Empowering vulnerable children, and families to reach their full potential. DDI Vantage is a qualified non-profit organization under 501(c)(3) and has been serving the community since 1971.

REQUEST FOR PROPOSAL

DDI Vantage has a current opening for a child care partnership

Early Head Start – Child Care Partnerships

To expand high-quality early learning opportunities in the years 0-3, Early Head Start Child Care Partnerships support communities to increase the number of Early Head Start and child care providers that can meet the highest standards of quality for infants and toddlers

What is an EHS-CC Partnership?

EHS-CC Partnerships bring together the strengths of child care and Early Head Start programs. The Partnerships layer funding to provide comprehensive services and high-quality early learning environments for low-income working families with infants and toddlers. Long-term outcomes for the program include:

- Sustained, mutually respectful and collaborative EHS-CC Partnerships
- A more highly-educated and fully qualified workforce providing high-quality infant-toddler care and education, along with an increased supply of high-quality early learning environments and infant-toddler care and education
- Well-aligned early childhood policies, regulations and resources, with quality improvement support at national, state and local levels
- Improved family and child well-being and progress toward school readiness

Benefits:

- Support for staff including enhanced training and professional development
- Developmental screening and referral and linkage to needed medical, dental, nutrition, vision and mental health services
- Provision of diapers and wipes for enrolled children
- Access to home visits, parent engagement activities and Family Advocates who help the family meet its goals
- Low student-to-teacher ratios and smaller, high quality environments supporting enhanced curriculum and instructional support

Proposal Submission Requirements:

By submitting a proposal, interested parties acknowledge that they have read the attached copy of the agreement and understand the evaluation process. To ensure a competitive and consistent review process, each proposal submitted should include the following items and be organized with the outline provided below:

a. Letter of Program Overview
Submit a letter outlining a general overview of the childcare program and the individuals who will be involved in the RFP process. The letter should be a **maximum of three (3) pages** and clearly identify the program's qualifications, capacities, and practices aligned with Head Start priorities.
i. Include in the letter:

1. General Program Information

- Number of total children served at the childcare center.
- A list of each infant, toddler, and two's classroom:
    - Number of children in each classroom
    - Teacher-to-child ratio in each classroom
    - Number of children in each classroom currently receiving child care subsidy
    - Teacher education in each classroom (names not required)

2. Family Income & Eligibility

- **Commitment to serve families most in need.**
- What percentage of the families you currently serve meet federal poverty guidelines? Please provide data from the most recent program year.
- What is the average household income of the families you serve? Please specify the income ranges (e.g., 0–50% FPL, 50–100% FPL, 100–130% FPL, over-income).
- How many of the families you serve currently receive a child care subsidy?
- Please share any strategies you use to ensure outreach and enrollment prioritizes families most in need.
- Approximately what percentage of enrolled children are:
    - Experiencing homelessness
    - In foster care
    - Receiving public assistance (TANF, SSI, SNAP, etc.)
- How do you collaborate with community partners to identify and serve families in crisis or with urgent financial need?

3. Mental Health, Behavioral Health & Disabilities Support

- **Commitment to prevent suspension and expulsion.**
- Describe how your program supports children with disabilities, challenging behaviors, or mental health needs.
- How do you involve families in supporting their child's social-emotional, behavioral, or developmental needs?
- Please describe any partnerships with community providers or agencies that enhance support for children with disabilities, behavioral challenges, or mental health needs.
- Describe your program's **professional development practices, including training on trauma-informed approaches and training specifically designed to support children with disabilities, challenging behaviors, or mental health needs.**
- **How does your program prevent suspension and expulsion, and what strategies do you use to support children remaining successfully enrolled?**

b. Regulatory Compliance Documentation

- **Commitment to high-quality health and safety.**
- Proof of **USDA compliance**, ensuring that the **Children and Adult Care Food Program (CACFP)** is the primary source of payment for meal services.
- Building code and occupancy certification.
- Copy of most recent fire inspection.

