



# CA Assembly Blue Ribbon Commission on Early Childhood Education Summary of Recommendations

**\*\*\*DRAFT\*\*\***

**March 11, 2019**

**The Blue Ribbon Commission report is comprised of the topics listed below, beginning with an 18-page summary. Detailed Recommendations follow the Summary.**

1. Governance and Administration
2. Family Engagement
3. Access for Children and Families
4. Workforce
5. Quality Improvement
6. Systems and Infrastructure
7. Facilities and Supply
8. Coordination and Alignment
9. Financing
10. Parent Focus Group Recommendation Summary

## **1. Governance and Administration**

- A. As we state in our Principles, governance structures must be transparent, accountable, collaborative, and committed to equity, continuous improvement, and responsive to emerging needs. Decisions must be informed by ongoing evaluation, robust data, and current research. Parents, the early care and education workforce, local and state partners, and other stakeholders must be key participants in all aspects of governance.
- B. Establish an inclusive Early Childhood Policy Council (ECPC) to advise the Legislature, Governor and Superintendent of Public Instruction (SPI). Appointments will be made by the Assembly, Senate, Governor, and SPI. The Advisory Committee should include parents, providers, and other stakeholders. It will be charged with developing and advancing the state's vision for children, families and communities, monitoring the evolution to a family first culture and using a strong equity lens to guide implementation based on agreed principles

and goals. It would replace current advisory bodies. Adequate staff and budget would be provided.

- C. Establish a Parent Advisory Council (PAC) including current and former recipients of subsidized child care and other parents to provide recommendations and develop partnerships. To support the best outcomes for the *whole family*. The PAC will be strongly represented on the ECPC. Staff and financial support for participants will be provided.
- D. Establish a Workforce Advisory Council (WAC) including providers from all settings, provider organizations, center directors, other stakeholders with expertise in workforce issues to oversee plans to compensate and grow the Workforce. WAC will be represented on the ECPC and staff and support for participants will be provided.
- E. Establish an augmented Division or Office for Early Childhood Education (OCE) in CDE with sufficient resources and staff to implement recommendations.
- F. To align administration and coordinate services OCE shall establish an Interagency Agency Workgroup to implement changes and coordinate among agencies, which will also report to the Governor, Legislative oversight committees, and the ECPC.
- G. Maintain strong Legislative leadership and oversight including robust engagement with the Legislative Women's Caucus, which is bicameral, and Policy and Budget Committees in each house.

## 2. **Family Engagement**

- A. Engagement is a two-way street, which recognizes parents as experts and includes joint decision-making. The Blue Ribbon Commission has worked to keep families at the center of our deliberations by inviting parents to be expert witnesses at BRC public hearings, holding focus groups across the state and challenging ourselves to think more deeply about how the voices of both parents and providers can effectively participate.
- B. The state should acknowledge the importance of parent voices in policy development and program improvement by establishing and funding formal bodies at the state and local level. No new program or policy should be implemented without the input of parents who are directly affected. Establish a Parents Advisory Council (PAC) as described in the Governance recommendations.
- C. Ongoing processes should be developed to address the agency culture shaped by scarcity of resources and a compliance mentality and transform it into a culture of continuous quality improvement that welcomes family, provider and community voices.
- D. We need to train and support everyone to recognize and address implicit bias based on race and poverty so that all families are valued, respected, and invited to participate.

### **3. Access for Children and Families:**

- A. Universal goal: California families at or below the State Median Income (SMI) would pay no more than 7% of their income on early care and education for children under the age of 6, regardless of whether they have access to subsidized child care, the state preschool program, or a federally funded program.<sup>1</sup>
- B. Short-term goal: Families at or below 100% Supplemental Poverty Measure (SPM) with a need for child care will be guaranteed subsidies or ECE program access and will pay no fees.
- C. Mid-term goal (1): Families at or below 70% SMI with a need for child care will be guaranteed subsidies or ECE program access and will pay fees on a sliding scale.
- D. Mid-Term goal (2): Families at or below 85% SMI with a need for child care will be guaranteed subsidies or ECE program access and will pay fees on a sliding scale.
- E. Establish a dedicated AP Emergency Services Fund for immediate access to care, expedited eligibility, and navigation, with contracted slots available for homeless families or those at risk of homelessness, resource parents, other children under supervision of CWS, parenting transitioning former foster youth, foster youth, unaccompanied minors and others applying for refugee status and families facing dislocation and crisis as a result of domestic violence.
- F. Increase equity and eradicate systemic barriers by prioritizing investments for children and families most at risk. Use Targeted Universalism process to develop a ten-year plan to meet universal goals first targeting the most excluded then evaluating and adjusting policies and investments.
- G. Redefine “need” for ECE in all state funded programs so that children’s need for ECE and continuity of care is prioritized. Families should not lose access to care when work hours are changed or other challenges occur.
- H. Immediate Goal: Prioritize increased investment and remove barriers to increase access for infants and toddlers to ECE focusing first on low-income families or those facing barriers.
- I. Expand access to full-day preschool and ECE for all 3 and 4-year olds, beginning with those in low-income families or others facing barriers.
- J. The state should ensure that every child receives early developmental screening. Screening must be tied to increasing access to early intervention services for the most vulnerable.

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<sup>1</sup> The federal Child Care for Working Families Bill guarantees federal child care assistance to working families with children birth to 13 earning up to 150 percent of SMI and establishes a sliding fee scale for families from 75 percent of SMI to 150 percent of SMI so that no family pays more than 7 percent of their family income on child care. We see our state-based proposals as a bold step towards that goal.

- K. Expand effective access to Head Start (HS) for federally eligible 3- and 4-year-old children by using state funds to expand HS program to full-day, full-year for all those meeting HS eligibility.
- L. Children's well-being is inextricably connected with the well-being of their family. Increase access for all low-income families while targeting those facing challenges.
- M. Targeted families and children – Equality is not Equity.
  - i. Children and families in poverty including CalWORKs: streamline administration and provide more flexibility in ECE need; provide 12 months of ECE upon initiating CalWORKs grant.
  - ii. Racial inequity: Increase flexible options for families relying on low-wage jobs. Integrate anti-bias in evaluation, training, coaching and other interventions. Definitions of quality must elevate standards on diversity or alternative concepts of quality.
  - iii. Dual-Language Learners (DLLs): Increase language access and cultural competence, remove systemic barriers due to cultural and linguistic bias and expand investments in professional development opportunities to support all DLL children.
  - iv. Immigrant Families: Remove barriers due to complicated eligibility and enrollment processes and work with experts to evaluate and understand how best to advocate against harmful proposed changes in federal policy.
  - v. Children with Disabilities, Mental Health and other Special Health Care Needs: In the long-term, ensure early identification and early intervention for all young children. Establish an inclusive task force with strong parental and provider representation to reform and oversee our bifurcated funding and administrative system. Eliminate racial disparities in provision of services and disproportionality in discipline practices.
  - vi. Tribal Child Care: Ensure culturally appropriate and fair intake processes, referral systems that clearly recognize parental choice, culturally responsive outreach, and inclusion of tribal populations, tribal child care, and tribal communities. A cultural/community broker should be available and resources should promote cultural awareness and inclusion of tribal children and families.
  - vii. Children and Families Connected to CWS: As the Families in Crisis program is implemented, expand the Emergency Child Care Bridge and provide access for parenting transitioning former foster youth or foster youth to age 26.

- viii. Migrant Families: Clarify practice and if required reform migrant child care regulations to not require a parent to relocate to remain eligible for services.
  - ix. Young Parents: Evaluate and where needed expand CalSAFE (currently subsumed in LCCF) and CalLearn programs.
  - x. Children with Incarcerated and Recently Released Parents: Incentivize on-site ECE programs in transitional housing and connect parents to child care resources and subsidy information as part of the reunification plan.
- N. Affirmative outreach on ECE and child wellbeing should be provided in multiple languages, through cultural navigators and utilizing mobile technology and YouTube channels.
- O. Reinstate the CDE-administered California Supplement to the federal Child and Adult Care Food Program and remove unnecessary burdens for agencies and providers.
- P. Encourage family friendly workplaces including paid sick leave.

#### 4. **Workforce**

- A. Equity and Diversity: Examine racial disparities in compensation and career advancement and develop targeted solutions. Establish supports and systems to optimize all providers' ability to meet the diverse needs of children and families, including working with dual-language learners, supporting culturally responsive practice, and providing trauma-informed care and instruction.
- B. Establish an inclusive Workforce Advisory Council connected to the EC Policy Council as described in governance.
- C. Support collective bargaining rights for family child care home (FCCH) providers, both licensed and family friend and neighbor.
- D. Standards for the ECE workforce cannot be increased until compensation levels are raised.
- E. Compensation and Support
- i. Title 5 programs: Ensure salary parity with K-3<sup>rd</sup> grade for those with comparable education and experience with competitive benefit packages including health dental, vision, 20 days paid time off annually, and retirement contribution.
  - ii. Title 22 programs: For those participating in state funded programs, their salary should have parity with K-3<sup>rd</sup> grade for those with comparable education and experience with competitive compensation increasing with education, training and quality improvement, and competitive benefit packages including health, dental, vision, 20 days paid time off, and retirement contribution.

- iii. Develop guidelines and provide incentives to licensed family child care homes who wish to specialize in care of infants and toddlers by establishing a specialized reimbursement rate for those with demonstrated experience and specialized training.
  - iv. Family, Friend and Neighbor (FFN): For those participating in state funded programs immediately make the compensation floor the state minimum wage and provide benefits for those working an annual average of 20 hours per week- include 20 days paid time off and support for purchase of health, dental, and vision insurance.
  - v. The state should increase support for local programs serving all FFN providers including community hubs, library programs, apps, online and mobile-based resources.
  - vi. FFN providers, receiving state funds, should be offered training, a higher reimbursement rate for improving quality, coaching and mentoring to serve children with special needs, and pathways to licensing or a certification.
- F. Competency-Based Permitting and Certification: Implementation should include realistic, phased-in timelines with necessary support and compensation, drawing where appropriate on current efforts such as the Commission for Teacher Credentialing (CTC) with attention to both the incoming and incumbent workforces in all settings.
- i. Streamline and simplify current educator and caregiver competencies to focus on essential adult practices that improve child outcomes.
  - ii. Measure and monitor competencies: create a competency-based assessment that allows applicants to demonstrate that they possess competencies.
  - iii. Establish and adequately fund a competency-based system that spans preparation, certification, and pre- and in-service training to improve quality and inform practice, and preparation should include supervised field experience.
- G. Professional Development for Center Teachers and Licensed FCCH providers:
- i. The incumbent ECE workforce in publicly funded programs should bear no cost for increasing competencies and the entering workforce should be assisted to limit costs.
  - ii. Professional development, including coaching and mentoring, must focus on strengthening educator and caregiver competencies.
  - iii. Invest in proven apprenticeship models to professionalize the early learning workforce by enhancing skills and knowledge while simultaneously increasing their compensation.
  - iv. Invest in a range of appropriate supports that allow people from a wide spectrum of cultural, educational, and financial backgrounds, including: (1) scholarships; (2) tutoring; (3) conveniently scheduled and located classes; (4) education advisors; (5) resources for

students learning English as a second language; and (6) the availability of courses and books in languages in addition to English.

## 5. Quality Improvement

- A. Build on work by Quality Counts California (QCC) and the QCC state consortia and establish an expanded work group to grow, review, and revise the current quality improvement and standards systems.
- B. Support continuous quality improvement through assessment, identifying valid diagnostic and summative assessments that predict children's later skills and use assessments to guide instruction and inform policy decisions and to provide information on outcomes for families.
- C. Ensure implicit bias based on race and ethnicity or any other factor is recognized as quality standards are developed and in the implementation any quality improvement programs. Review evaluation criteria and outcomes to ensure criteria are culturally relevant to diverse populations and do not unduly disadvantage a protected class.
- D. Work Force Related Quality Improvement
  - i. Expand and develop effective Family Child Care Home Education Networks (FCCHENs).
  - ii. Increase the capacity of the Community College and State University systems to enable them to expand accessibility and range of programs offered.
  - iii. Focus ECE degree programs on particular areas such as (1) DLLs; (2) children with disabilities and special health care needs; (3) infants and toddlers; (4) trauma informed care; and (5) interactions that support children's cognitive and linguistic development.
  - iv. Tie reimbursements to higher quality standards after the state provides sufficient funding and makes them accessible to family child care homes and FFN providers.
  - v. Assess effectiveness of federal Child Care and Development Block Grant (CCDBG) quality expenditures and fund those found to have the most effective outcomes.
- E. Higher Education Systems
  - i. Provide adequate funding for the Community College and State University systems to enable them to expand accessibility and range of programs to reflect current research on child development and defined competencies.
  - ii. Support higher education faculty and administrators to better meet the preparation and professional development needs including supervised clinical experience.
  - iii. Focus ECE degree programs on particular areas such as (1) DLLs; (2) children with disabilities and special health care needs; (3) infants and toddlers; (4) trauma-informed

care; and (5) adult-child interactions that support children's cognitive and linguistic development.

- iv. Invest in a range of appropriate supports that allow people from a wide spectrum of cultural, educational, and financial backgrounds to access professional development opportunities, including conveniently scheduled and located classes, education advisors, and resources, including courses and books for students learning English as a second language.

## **6. Systems and Infrastructure**

### **A. Responsive Integrated Systems**

- i. California's vision for ECE, size and diversity require a complex system.
- ii. Three key culture changes are essential:
  - a. We must use an equity lens in every aspect of our work.
  - b. Our compliance-based system is a major source of inefficiency and undue complexity and we must reverse policy and change culture.
  - c. Lack of state level interagency communication leads to unneeded duplication and barriers for families. We call for a robust ECE Advisory Council partnering with an Interagency Task Force to coordinate implementation (see Governance).

### **B. Alignment and streamlining**

- i. Align and streamline to better serve children and families, changing the culture so it is based on their needs rather than mistrust and compliance-based contracts. Prioritize continuity of care and align DSS and CDE regulations in instances that will benefit families, including those relating to providers living in the home and those for FFN care.
- ii. Align and streamline for agencies and providers moving to multi-year grants, alignment of approvals across funding streams and address regulatory inconsistencies created by different program applications, application timelines, reimbursement rates, and earning structures to significantly reduce administrative burdens.
- iii. Title V regulations around provider reimbursements should be simplified and structured to reflect common practices in the private pay world such as required notice periods, closure days beyond 10, and flat monthly payment amounts.
- iv. Modernize the TrustLine application process by allowing applicants to apply, pay their application fee, and check their status online.
- v. Create flexibility across all systems to allow and incentivize programs to offer care for families who have variable schedules and/or work outside the school day schedule.



### C. Transparency, Accountability, and Integrated Data Systems

- i. Ongoing data collection and mapping should identify geographic disparities and child care deserts on an ongoing basis and develop proposals with an equity lens to incentivize creation of supply particularly in child care deserts. New funding should be directed to areas of greatest need and we should consider contracts and other incentives to develop resources in areas with little supply.
- ii. Track utilization rates and movement between ECE programs funded by federal, state and local funds and identify legislative and regulatory barriers in order to align programs, increase continuity of care, and make it easier for families to negotiate existing systems. Align intra-agency data at CDE between ECE programs. Encourage braiding and leveraging of funds from multiple sources by simplifying and streamlining reporting requirements, including data definitions and coding.
- iii. Decrease barriers to linking administrative data across systems and build on existing administrative data systems to provide timely data on the array of federal, state and locally funded programs serving families with young children. Use linked administrative data to support cross-agency planning, inform decision-making and guide resource allocation based on key outcomes for children. Engage universities and other research partners with government to support continuous quality improvement and outcomes and track results for children and families.
- iv. Build public will by making data and information about California's ECE system readily available to the public. Provide public access to important and timely information on California's ECE system by creating an online portal with relevant information on the state's comprehensive child care and development service system.

### D. Licensing

- i. The Legislature and Governor should establish a process to review California's licensing standards, recommend improvements and integration with quality improvement efforts and define clear consistent mandates across all licensed early care and education settings and develop adequate resources to ensure Community Care Licensing (CCL) can meet its charge.
- ii. Expand CCL staff capacity and establish clear guidelines and timelines so that applications for new providers and/or expansion can be completed in a timely manner.

### E. Disaster Preparedness

- i. Relevant State Agencies (CDE, DSS/CCL and OES) should convene a task force for advance disaster preparedness planning based on the 2016 Child Care Disaster Preparedness Plan and recent lessons.

- ii. State Agencies and Service providers including CDE, DSS and Resource and Referral agencies should convene a collaborative, cross-agency task force with designated, clear roles that assumes responsibility in time of disaster with dedicated staff (dedicated only during/post disaster) who become the point persons at each agency at the state and local level.
- iii. Local organizations and agencies at the regional, county, sub-county, and city level should have dedicated resources to prepare for a disaster and preparedness should include state supported provision of training and materials readily accessible on-line.

#### F. Rate Reform

- i. The BRC concurs with the multi-step recommendations of the Rates Working Group, convened by First 5 California, to implement comprehensive rate reform through a multi-step process. Their recommendations are moving towards a heavier emphasis on the true cost of providing quality child care, preschool and early learning experiences and address equity issues by refining the RMR survey and future rate-setting methodologies.
- ii. In the long-term, the reimbursement rates for Title 5 and 22 programs should include competitive compensation that increases with quality improvement and as detailed in the Workforce recommendations.
- iii. In the near term, the reimbursement rates for Family, Friend and Neighbor (FFN) should make the compensation floor the state minimum wage as detailed in the Workforce recommendations.
- iv. Prioritize analysis of the costs and as necessary provide additional incentives to increase access for targeted children and families including children with disabilities, infants and toddlers, children in care deserts including rural areas, care during nontraditional hours and children entering care through the Emergency Services Fund.

### 7. Facilities and Supply

- A. Map state facilities needs to ensure equity in spending new funds including needs for infants and toddlers, isolated rural areas, and other special populations and match facility needs with available space that can be converted, such as unused schools as well as funding new construction.
- B. The state should establish a targeted facilities grant program directed to communities and families with greatest need with multi-year investment priorities. The targeted facility grant program should provide appropriate funding and support for all aspects of our mixed delivery system.
  - i. For subsidized child care centers, provide the facility, equipment, and staff recruitment start-up costs necessary to open new classrooms or to convert existing child care spaces to serve different age groups.

- ii. For licensed family child care, provide funds to meet licensing and quality standards to serve subsidized children and those with greatest need. Determine criteria for grants to private businesses based on receipt of public funds and meeting identified needs of targeted communities and families/children.
  - iii. Create a fund for FFN providers, who wish to be licensed, to pay for licensing fees, zoning processes, and facility alterations.
  - iv. Include Head Start in all mapping analysis and provide opportunities to participate in state and local funded facility programs including those for one-time grants for building or renovating early childhood facilities.
- C. Simplify the process to build new facilities and to expand existing facilities including zoning, building codes and permit processes; streamline state and local licensing and other requirements.
- D. Establish statewide program learning from successful models to share best practices and provide materials, technical assistance on facility planning, development and financing, and facility quality assessment and improvement. Include appropriate services for FCCH and FFN providers.
- E. ECE Supply including geographic disparities
- i. Ongoing data collection and mapping should identify geographic disparities and child care deserts on an ongoing basis and develop proposals with an equity lens.
  - ii. Incentivize creation of supply to address inequities.
    - a. New funding should be directed to areas of greatest need including projected growth of number of children and those facing challenges; ensure growth for all programs while addressing disparities.
    - b. Consider increased contracts to develop supply in areas of greatest need.
    - c. Workforce development resources should target areas of greatest need.
  - iii. Target Quality Counts support and funding to areas of low supply and areas of need.
  - iv. California's rural counties face the lowest access to quality child care because of geographic challenges. FCCHs should be incentivized to fill the need in these areas.

## **8. Coordination and Alignment**

### A. TK-12 Articulation

- i. Barriers to district participation in preschool and child care programs should be mitigated, including coordination and greater alignment of schedules, facility regulations, and other barriers, while maintaining requirements which serve the needs of children and families for full-day, full-year care.

- ii. Barriers and disincentives should be examined and alleviated to encourage local educational agencies to contract with state and federally funded community-based birth to 5 providers.
  - iii. Targeted support programs should be made available to children who face special challenges and who do not have access to child care or preschool programs, with formal transition plans including assessment, early intervention, and summer programs on the school site.
  - iv. Build partnerships between school district programs and our mixed delivery systems. Leverage the connections with county offices of education and the First 5 Commissions and build partnerships between statewide education advocacy organizations and early care and education associations.
  - v. Staff qualifications, ratios and, developmentally appropriate practices for children birth to age 5 should be analyzed and, where necessary, changed to ensure that children thrive and all outcomes, including social and emotional, are improved.
- B. First 5 is an essential partner for child development and family strengthening services for two-generation systems change.
- i. First 5 should be a member of the State Early Childhood Advisory Council and a partner in systems change in areas of their focus including home visiting, Dual-Language Learners and Quality Counts.
  - ii. First 5 will be a key partner on the Task Force to reform our bifurcated funding and administrative system serving children with disabilities and special health care needs. Specifically, the Task Force should partner with the First 5 Association and its initiatives on early intervention.
- C. Tribal Child Care
- i. State and local agencies need to track and report publicly to ensure families who request services (tribal or non-tribal) in tribal communities are receiving them.
  - ii. Quality improvement systems and Health and safety requirements should reflect the needs of tribal communities and assessment should build upon the current strengths.
  - iii. Support should be provided to tribal communities for outreach and engagement activities within tribal communities by tribal organizations/tribal governments and local needs assessment should be inclusive of tribal child care and communities.
- D. Head Start
- i. Expand access to Head Start for federally eligible 3 and 4-year-old children by using state funds to expand HS program to full day, full year for all those meeting HS eligibility.

- ii. Support Head Start home visiting funding and permit Head Start agencies to receive MIECHV funding to support home visiting.
- iii. Simplify ECE regulations. 66% of Head Start agencies also have state preschool contracts. Align state regulations with Head Start requirements.
- iv. Apply for a waiver to current Head Start income and age eligibility.

#### E. Business

- i. The governing and planning entities charged with implementing the BRC Recommendations should coordinate with Business and Business organizations encouraging their support for ECE policy investment and other family supports to prepare our future workforce for the 21<sup>st</sup> century.
- ii. Business should be encouraged to develop family friendly scheduling, offer flexible spending accounts, and share information on community ECE programs and other family supports such as PFL and eligibility for tax credits and subsidies.

#### F. Local Funding Sources and Coordination

- i. Each region, county or sub-county area should have an effective local coordinating body that does local needs assessments; collects data, identifies equity goals and implementation for targeted resources and policies; supports local innovation, coordinate local partnerships and evaluate local efforts. This body should have robust parent and provider as well as agency and local government involvement. They should be linked to state bodies. The state should adequately support these bodies including stipends for parents and providers to participate.

#### G. Integrate Services for Families with Children from Birth to Age Five

- i. Paid Family Leave should be expanded to one year of job-protection and paid family leave (PFL) for bonding and caregiving with benefits high enough to replace 100% of wages of low-wage workers and subsidies for low-income families not currently eligible.
- ii. Home Visiting Programs: Coordinate development of an integrated birth to five system statewide that addresses the multiple needs of families including a variety of evidence-based models, supporting culturally and language appropriate models. Ensure ECE and home visiting staff are cross-trained and can make appropriate referrals.

### 9. **Financing**

- A. Long-term goal: Create an adequate and sustainable financing structure for all subcommittee recommendations including equitable access to early care and education for all families while targeting those most separated from opportunity, settings that meet their

needs and definition of high quality and are affordable; a well-compensated, professionally supported diverse workforce; and necessary facilities, systems, and infrastructure.

- B. The BRC approached new funding with commitment to not reducing current funding for other important programs. We do not propose to take funding away from existing programs but rather to identify additional financing options for consideration by the BRC. The BRC does not believe in taking current funds needed by our TK-12 partners.
- C. Family contribution: Our recommendations for family share are detailed in the Access section but in summary we recommend:
- i. Universal goal: California families at or below the SMI would pay no more than 7% of their income on early care and education for children under the age of 6.<sup>2</sup>
  - ii. Short-term goal: Families at or below 100% Supplemental Poverty Measure (SPM) with a need for child care will be guaranteed access and will pay no fees.
  - iii. Mid-term goal: Families at or below 70% SMI with a need for child care will be guaranteed subsidies or ECE program access and will pay fees on a sliding scale.
  - iv. Long Term goal: Families at or below 85% SMI with a need for child care will be guaranteed subsidies or ECE program access and will pay fees on a sliding scale.
  - v. Long term goal: Make the state Child and Dependent Care Credit fully refundable, tied to cost of living increases, and increased over time to meet long-term affordability goals.
- D. State Funding
- i. Fund Paid Family Leave policies by eliminating the cap on the current taxable wage base of \$114,967.
  - ii. Establish a dedicated funding stream with new funds to establish a Families in Crisis Fund for immediate access to care (See Access recommendations).
  - iii. The Mental Health Services Oversight and Accountability Commission should work with ECE stakeholders including First 5s to examine MHSA funding to ensure that we are maximizing early intervention funds.
- E. Federal Funding for ECE
- i. Many of these proposals align with the comprehensive and visionary federal legislation, The Child Care for Working Families Act, S. 568, introduced February 26, 2019, by

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<sup>2</sup> The federal Child Care for Working Families Bill guarantees federal child care assistance to working families with children birth to 13 earning up to 150 percent of SMI and establishes a sliding fee scale for families from 75 percent of SMI to 150 percent of SMI so that no family pays more than 7 percent of their family income on child care. We see our state based proposals as a bold step towards that goal.

Senator Murray and Rep. Scott, with 131 cosponsors including Senators Feinstein and Harris.

- ii. The Secretary of the California Health and Human Services Agency should prepare a report to the Legislature, Governor and SPI by December 2019 outlining all federal opportunities including Medi-Cal to draw down federal funding to meet the goals outlined by the BRC and identify areas where new regulatory, legislative, or other action is required to maximize federal funding.
- iii. Head Start is the largest single source of federal funding at \$1.152 billion in California in 2016-2017. Maximize state receipt of Head Start funding.
- iv. TANF: California should maximize the use for CalWORKs grants, ECE, and other direct services to families and children in the CalWORKs system.
- v. CCDBG: While funding has been increased, it is still does not meet the need and we should actively encourage our federal delegation to increase CCDBG funding.
- vi. Special Education Funding (see Task Force recommendations in Access).

#### F. Integrating and Maximizing Funding Sources

- i. Funding Children with Disabilities and Special Health Care needs: Establish a Task Force with strong parental and provider representation to reform our bifurcated funding and administrative system building on the work of the State's 2015 Special Education Task Force (see Access Recommendations).
- ii. We should develop effective strategies and statewide requirements for counties and managed care providers to ensure Early and Periodic Screening, Diagnostic and Treatment (EPSDT) is funding periodic screenings and identified needed treatment. Counties should be incentivized to develop best practices and county-level solutions in partnership with TK-12, First 5, and other child-serving county-based entities.
- iii. Federal Law requires mental health plans to provide specialty mental health services to eligible Medi-Cal beneficiaries, including both adults and children. Enforce and ensure that EPSDT is available pursuant to federal law.
- iv. Immediately establish policies and invest resources to ensure California meets the federal Early Start and Individuals with Disabilities Education Act (IDEA) Part C (early interventions for infants and toddlers birth to three) requirements in terms of procedures, timelines, and child outcomes. In addition, review current definitions of what constitutes a developmental disability or delay.

## **10. Parent Focus Groups Summary**

This is a summary from four Focus Groups held by Parent Voices in October and November 2018, in the Bay Area, Inglewood, San Fernando Valley, and Fresno.

### **A. Learning about Child Care**

1. Advertise child care resources in easily accessible places such as hospitals, buses, doctor's offices, and television. This outreach should be provided in multiple languages and through cultural navigators.
2. Train prenatal doctors to inform parents about child care options and connect them with social services and child care resource and referral agencies.
3. Similar to a Lamaze or child birthing class, create a workshop for parents that includes information about available child care and social services, understanding child development, and non-violent empathy skills to address challenging behaviors.

### **B. Applying for a Child Care Subsidy**

4. Allow parents sign up for a child care subsidy when they are pregnant.
5. Allow for automatic child care authorizations upon approval of CalWORKs to remove delays in child care access.
6. Have child care case managers and resource & referral counselors at county welfare offices streamline and speed up child care authorizations.
7. Create an emergency child care subsidy program for victims of domestic violence, homeless, or at risk of neglect and abuse.

### **C. Recertifying and Determining Subsidy Eligibility**

8. Create a seamless paperwork process for moving from Stage 1 to Stage 2, when adding a second child to an existing subsidy, and when transferring child care subsidies across counties.
9. Ensure that subsidies follow parents across counties; parents do not need to reapply if they move to a new county.
10. Streamline recertification paperwork so that employment can be verified through pay stubs and tax returns.
11. Remove parent needs requirements and follow the child to determine eligibility. Allow all recertification to be provided via electronic means.

### **D. Determining how Much Parents should pay for Child Care**

12. Increase the reimbursement rates of the subsidy to better reflect local costs of living.
13. Mandate paid family leave for one to two years, with the first year being at 100% of the parent's income. Paid family leave should be based on the city where you work, not the headquarters of the company which could be out of state.
14. Do not count one-time bonuses toward parents' income.



15. Allow deductions (such as housing costs and medical insurance) when applying for child care or when assessing family fees. Policies should be consistent with other social service programs.
16. Improve the quality of county social services offices through offering child care onsite, outdoor playgrounds, breastfeeding facilities, and gender-neutral bathrooms.
17. Ensure forms are gender neutral and more inclusive for LGBTQIA+ families.
18. Mandate ongoing empathy and sensitivity training for case workers and child care subsidy case managers.
19. Ensure case managers are offering travel time allotments that truly reflect parents' travel times rather than a 30-minute general allotment.

#### **E. Ensuring High Quality Child Care Environments**

20. Improve the timeliness and quality of child care facility inspections.
21. Facilitate partnerships between providers and child development organizations to offer parenting courses at the provider's location.

#### **F. Supporting Child Care Providers**

22. Incentivize individuals and offer pathways to become providers, especially in rural areas and for bilingual providers.
23. Mandate ongoing education for child care providers and provide training for providers while offering additional pay for meeting these requirements.
24. Increase salaries for both exempt and non-exempt child care providers.

#### **G. Selecting the Right Provider**

25. Provide easily accessible online child care facility records so parents can easily access any reported complaints or violations.
26. Offer support for parents when selecting providers. For example, facilitate parent meet ups to discuss child care options and advertise counseling services for selecting a provider.
27. Develop an application or online database that provides more comprehensive information about child care providers in parents' communities. Information could allow a parent to filter based on: (a) whether the provider take subsidies or not; (b) if the provider has current availability; (c) provider hours of operation; (d) whether the provider offers meals or diapers; (e) if the provider offers care on nights or weekends; and (f) the languages spoken in the facility. Provider profiles could include pictures and videos of the program, philosophy of the provider, certifications and educational background, background checks, easy link to licensing for violations, and reviews by parents who have used the program. Parents could also apply for child care assistance online.

#### **H. Reforming Existing Policies**

28. Clarify or reform migrant child care regulations to not require a parent to move out of the county within 12 months to remain eligible for services.

29. Enforce and implement 2017 policy changes around variable income and 12-month eligibility.
30. Increase funding for child care so families are not on waiting lists, can access services without enrolling in CalWORKs, and gaps in service provision are minimized.
31. Offer support for students pursuing a Master's degree; allow parents to receive beyond two semesters of support.



## CA Assembly Blue Ribbon Commission on Early Childhood Education

### Recommendations: Family Engagement

**\*\*\*DRAFT\*\*\***

**March 11, 2019**

As their children's first teachers and strongest advocates, parents should have a strong voice in guiding California's ECE system. As informed consumers of ECE services, this voice and participation can acknowledge its successes and highlight areas that need improvement. Fundamental to authentic parent engagement is the belief that the work is done not *for families*, but *with families*. Engagement is a two-way street that recognizes parents as experts and includes them in joint decision-making.

The Blue Ribbon Commission (BRC) has worked to keep families at the center of deliberations by inviting parents to be expert witnesses at BRC public hearings, holding parent focus groups across the state, and to challenge thinking and reflection about how the voices of both parents and providers can be woven more effectively into ongoing policy deliberations.

Parent Voices is an important formal member of the Commission and facilitated authentic parent engagement throughout the process and is ready to support and hold the Blue Ribbon Commission and new administration accountable to implementing these recommendations. This work draws from their current proposals and benefits from the input of their existing networks of parent leaders and community partners.

The formal recommendations included in the report are informed by parent focus groups conducted throughout the state in fall 2018 designed for the purpose of informing the Blue Ribbon Commission. Recommendations from parent focus groups are included at the end of the summary preceding this section and integrated into each section of the report.

## Principles & Recommendations

- A. Parents are key participants in their child's care, and should be key players in program development, improvement and ongoing deliberations regarding policy and programs at state and regional levels.
- B. No new program or policy should be implemented without the input of parents and consultation with those most directly affected.
- C. The State should acknowledge the importance of parent input in policy development and program improvement by establishing and funding formal bodies at the state and regional level. Recommendations include:
  - i. Establish a Parent Advisory Council (PAC) including parents from the subsidy system both voucher and contracted (Title 5), those on waiting lists, and those paying privately. Representatives of the Parent Advisory Committee will sit on the ECE Advisory Committee.<sup>3</sup>
  - ii. The Parent Advisory Council should be formed and funded to provide recommendations to early care and learning stakeholders with regard to the best practices for engaging families, creating warm and welcoming environments, and how to develop partnerships to support the best outcomes for the *whole family*.
- D. Ongoing processes should be developed to address agency cultures shaped by scarcity of resources and a compliance mentality and transformed into a culture of continuous quality improvement that welcomes family, provider and community voices.
- E. Professional development for service providers who work with parents should include best practices on family engagement and joint decision-making.
- F. Training and support should be provided for all providers and staff who interact with children and families, as well as for administrators and policymakers, so that everyone is prepared to recognize and address implicit bias based on race and poverty and all families are valued and respected and invited to participate.<sup>4</sup>
- G. Training and support on the impact of trauma and adverse child and family experiences should be developed and made widely available.
- H. The Department of Social Services and the Department of Education should work with parents and providers from all domains of California's mixed delivery system, to develop a parent

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<sup>3</sup> See AB 641 Introduced by Speaker Rendon February 20, 2013.

<sup>4</sup> Systems change focusing on equity and moving from compliance to children and families first is a key component throughout these recommendations. See Workforce section for training and coaching See Access for culture change from compliance based to child development and two-generation based system. See system for training for agency staff and See quality for equity and QRIS.

engagement tool kit that would be available to professionals who work with parents to encourage cultural humility and understanding of diverse family structures.

- I. Education state law should be drafted and updated to include specific language related to local child care advisory committees including local Child Care Planning Councils to require a minimum of two parents who currently, formerly, or are waiting to receive subsidized child care services be appointed to all local entities. Funding to support meaningful parent participation should be part of the funding provided to all local planning bodies



## **CA Assembly Blue Ribbon Commission on Early Childhood Education**

### **Recommendations: Access for Children and Families**

**\*\*\*DRAFT\*\*\***

**March 11, 2019**

Early Care and Education (ECE) must be accessible to children and their families. ECE must be a two-generation policy as the wellbeing of children is inextricably linked to their family's wellbeing. Families need to succeed for children to succeed.

All children birth to age five should have access to nurturing, educational, culturally, linguistically, and developmentally appropriate high-quality early care and education opportunities with a commitment to social, behavioral, emotional, cognitive and physical development, and continuity of care.

Families must have choices. These environments must be affordable and available during the times families work, go to school or engage in other activities to earn a living or move to economic security. As jobs increasingly require nontraditional hours and growing numbers of workers have variable schedules, we need to ensure ECE meet the needs of working families. In addition, families need choice to ensure their ECE programs reflect their cultural, linguistic and other preferences. We are fortunate that our mixed delivery system helps provide choice and flexibility.