Be aware that DDIV will review Utah State Office of Child Care (OCC) licensing reports.
Submission Instructions:

Submission Instructions: All proposals need to be submitted via email to klyon@ddivantage.org or postmarked regular mail by October 31, 2025

Kellie Lyon – Executive Director
DDI Vantage
EHS Program RFP
670 East 3900 South Suite #210
SLC, UT 84107

Proposals received after the deadline will not be accepted. Selection will be made to the proposer who is the most advantageous to DDIV based on the selection criteria outlined above. DDIV reserves the right to not select any proposer. Following the closure of the RFP all proposers will be notified of the selection.

Attachment A

Child Care Partnership Agreement

CHILD CARE PARTNERSHIP AGREEMENT
between
DDI VANTAGE EARLY HEAD START
and
CHILD CARE PARTNER

1. STATEMENT OF PURPOSE

It is the intent of this purchase-of-service agreement (hereinafter "Agreement" or "POSA") to establish a Child Care Partnership (hereinafter "Child Care Partnership") between DDI Vantage Early Head Start (hereinafter "Program" or "EHS") and Child Care Partner. (hereinafter "Partner" or "Entity") for the delivery of authorized EHS services to EHS-enrolled infants and toddlers at Partner, and to stipulate the manner in which those services will be made available.

2. ENGAGEMENT

The parties of this Agreement acknowledge that no term of engagement is specified herein; the Child Care Partnership and the terms of the Agreement are presumed in force until such time as either party delivers to the other party a written notice of its intention to dissolve the Child Care Partnership and terminate the Agreement for cause or convenience, said notice being given at least sixty (60) days prior to the projected date of termination. At dissolution neither party is required to pay back to the other any funds that were authorized and expended for the purposes of the Child Care Partnership during the effective term of the Agreement unless otherwise stipulated in a separate and duly authorized financial agreement. Any and all valuable or usable classroom supplies, equipment, furniture, clothing, or other materiel that belong to Program by virtue of having been purchased, owned, or provided by Program during the effective term of the Agreement shall be returned to Program.

3. RESPONSIBILITIES OF PARTNER

General Requirements

Maintain a basic understanding of the regulations contained in Head Start Program Performance Standards (HSPPS) and the Head Start Act of 2007 (HSA) and demonstrate a commitment to comply with them in serving EHS-enrolled children, as charged by Program.

While Program is responsible to fully understand and account for all regulations and stipulations for compliance put forth by HSA and HSPPS, Entity agrees to provide quality, full day/full year, developmentally appropriate child care services compliant with those regulations to EHS-enrolled infants and toddlers for no less than 52 weeks per year.

Cooperate with Program's regular and ongoing program and fiscal monitoring to ensure compliance with all applicable federal requirements for program services and fiscal accountability (per 45 CFR 75.327b).

Meet regularly with Program to maintain adherence to licensing, HSA, and HSPPS as identified in a duly authorized addendum to this agreement.

Become familiar with the Office of Head Start (OHS) Monitoring Protocol and participate in Program self-assessments and federal monitoring reviews as appropriate.

Meet regularly with ERSEA Specialists to ensure that child care subsidies, parent fees applicable for children who are receiving assistance to pay for child care, and other potential funding sources are addressed.

Review, understand, complete as necessary, and comply with the following forms: EHS-CC Child Care Child Care Partnership Teacher Position Filling Process, Child Care Child Care Child Care Partnership New Hire Demographic Information, Child Care Child Care Child Care Partnership Teacher Requirements, Child Care Child Care Child Care Partnership Teacher Termination Information, DDI Vantage Policies and Code of Conduct, DDIV EHS Code of Conduct and Conflict of Interest, and Tuberculosis (TB) Information and Questionnaire.

Obtain and maintain the following certifications and assurances: (i) Utah State Office of Child Care (OCC) licensing, (ii) building code and occupancy, (iii) fire code, (iv) criminal records checks for teachers who serve EHS-enrolled children, (v) USDA, and (vi) other certifications and assurances that may be mandated by law or required by Head Start regulations.