We must strive to serve all families and children while focusing on removing the barriers for those separated from opportunity due to poverty, racial bias, language, geographic isolation, disability and other factors.

Recommendations are in the following areas:

- Access Birth to Five
- Equity
- Families in Crisis
- Targeted Families and Children
- Eradicating Barriers

## 1. Access Birth to Five

- A. Universal goal: California families at or below the State Median Income (SMI) would pay no more than 7% of their income on early care and education for children under the age of 6, regardless of whether they have access to subsidized child care, the state preschool program, or a federally funded program.<sup>5</sup>
- B. Short-term goal: Families at or below 100% of the Supplemental Poverty Measure (SPM) with a need for child care will be guaranteed subsidies or ECE program access and will pay no fees.
- C. Mid-term goal One: Families at or below 70% SMI with a need for child care will be guaranteed subsidies or ECE program access and will pay fees on a sliding scale.
- D. Mid-Term goal Two: Families at or below 85% SMI with a need for child care will be guaranteed subsidies or ECE program access and will pay fees on a sliding scale.
- E. Redefine “need” for ECE in all state funded programs so that children’s need for ECE and continuity of care<sup>6</sup> is prioritized. Families should not lose access to care when work hours are changed or reduced, when school is on break, employment is not available or other challenges occur.
  - i. There is no federal requirement that parents work a minimum number of hours to qualify for child care subsidies or that agencies document or verify parent’s job schedules or hours. California’s Child Care and Development Fund State Plan (CCDF) requires that parents of eligible children must be “working or attending a job training or educational program,” or the child must be in need of protective services. There is no federal requirement that parent’s work hours match the number of child care hours authorized, or that parent’s work hours match children’s hours in child care.<sup>7</sup>
- F. Expand ECE programs that provide care during nontraditional hours and that are responsive to flexible schedules. Provide incentives and appropriate guidelines for this care and remove barriers to participation in programs such as State Preschool, Head Start, and voucher programs in order to meet the family’s needs.

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<sup>5</sup> The federal Child Care for Working Families Bill guarantees federal child care assistance to working families with children birth to 13 earning up to 150 percent of SMI and establishes a sliding fee scale for families from 75 percent of SMI to 150 percent of SMI so that no family pays more than 7 percent of their family income on child care. We see our state based proposals as a bold step towards that goal.

<sup>6</sup> Prioritizing continuity of care means implementing policies and practices to ensure children and families are consistently engaged in high-quality early learning experiences without interruptions and maximizing children’ relations and bonds with caring adults

<sup>7</sup> Job Hours and Schedules: Implications for State Child Care and Development Fund Policies Christine Johnson-Staub and Hannah Matthews, CLASP Gina Adams, Urban Institute April 2015

- G. The state should ensure that every child receives developmental screening during their early years that incorporates family input with regard to their child's physical, emotional and mental wellbeing for the early identification and support for children at risk of a delay and children with special needs. Screening must be tied to increasing access to tiered early intervention services for those at risk and those identified with special needs. Only 28.5% of children age 10 months to 5 years received developmental screening resulting in California currently ranking 30<sup>th</sup> in the country.<sup>8</sup>
- H. Ensure that eligibility rules are aligned with the goal of making child care available to families across the state. Introduce additional income deductions or disregards that would more equitably reflect a family's ability to afford child care and align with other systems.
- i. Do not count one-time bonuses when calculating family income.
  - ii. The state is currently implementing CalSavers, a voluntary retirement savings plan for the millions of workers who do not have access to a retirement plan through their employer, most of whom are low-wage employees. Contributions made to CalSavers or other retirement plans should be deducted from the calculation of family income for both determining eligibility and calculating family fees.
- I. Make the state Child and Dependent Care Credit fully refundable, tied to cost of living increases and increased over time to meet long-term affordability goals.
- i. Provide an additional 50% CDCE tax credit to the families at or under 100% SPM with infants and toddlers.
  - ii. Offer optional monthly payments for families at or under 100% SMI.
  - iii. Provide funding for robust outreach to inform families of new tax and subsidy policies and technical support in filing. Include not-for-profit organizations as well as public entities and integrate with the Earned Income Tax Credit (EITC) and PFL outreach as possible. Ensure that outreach and technical assistance are in multiple languages, and special populations are reached with culturally appropriate service.
  - iv. This refund should not be counted as income for ECE or other program eligibility.
- J. Prioritize investment for infants and toddlers for all services including child care subsidies that can be used for family child care, family friend and neighbor (FFN) care or a child care center and Title 5 centers. Only 5-10% of eligible infants and toddlers are served in subsidized programs compared to 35% of three-year old children and 67% of four-year-old children.<sup>9</sup>

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<sup>8</sup> Deborah Stipek and Colleagues, Stanford University *Getting Down to Facts II Early Education in California* (2008) page 45

<sup>9</sup> CCRC handout BRC hearing October 9, 2018 based on American Institute of Research Data.



- i. Expand whole family options including expansion of Paid Family Leave, voluntary home visiting and other approaches (see Coordination recommendations).
  - ii. Develop adequate reimbursement rates for infants and toddlers in all settings (see Rates section).
  - iii. Incentivize licensed family child care homes who wish to specialize in care of infants and toddlers by establishing a specialized reimbursement rate for those with demonstrated experience and specialized training to serve two infants alone or four with an assistant (see Workforce recommendations).
  - iv. Remove barriers that prevent expansion of infant-toddler centers in California. This includes licensing and regulatory barriers, physical access and facilities barriers.
  - v. Design incentives for Title 5 centers and licensed family child care home providers to expand capacity to serve infants and toddlers.
  - vi. Remove barriers to collaboration and coordination with Early Head Start to ensure California utilizes all available federal Early Head Start funds.
  - vii. Incentivize infant toddler focused quality improvement by Title 5 and Title 22 programs who receive state subsidies to engage in quality improvement and increase reimbursement (see Workforce recommendations).
  - viii. Support Family Friend and Neighbor providers who receive state subsidies to engage in quality improvement and increase reimbursement (see Workforce recommendations).
- K. Expand access to ECE programs including preschool for all 3 and 4-year old children. Expansion should begin with those in low-income families, ensuring full-day care with wrap around services available. Options for expansion include but are not limited to:
- i. Allow participation in part-day, part-year programs while keeping full subsidies for families that utilize Alternative Payment (AP) vouchers for child care. This is currently prohibited.
  - ii. Expand effective access to Head Start for eligible 3 and 4-year old children by using state funds to expand HS program to full-day, full-year for all those meeting Head Start eligibility.<sup>10</sup> Ensure California utilizes all available federal Head Start funds.
  - iii. Children who were served as a 3-year-old and who want to enroll in full-day or part-day CSPP as a 4-year-old should be automatically enrolled with no additional eligibility verifications based on this age transition and parents should not be required to attend orientations.

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<sup>10</sup> See recommendation to increase federal Head Start eligibility to reflect California costs

- L. Develop a whole family approach, so the system is not set up that only one child receives services while other eligible children in the family do not due to their age or other factors. We need to ensure the whole family is being served.
  - i. The state should integrate eligibility across programs so that all children in a family are seamlessly eligible for subsidies.
  - ii. A whole family approach should be applied whether the family enters through the voucher system or other subsidized programs.
  - iii. Remove barriers to integrating vouchers, state contracted programs, and Head Start.
- M. Reinstate the CDE administered California supplement to the federal Child and Adult Care Food Program and conduct a thorough review of administration and compliance monitoring to remove unnecessary burdens for agencies and providers. Explore making these funds available to FFN providers.
- N. Support parents during prenatal care linking them with services and allowing them to pre-register for ECE subsidies.
- O. Adopt Family Friendly Workplace policies that would directly support ECE participation. Comprehensive fair workweek state standards should be enacted, giving employees predictable schedules with stable hours. Without a predictable schedule with consistent hours, families have difficulty arranging child care and balancing their household budget. Unpredictable work schedules also make it hard for parents to go back to school or engage in job training, limiting economic mobility.<sup>11</sup>
- P. Expand paid sick and safe days for workers for their own illness, to care for family (blood relative or affinity) and for survivors of domestic violence to take time for safety and support. ECE providers in the subsidized system would be paid when workers taking paid sick and safe days keep their children out of their ECE placements.
- Q. Affirmative Outreach Child Care and Child Wellbeing<sup>12</sup>
  - i. Advertise child care resources in easily accessible places such as libraries, hospitals, buses, doctor's offices, and television. This outreach should be provided in multiple languages through cultural navigators.
  - ii. Direct prenatal doctors to inform parents about Resource and Referral Programs and other resources that can provide them with child care options and connect them with social services.

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<sup>11</sup> Supporting Working Mothers in California Kristin Schumacher California Budget and Policy Center June 2018 CBPC

<sup>12</sup> Parent Voices Parent Focus Groups developed all these recommendations, Fall 2018

- iii. Fund Resource and Referral agencies and other not-for-profits to develop resources with and for parents including YouTube channels, videos in public places, mobile technology based resources as well as classes that include information about available child care and social services, understanding child development, and non-violent empathy skills to address challenging behaviors.
- iv. Facilitate partnerships between providers and child development organizations to offer parenting courses at the provider's location.
- v. Apply recent laws requiring policies to be gender neutral and more inclusive for LGBTQIA+ families and families based on affinity, including program-related forms.
- vi. Offer support for parents when selecting providers. For example, facilitate parent meet-ups to discuss child care options and advertise counseling services for selecting a provider.
- vii. Develop an application or online database that provides more comprehensive information about child care providers in parents' communities. Information could allow a parent to filter based on: (a) whether the provider takes subsidies or not; (b) if the provider has current availability; (c) provider hours of operation; (d) whether the provider offers meals or diapers; (e) if the provider offers care on nights or weekends; and (f) the languages spoken in the facility. Provider profiles could include pictures and videos of the program, philosophy of the provider, certifications and educational background, background checks, easy link to licensing for violations, and reviews by parents who have used the program. Parents could also apply for child care assistance online.

## **2. Equity**

- A. California must commit to providing opportunity for all children and families through equity-based strategies and policies. First, we must adopt a clear and measurable working definition of equity and a process to meet universal goals while prioritizing investments for children and families, and communities most at risk. This includes developing equity indices statewide and for each county.
- B. Align programs and practices with equity principles using an equity lens when viewing current programs and recommendations.
- C. Use a targeted universalism process<sup>13</sup> to develop a ten-year plan to meet universal goals by first, targeting the most excluded and evaluating and adjusting policies and investments. The plan must recognize that different groups are situated differently relative to the institutions and resources of society.

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<sup>13</sup> Stephen Menendian, Haas Institute for a Fair and Inclusive Society, Testimony BRC May 3, 2018

- D. Investment should be equitable based on actual demographic trends<sup>14</sup> not historical funding. For example, the Central Valley is projected to have the largest growth in child population over the next two decades<sup>15</sup>
- E. Engage and build power among parents and ensure governance includes robust participation of parents and providers including the groups and places targeted.
- F. Invest in outreach to the vulnerable populations, their organizations, and the agencies that partner with and serve them since these populations are often isolated and difficult to reach. Use prevalent methods of communication such as social media and mobile-based technology.

### **3. Families in Crisis**

- A. Establish a Families in Crisis Fund for immediate access to care and expedited eligibility and navigation with contracted slots available.
  - i. Have 12-month certification be based on a qualifying special population with no income eligibility or need for the first year. After 12-months, re-evaluate their continued status in a special population or another need for care and income eligibility.
  - ii. New funding is needed, not a reallocation of existing funding.
  - iii. Support child care navigator services to identify permanent child care resources and trauma-informed care training and coaching for participating emergency child care providers and explore evidence-based support models.
  - iv. Ensure that programs have the additional resources to offer necessary child/family support services and links to mental health consultation, quality technical assistance and coaching, health visits and screenings, and inclusion support.
  - v. Allow choice of Family Friend and Neighbor care with appropriate supports to ensure screening, assessment and connection with trained trauma-informed care providers through Head Start, Early Head Start or another program.
  - vi. Families to be served:
    - a. Homeless families: Use the McKinney-Vento Act definition for children who are eligible based on their homelessness and give discretion to local agencies to include families at risk of homelessness.
    - b. Resource parents, other children under supervision of CWS, parenting transitioning former foster youth and foster youth through youth's graduation to age 25 years old.
    - c. Unaccompanied minors placed in California and other children and/or families applying for or with granted refugee status.
    - d. Families facing dislocation and crisis as a result of domestic violence.

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<sup>14</sup> See Data Recommendations for more detail

<sup>15</sup> Manuel Pastor Testimony BRC July 11, 2018 citing DOF

#### **4. Targeted Families and Children**

##### A. Children and families in poverty including CalWORKs.

- i. Administration should be humanistic and streamlined to ensure continuity of care and the presumption of eligibility for families (see Systems recommendations).
- ii. One caseworker should be assigned for all services or caseworkers that are cross trained.
- iii. Family navigators, preferably former CalWORKs recipients, should assist families.
- iv. Provide 12-months child care authorization for fulltime ECE upon initiating CalWORKs cash grant with no need determination. Families should keep stable child care for 12-months, or until transfer to Stage 2, whichever occurs first.
- v. Make sure that children have safe, stable child care before a parent is required to participate in mandatory CalWORKs activities.
- vi. Allow siblings over 18 to be eligible to care for younger children as a FFN provider with supports and training as outlined in the Workforce recommendations.
- vii. Facilitate Head Start and Early Head Start enrollment. Require all ECE providers to share pertinent information about all program options available, including Head Start, to interested and eligible families within a service area.

##### B. Racial Equity

- i. All low-income families face significant barriers to child care and early education. Barriers are particularly daunting for families of color, families whose first language is not English, and immigrant families who face systemic barriers to successfully navigating public systems due to cultural and linguistic barriers, which results from persistent, deeply rooted racial bias.
- ii. Definitions of quality in early childhood settings often reflect the views of the dominant language and culture and may fail to elevate standards on diversity or alternative concepts of quality. Head Start offers standards for cultural competence that can be incorporated into state quality standards and early childhood programs<sup>16</sup>.

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<sup>16</sup> Christine Johnson-Staub *CLASP Equity Starts Early*, December 20, 2017, pg. 13

- iii. Employment conditions in the low-wage sector make it difficult for Black and Latino families with low-wage workers to participate in state child care assistance programs due to schedule fluctuations.
  - a. Redefine “need for child care”.
  - b. Increase flexible scheduling options for families relying on low-wage jobs that include night and/or weekend shifts, unpredictable schedules, and hours that fluctuate from month to month or even from week to week.
- iv. End disproportional discipline practices. Racial stereotyping, explicit and implicit bias negatively impact children’s participation in early childhood programs and result in disproportionality in discipline including literally removing them from the classroom. Research shows that children of color, particularly black children, are disproportionately disciplined in educational settings and are more likely to be suspended and expelled from early education settings than their white counterparts, disrupting their access to early education and affecting their future developmental and educational success.<sup>17</sup>
- v. Require evidence-based, anti-bias training for all people connected to ECE from policy makers to those providing services and to all ECE providers. Integrate anti-bias component in all training, coaching and other interventions to eliminate bias. Provider training should include positive reinforcement practices for how to help improve a child’s behavior instead of using suspensions, expulsions, and other forms of punitive disciplinary measures. Child care providers and teachers need to be trained in other disciplinary options that will support a child’s healthy development.
- vi. Leverage home-based care with its diverse providers as an asset in early childhood education and peer mentoring programs with appropriate training and support for these providers (see Workforce recommendations).
- vii. Increase investment in ECE as necessitated by California demographics. In part, demographic groups experiencing rapid population growth are less likely to be enrolled in subsidized care because the number of child care and development “slots” has not kept up with this growth.

#### C. Dual-language learners (DLL), language access and cultural competence

- i. Recognize that the state’s DLL/ EL students enter the education system with linguistic, cultural, and intellectual assets that contribute to the rich diversity of California.
- ii. Design and implement policies consulting with the families to remove systemic barriers to successful navigation of public systems due to cultural and linguistic barriers and those that result from persistent, deeply rooted racial bias.

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<sup>17</sup> CLASP, Christine Johnson-Staub *CLASP Equity Starts Early*, December 20, 2017, pgs. 7, 11

- iii. Conduct effective outreach to families from linguistically diverse backgrounds and implement the law ensuring ESL classes are an approved activity. Post program application in multiple languages and review the verification required by the state and streamline in accordance with evidence-based practices.<sup>18</sup>
- iv. Provide targeted funds for local initiatives learning from the 2015 First 5 \$20 million investment in a Dual Language Learner Pilot. Their effort is designed to build on existing research and best practices to pilot culturally and linguistically-effective strategies for DLLs, birth to five, in early learning settings to inform local and national approaches to meet the unique needs of DLL children.
- v. Establish evidence based instructional approaches for young DLLs with a dual language approach, instruction with varying proportions in the home language and English to support simultaneous development of both languages and promote bilingualism and literacy in both languages.
- vi. Develop appropriate approaches for children in linguistically isolated families where English is not spoken at home.
- vii. It is critical that screening, observations, and ongoing monitoring of DLLs/ELs are done in the home language and English with culturally, linguistically, and developmentally appropriate and valid assessments by qualified assessors who are knowledgeable about DLL/EL education and language acquisition.
- viii. While Family engagement is a critical component of all ECE programs, Family Engagement strategies for DLL must be responsive to their specific strengths and needs. Strong family-child bonds establish strong cultural identities that serve as a critical foundation for learning. Families can help their children bridge the diverse cultural worlds of home and school.<sup>19</sup>
- ix. Expand investments in access and professional development opportunities that will enhance the capacity of the early learning workforce to effectively support all children who are DLL.

#### D. Immigrant families

- i. In California, more than half (57.8 percent) of low-income children from birth through age 12 have at least one immigrant parent, and the majority of these children are Latino. Barriers, which arise due to complicated eligibility and enrollment processes, should be removed (see Systems recommendations).

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<sup>18</sup> Child Trends January 2019 *How State Level CCDF Policies May Shape Access and Utilization among Hispanic Families*

<sup>19</sup> Marlene Zepeda Testimony BRC October 9, 2018

- ii. We should invest in Resource and Referral and other community-based organizations to address the specific needs of immigrant families including access to cultural translators specific to the immigrant experience.
- iii. The State should work with experts to evaluate and understand how best to advocate against harmful proposed changes in federal policy which denigrate the ability of individuals to be in California.

#### E. Migrant Families

- i. Clarify practice and if necessary reform migrant child care regulations to not require a parent to move out of the county every 12-months to remain eligible for services.

#### F. Tribal Child Care

- i. The state should have clear requirements including outreach, culturally appropriate and fair intake processes, and referral systems that clearly recognize parental choice ensuring equitable access, culturally responsive outreach, and inclusion of tribal populations, Tribal Child Care, and tribal communities.
- ii. A cultural/community broker should be available. This is a person from the tribal community, or who has knowledge of, the cultural norms and practices working as an advocate and liaison in bridging the gaps for Tribal Child Care and support in accessing culturally appropriate resources for families, children and community within the current local and state systems. They can help create a path to healing at the local level, reducing conflict and misunderstandings, and work in unison with the tribal community to support the needed resources to increase quality and access to early care and development.
- iii. Ensure home visitors and family educators are trained in and practice culturally proficient services including health and safety practices.
- iv. Support FFN providers, as outlined in the Workforce section, and use culturally appropriate definitions of relatives.
- v. Resources and informational materials should promote and include symbols, pictures, and locations to promote cultural awareness and inclusion of tribal children and families. The state should support communities in keeping an active list of resources to incorporate tribal cultural activities to expose tribal children to the community in general.



- vi. Transportation should be provided for tribal children and families to access ECE, as geographical and social isolation has been exacerbated by system barriers.

G. Children with disabilities, mental health and other special health care needs.

- i. Ensure the early identification of potential delays, risk of delay and other special needs for all young children by implementing a comprehensive, coordinated, accessible system that provides all children access to early screening and intervention and the tiered services they need. High quality ECE should be an integral part of the system as an accessible and effective intervention for children with disabilities and one source for early identification.
- ii. Long term goal: Fully fund ECE and other services for children with disabilities so universal screening is accompanied by access to service. The percentage of children enrolled in special education services birth to five, including those eligible for enhanced rates and related services and infants and toddlers eligible for early intervention services, should be comparable to the percentage of children enrolled in special education services in TK-12.
- iii. Develop integrated and tiered systems of support and services responsive to the needs of all children including those at risk of a delay and those identified with special needs. We need to break down silos and build tiered systems of support for those at risk as well as those identified with delays and other special needs.
- iv. Expand the Child Find program so parents understand the no-cost resources available for screening and assessment with a focus on reaching those families where needs are under-identified due to a lack of connection to a medical home, ECE program, or other resources.
- v. Simultaneously ensure expansion of the capacity of Early Start programs, such as screenings, statewide standards in services offered, and eligibility determinations by the regional centers.<sup>20</sup>
- vi. Establish a Task Force including CDE, ECE stakeholders, TK-12, DDS, DSS, DPH, First 5s, MHSD, SELPA, Disability Rights CA, Regional Centers, legal advocates, Pediatricians and Head Start, with strong parental and provider representation to reform our bifurcated funding and administrative system.
  - a. Remove barriers leading to delayed transition between programs at age 3 and identify barriers to participation in inclusive ECE.

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<sup>20</sup> Deborah Stipek and Colleagues, Stanford University *Getting Down to Facts II Early Education in California* (2008) page 45

- b. Broaden current legal definitions of disability used to determine eligibility and reimbursement rates.
- c. Determine the cost to school districts of special education services for preschool children and allocate sufficient funding for special education preschool children as well as other children at risk of delay served in the TK-12 system.
- d. Allocate funding for special education preschool children being served in the TK-12 system, as currently TK-12 does not receive funding for preschoolers receiving special education services.
- e. Establish adequate special needs reimbursements for school district based programs, Title V and Title 22 and FFN providers receiving subsidies.
- f. The Task Force should build on the work of the State's 2015 Special Education Task Force.
- vii. Child care providers including those in preschools, other center-based programs, licensed family child care providers and Family Friend and Neighbor providers should be trained to provide initial screenings and refer families for professional assessments.
- viii. Providers should receive the financial support, training, and resources they need to serve the broad range of children in their care, including children with special needs, and provide inclusive programs for all children.
- ix. CDE should eliminate burdensome documentation for providers to qualify for the special needs increased payment (known as the adjustment factor) and increase the adjustment factor added to the reimbursement rates to incentivize providers to care for this vulnerable population. Less than 3,300 children statewide qualified for the adjustment factor paid to providers who care for children with exceptional needs.<sup>21</sup>.
- x. Eliminate racial disparities in identification and provision of early intervention services.
- xi. Eliminate disproportionality in discipline practices based on racial disparities and special needs.
- xii. Expand access to mental health services and screening for children and support and training for providers using best practices developed nationally (see Financing recommendations).

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<sup>21</sup> According to CDE statewide data from 2016-17, only 3,214 children with exceptional needs were granted the adjustment factor.

#### H. Children and Families Connected to the Child Welfare System (CWS).

- i. As the Families in Crisis program is being implemented, immediately evaluate and expand the Emergency Child Care Bridge Program for foster children.
- ii. Immediately designate child care voucher programs for parenting, transitioning former foster youth, or foster youth through the youth's graduation to age 26.
- iii. Ensure continuity of care for foster children, (meaning the child care follows the child and is not based on the parent's eligibility) whenever it is in the child's best interest as they move from families to caregivers, between caregivers, and back to their homes. Current state policy does not prioritize continuity of child care.
- iv. Every child welfare worker should have the training to understand child care options for all children connected to the Child Welfare System.

#### I. Young parents not connected to Child Welfare.

- i. CDE should conduct an evaluation of California School Age Families Education (CalSAFE) which was subsumed into LCFF as of 2013-14.
- iv. Evaluate the need for additional funding of Cal-Learn for CalWORKs eligible parenting teens.

#### J. Children with Incarcerated and Recently Released Parents.

- i. Incentivize on-site ECE programs in transitional housing and remove barriers including liability barriers.
- ii. Connect parents to child care resources and subsidy information as part of the reunification plan.
- iii. Ensure children already in ECE retain the family's choice of provider.

### 5. Eradicating Systemic Barriers

Recommendations in this section, and many integrated throughout the report, originated in the Parent Voices initiated parent focus groups. Parents painted a very clear picture of the qualities comprising their ideal child care scenario as well as the existing barriers to navigating the system.

- A. Create a seamless paperwork process for moving from CalWORKs Stage 1 to Stage 2, when adding a second child to an existing subsidy, and when transferring child care subsidies across counties.

- B. Ensure that subsidies follow parents across counties; parents do not need to reapply if they move to a new county.
- C. Streamline recertification paperwork so that employment can be verified through pay stubs and tax returns.
- D. Allow all recertification to be provided via electronic means.
- E. Allow parents sign up for a child care subsidy when they are pregnant.
- F. Ensure forms are gender neutral and more inclusive for LGBTQIA+ families.
- G. Mandate ongoing empathy and sensitivity training for county case workers and child care subsidy case managers.
- H. Ensure case managers are offering travel time allotments that truly reflect parents' travel times rather than a 30-minute general allotment.
- I. Offer support for students pursuing advanced degrees; allow parents to receive beyond two semesters of support.
- J. Remove specific barriers to access to school district full-day State Preschool.
  - i. Change the definition of need in line with overall system redefinition to focus on providing the services needed by families and children. Immediately allow all work hours including those on weekends and hours when school is not in session.
  - ii. Reduce paperwork and verification, including birth certificates, requirements which currently take as long as two hours to complete.
  - iii. Integrate the data entry. Currently, it must be entered in two databases for general education students and three for students who receive Special Education services.
- K. Immediately ensure Head Start enrollment does not eliminate eligibility for CalWORKs Stage 2 and 3 vouchers during or after Head Start participation.



## CA Assembly Blue Ribbon Commission on Early Childhood Education

### Recommendations: Workforce & Quality

**\*\*\*DRAFT\*\*\***

**March 11, 2019**

The early child care and education workforce should be celebrated as the brain builders of our society. Babies and young children thrive when they have secure, positive relationships with adults who know how to support their development and learning and are responsive to their individual progress, according to a seminal national report on workforce.<sup>22</sup> Early educators and caregivers carry a great responsibility, according to the science of child development and early learning, which demonstrates the importance and complexity of working with young children.<sup>23</sup> Yet “due to the lack of uniformity in minimum educational requirements and funding across programs and settings, in any state, the qualifications children can expect their teachers to meet are dependent on the type of programs that are available and affordable given their family’s circumstances, rather than their developmental and educational needs.”<sup>24</sup>

While we have dedicated and skilled providers, we cannot achieve the goals identified in this Report without bold action leading to increased investment and systems reforms. The BRC recognizes that these Recommendations require a significant increase in public investment.<sup>25</sup> Many families are now unable to afford early care and education, even with the current low level of compensation and inadequate access to training and teacher support. Child care teachers and providers should not finance the system through their low wages and lack of basic benefits. All providers must be lifted up across their various roles and settings, while investments are simultaneously made to meet the needs of the children and families they serve.

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<sup>22</sup> Committee on the Science of Children Birth to Age 8: Deepening and Broadening the Foundation for Success, *Transforming the Workforce for Children Birth Through Age 8: A Unifying Foundation* (Washington, D.C.: The National Academies Press, 2017), page 1.

<sup>23</sup> Ibid.

<sup>24</sup> *Early Childhood Education Workforce Index*, Center for the Study of Child Care Employment, University of California, Berkeley page 69

<sup>25</sup> Recommendations for sustainable adequate funding are in the Financing Section.

Despite the increased emphasis on qualifications and quality, little progress has been made in increasing the compensation for the ECE workforce. In California, 58% of ECE workers' families participate in one or more income support programs. The median wage for child care workers in 2017 was \$12.29/hour; the median for all workers was \$19.70, and for kindergarten teachers it was \$38.33.<sup>26</sup>

We must respect the experience, commitment, and diversity of our current workforce while increasing compensation and providing pathways to opportunities for career advancement and quality improvement for providers in all settings. The floor has to be lifted for all and we need to insure access to education, training, and support for all providers. Once the floor is lifted equitably for all, then additional increases in compensation based on quality improvement could be instituted.

Members of the current workforce must have opportunities, incentives, and supports to acquire education and training, and, for those who wish and are able to pursue, attainment of Associate, Bachelor's, and advanced degrees. The incumbent ECE workforce in publicly funded programs should bear no cost for professional development and the entering workforce should receive support to limit the cost of educational attainment.

Since paths to becoming an effective teacher vary and include practice and emotional intelligence coupled with knowledge of child development, we recognize there is no one-size-fits-all approach. The BRC recommends a competency-based approach<sup>27</sup> while recognizing that higher education programs are an essential part of a comprehensive workforce system. Competencies are what educators, caregivers, and leaders who work with children from birth to age 5 need to know and be able to do to support children's development and learning and are behaviors and actions that can be demonstrated. A focus on both competencies and education helps to ensure we bring well-rounded teachers into our children's lives who understanding the theory and research behind child development coupled with practical knowledge and experience on how to support children's strong executive functioning and emotional intelligence. ECE teachers should be able to support the academic and social-emotional development of the children they serve.

### **Supporting the Workforce**

The Commission's workforce recommendations are intended to align with state and other national efforts designed to support the early childhood workforce.

Long-Term Universal Goal: High-quality early care and education requires a competent, effective, well-compensated, and professionally supported workforce. It must be one that reflects the racial, ethnic, and linguistic diversity and needs of the children and families they serve, across the various roles and settings where children are cared for.

## **1. Equity and Diversity**

We must ensure that anti-bias and a laser focus on equity and diversity are key components of all aspects of our system including education and supportive services. We must maintain

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<sup>26</sup> EARLY CHILDHOOD WORKFORCE INDEX 2018 California Profile Center for the Study of Child Care Employment, University of California, Berkeley

<sup>27</sup> See explanation of competency based systems in section on Competencies page 6

diversity of workforce and address areas of stratification by race and ethnicity and adopt intentional strategies to achieve equity.

- A. Examine racial disparities in compensation and career advancement and develop targeted solutions.<sup>28</sup>
- B. Develop focused training and education opportunities for people of color and those who are English learners in English and their home language. Education can enhance their skills to teach their home language as well as English.
- C. Establish supports and systems to optimize all providers' ability to meet the diverse needs of children and families, including engaging parents, working with dual language learners, supporting culturally responsive practice, and providing trauma-informed care and instruction.

## **2. Provider Engagement in Systems Change**

- A. Support collective bargaining rights with the state for family child care providers both licensed and license exempt. Collective bargaining is an effective form of advocacy for providers in partnership with parents, which in other states has led to increased state funding; commitment to access and affordability for families; greater utilization of federal dollars; quality improvements; and training and collaboration.
- B. Establish a Workforce Advisory Council<sup>29</sup> including family child care, license- exempt care, and center-based teachers; statewide organizations representing child care providers; parents; state agency staff; First 5; and other stakeholders and researchers with expertise in workforce issues. The Council will develop a cost model and strategic plan to provide recommendations to the Early Childhood Policy Council and other entities on an ongoing basis and monitor implementation.
  - i. Establish data needs and plans to collect and use more data (see data in Systems section) including data needed to determine costs
  - ii. Develop a strategic plan for recruitment and retention, and to ensure career advancement pathways for all providers in all settings, reviewing the career lattice and pathways and ramps. Develop plans for leadership development and expansion of leadership and capacity of all roles in the ECE system as it expands.
  - iii. Identify ways to increase capacity of higher education systems, exploring the possibility of community colleges offering early childhood BA degrees, and increase partnerships

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<sup>28</sup> EARLY CHILDHOOD WORKFORCE INDEX 2018 68 Center for the Study of Child Care Employment, University of California, Berkeley page 20

<sup>29</sup> See Governance Section for relation to EC Policy Council and staffing and support

with community-based apprentice programs. Ensure support systems such as counseling, financial aid, tutoring, and mentoring are in place.

- iv. Determine how to increase capacity of existing and new evidence-based coaching, training, apprenticeship, and mentoring programs.
- v. Review lessons from other states as they expanded their workforces, including assessment, credentialing, expansion of higher education, and on-site mentoring and coaching. Examine the role of community-based organizations as well as those linked to TK-12.
- vi. Estimate the cost of advancing preparation, workplace supports, and compensation of the workforce.<sup>30</sup>
- vii. Ensure stable, adequate funding. Develop a cost model determining the extent of the cost gap between existing resources and what is required to accomplish reforms and articulate a phase-in plan to meet reforms. [blueprint function]
- viii. Coordinate with and include representatives from initiatives of family child care providers and their organizations focused on training, education and quality improvement.

### **3. Compensation and Support**

These recommendations for direct compensation are for licensed programs receiving state and local public funds. Family Friend and Neighbor providers have particular challenges and needs. Those Recommendations are in a separate section below.

- A. For All Caregivers and Educators in licensed programs receiving state and local public funds:
  - i. Achieve salary parity with TK-3 for those with comparable education and experience.
  - ii. Establish competitive compensation for all teaching and assistant roles and education levels.
  - iii. Competitive benefit packages including health, paid time off, retirement, and other compensation.
  - iv. Ensure that members of the current workforce have opportunities and supports to acquire education and training at no cost.
  - v. Develop targeted opportunities for advancement and supports for members of diverse racial and ethnic groups and individuals who speak English as a second language, as outlined in equity section.

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<sup>30</sup> EARLY CHILDHOOD WORKFORCE INDEX 2018 Center for the Study of Child Care Employment, University of California, Berkeley



- vi. Increases in compensation are required at all levels of qualification among the incumbent workforce. Standards for the ECE workforce cannot be increased until compensation levels are significantly raised.
- vii. As new qualifications are enacted, ensure that resources to support any education, training, and certification that may be required is available and accessible.
- viii. Invest in strategies that compensate providers as they increase their professional development, such as student loan forgiveness, paid professional development time, and graduated wage increases above the base.
- ix. Make compensation comparable between community-based providers and those in school district programs for all staff members.

B. Specific Recommendations for Title 5 Programs:

- i. Increase compensation and provide appropriate supports for working with infants and toddlers. Close the wage gap based on the age of the child served. Currently center educators working with infants and toddlers face a sizeable wage penalty compared to educators working only with children ages 3 to 5 who are not yet in kindergarten.<sup>31</sup>

C. Specific Recommendations for Title 22 Licensed Family Child Care Homes

- i. Establish reimbursement rates sufficient to ensure competitive salaries and benefit packages including health, paid time off, retirement, and other compensation
- ii. Review LFFCH providers/ labor law participation and establish protections such as minimum wage and workers' compensation.
- iii. Develop guidelines and provide incentives for licensed family child care homes who wish to specialize in caring for infants and toddlers by establishing a specialized reimbursement rate for those with demonstrated experience and specialized training to serve two infants alone or four with an assistant.

D. Specific recommendations for Title 22 centers receiving public funds:

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<sup>31</sup> Supporting the Infant Toddler Workforce Lea Austin Blog 2018 Center for the Study of Child Care Employment, University of California, Berkeley

- i. Provide equal compensation to center educators working with infants and toddlers. Currently early educators working with infants and toddlers face a sizeable wage penalty compared to educators working only with children age 3 to 5.

#### 4. **Support and Competency-Based Permitting and Certification.**

Implementation should include realistic, phased-in timelines with necessary support and compensation, and attention to both the incoming and incumbent workforces in all settings.

A. Streamline and simplify current educator and caregiver competencies to focus on essential adult practices that improve child outcomes.

- i. Make competencies easily measurable and based upon what current research says are the most effective educator and caregiver practices.
- ii. They should be aligned with work on competencies at the national level.

B. Measure and monitor competencies

- i. Create, over no more than a two-year period, a competency-based assessment that allows both new applicants and the incumbent workforce to demonstrate that they possess competencies. This should be piloted and refined for the year prior to scaling statewide. Competencies could be measured in a variety of ways including:
  - a. Certification based on formal education
  - b. Professional Development and mentoring participation and evaluation
  - c. Job evaluation using essential practices
- ii. Competencies should also be monitored and linked to a periodic recertification based upon the most recent research. The recertification process should not be cumbersome.
- iii. Assessment can be done both through the higher education system and on-site programs.
- iv. Applying for and monitoring the certification process should be free, easy to access, online, and accessible via mobile technology.
- v. This system should be aligned with the system Quality Counts California is developing for coaching competencies.
- vi. Competency-based assessment should be created for all positions including teachers, coaches, administrators, and center directors in coordination with the Commission on Teacher Credentialing process.