Collaborate with Program to develop a plan by which Child Care Child Care Partnership needs are met and challenges resolved, utilizing EHS staff as resources as needed.

Cooperate with Program to ensure the delivery of EHS services in the area of early childhood development, health services, family engagement and leadership, governance and management systems.

Communicate regularly and reliably with Program about the hiring and assigning of Child Care teachers, program enrollment and attendance, pertinent meeting minutes, and the annual Program Information Report (PIR).

In accordance with HSA, prior to employment either directly or through contract, including transportation staff and contractors, Child Care must conduct an interview, verify references, conduct a sex offender registry check and obtain one of the following: (i) state or tribal criminal history record, including fingerprints checks; or (ii) a Federal Bureau of Investigation criminal history record, including fingerprint checks. If a preliminary offer is made Child Care will, within 90 days, complete the background check process by obtaining whichever check was not obtained prior to the date of hire; and (ii) Child abuse and neglect state registry check, if available. The Program must complete the background check process for each employee, consultant, or contractor at least once every five years. (1302.90(b)(5)

Work with Program to establish a process by which Child Care teachers receive appropriate and timely staff development and training.

Collaborate with Program to identify in a timely manner any classroom needs or program challenges (equipment, toys, physical plant, etc.) that may hinder the provision of a healthy, safe environment and quality child care.

Notify Program in the event of an emergency such as fire, utilities shut-down, infectious disease, criminal behavior, police intervention, center closure, or any other event or circumstance that threatens or may threaten the safety of children.

Follow proper procedures for reporting child abuse and notify Program when a report has been made.

Ensure that systems are in place to gather and analyze data from relevant sources that can support desired outcomes for children, families, and staff, such as periodic community assessment, child assessment, staff evaluations, PIR, Program self-assessment, ChildPlus.net, CCDF subsidy systems and requirements, USDA systems and requirements, OCC licensing systems and requirements, Child and Adult Care Food Program (CACFP) systems and requirements, and on-site monitoring.

Collaborate with Program to support children with challenging behaviors accessing Early Intervention and Mental Health Consultation as necessary in an effort to prevent suspension and expulsion.

Promote staff wellness for Child Care Partnership teachers.

Ensure all children in EHS-CC classrooms have parental permission to be observed by Program staff.

Collaborate with Program to ensure hearing, vision, behavioral, and developmental screenings take place no later than 45 calendar days after services have begun.

Enrollment, Recruitment, Selection, Eligibility and Attendance (ERSEA)

Assist Program in the identification and recruitment of EHS-eligible infants and toddlers while maintaining a waiting list of eligible families. Coordinate enrollment efforts with Program.

Maintain enrollment as described in the POSA.

Collaborate with Program to ensure children have 85% attendance or greater.

When EHS-CC enrolled children are unexpectedly absent, communicate with Program about contact made with family within one hour.

Recruit and refer EHS-CC eligible children to Program and maintain a waiting list of 30%. When an EHS-enrolled child withdraws from Child Care services, coordinate with Program to

establish an appropriate transition plan as needed for each family.

Provide Program with access to child care subsidy reports.

Child Development Services

Center will implement the pyramid model and provide space and time for trainings.

Collaborate with Program to ensure that Child Care teachers implement prescribed curricula and create lesson plans to meet children's development goals.

Comply with Head Start's philosophies of primary care-giving and continuity of care for infants and toddlers.

Ensure that all Child Care teachers have, at a minimum, completed the required course work for a child development associate credential (CDA) and have been trained in early childhood development with a focus on infant/toddler development. Ensure ongoing compliance with this standard through periodic CDA renewals, as required.

Ensure collaboration between the Child Care Director and Program to coordinate performance evaluations for Child Care teachers.

Ensure that each Child Care teacher working exclusively with infants and toddlers has responsibility for no more than four children, and that no group has more than eight infants and toddlers, in accordance with HSPPS.

Ensure that EHS-enrolled families receive two home visits from an Child Care teacher during the school year and participate in parent/teacher conferences twice annually.

Ensure that Child Care teachers coordinate with Program to maintain accurate child records and assure confidentiality according to HSPPS.

Ensure that teaching staff is made available for coaching support, and will support action plans as necessary.

Family Engagement Services

Ensure that Program has access to EHS-enrolled parents to obtain information necessary to update child records semi-annually in compliance with applicable rules and regulations.

Encourage EHS-enrolled parents to participate on the Parent Committee and the Policy Council according to the program governance requirements of HSPPS.

As opportunity and funding permit, and as agreed with Program, enable the participation of Child Care staff and/or EHS-enrolled parents in local and/or national training to improve the

quality of services provided through the Child Care .

Make space available for Program to have confidential discussions with families as necessary.

Health Services

Center will notify the program within 5 calendar days if the following happen to any child in an EHS classroom: Child injury that requires hospitalization or emergency room medical treatment, Inappropriate discipline, potential child abuse and maltreatment, lack of supervision, and a child is released to an unauthorized adult.

Work with EHS to conduct a screening of the health and safety environment of the classrooms where services are provided, and follow-up on safety improvements when needed.

Collaborate with Program to ensure that Child Care teachers are certified in CPR; first aid; proper food handling; prevention and control of infectious diseases; prevention of Sudden Infant Death Syndrome and use of sleep practices; administration of medication consistent with parent consent; prevention and response to emergencies due to food and allergic reactions; building and physical premise safety including identification of and protection from hazards, bodies of water, and vehicular traffic; prevention of Shaken Baby Syndrome, abusive head trauma and child maltreatment; emergency preparedness and response planning for emergencies; handling and storage of hazardous materials and appropriate disposal of bio-contaminants; recognition and reporting of child abuse and neglect; and have completed the Tuberculosis (TB) Information and Questionnaire within three months of hire and annually thereafter.

Ensure all children with teeth are assisted by staff in brushing their teeth with toothpaste containing fluoride once daily.

Ensure teaching staff are practicing strategies to ensure children's safety through active supervision, and report any active supervision violations in EHS-CC classrooms to Program Coordinator immediately.

Ensure that diapers and wipes are distributed to EHS-CC enrolled children.

Make teachers available to complete daily health status and daily safety checklist.

Nutrition Services

Work with Program and dietitian to maintain nutrition services at or above USDA guidelines and implement menus that are appropriate for infants and toddlers. Ensure that CACFP is the primary source of payment for meal services.

Ensure dietician has access to classrooms and teachers to complete nutrition observations, training, and follow-up.

Mental Health and Disabilities Services

Collaborate with Program to establish a system for reflective supervision with Child Care teachers regarding concerns related to the mental health of children and families enrolled in Program, and cooperate in the referral of families for services as needed.

4. RESPONSIBILITIES OF DDI VANTAGE EARLY HEAD START

General Requirements

Through regular and ongoing program and fiscal monitoring, oversee Child Care 's performance to ensure compliance with all applicable federal requirements for program services and fiscal accountability (per CFR 75.327b).

Meet regularly with Child Care to maintain adherence to licensing, HSA, and HSPPS as identified in a duly authorized addendum to this agreement.

Provide funding as stipulated in a separate, properly authorized financial agreement that is in force for the time period specified therein. (Note: The provision of funding by Program for this Child Care Partnership is contingent upon the granting of sufficient federal funds to DDI Vantage, and no representation is made by DDI Vantage about the availability or amount of funds available for the Child Care Child Care Partnership.)

Provide for Child Care Director a copy of HSPPS and HSA and serve as a resource for Child Care staff for clarification of regulations and rules.

Provide for Child Care a copy of the OHS Monitoring Protocol and facilitate the center's participation in Program self-assessments and federal monitoring reviews.

Collaborate with Child Care to develop a plan by which Program needs are met and challenges resolved. Ensure that EHS staff are available as resources as needed.

Collaborate with Child Care to identify classroom needs (equipment, toys, physical plant) and other program challenges to promote the provision of a healthy, safe environment and a quality child care experience.

Communicate regularly and reliably with Child Care about the hiring and assigning of Child Care teachers, Program enrollment and attendance, pertinent meeting minutes, and the PIR.