- vii. Ensure that competencies address equity for our dual language learners and include knowledge of first and second language learning, understanding the role of culture in language development, and familiarity with best practices for DLL education<sup>32</sup>,
- C. Establish and adequately fund a competency-based system that spans preparation, certification, and pre- and in-service training, including coaching, to improve quality and inform practice. Such a system would embed competencies in every part of the system and would require the state's preparation and pre-service training system to orient toward competencies.
  - i. Preparation should include a supervised field experience that emphasizes mastery of competencies.
  - ii. For the incumbent workforce, the state should consider an equivalency for competencies that translates into units/course credits.
- D. Require a certification process in which candidates demonstrate competencies. This should include demonstration of competencies in serving particular children including dual language learners, infants and toddlers, children experiencing trauma, and special needs children.

## **5. Professional Development for Center Teachers and Licensed Family Child Care Providers**

- A. Professional development, including coaching and mentoring, must focus on strengthening educator and caregiver competencies. Professional Development should be a component of all ECE jobs and the need for ongoing learning should be integrated into all jobs with a respect for the diversity of learning needs of provider population, based on principals of adult learning.
- B. Extend the California Early Care and Education Workforce Registry to all counties as a support to the ECE workforce in tracking and accessing professional development opportunities and as a source of information for evaluation and planning statewide. The Registry is a web-based system designed to verify and securely store and track the employment, training, and education accomplishments of early childhood care and education teachers and providers.
- C. Professional learning should be ongoing, intentional, reflective, and focused on key practices that support children's learning and development.
- D. Increase release time and paid training days for all members of the ECE workforce.

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<sup>32</sup> An Advocacy Framework for Young Dual Language Learners Marlene Zepeda, Ph.D. | Published November 2017

- E. Provide site leaders, administrators, teachers and caregivers with intensive, sustained, individualized, on-site coaching focused on interactions with children building on California's extensive teacher mentoring program.
  - i. Coaches can be trained and certified through the higher education system or be master teachers certified by on-site programs based on experience and training.
  - ii. Evaluate linkage with the Quality Counts California coaching certificate and investments.
- F. Review the TK-12 induction model, which is designed to provide a two-year; individualized, job-embedded system of mentoring, support, and professional learning that begins in the teacher's first year of teaching.
- G. Invest in proven apprenticeship models to professionalize the early learning workforce by enhancing early educators' skills and knowledge while simultaneously increasing their compensation.
- H. Invest in a range of appropriate supports that allow people from a wide spectrum of settings and cultural, educational, and financial backgrounds to access professional development opportunities. These supports include: (1) funding for tuition, books, fees, transportation, and child care; (2) tutoring; (3) conveniently scheduled and located classes; (4) counselors and mentors; (5) resources for students learning English as a second language; and (6) the availability of courses and books in languages in addition to English.
- I. Offer Professional Development programs to FCCH in a way that is accessible to providers and delivered so they enhance, not hinder, their ability to provide services and sustain their businesses.
- J. Professional Development programs should include supports such as payment for substitutes to enhance their ability to participate.
- K. Provide training in management and administration for Title 5 and Title 22 Centers. Center managers should demonstrate competencies and, as needed, receive additional training in licensing, regulation, business practices, and personnel.
- L. FCCHs should receive training on child development and running a small business, including the licensing process, legal requirements, business plans, application for other services such as the food program, budgeting, and hiring and managing personnel.
- M. Invest in expanding Resource and Referral programs including Child Care Initiative Project that provide training and support as one means to increase capacity in the areas above.
- N. Align ECE career pathways, professional development, and supports to those for other child-serving professionals such as those in home visiting, using a multidisciplinary approach.

## **6. Family Friend and Neighbor Care (FFN)**

- A. Develop and provide state support for local, evidence-based programs for children, their families, and care providers, including community hubs, library programs, online resources and apps on child development, video or online training programs, and outreach on licensing for FFN universally.
- B. Focus state investment on providers serving the most vulnerable families and children.
- C. Providers receiving state or local public funds should receive adequate compensation
  - i. The floor should be minimum wage, with incentives for quality improvement.
  - ii. Compensation in addition to minimum wage floor should be provided for those working an average of at least 20 hours per week, sufficient to purchase health care, retirement, and disability insurance.
- D. Family, Friend, and Neighbor providers should be offered quality training opportunities and peer learning communities on an ongoing basis and receive a higher license-exempt reimbursement rate for meeting the participation standards for quality activities.
- E. Encourage local innovation and implementation of programs that meet local needs, particularly
- F. Define effective ways to reach and engage parents and FFN and offer training, supports that respect diverse languages, cultures, and communities.
- G. Connect FFN providers with neighborhood resources/supports, e.g. Family Resource Centers FFN cohorts, and learning communities.
- H. Connect FFN providers and the families they work with to resources for developmental screening and early intervention services as detailed in Access section.
- I. Connect FFN provider and the families they work with to home visiting programs and resources as detailed in home visiting (See Coordination Section)
- J. Encourage partnerships between ECE and TK-12 and other partners, such as the Kaleidoscope programs housed in Los Angeles Unified schools.
- K. Ensure that state implementation of the Child Care and Development Block Grant (CCDBG) requirements for monitoring and inspection is appropriate for FFN and include support to meet new requirements.<sup>33</sup>

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<sup>33</sup> While CCDBG is a federal program, the California Department of Education has discretion in designing implementation of these provisions.

- L. Provide pathways to licensing for FFN providers, or a certification program where an FFN who does not want to become licensed can still acquire training and supports with commensurate increases in compensation.
- M. Offer Specialized Training and Support:
  - i. Expand peer mentor programs providing coaching and other training and support for providers from the same community and cultural background.
  - ii. Expand DLL training and support to accommodate the multiple languages spoken by providers and the families and children they serve.
  - iii. Expand infant and toddler training and supports.
  - iv. Expand training and support for children with disabilities and connections to early identification and intervention, including to comprehensive services.
- N. Invest in expanding Resource and Referral programs that provide training and support as one means to increase capacity in the areas above.
- O. Remove barriers to participating in Head Start, State Preschool Program or other center-based programs for families receiving full-time FFN care.
- P. Review regulations that create barriers for family's preferences and choice –for example, a grandmother living in the home cannot receive payment when that may be their preferred care.

### **Quality Improvement**

Central to our belief that all young children deserve equitable opportunities to learn, develop, and thrive is the importance of quality. Without it, we will be unable to realize early learning's full potential for children and families. Recognizing this, in addition to the recommendations contained in this section, quality is embedded in each section of our recommendations.

California faces uneven levels of quality across our large and diverse state. We recognize we must simultaneously increase access while improving quality. There are many examples to learn from, and in particular, lessons and direction can be found in studying and building upon innovative models and practices developed in local communities. Reimbursement rates should be tied to higher quality standards after the state provides sufficient funding to support those who want to achieve higher quality.

1. **Build on work by Quality Counts California** and the QCC state consortia and establish an expanded work group to grow, review and revise the current quality improvement and standards systems. Include input from parents and providers across all settings, Quality

Counts participants, First 5, academic experts, representatives of the Legislature, agency staff, and other stakeholders. The work group should make recommendations to implement the following, as well as others they define:

- A. Increase participation in California's quality standards system, making it more accessible to other settings beyond centers, such as family child care homes and FFN providers.
- B. Ensure that parent engagement is a key aspect of quality and a training and support priority.
- C. Increase integration and coherence of quality improvement programs, focusing on those that have been proven effective.
- D. Conduct research linking quality standards to outcomes for children, including children's social-emotional and early literacy and numeracy outcomes. Identify and replicate best practices that link quality standards to measures shown to predict desired outcomes.
- E. Assess effectiveness of state quality improvement expenditures, including the federal CCDBG quality improvement funds, and coordinate and continue to support those found to be most effective at improving program quality and child outcomes
- F. Fund research on child outcomes in different ECE settings
- G. Establish quality improvement assessment standards and identify support for care offered during nontraditional hours.

## **2. Support Continuous Quality Improvement through Assessment**

- A. Develop broad consensus; identify valid diagnostic and summative assessments that predict children's later skills.
- B. Individual Assessments should:
  - i. not be used to make high-stakes decisions
  - ii. not be linked to funding or performed by funders
  - iii. performed using reliable tools by trained assessors
  - iv. done after a ramp-up period for programs
  - v. not be burdensome to caregivers
  - vi. linked to data systems to help inform policy decisions and to provide information to parents seeking care.

- C. Assessments should be short, easy to complete, and used by teachers and caregivers to inform and guide instruction, and:
- i. be used in conjunction with developmental screenings at 9, 18, and 30 months to identify early intervention needs, and connected to services
  - ii. performed at key milestones, e.g. 36 months and 60 months, and articulated with early elementary assessments.
  - iii. used to provide information on individual and program outcomes for families after a ramp up period.

**3. Ensure implicit bias based on race and ethnicity or any other factor is recognized as quality standards are developed, and quality improvement programs implemented.**

- A. Review evaluation criteria and outcomes in diverse communities to ensure criteria are culturally relevant to diverse populations and do not unduly disadvantage a protected class.
- B. Require clear, written policies to address concerns regarding potential biased ratings.
- C. Require lead agencies to respond to public input on issue of bias and cultural competence.

**4. Workforce-Related Quality Improvement**

- A. After compensation is raised and training and other supports are accessible, require linking increased reimbursement to quality.
- B. Effective services to support particular barriers faced by children and families requires additional time built into the direct providers' day to prepare and work with children and families, including small group planning, meeting time with families by the direct provider, and additional training and professional development regarding best practices.
- C. Assess worker protections and possible remedies available to ECE staff and institute new protections as needed to ensure enforcement of work environment standards.
- D. Align and increase funding for all evidence-based teacher training and quality improvement initiatives.
- E. Ensure equity and implicit bias is included in all standards and assessments.

**5. Expand support for and participation in Family Child Care Home Education Networks (FCCHENs) to expand quality care options for families. FCCHENs are one option to create a system of ongoing support to improve quality and provide support to providers.**



- A. Ensure assessment tools are evidence-based and appropriate to family child care home settings.
- B. Developmental profiles shall be realistic for family child care settings and include a child's work product and observations of the child.
- C. Providers will provide opportunities for parent involvement and offer parent conferences.
- D. Contractors will employ at least one child development specialist who has educational qualifications equivalent to a child development teacher permit, to provide training, technical assistance, and coaching to providers.
- E. Contractors will develop and implement a plan for timely payment to providers.
- F. Contractors will monitor each family child care home affiliated with the network to ensure that requirements are met, including, but not limited to, basic health, nutrition, and quality standards.
- G. Contractors will offer providers at least 12 hours annually of training and technical assistance in group or individual settings including age- and developmentally-appropriate educational practices and activities for children.

## **6. Higher Education Systems**

- A. Provide adequate funding for the community college and state university systems to enable them to expand accessibility and range of programs so that they reflect current research on child development and defined competencies.
- B. Support higher education faculty and administrators to develop and/or revise programs to better meet the preparation and professional development needs of the ECE workforce and diverse children served.
- C. Build on coordination and coursework alignment of the community college and four-year colleges systems, including supervised clinical experience.
- D. More effectively link degree programs with the credentialing system to ensure both coursework and course content effectively prepare the ECE workforce.
- E. Focus ECE degree programs on areas such as (1) DLLs; (2) children with disabilities and special health care needs; (3) infants and toddlers; (4) trauma-informed care; and (5) adult-child interactions that support children's cognitive and language development.
- F. Invest in a range of appropriate supports that allow people from a wide spectrum of cultural, educational, and financial backgrounds to access professional development opportunities, including conveniently scheduled and located classes; education advisors; and resources, including courses and books for students learning English as a second language.

- G. Particular attention should be paid to making scholarship programs accessible to a linguistically diverse group of educators. Scholarship programs should strive to provide mentoring support for educators who participate because of the difficulties inherent in taking college courses while simultaneously working a full-time job. Scholarship programs should provide more than tuition support. The cost of books, fees, transportation, and child care for parents can prevent higher education from being financially feasible for early educators.<sup>34</sup>
- H. Review the Recommendations of the California **Early Childhood Higher Education Inventory**,<sup>35</sup> to rationalize early childhood workforce preparation.

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<sup>34</sup> Putting Degrees Within Reach Strategies for Financing Early Educator Degrees, [Anne Katz](#), [Aaron Loewenberg](#) New America  
*Last updated on January 22nd, 2019*

<sup>35</sup> Center for the Study of the Child care Employment Austin Whitebook et al TEACHING THE TEACHERS OF OUR YOUNGEST CHILDREN: THE STATE OF EARLY CHILDHOOD HIGHER EDUCATION IN CALIFORNIA, 2015 OCTOBER 2015



## CA Assembly Blue Ribbon Commission on Early Childhood Education

### Recommendations: Coordination & Alignment

**\*\*\*DRAFT\*\*\***

March 11, 2019

Recommendations are in the following areas:

#### **Coordination and Alignment**

1. TK-12 Articulation
2. First 5
3. Tribal Child Care
4. Head Start
5. Business
6. Services Integration

#### **1. TK-12 Articulation**

The focus of the BRC is the wellbeing and optimum development of young children, and to that end, transition should be minimized and continuity maximized. Schools should be ready to support children at their developmental stage and provide them with age-appropriate activities and curriculum when they enter TK<sup>36</sup> and kindergarten (K). Children should be ready to enter public schools. TK and kindergarten teachers will have access to children's records from previous ECE programs. Local schools will coordinate with local 0-5 programs and children will have exposure to TK-12 campuses. Professional development for 0-5, TK, and K teachers will include practices to assist in the transition. Funding should be provided to ensure continuity of care, minimal transitions for children, and developmentally appropriate practices.

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<sup>36</sup> We define Transitional Kindergarten (TK), as the program instituted for children who turn five between Sept. 2 and Dec. 2 when the kindergarten entry date was changed. It is the first phase of a two-year kindergarten program

- A. All children will have access to a wide variety of preschool and early education programs with a sliding fee scale (Reference earlier Access and Eligibility recommendations).
- B. Reimbursement Rates will be increased to a funding level appropriate for high-quality early learning, preschool, and early childhood education programs (see Rates recommendations).
- C. Barriers to school district participation in preschool and child care programs should be mitigated including coordination and greater alignment of schedules, facility regulations and other barriers. New contract types should be offered by CDE with more flexible definitions of what constitutes a school year and school day and provide options for local educational agencies (LEAs) that have barriers to providing 250 days of care in the CA State Preschool Program (CSPP). Flexibility should be provided as much as possible while ensuring services are available to families to meet their needs for full-day and full-year care.
- D. Barriers and disincentives should be examined and alleviated to encourage LEAs to contract with state and federally funded community-based birth to age 5 providers to provide preschool programs, early learning, and wrap around, full-day care.
- E. Targeted support programs should be made available to children who face special challenges and who do not have access to child care or preschool programs, with formal transition coordination plans including assessment, early intervention, and summer programs at the school site.
- F. As required by the federal Every Student Succeeds Act (ESSA), the California Department of Education should provide guidance to encourage locally driven agreements between LEAs and Head Start and other entities carrying out early education development programs.
- G. Any unnecessary barriers to sharing information between birth to age 5 providers and TK-12 should be removed and outreach to families and child care providers should include the benefits of sharing assessments and other information.
- H. The state should leverage the existing CalPADS data infrastructure and fund the remaining elements of a longitudinal data system to include a unique child identifier across all programs from birth to 12<sup>th</sup> grade and include postsecondary education and workforce outcomes. All children from birth to age 3 involved in publicly supported programs should be included. Those programs include, but are not limited to, subsidized child care, Head Start, preschool, home visiting, child welfare services, Early Start, and Individuals with Disabilities Education Act (IDEA) part B provided by public school districts.
- I. Build partnerships between school district programs and mixed delivery community-based systems. Leverage the connections with county offices of education and the First 5 Commissions and build partnerships between statewide education advocacy organizations, and early care and education associations to have an open discussion about the challenges each face in increasing access and meeting the needs of families and children.

- J. Staff qualifications, ratios and developmentally appropriate practices for children birth to five should be analyzed, and where necessary, changed to ensure that children thrive and all outcomes, including social and emotional outcomes, are improved.
- K. Align with Head Start by allowing providers a longer timeframe of up to 30 days to fill empty CSPP slots before funds become unearned and thus disallowed. Providers should be allowed to start enrolling children in the spring, in addition to the fall, and be given flexibility and discretion to align with kindergarten registration.
- L. It is crucial for elementary school principals to understand best practices for early learning. TK-12 and ECE should work with higher education to explore including ECE units or basic knowledge of ECE in the Administrators Credential content.

## 2. **First 5**

First 5 is an essential partner for child development and family-strengthening services and for two generation systems change. County First 5s receive 80% of the funds collected and the state Commission receives 20 percent. Child development services include Quality Counts California (QCC) workforce and professional development systems, free high-quality preschool, special needs assessment and intervention, and school readiness programs. In FY 2017-18, First 5 county commissions served large numbers of children including the provision of 234,040 child development services for children ages 0 to 5 and 128,575 child development services for parents, caregivers, and providers.<sup>37</sup>

- A. First 5 should be a member of the State ECE Advisory Council and a partner in systems change in areas of their focus including home visiting, Dual Language Learners and Quality Counts.
- B. The State Advisory Council should partner with First 5 as a convener and collaborator on key systems change issues such as the recent work on reimbursement rate reform.
- C. First 5 will be a key partner on the Task Force to reform our bifurcated funding and administrative system serving children with disabilities and special health care needs. Specifically, the Task Force should partner with the First 5 Association Initiatives on Early Intervention.
- D. First 5 is integrated into our state and county delivery systems and as such is recognized as a collaborator throughout the report.