Cooperate with Child Care to ensure the delivery of EHS services to eligible children and their families, focusing on early childhood development, health services, family engagement, and leadership, governance, and management systems.

In accordance with HSA, Program will ensure that, prior to employment either directly or through contract, including transportation staff and contractors, Child Care will conduct an interview,

verify references, conduct a sex offender registry check and obtain one of the following: (i) state or tribal criminal history record, including fingerprints checks; or (ii) a Federal Bureau of Investigation criminal history record, including fingerprint checks. If a preliminary offer is made Child Care will, within 90 days, complete the background check process by obtaining whichever check was not obtained prior to the date of hire; and (ii) Child abuse and neglect state registry check, if available.

During emergencies, comply with Child Care policies, procedures, and instruction from Child Care staff. In the event of an emergency closure, suspend EHS services for the period of closure.

Follow proper procedure for reporting child abuse and notify Child Care when a report has been made.

Ensure that systems are in place to gather and analyze data from relevant sources that can support desired outcomes for children, families, and staff, such as periodic community assessment, child assessment, staff evaluations, PIR, Program self-assessment, ChildPlus.net, CCDF subsidy systems and requirements, USDA systems and requirements, OCC licensing systems and requirements, Child and Adult Care Food Program (CACFP) systems and requirements, and on-site monitoring.

Ensure School Readiness data is shared with Child Care .

Ensure EHS-CC enrolled children complete hearing, vision, behavioral and developmental screening no later than 45 calendar days after services have begun.

Enrollment, Recruitment, Selection, Eligibility and Attendance (ERSEA)

Coordinate and monitor enrollment, recruitment, selection, eligibility, and attendance according to 1302 Subpart A of the HSPPS.

When an EHS-enrolled child withdraws from center-based services, coordinate with Child Care to establish an appropriate transition plan as needed for each family.

Program will support Child Care in helping EHS-CC enrolled children maintain or re-establish child care subsidy when necessary.

Coordinate with Child Care to document follow-up on contact made with families when children are unexpectedly absent

Ensure families referred to the program will be contacted for EHS-CC application process. Communicate with Child Care on enrollment, application, attendance and transition status of children.

Child Development Services

Will train teachers on the pyramid model and provide support through individual coaching.

Make Program available as a resource to Child Care to ensure compliance of with HSPPS requirements for early childhood and disabilities.

Make Child Care Adviser available as a resource to assist Child Care as necessary to ensure that Child Care teachers implement the prescribed curriculum.

Child Care Advisers will review lesson plans and will support teachers with implementation of curriculum in EHS-CC classrooms.

Monitor and work with Child Care to ensure that each POSA teacher working exclusively with infants and toddlers has responsibility for no more than four children, and that no group has more than eight infants and toddlers, in accordance with HSPPS.

Ensure that all Child Care teachers have completed the required course work for a child development associate credential (CDA) and have been trained in early childhood development with a focus on infant/toddler development. Ensure ongoing compliance with this standard through periodic CDA renewals, as required.

Coordinate with Child Care teachers to maintain accurate child records and ensure confidentiality according to HSPPS.

Review Child Care program files quarterly to ensure completeness and compliance.

Provide coaching for Child Care teaching staff.

Health and Nutrition Services

Collaborate with Child Care to ensure that teachers are certified in CPR; first aid; proper food handling; prevention and control of infectious diseases; prevention of Sudden Infant Death Syndrome and use of sleep practices; administration of medication consistent with parent consent; prevention and response to emergencies due to food and allergic reactions; building and physical premise safety including identification of and protection from hazards, bodies of water, and vehicular traffic; prevention of Shaken Baby Syndrome, abusive head trauma and child maltreatment; emergency preparedness and response planning for emergencies; handling and storage of hazardous materials and appropriate disposal of bio-contaminants; recognition and reporting of child abuse and neglect; and have completed the Tuberculosis (TB) Information and Questionnaire within three months of hire and annually thereafter.

Ensure that the Health Services Specialist (HSS) and the dietitian are reasonably available to Child Care to promote sound infant/toddler nutrition and support compliance with environmental health and safety requirements.

Maintain a system by which diapers and wipes are provided through EHS funding to EHS-enrolled families while at the center.

Provide training to encourage good oral health practices and provide toothbrushes, toothpaste, and gauze as necessary to support oral health.

Ensure daily health status and daily safety checklists are collected weekly.

Complete environmental health and safety checklists.

Provide sleep sacks for infants to ensure safe sleep practices are implemented.

Ensure Child Care is payee of last resort for formula if vendor or USDA will not cover cost.

Provide annual active supervision training and/or other health and safety training as needed.

Family Engagement Services

Encourage EHS-enrolled parents to participate on the Parent Committee and the Policy Council according to the program governance requirements of HSPPS.

As opportunity and funding permit, and as agreed with Child Care, enable the participation of Child Care staff and/or EHS-enrolled parents in local and/or national training to improve the quality of services provided through the Child Care Partnership.

Support parents in finding resources to improve family well-being.

Provide opportunities for families to become advocates and leaders by participating in Parent Committees, Policy Council, and other program opportunities.

Collaborate with Child Care to conduct parent activities.

Provide opportunities to improve parent-child relationships by implementing a parenting curriculum.

Mental Health and Disabilities Services

Deploy mental health consultant as necessary to (i) observe Child Care classrooms, (ii) identify presenting or potential child behavior concerns, (iii) prescribe strategies for management or intervention to prevent suspension and expulsion, and (iv) make referrals as necessary.

5. INDEPENDENT CONTRACTOR

The parties to this Agreement hereby agree that the provision of services by either party as described herein is on the basis that each party and any employee, representative, or agent of

such party will retain its individual professional status and that its relationship with the other party as that of an independent contractor and not that of employee. Any employee, representative or agent of one party will not be eligible for any employee benefits of the other party nor will either party of this Agreement make deductions from any consideration paid pursuant to this Agreement for taxes, insurance, or any other item to employees or agents of the other party. Each entity shall, through its employees and agents, use its own discretion in performing its obligations under this Agreement. As an independent contractor, each party has power to represent only itself and shall have no power to represent, act for, bind, or otherwise create or assume any obligation on behalf of the other party for any purpose whatsoever except as contemplated hereby.

6. ASSIGNMENT

This Agreement may not be assigned or delegated in whole or in part by either party hereto without prior written consent of the other party.

7. WAIVER OR MODIFICATION

Any waiver, modification, or amendment of any provision of this Agreement shall be effective only in writing in a document that specifically refers to this Agreement and such document is signed by the parties hereto.

8. ENTIRE AGREEMENT

This Agreement constitutes full and complete understanding and agreement of the parties hereto with respect to the subject matter covered herein and supersedes all prior oral or written understanding and agreements with respect thereto.

9. SEVERABILITY

If any provision of this Agreement is found to be unenforceable by a court of competent jurisdiction the remaining provisions shall nevertheless remain in full force and effect.

10. COSTS

Should it be necessary for either party to enforce its rights under this Agreement whether in suit or otherwise the prevailing party shall be entitled to recoveries including attorney's fees and costs in addition to any other ruling to which the party attempting to enforce its rights under this Agreement may be entitled.

11. GOVERNING LAW

This Agreement shall be governed by and in accordance with the laws of the State of Utah. Each party expressly submits and consents to exclusive personal jurisdiction and venue in the courts of Salt Lake County, State of Utah, or in any federal district court in Utah.

12. NOTICES

All notices and communication required under this Agreement shall be in writing and mailed to the following addresses:

Child Care Partner. DDI VANTAGE, Inc.

IN WITNESS WHEREOF, each party has caused this Child Care Partnership Agreement to be executed by its duly authorized representative(s):

Child Care Child Care Child Care Partner. **DDI VANTAGE, Inc.**

_____ _____

Executive Director Date

_____

Date

EHS Program Coordinator

_____

Date

EHS Policy Council Chair