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<sup>37</sup> First 5 California Annual Report 2017-2018 [www.cafc.ca.gov](http://www.cafc.ca.gov)

### **3. Tribal Child Care**

State and tribal administrators are collaborating to build the capacity of local communities and cross-sector state teams to address inequalities and to promote child wellbeing for all children in California and California Indian Country. Tribal Child Care and Development Fund dollars reach 80% of the federally recognized tribes in California providing services to families, children and communities on tribal land and in urban areas. Child care services are provided through child care centers operated on tribal land, by regulated family, friend and neighbor care, and through private and not-for-profit child care facilities licensed by the state.

- A. State and local agencies need to track and report publicly to ensure families who request services (Tribal or Non-Tribal) in tribal communities are receiving them.
- B. Quality improvement systems should reflect the needs of tribal communities.
  - i. Funding set-asides should be earmarked for Tribal community access to improve systems that are culturally respectful and inclusive – with input from the community being served or receiving supports.
  - ii. Programs should recruit providers who meet the unique and diverse needs of the populations they serve, and reach out to community members such as Elders who may be able to teach traditional language or practices.
  - iii. Provider training and support should be available in all communities including those that are geographically remote.
  - iv. Assessment should build upon the current strengths in the community and ratings should not occur until relationships and trust between trainers and communities are built.
- C. Support should be provided to Tribal Communities for Outreach and Engagement activities within tribal communities by tribal organizations and tribal governments.
- D. Local needs assessment should be inclusive of Tribal Child Care and Tribal Communities. Data collected from communities needs to be reviewed and analyzed from a shared position of power. Any plan regarding the use of the information will support the community information in any local level planning.
- E. Adopt health and safety requirements for Sovereign Nations to support development of tribal based child care and early child development opportunities.

### **4. Head Start**

Head Start (HS) was created as a poverty eradication program. While it does provide education programming (similar to State Preschool), it also provides a wide range of supportive services

to children *and their parents* – a two generational approach - to address some of the barriers often associated with poverty. Services provided include immunizations, physical exams, medical and dental health screenings, nutrition, and mental health support. Head Start also assists parents in strengthening their skills as parents, providing life skills for family stability and success, as well as education supports such as improving their literacy to support completing high school and postsecondary training.

- A. Expand effective access to Head Start for federally eligible 3 and 4-year-old children by using state funds to expand Head Start program to full day, full year for all those meeting HS eligibility.
- B. Support Head Start home visiting funding. The California Department of Public Health (CDPH) should permit Head Start agencies to receive the federal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) funding to support home visiting.
- C. Help simplify ECE regulations. Sixty-six percent of Head Start agencies also have State Preschool contracts. Different funding streams often carry conflicting regulations. Align state regulations with Head Start requirements to simplify administrative challenges.
- D. Apply for a waiver to current Head Start income eligibility capped at the federal poverty level. This would recognize the higher cost of living in California in comparison to the nation, and be similar to the waiver granted to Alaska and Hawaii. California should also apply for a waiver request to make age eligibility 2.9 to parallel CSPP.
- E. Empower families to make informed choices. Require all ECE providers to share relevant information about all program options available to interested and eligible families within a service area. Parents will be best prepared to make informed choices that best meet the needs of their children.<sup>38</sup>

## 5. **Business**

- A. The governing and planning entities charged with implementing the BRC recommendations should coordinate with business and business organizations. Business should be encouraged to support ECE policy investment and other family supports as a means to prepare California's future workforce to support employees from the lowest paid to the highest paid employee for the 21<sup>st</sup> century. Business and business organizations should be included in ECE planning processes at the state and local level.
- B. Business organizations should be encouraged to develop model Work-Life- Harmony options that can be shared with their membership including convening a Family-Friendly Business Advisory Council to develop a guide of best practices for employers to consider and adopt. Options to consider include flexible hours, telecommuting, flex spending accounts (pre-taxed dollars for child care, after school and summer care), expanded

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<sup>38</sup> Dr. Claudia Sosa-Valderrama Testimony on behalf of CHSA, BRC Hearing October 9, 2018

parental leave and related policies. Such benefits will increase employee morale, reduce turnover, and increase productivity.

- C. Encourage collaboration between business and business organizations to communicate to employers opportunities to work with employees to share information on community ECE programs, and develop relationships and partnerships with local providers including Family Friend and Neighbor providers.
- D. State agencies and ECE organizations should share available research and data with business and business organizations regarding the impact that early childhood care and education has on our current workforce to help draw a clear picture of their workforce needs and realities, including policies to reduce interruption in the workplace.

## **6. Local Funding Sources and Coordination**

- A. Each region, county or sub-county should have an effective local coordinating body that does local needs assessments, that collects data, identifies equity goals and implementation for targeted resources and policies, that supports local innovation, coordinates local partnerships, and evaluates local efforts. This body should have robust parent and provider as well as agency, Tribal and local government involvement. They should be linked to state bodies. The state should adequately support these bodies including stipends for parents and providers to participate.
- B. Some body at the region, county or sub-county level should have the authority to approve transfer of state contract funds between local agencies who have approved state contracts.

## **7. Integrate Services for Families with Children from Birth to Age Five**

- A. Paid Family Leave (PFL) should be expanded to one year of job-protected and made available for bonding and caregiving with benefits high enough to replace 100% of wages of low-wage workers and come with expanded job protections.
  - i. Eliminate the cap on salary contribution to help fund increases.
  - ii. Provide subsidies for low-income families not eligible for the California's PFL program with the same time allowances and subsidize the equivalent to PFL at the minimum wage.
  - iii. Expand definition of family to include affinity.
- B. Home Visiting Programs: Home visiting programs are a component of a system of comprehensive supports. Families should have access to comprehensive services including home visiting, based on need, through ECE programs. Similarly, home visiting programs can provide targeted services and link families to other services including early care and education.



- i. Coordinate development of home visiting programs statewide so they are aligned with early childhood education and other early intervention strategies. Collaboration with CDPH, California Home Visiting Program, Head Start, First 5 funded programs, and other local programs should be encouraged so that families can find the help they need in a timely manner.
- ii. Link a universal voluntary home visiting program to more targeted interventions for high-risk families facing challenges.
- iii. Ensure home visiting programs understand the ECE programs available and can refer families to ECE programs as appropriate to the needs of the families and children. Likewise, ensure that early educators have the information they need to refer families to local home visiting and other family support programs.
- iv. Ensure that the most effective services are targeted to the needs of families and they are integrated so that families have one contact point and constituent services.
- v. Ensure California utilizes all available Early Head Start and other federal funds.
- vi. Expand resources supporting culturally and language appropriate home visiting models.



## **CA Assembly Blue Ribbon Commission on Early Childhood Education**

### **Recommendations: Systems, Infrastructure, Supply and Facilities**

**\*\*\*DRAFT\*\*\***

**March 11, 2019**

Recommendations are in the following areas:

#### **Systems and Infrastructure**

1. Responsive Integrated Systems
2. Aligning and Streamlining
3. Transparency, Accountability and Integrated Data Systems
4. Data
5. Licensing
6. Disaster Preparedness
7. Reimbursement Rates Reform

#### **Supply and Facilities**

1. Facilities
2. Increasing Supply and Geographic Disparities

## **Systems and Infrastructure**

### **1. Responsive integrated systems**

California is faced with a complex system of administering early childhood education (ECE) both at the state and local levels. In addition, Head Start, a major service provider, is funded and administered federally. Both the California Department of Education (CDE), overseen by the elected Superintendent, and the California Department of Social Services (CDSS), overseen by a Secretary appointed by the Governor, administer ECE programs funded with federal and state funds. County-based agencies (both public and not-for-profit) administer child care vouchers and other aspects of the program, and school districts also administer certain programs. First 5 at the state and local level also provide funds for selected program goals. ECE programs also coordinate with other services for children and families including special education and foster care services. Many programs utilize more than one funding source to respond to the needs of children and families which further complicates administration.

While it is tempting to call for simplification across the board or changing organizational charts, the real lens must be equity, maximizing access to ECE for children and families with diverse needs, improving compensation and support for the workforce, improving quality and easing administrative burdens wherever possible.

California is the largest state and is fortunate to have tremendous diversity and a rich history of model programs. However, California also presents unique and difficult challenges bridging the opportunity gap for all children and families. The BRC has identified numerous changes that can lead to more effectively meeting the BRC principles and core goals.

Three key changes involve the change of culture, which will lead as well to administrative and regulatory reform.

- First, an equity lens must be used when planning, evaluating and in every aspect of our programs.
- Second, the compliance-based system is a major source of inefficiency and undue complexity and we make numerous recommendations to reverse policy and effectively contribute to a change in culture.
- Third, lack of state level interagency communication leads to unneeded duplication and barriers for families. Leading these changes, we call for a robust EC Advisory Council partnering with an Interagency Task Force to coordinate implementation (see Governance).

The Legislature, Governor, and the SPI are committed to providing strong leadership to transform and grow California's ECE system. They have all demonstrated their willingness to listen to parents, child care providers and other stakeholders and thus could work effectively with a Policy Council (see Governance section) just as the Assembly members and Community Commissioners have worked together on the Blue Ribbon Commission. The Governor and his cabinet, the SPI and his team, as well as the Legislative Committees, which provide oversight to state departments, can provide strong leadership to ensure the Interagency Task Force

leads to robust coordination and alignment to implement the systemic and culture changes recommended by this report and those that arise as we move forward.

The following specific recommendations on systems, should be considered by the Policy Council and Interagency Task Force.

## **2. Aligning and Streamlining**

There is a severe degree of complexity embedded in the administrative structure of California's ECE programs. Aligning and streamlining requirements among the various local, state and federal child care programs will help families get the child care they need and keep it without disruption for as long as they remain eligible. Aligning and streamlining requirements will also release child care providers and agencies from burdensome requirements, increase agency efficiency and accountability and minimize disruptions for employers.

### **A. Align and streamline requirements and processes for children and families**

- i. Change the culture so it is not based on mistrust but on positive family and child outcomes. The current arduous rules and regulations reflect a culture of explicit and implicit bias directed to the families receiving child care subsidies.
- ii. System integration should prioritize continuity of care ensuring that eligible families keep their child care without any break in services even when transferring between programs. Continuity of care should be a priority for all children and families and barriers should be examined and eliminated.
- iii. Family fees should be determined based on a transparent formula that reflects how much families can realistically pay. Remove Dept of Finance (DOF) approval of the family fee scale charged in CDE subsidized programs and/or require consultation with the Joint Legislative Budget Committee (JLBC).<sup>39</sup>
- iv. Align DSS and CDE regulations in instances that will benefit families including those relating to providers living in the home. Multiple and varied requirements for the myriad child care programs serving the same families is confusing to parents and agencies, creates unnecessary barriers, and ultimately keeps families from getting the child care they need.
  - a. Streamline provider approval process in Stage 1, which requires multiple forms and approvals and can result in denial of child care if strict and severe deadlines are not met.
  - b. Ensure online access to needed data elements so that a family can transition seamlessly from Stage 1 to Stage 2.

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<sup>39</sup> BRC Recommendations on affordable family share are in the Access Section.

- v. Align regulatory requirements and allow greater flexibility to layer programs that serve children in the same age cohort to assist parents in accessing full-day care and assist providers leveraging the existing funding resources to provide full day care.
  - vi. When families are screened for any social service programs, agencies should assess their need and eligibility for child care programs including Head Start, child care vouchers and Title V programs.
- B. Align and streamline requirements and processes for child care contracting agencies and child care providers.
- i. Remove the unnecessary complexity of earning contracts and move to multi-year grants as an alternative method of allocating funding. State programs could mirror federal Head Start funding, where the service is a grant contract for children, and not be based on a child's daily attendance.
  - ii. Remove the unnecessary complexity of earning contracts and move to multi-year grants as an alternative method of allocating funding. State programs could mirror federal Head Start funding, where the service is provided via grant for children, and not be based on a child's daily attendance.
  - iii. Review fiscal approval criteria and align among funding streams.
  - iv. Address regulatory inconsistencies created by varying program applications, application timelines, reimbursement rates, and contract earning structures to significantly reduce administrative burdens.
  - v. Review Head Start proposals to combine HS and fee-based families in programs.
  - vi. Review Head Start eligibility and how to align to state eligibility.
  - vii. Standardize AP agency payment practices so they are consistent, providers will thus know when to expect payment, and require all APs to have a transparent appeals process.
  - viii. Augment funding for the Commission on Teacher Credentialing (CTC) to expedite the receipt of child care permits to in turn expedite hiring new staff.
  - ix. Modernize the TrustLine<sup>40</sup> application process. Allow applicants to apply, pay their application fee, and check their status online. Currently, all applicants to TrustLine must submit a paper application and a check sent through the mail. The results of the application are also returned through the mail.
- C. Design and implement a modernized statewide Centralized Eligibility List (CEL), a single point of entry for families seeking care, and make it user-friendly, emphasizing parental

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<sup>40</sup> TrustLine is the state's background check for license-exempt providers receiving subsidies, as well as nanny agencies, ancillary child care, and child transportation services.

choice and making it accessible through mobile technology.

- D. Invest in the Resource and Referral infrastructure to support both consumer education and expand the community-based child care system. Families rely on the wide array of options for care from family, friend and neighbor to family child care home and center-based programs and it is critical that we invest in a system that allows the flexibility families need.
- E. Simplify Administration
  - i. Existing regulations and contract conditions adopted by specific funding sources should be analyzed to eliminate regulatory barriers and guide system integration
  - ii. Title V regulations regarding provider reimbursements should be simplified and structured to reflect common practices in the private pay world such as required notice periods, closure days beyond 10, and flat monthly payments.
- F. Create flexibility across all systems to allow and incentivize programs to offer care for families who have variable schedules and/or work outside the school day schedule. Blending and braiding funding streams should be allowed, but should not be the only path to achieve continuity of care and efficiencies for families and the system.<sup>41</sup>

### **3. Transparency, Accountability, and Integrated Data Systems**

There is tremendous need to build data infrastructure for ECE. This is a fundamental, foundational need. Ensure coordinated planning and increased transparency for California's ECE system by improving information sharing, streamlining data collection, and consolidating criteria and processes.

- A. Available data should be used to assess the impact of changing birth rates, family demographics and employment characteristics on demand for ECE services. Coordinate data use across systems to ensure maximum utilization of available resources, reduce barriers to timely enrollment, anticipate service shortfalls and reduce barriers for families in accessing services. Include the California Strong Start Index and other information on family strengths to inform planning and monitor program investments for children and families.<sup>42</sup>
- B. Make existing systems more transparent and easier for families to navigate. Work across programs to diminish provider workloads associated with different data definitions and reporting requirements from multiple funding agencies. Align data definitions, reporting timeframes and documentation across the state agencies that oversee ECE programs, including CDE, DSS and others. Align intra-agency data at CDE between ECE programs.

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<sup>41</sup> Deborah Stipek and Colleagues, Stanford University *Getting Down to Facts II Early Education in California* (2008), pg. 20.

<sup>42</sup> First 5 Association, California Public Health Department, Heising-Simons Foundation, First 5 LA & Conrad N. Hilton Foundation. *California Strong Start Index*. Los Angeles, CA: Children's Data Network. Public launch: February 4, 2019. [www.datanetwork.org](http://www.datanetwork.org).

Establish clear reporting requirements that meet the needs of as many funders as possible, including alignment with Head Start and other funders to the extent possible.

- C. Track child and family utilization of ECE programs, using both point-in-time and longitudinal tracking, to increase understanding of how families use part- and full-day programs and how they move from one program to another over time. Coordinate and calibrate program eligibility criteria and “needs” calculations in order to increase continuity of care.
- D. Reassess data collection requirements for Needs Assessment reports which are currently the responsibility of Local Planning Councils, which have limited funding, so that they are more informative, highlighting the voices of parents and community stakeholders. Assure validity and reliability of data definitions and data collection methods to increase utilization of the information collected.
- E. Create a workforce data plan that requires participation in state workforce data systems by all members of the ECE workforce employed in licensed settings and in settings that receive public funding. Ensure local and statewide appropriate processes for data collection, management, and regular analysis<sup>43</sup>. Invest in and maintain a comprehensive workforce data system and the California Early Care and Education Workforce Registry to identify the characteristics and needs of the workforce and to assess the reach of policy initiatives and investments.<sup>44</sup>
- F. Support and continue to build a statewide, integrated data system that combines data from health, social services and educational sectors.<sup>45</sup>
- G. Make information about California’s ECE system readily available.
  - i. Fully fund and bring to scale the online portal currently being developed by the California Resource and Referral Network for access to comprehensive child care and development services in order to provide public access to important and timely information on California’s system.
  - ii. The portal should be fully accessible by mobile technology and should be designed to result in simplifying family access so all parents can access local resource and referral information regarding care options. Fully integrate existing resource and referral operations with a single portal and evaluate effectiveness.<sup>46</sup>

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<sup>43</sup> Center for the Study of Child Care Employment & California Child Care Resource and Referral Network. (2006). *California early care and education workforce study*.

<http://csce.berkeley.edu/californias-ece-workforce/>

<sup>44</sup> Deborah Stipek and Colleagues, Stanford University *Getting Down to Facts II Early Education in California* (2018)

<sup>45</sup> Ibid

<sup>46</sup> Berkeley ECE Think Tank

- iii. Expand the portal to gather real time reimbursement rate data to complement the cost of care-based RMR analysis described in the Rates Reform Section.
- H. At the county and regional level, map the capacity of existing programs, track utilization, and highlight gaps in services in order to maximize available resources and improve cross-agency collaboration.
- i. Counties, regional collaborations, school districts, municipalities, and ECE system leaders should work together to assess local strengths, challenges and community interests and make information available to support local decision-making and help families learn about and negotiate the array of ECE programs.
  - ii. Standard metrics describing system capacity and operations should be developed to support and inform local decision-making<sup>47</sup>. Surveys of parents and child care providers would help to identify strengths and challenges in local systems.
  - iii. Mapping of ECE services should be used to highlight the distribution of programs, service types and facilities<sup>48</sup> to inform resource distribution at the county and community level. Mapped data should help to promote equity in access, and to identify additional service needs including underserved communities, services for babies and toddlers and other high-need children.
  - iv. Data on services funded across all federal, state and local ECE funding streams should be linked to ensure that funding decisions are not made in silos and that available resources are maximized. Data should be used to map gains and losses in service capacity and availability of ECE programs for families with varying needs and children of different ages in different communities.
  - v. Collaboration among key organizations, including government, First 5, philanthropy, business, researchers, Resource and Referral agencies and local planning councils, and with parent and community groups would help to assure that information is clear and understandable to the public, provided in easy-to-navigate formats and in multiple languages. Information should be available in digital and paper formats in a wide array of locations frequented by families, such as schools, libraries, parks, community centers, public agency offices, etc.
  - vi. Materials available to the public should describe the importance of ECE for children, families, employers, and communities. These materials should highlight parent voices and describe opportunities for involvement and partnerships between counties, school

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<sup>47</sup> For example, see Monthly Enrollment Demographics for the San Francisco Office of Early Care and Education, [www.sfoece.org](http://www.sfoece.org)

<sup>48</sup> For example, see *Babies and toddlers in Los Angeles County: Prioritizing high-quality early care and education to set children on a path to success*. Los Angeles, CA: Advancement Project.



districts, municipalities, non-profit and business entities designed to improve access and quality of services for children and families.

- I. Track and improve results for children, families and communities
  - i. Develop consensus on key outcomes for children enrolled in ECE programs, including social/emotional and cognitive development, as well as school readiness, as well as support for families, and benefits for communities.
  - ii. Develop public-private partnerships to support research, engage universities and other researchers in developing collaborative research programs to understand results and support continuous quality improvement.
- J. Decrease barriers to linking administrative data across systems to assure that information is readily available, accurate, and designed to support local and statewide planning.
  - i. Proactively build on existing administrative data systems to provide timely data on the array of federal, state and locally funded ECE programs to support cross-agency planning, inform decision-making and guide resource allocation.
  - ii. Integrate and improve the ability to link and navigate between early childhood and other data systems to track and evaluate outcomes for children participating in subsidized ECE and early learning opportunities, strengthen services to individual children and cohorts, as well as track the reach and impact of programs, starting with a unique identifier for children before school entry. Use the data systems to support continuous quality improvement and to link children living in poverty with comprehensive services such as developmental screening, early intervention, and home visiting.<sup>49</sup>
  - iii. Assess utilization and need for ECE services by families who are also involved with other key child and family serving agencies, such as child welfare, mental health, developmental disabilities, juvenile probation, etc., in order to assess the need for state and local partnerships to support families in crisis, while adhering to the confidentiality required.

#### 4. Licensing

Community Care Licensing (CCL) within the California Department of Social Services is the state's child care licensing program. CCL performs the essential governmental function of protecting the basic health and safety of all children in licensed child care. In 2015, the federal Administration for Children and Families (ACF) published federal guidance to support states in creating basic, consistent health and safety standards across early care and education

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<sup>49</sup> Lifting Children Out of Poverty Task Force

settings. Child Care Aware<sup>50</sup> ranks California 48<sup>th</sup> in licensing benchmarks<sup>51</sup> based on the 2015 ACF federal guidance. Only 4% of national standards are met by center-based regulations and only 1% of national standards are met by family child care-based regulations. CCL should be proactive, with an emphasis on prevention and protecting the health and safety of children. CCL should focus on offering child care providers the tools to help support children and families. Balancing the needs of health and safety in child care, CCL should also apply a strengths-based approach by giving child care providers technical assistance that will help them comply with licensing regulations, rather than being quick to respond with punitive measures whenever possible.

- A. The Legislature and Governor should establish a process to review California's licensing standards, recommend improvements and integration with quality improvement efforts.
  - i. While preserving the vital importance of health and safety as the floor for quality, the process should consider integration of licensing with statewide quality improvement standards based on child outcomes.
  - ii. Integrate licensing standards with other regulatory requirements for all programs including Head Start, so programs can meet a set of integrated standards.
  - iii. CCL must have sufficient dedicated staff to participate in review of licensing standards and implementation and evaluation.
  - iv. Licensing analysts should have knowledge of effective early care and education programs, with emphasis on both licensed family child care homes and centers, and knowledge of healthy environments for young children.
- B. Define clear consistent mandates across all licensed early care and education setting and develop adequate resources to ensure Community Care Licensing can meet its charge.
  - i. Monitor annual funding to ensure resources are adequate to provide for annual visits to all licensed facilities.
  - ii. Increase the number of regional CCL child care advocates and local CCL advisory committees.
  - iii. Ensure that all CCL staff are adequately trained, have appropriate oversight and compensation.
  - iv. Expand CCL in proportion to the growth in the licensed child care supply. Any increase in facilities and providers will have an administrative cost that should be included in budget allocations for the department, and should be taken into consideration when considering costs of new programs.

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<sup>50</sup> Child Care Aware is the nationally respected Child Care Resource and Referral hub. The licensing database can be accessed at <http://licensingdatabase.usa.childcareaware.org/>

<sup>51</sup>Getting Down to Facts II page 125

- v. Ensure CCL has sufficient dedicated staff in emergency situations such as natural disasters (see Disaster preparedness).
- C. Ensure licensing processes are consistent and fair for providers.
- i. Ensure all licensing visits are governed by consistent protocols, which are clearly outlined so that all analysts have consistent priorities and findings. To the degree appropriate, consider the Key Indicator Methodology (KITS) in this process.
  - ii. Evaluate the quality of training for analysts and make necessary improvements.
  - iii. CCL staff should support child care providers and offer technical assistance so they are able to comply with licensing requirements.
  - iv. Require all CCL staff to have training in child development.
  - v. Support improved management and supervision.
  - vi. Ensure that analysts' performance evaluation is not based on the number of penalties found. Penalties should be seen as only one part of oversight, not a substitute for consistent visits.
  - vii. Continue to increase communication with providers so they understand the standards expected of them. Providers should not be cited before regulations are finalized and clearly communicated, so that a provider has sufficient time to comply.
  - viii. Enforcement should be consistent across the state.
    - a. Fire clearances and regulations for large family child care homes are inconsistent across regions of the state. Statewide uniformity and clarity could reduce barriers to obtaining a large family child care license.
    - b. CCL needs to work with the Office of the State Fire Marshal to devise clear statewide standards in easy-to-read language. State fire marshal guidance, an information bulletin, should be distributed to all local fire departments, child care licensing analysts, and child care providers.
- D. Ensure licensing processes are consistent and fair for families.
- i. Provide clear explanations of licensing guidelines
  - ii. Include parents in review and evaluation processes.
  - iii. Provide easily accessible online child care facility records so parents can easily access any reported complaints or violations.

- E. Resolve noncompliance issues in a timely and transparent manner. Currently when CCL finds a violation after a random inspection or a visit prompted by a complaint, CCL is required to set out a plan for compliance and monitor whether the provider successfully follows the compliance plan.
- i. Improve CCL follow-up after initial visits are made.
  - ii. Shorten the length of time it takes to resolve noncompliance issues.
  - iii. Ensure that complaints are handled in the mandated timelines.
  - iv. Require immediate consequences for all serious violations.
  - v. Create well-defined civil penalties and eliminate discretion among licensing analysts.
- F. Expand CCL staff capacity, establish clear guidelines and timelines so that applications for new providers and/or expansion can be completed in a timely manner.
- i. Expand support for new applicants by increasing the number of orientations, increasing both language accessibility and geographic reach.
  - ii. Orientations and trainings should be low-cost or free and when possible, led by licensed child care providers, or former child care providers. Peer-led trainings help create a supportive, comfortable environment for the trainees, and empower child care providers to share their knowledge, experiences, and how they have dealt with challenges.
  - iii. Provide technical assistance and peer mentors to applicants as they complete the process.
  - iv. Provide consistent and clear standards in both the child care center and family child care licensing process.
  - v. Inform child care providers of local zoning permit, business license, and fire requirements.
  - vi. CCL licensing analysts and advocates should be trained in state zoning, business and housing protections for family child care providers so they can discern when a city or county is applying requirements to family child care providers that are inconsistent with state law. CCL licensing analysts and advocates should be able to support child care providers in working with R&Rs, child care legal advocates, and local governments to remove local unlawful and burdensome requirements.

## **5. Disaster Preparedness Recommendations**

- A. State agencies whose function is to address disaster preparedness, including CDE, DSS, its licensing division CCL and the Office of Emergency Services (OES) should convene a task force for advance disaster preparedness planning based on the 2016 Child Care Disaster Preparedness Plan as well as lesson learned from recent experience. The task force should include but not be limited to parents, child care provider associations, child care providers, local and county ECE organizations, child care center representatives, Head Start, Resource and Referral agencies, representatives of state and local emergency responders, and county offices of education. The task force should:
- i. Proactively develop a list of the type of waivers granted and the payment process that is activated during and after disasters. Communicate these disaster standards so that they can activate immediately when a disaster occurs.
  - ii. Develop procedures to allow family child care providers to provide care from public spaces, or from another home, on a temporary basis after a disaster.
  - iii. Establish a communication method, using available technology, where information is shared across agencies, including the local Resource & Referral agency, between agencies and parents and local and state disaster response agencies.
  - iv. Adopt a short, three to four-question survey that can be pushed out to providers immediately in the wake of a disaster with the critical information needed. For example, “did you suffer total or partial damage, are you currently evacuated, are you able to provide care to additional children?”
  - v. Extend the time for certain waivers beyond the initial disaster declaration. Recovery and rebuilding takes a very long time.
  - vi. Develop guidelines for post-disaster cleanup and for environmental health standards including air quality so programs can determine when to stay open and when to close.
- B. State agencies and service providers including CDE, DSS and Resource and Referral agencies should convene a collaborative, cross-agency task force with designated, clear roles that helps lead efforts in time of disaster with dedicated staff during and post disaster who become the point persons at each agency at the state and local level.
- i. Immediately after the disaster, local and state child care leaders, often an R&R leader, should convene a Child Care Response and Recovery Working Group.
  - ii. This working group should share information about the disaster’s impact on child care, identify gaps in the response and recovery, share resources and work together to ensure that the needs of the R&R and child care programs are addressed as part of the emergency response and recovery.

- C. Local organizations and agencies at the regional, county, sub county and city level should have dedicated resources to prepare for a disaster supporting trained staff who become the local lead in times of disaster.
  - i. Local communications with first responders should be ongoing so policies can be determined in advance, including the ability of parents to pick their children up from shelters and the ability of providers to shelter in place rather than evacuating to large facilities if safety allows.
  - ii. Provide funding and technical assistance so agencies use technology and cloud-based data storage systems to minimize the risk of a complete loss of data stored on-site.
- D. Preparedness should include state supported provision of training and materials readily accessible on-line, including materials developed or provided under state contract and by local Resource and Referral programs and local best practices.

## 6. Rate Reform

- A. The BRC concurs with the multi-step Recommendations of the Reimbursement Rates Working Group convened by First 5 to establish a framework in which all subsidized programs shall be reimbursed on the same regionalized pay scale which tiers up for quality. Recommendations include implementation of comprehensive rate reform through a multi-step process:
  - i. First, bridge the standard reimbursement rate (SRR) and the regional market rate (RMR) together. Then reform the RMR survey methodology to create a tiered reimbursement system that can incentivize and reimburse for quality and quality improvement efforts across different program types and incentivize full day programs. Throughout this multi-step process, all programs should be held harmless.
  - ii. Address equity issues by refining the RMR survey and future rate-setting methodologies. The use of socio-demographic characteristics to set rates through market profiles exacerbates inequality and institutionalizes low reimbursement rates for providers that serve children and families in low-income counties.
  - iii. Move towards a heavier emphasis on the true cost of providing quality child care, preschool, and early learning experiences.
- B. In addition, the BRC makes the following recommendations regarding Rates:
  - i. Over the long term, the reimbursement rates for Title 5 and 22 programs should include competitive compensation increasing with quality improvement and a competitive benefit package as detailed in the Workforce Recommendations.

- ii. In the near term the reimbursement rates for family, friend and neighbor (FFN) should make the compensation floor the state minimum wage and benefits as detailed in the Workforce Recommendations.
- iii. Prioritize analysis of the costs and as necessary provide additional incentives to increase access for targeted children and families including children with disabilities, infants and toddlers, children in child care deserts including rural areas, care during the evening, overnight and on weekends, care for families with variable schedules, and for children entering care through the Emergency Services Fund.
- iv. Expand support for and participation in Family Child Care Home Education Networks (FCCHENs) to expand quality care options for families. FCCHENs are one option to create a system of ongoing support to improve quality and provide support to providers. CDE will be directed to set appropriate reimbursement rate structures for providers and contractors.
- v. Analyze the costs of minimum wage, including mitigating the wage compression cost pressures of minimum wage. In Los Angeles as the minimum wage rises to \$12 per hour, more experienced teachers may be making only \$14 per hour which disincentivizes both retention and acquisition of additional training and skills.<sup>52</sup>

## **Supply and Facilities**

### **1. Facilities**

- A. Create state-local partnerships to map state facilities needs to ensure equity in spending new funds. This includes needs for infants and toddlers and isolated rural areas and other special populations. This should match with available space that can be converted, such as unused schools and opportunities for new construction. Target new funds and develop proposals with an equity lens, allocating facilities funds based on mapping and needs assessment priorities.
- B. The state should establish a targeted facilities grant program directed to communities and families with greatest need with multi-year investment priorities. The targeted facility grant program should provide appropriate funding and technical assistance for all aspects of California's mixed delivery system including centers, family child care homes and family friend and neighbor care. Grant funds should be available for a variety of uses, including expansion and retention of spaces, deferred maintenance, and health and safety needs.
  - i. For subsidized child care centers provide the facility, equipment, and staff recruitment start-up costs necessary to retain spaces and open new child care "classrooms" or to convert existing child care spaces to serve a different age-group.

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<sup>52</sup> Lisa Wilkins Executive Director of the Child Development Consortium of Los Angeles BRC Oakland Hearing October 17, 2017

- ii. For licensed family child care homes provide funding and technical assistance to meet licensing and quality standards to serve children whose families have subsidies and those with greatest need. Determine grants based on receipt of public funds and meeting identified needs of targeted communities and families/children.
  - iii. For both centers and licensed family child care providers provide funds for renovations to serve children with disabilities.
  - iv. Create a fund for family friend and neighbor (FFN) providers who wish to be licensed to pay for licensing fees, zoning processes, fire inspections and facility alterations.
  - v. Include Head Start in all mapping, analysis and provide opportunities to participate in state and local funded facility programs including those for one-time grants for building or renovating early childhood facilities. Some Head Start programs, in response to the decrease in enrollment of 3- and 4-year-olds, are transitioning to serve 0-2 year-olds. This is very a costly change in terms of facilities.
  - vi. Transfer funds from the current revolving loan fund to the new facilities program.
- C. Simplify the process to build new facilities and to expand existing facilities including:
- i. Simplifying zoning and building codes and permit processes.
  - ii. Streamline state and local licensing and other requirements.
  - iii. Reduce Department of State Architect (DSA) approval times for facilities construction and structural changes. At this point, approval is 5-6 months on most projects and if the project involves significant structural changes it can extend to 9-12 months. Increased use of technology including the electronic plan check progress should be evaluated.
- D. Establish a statewide program learning from other successful models to share best practices, provide materials, technical assistance on facilities planning, development and financing and facilities quality assessment and improvement. Include appropriate services for family child care home and FFN providers.
- E. Enact state policies that require ECE to be part of city plans and consider adding a seventh planning element regarding ECE. Policies should reflect that every child deserves to be cared for in a caring, safe environment, where they can learn and thrive, and working parents need dependable child care in their neighborhoods. Cities must ensure the city's policies encourage the availability of child care and to not create barriers that keep family child care homes and child care centers from opening and staying open. They must eliminate zoning barriers that thwart small family child care providers from becoming large family child care providers to care for more children.
- F. When increasing reimbursement rates, consider a portion dedicated to facilities costs and maintenance.



- G. Facilitate local efforts and partnerships including a coordinated message regarding ECE and outreach to the business community and developers.

## 2. Supply including geographic disparities

- A. Ongoing data collection and mapping should identify geographic disparities and child care deserts on an ongoing basis and develop proposals with an equity lens.
- B. Incentivize creation of supply to address inequities.
  - i. New funding should be directed to areas of greatest need including projected growth of number of children and those facing challenges. For example, the number of children of color in poverty is projected to grow at a much higher rate in Fresno than California as a whole.<sup>53</sup>
  - ii. Growth should be ensured for all programs while addressing disparities such as was done by the 2018 CAPP formula criteria.<sup>54</sup>
  - iii. Consider increased contracts to develop supply in areas of greatest need.
  - iv. Workforce development resources should target areas of greatest need.
- C. Target Quality Counts support and funding to areas of low supply and targeted areas of need.
- D. Child care is scarce and even more difficult to find in California rural communities. Family child care is a key component to fill the need in these areas. Support for FCCHs and incentives for new FCCHs should be targeted to rural areas.
- E. Make large family child care homes a residential use of property, like small family child care homes, to eliminate burdensome and costly zoning permits.
- F. Make child care more available in urban cities and to families living in more affordable housing by ensuring large family child care homes can open in apartments, townhomes and condominiums.
- G. Strengthen housing protections for family child care providers battling discrimination and wrongful eviction.
- H. Deter discrimination against family child care providers and allow providers to enforce their rights by adding enforcement measures and remedies.

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<sup>53</sup> Manuel Pastor Testimony to BRC Fresno July 11, 2018

<sup>54</sup> CAPP 2018 Funding: The goal in distributing the additional slot funding was to provide equal access to care for children in California by reducing the inequities of unserved populations across counties, while providing funding to every contractor with the opportunity to grow their program by at least 10%.



## CA Assembly Blue Ribbon Commission on Early Childhood Education

### Recommendations: Governance & Administration

**\*\*\*DRAFT\*\*\***

**March 11, 2019**

#### Considerations

- The Legislature must play a strong policy, investment, and oversight role.
- The Governor and the SPI have identified ECE as a priority.
- Parent and provider voices must have ongoing input and influence in the governance structure.
- Significant resources must be designated for governance and infrastructure.
- Governance structures must be evaluated applying the BRC principles.
- Governance should be based on inclusiveness, equity, opportunity and continuous quality improvement, rather than punitive rule-based compliance.
- We must build on existing systems and maintain our mixed delivery system even as we advocate for change.
- An effective and inclusive governance structure will strengthen decision-making and broaden support for increased investment and systems change.
- Governance and Administration are separate but related, with administration accountable to Governor, the Legislature, SPI, and inclusive advisory bodies

**1. Establish an Early Childhood Policy Council, Parent Advisory Council and Workforce Advisory Council.**

- A. Establish an Early Childhood Policy Council (ECPC) to maintain the vision articulated in the BRC principles, ensure equity, transparency, accountability and an inclusive process. ECPC will oversee planning, implementation, evaluation and develop resources for the BRC Recommendations. The Governor, Legislature and Superintendent of Public Instruction (SPI) should make appointments including representatives from the Governor, Legislature, Parents and Provider Advisory Committees, advocacy groups, First 5's, agencies, Head Start, Tribal Child Care, and other stakeholders. Current Advisory Bodies should be evaluated as to whether they should continue or their functions incorporated into this broader more inclusive Council.
- B. Establish a Parent Advisory Council (PAC) including parents from subsidy system both voucher and contracted (Title 5), waiting list, and those paying privately. Representatives of the Parent Advisory Committee will sit on the ECPC Committee.<sup>55</sup>
- C. Establish a Workforce Advisory Council including Family Child Care, Family, Friend and Neighbor Care and Center based teachers, directors, and statewide organizations representing child care providers. Representatives of the Workforce Advisory Committee will sit on the ECE Advisory Committee
- D. Each Council should be independent of agencies which administer programs and each should be adequately staffed to support their charge. <sup>56</sup>
- E. Parent representatives and child care provider representatives will be reimbursed for their expenses including a stipend to cover child care, lost wages and costs for substitutes for Council meetings.

**2. Establish an augmented Division or Office for Early Childhood Education (OCE).**

- A. Provide CDE with sufficient resources and staff to meet all mandates including implementation of BRC Recommendations.

**3. Establish an Interagency Administrative/Operations Workgroup for Implementation.**

- A. Establish a separate Interagency Workgroup to implement changes and coordinate among agencies which will report to the Governor and Legislative oversight committees. The Interagency Workgroup will coordinate with the EC Policy Council.
- B. CDE will coordinate and staff the Workgroup.

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<sup>55</sup> See AB 641 Introduced by Speaker Rendon February 20, 2013

<sup>56</sup> The Child Development Policy Advisory Committee (CDPAC) in 2001 had a budget of \$937,000, a staff of seven and advised the SPI, State Departments, Governor and Legislature.

- C. Current interagency groups with an ECE focus should be evaluated as to whether they should continue or their functions incorporated in this structure.

#### 4. **Legislative**

- A. The Legislature, Governor and Councils should maintain strong engagement with the Legislative Women's Caucus which is bicameral.
- B. Development, implementation and oversight of a ten-year Legislative and Budget agenda by a Select Committee on ECE (Joint or Assembly)
- C. Ten-year charge to joint Human Services and Education Budget and Policy committees in both houses to oversee increased investment and implementation.

#### 5. **Local**

- A. Each region, county or sub-county area should have an effective accountable local coordinating body or bodies to oversee local needs assessments; coordinate data collection, identify equity goals and how resources should be targeted, support local innovation and coordinate local partnerships.
- B. This local body should have robust parent and provider as well as agency, local government and Tribal involvement.
- C. They should be linked to State Councils. The State should support these bodies to ensure they have adequate resources to meet their charge including stipends for parent and provider representatives to participate.

#### 6. **Charge of Early Childhood Policy Council (ECPC)**

- A. Determine adequate resource levels for long-term investment each year and develop and monitor resources needed to fund BRC Recommendations.
- B. Develop specific plans and monitor systems changes including changing to a children and family first culture and using a strong equity lens in all decision-making.
- C. Oversee data, evaluation, and accountability plans.
- D. Promote equity and increase access using Targeted Universalism process to develop a ten-year plan to meet universal goals first targeting the most excluded and then evaluating and adjusting policies and investments.
- E. Review and integrate role of current advisory bodies and interagency task forces and collaborations.

## **7. Charge of Parent Advisory Council (PAC)**

- A. The PAC should be formed and funded to provide recommendations to the ECPC and other entities on all aspects of ECE including equity, access, streaming and best practices for engaging families, creating warm and welcoming environments, and how to develop partnerships to support the best outcomes for the *whole family*.

## **8. Charge of Workforce Advisory Council (WAC)**

- A. The WAC should be formed and funded to develop a strategic plan on Workforce issues, and to provide recommendations to the ECPC and other entities on an ongoing basis. (See workforce section for more detail) and monitor implementation.

## **9. Oversee identified planning processes** (Recommendations included in other sections)

- A. Children with Disabilities and Special Health Care Needs: Establish a Task Force of stakeholders including CDE, ECE, K-12, DDS, DSS, DPH, First 5, DMHS, SELPA, Regional Centers, legal advocates, Pediatricians and Head Start with strong parental and provider representation to reform our bifurcated funding and administrative system which leads to delayed transition between programs at age 3, under identification and provision of early intervention services, and barriers to participation in inclusive ECE. The Task Force should build on the work of the State's 2015 Special Education Task Force (See Access).
- B. Build on work by Quality Counts California and the QCC state consortia and establish an expanded work group to grow, review and revise the current quality improvement and standards systems. Make proposals for change, including input from parents, providers from different settings, Quality Counts participants, First 5, academic experts, representatives of the Legislature, agency staff, and advocates (See Quality).
- C. The Legislature and Governor should establish a process to review California's licensing standards, recommend improvements and integration with quality improvement efforts (See Systems).
- D. Relevant State Agencies (CDE, DSS/CCL and OES) should convene a task force for advance disaster preparedness planning based on the 2016 Child Care Disaster Preparedness Plan and recent lessons. The Task Force should include parents, child care provider associations, child care providers, child care center representatives, Head Start, Resource and Referral agencies, representatives of state and local emergency responders, and county offices of education (See Systems).



## CA Assembly Blue Ribbon Commission on Early Childhood Education

### Recommendations: Financing

**\*\*\*DRAFT\*\*\***

**March 11, 2019**

**Long term goal:** Create an adequate and sustainable financing structure for all subcommittee recommendations including:

- Equitable access to Early Care and Education (ECE services for all families while targeting those most separated from opportunity);
- Settings that meet family needs and encompass a definition of high quality and are affordable;
- A well-compensated and professionally supported diverse workforce, and
- Support for necessary facilities, systems and infrastructure.

The BRC has developed a variety of financing options to address long-term goals. Significant increases in investments will be needed to achieve priority recommendations the first year and in subsequent years.

The BRC does not support reducing current funding for other programs. The focus is to not take funding away from existing programs but rather to identify additional financing options for consideration by the Legislature and Governor. The BRC does not support diverting funds needed by the TK-12 system or by other family and child-serving sources.

California is far from serving all eligible children, providing fair compensation for our workforce and eliminating inequities. As access is expanded, compensation and support for the workforce is increased, to build capacity we must use an equity lens. This means the investment must be targeted to ensure the opportunity gap is directly addressed. All of the recommendations are targeted to those most isolated from opportunity. In addition, multiple financing mechanisms with differing requirements and oversight has led to a fragmented system for families and

providers. There are numerous recommendations regarding alignment and streamlining of financing mechanisms in the Systems section.

## **1. Current Sources of Funding**

In the United States families provide the majority of funding for child care or Early Child Development, equaling 52% of the cost, according to BULD Initiative in 2017.<sup>57</sup> The BRC proposes that families who can afford to participate in payment for ECE continue to do so. The BRC would ensure all children whose families cannot afford ECE have access to it. In addition, the BRC proposes to look at strategies that ensure families facing specific challenges have access to ECE. We detail these proposals below and in the Access section.

Funding is currently provided by the federal government, state, local governments, First 5, philanthropy and business. According to the Legislative Analyst's Office (LAO), \$2.6 billion was spent on ECE by the state including Proposition 98 and the General Fund in 2016-17. Federal sources provided \$2.2 billion, including Head Start, Child Care Development Fund (CCDF) and Temporary Assistance for Needy Families (TANF) funds utilized for ECE.<sup>58</sup> First 5 contributed \$101 million. We do not have figures for local, business or philanthropic contributions. This lack of state level information demonstrates the need for investment in data systems.

In addition, children are served with related funding from other state and federal sources. Most notably this includes funding for children with disabilities, children participating in Medi-Cal and those connected to Child Welfare Services. The BRC makes recommendations for more effective alignment and use of those funds below.

## **2. Critical Financing Decisions**

Funding reflects priorities and decisions about what is important. The BRC focus is on state investment, and while there are recommendations about other funding sources as they relate to federal programs, the primary focus here is state investment. The overarching issue is wholly inadequate investment on all levels.

The BRC began with several critical financing decisions to determine what level of state investment should be our goal.

A. The first is determining what share families should bear. The BRC has looked at this issue through several lenses including equity, the opportunity gap, the need for a well-compensated workforce, and prudent use of state resources. The Parent Focus Groups contributed greatly to our understanding.

B. The second decision is that child care workers and providers should not finance the system through their low wages and lack of basic benefits received by comparable workers.

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<sup>57</sup> National Academy of Sciences Transforming the Financing of Early Care and Education, 2018 page 57

Recommendations regarding the workforce and compensation are detailed in the Workforce section.

- C. Third, equity and equality are not the same. We looked at equity in access and in the workforce and the recommendations are designed to recognize and eliminate disparities based on numerous factors including race and ethnicity, poverty, language, immigration status and disability. The Access and Workforce section contain detailed recommendations.
- D. The fourth decision is the need to support a high-quality system with adequate oversight, data collection and access, evaluation, administration and facilities. Funding needs to incorporate these critical components, so it is ensured that children have access to quality. What funding is essential? The systems section includes the related recommendations.
- E. The fifth decision is that Early Childhood Education does not stand on its own. Families and children have a variety of needs to ensure they are able benefit from ECE. Paid Family Leave, Family Friendly workforce policies and home visiting programs are key related supports. In addition, early developmental screening and interventions and other comprehensive services are key supports for children and families. The systems section includes these recommendations.
- F. Finally, family engagement and participation by child care providers in planning, oversight, and policy development must be funded. The Parent engagement section includes those recommendations.

### **3. Recommendations Regarding Direct ECE Financing Mechanisms**

Currently, ECE is funded through a variety of mechanisms and as the late advocate Patty Siegel used to say, it is a patchwork quilt more than a system.

- A. Family share: Our recommendations for family share are detailed in the Access section but in summary the BRC recommends:
  - i. Long term goal: Make the state Child and Dependent Care Credit fully refundable, tied to cost of living increases and increased over time to meet long term affordability goals.
  - ii. Universal goal: California families at or below the State Median Income (SMI) would pay no more than 7% of their income on early care and education for children under the age of six, regardless of whether they have access to subsidized child care, the state preschool program, or a federally funded program.<sup>59</sup>

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<sup>59</sup> The federal Child Care for Working Families Bill guarantees federal child care assistance to working families with children birth to 13 earning up to 150 percent of SMI and establishes a sliding fee scale for families from 75 percent of SMI to 150 percent of



- iii. Short-term goal: Families at or below 100% of the Supplemental Poverty Measure (SPM) with a need for child care will be guaranteed state subsidy support or ECE program access and will pay no fees.
  - iv. Mid-term goal One: Families at or below 70% SMI with a need for child care will be guaranteed subsidies or ECE program access and will pay fees on a sliding scale.
  - v. Mid-Term goal Two: Families at or below 85% SMI with a need for child care will be guaranteed subsidies or ECE program access and will pay fees on a sliding scale.
- B. State Funding (Note: Final Report will include cost estimates of proposals and sequencing)
- i. Fund Paid Family Leave policies by eliminating the cap on the current taxable wage base of \$114,967.
  - ii. Establish a dedicated funding stream with new funds to establish a Families in Crisis Fund for immediate access to care and expedited eligibility and navigation with contracted slots available (See Access Recommendations)
  - iii. The Mental Health Services Oversight and Accountability Commission should work with ECE stakeholders including First 5s to examine MHSA funding to ensure that we are maximizing early intervention funds throughout the state for children identified as needing mental health services and who are not eligible for services under Medi-Cal.
- C. Federal Funding: Many of the BRC proposals align with the comprehensive and visionary federal legislation, The Child Care for Working Families Act, S. 568, introduced February 26, 2019, by Senator Murray and Rep. Scott, with 131 cosponsors including Senators Feinstein and Harris. The State should maximize its receipt of federal funding and ensure California is drawing down all potential funds.
- i. To this end, it is recommended that the Secretary of the California Health and Human Services Agency prepare a Report to the Legislature, the Superintendent, and Governor by October 2019 outlining all opportunities to draw down federal funding to meet the goals outlined by the BRC and identify areas where new regulatory, legislative, or other action is required to maximize federal funding.
  - ii. Head Start is the largest single source of federal funding received, with \$1.1 billion in 2016-2017. The BRC makes proposals throughout to maximize state receipt of Head Start funding. In 2017, for example, only 31% of eligible children ages 3 to 5 and only 7% of children under age 3 were served nationally by Head Start. In California, only

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SMI so that no family pays more than 7 percent of their family income on child care. We see our state based proposals as a bold step towards that goal.

30% of eligible children ages 3 to 5 and only 8% under age 3 had access in 2017.<sup>60</sup> The BRC recommends to:

- a. Maximize placement of child-welfare involved children in Early Head Start and Head Start and to supplement federal funds with state funds.
  - b. Maximize placement of Children entering ECE through the Families in Crisis programs in Early Head Start and Head Start supplementing federal funds with state funds.
  - iii. TANF funding is a significant source of funding. California should maximize the use of TANF funds for CalWORKs grants, ECE and other direct services to families and children in the CalWORKs system as they struggle to achieve economic security.
  - iv. Child Care Development Fund (CCDF) or Child Care Development Block Grant (CCDBG): While funding has been increased, it still does not meet the need for the federal share in meeting child development needs in California. In March 2018, Congress approved a historic increase in ongoing child care funding, which will help states address these gaps in their key child care assistance policies. Yet this increase—\$2.37 billion—does not fully compensate for years of stagnant funding. As a result, total funding for child care in fiscal year (FY) 2018—even after the increase—remained nearly \$1 billion short of the total funding level in FY 2001 after adjusting for inflation.<sup>61</sup> As funding options are developed, California’s federal delegation should advocate to increase CCDF/CCDBG funding.
- D. The Federal Government administers additional programs for which we do not have specific recommendations, but the BRC believes it is important to develop coordination and communication as California’s ECE system is built. Additional programs of note:
- i. Department of Defense Child Care: it is important to coordinate to ensure maximum access for military families.
  - ii. Title I, Part A of the Elementary and Secondary Education Act (ESEA), reauthorized as the Every Student Succeeds Act (ESSA), encourages the use of Title I, Part A funds for preschool programs. For the 2016-17 school year 55 California districts out of 1024 and four county Offices of Education used Title I funds to support preschool.<sup>62</sup>
  - iii. Tribal Child Care – the State should include Tribal voices as targeted programs are developed. See Access and Coordination Sections for more detail.

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<sup>3</sup> National Head Start Association 2017 State Profile, [www.nhsa.org](http://www.nhsa.org)

<sup>61</sup> National Women’s Law Center, State Child Care Assistance Policies Fall Short in Meeting Families’ Needs, November 2018

<sup>62</sup> Deborah Stipek and Colleagues, Stanford University *Getting Down to Facts II Early Education in California* (2018) page 8

- iv. Workforce Investment Boards<sup>63</sup> are a potential source of workforce investment. Not only does ECE investment serve the ECE workforce, it supports other workers as their children are cared for.

#### **4. Integrating and Maximizing other Funding Sources**

- A. California's bifurcated funding and administrative system to address special needs leads to delayed transition between programs at age 3, under-identification and inadequate provision of early intervention services, and barriers to participation in inclusive ECE programs. To reform this system, the BRC recommends to establish a task force including CDE, ECE, K-12, DDS, DSS, DPH, First 5, DMHS, SELPA, Disability Rights CA, regional centers, legal advocates, pediatricians, provider groups and Head Start, in partnership with strong parental and provider representation. The Task Force should build on the work of the State's 2015 Special Education Task (See Access Recommendations).
- B. Early identification of developmental delays through screening is the first step to connecting children with the supports they need for healthy development. Six in ten of California's children participate in Medi-Cal and are thus eligible for the Early Periodic Screening Diagnosis and Treatment (EPSDT) Medi-Cal program component. EPSDT should immediately be used more effectively to ensure the screening of children occurs. The California Department of Healthcare Services (CDHCS) should work with stakeholders to develop effective strategies and statewide requirements for counties and managed care providers to ensure EPSDT is funding periodic screenings and the needed treatment. Counties should be incentivized to develop best practices and county-level solutions in partnership with TK-12, First 5, and other child-serving county-based entities.
- C. Federal law requires mental health plans to provide specialty mental health services to eligible Medi-Cal beneficiaries, including both adults and children. Enforce and ensure that EPSDT is available pursuant to federal law.
- D. Immediately establish policies and invest resources to ensure California meets the early interventions for infants and toddlers birth to three federal IDEA Part C program components and requirements in terms of procedures, timelines and child outcomes.
- E. All infants and toddlers participating in Medi-Cal should receive routine developmental screenings with a validated tool during a health care visit, as recommended by pediatricians. Early identification of developmental delays through screening is the first step to connecting children with the supports they need for healthy development. When children with (or at risk of) developmental or other delays are not identified early, they may not receive the timely care and intervention services they need to address those developmental delays or concerns. Unidentified delays during the child's first years of life can significantly affect a

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<sup>63</sup> Caitlin McLean, Center for the Study of Child Care Employment Testimony BRC Hearing Oakland October 17, 2017

child's school readiness and have long-term effects on their overall well-being. Fewer than one in three California kids actually receive timely developmental screenings, further delaying any referrals to needed early intervention services. Additionally, California ranks 43rd in the nation in the rate of young kids who receive timely screenings, which puts California children at a serious disadvantage.<sup>64</sup>

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<sup>64</sup> Senate Health Committee Analysis AB11 June 28, 2018