



California Preschool Development Grant Birth Through Five Program Needs Assessment

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Executive Summary

In December 2018, California secured a \$10.6 million award for the Preschool Development Grant (PDG) Birth Through Five program funded by the US Department of Health and Human Services (HHS). The first activity required under the PDG is a statewide needs assessment of the early learning and care (ELC) system to inform in-depth strategic planning to increase the availability of high-quality ELC services.

California is home to more children under age five—and has more ELC programs—than any other state in the nation. The state has a complex mixed-delivery system funded by a variety of sources, administered by multiple state and local agencies, and implemented by a diverse set of home-, center-, and school-based providers. This year, Governor Newsom and the state Legislature made commitments to improving and expanding access to ELC services. In 2019–20, the state intends to develop a master plan for its ELC system, leveraging the PDG Birth Through Five Strategic Plan and other recent statewide planning efforts.

The California PDG Needs Assessment provides a comprehensive review of the state's ELC system (see Methodology side bar for the assessment methodology). This Executive Summary provides highlights from the full statewide needs assessment report, including findings related to ELC quality and access, facilities, financing, workforce, data, school and program transitions, and governance.

Methodology

The American Institutes for Research (AIR) drew on several data sources to complete the statewide needs assessment. The AIR team (1) analyzed relevant extant data; (2) conducted interviews with state, tribal, and local ELC leaders; (3) reviewed prior needs assessments and other public reports; and (4) administered a survey to coordinators from Local Child Care and Development Planning Council (LPCs), which are required to conduct local assessments of child care needs in their respective counties at least once every five years.

Children in California

- *Approximately 2.4 million children under age five live in California. Almost 200,000 of these children (8 percent) live in deep poverty (under 50 percent of the federal poverty level).*
- *The majority of children under age five (58 percent) are in households earning less than 85 percent of the state median income (SMI) and are thus income-eligible for state subsidized ELC programs.*
- *A conservative estimate of the proportion of children under five who experience homelessness in California in a given year is 7.5 percent.*
- *Between 2011 and 2015, 60 percent of the young child population (zero to age eight) in California were dual language learners (DLLs).*
- *An estimated 784,557 children under age five live in rural areas in California, approximately 32 percent of the total child population.*

Key Findings

In recent years, the supply of preschool spaces has expanded in California, yet a large group of subsidy-eligible children remain unserved, especially as California has raised the income threshold for eligibility. The ongoing growth in the supply of preschool spaces is a major strength of the ELC system in California. An estimated 65 percent of all four year olds are enrolled in licensed center-based care or Transitional Kindergarten (TK), and an estimated 69 percent of income-eligible four year olds are in some form of part- or full-day publicly supported preschool or TK. Access for three year olds also has expanded, although only 34 percent of subsidy-eligible children in this age group are currently served.

In 2019, California increased the income threshold for subsidized child care from 70 percent of the SMI (\$63,083 annually for a family of four) to 85 percent of the SMI (\$80,623 for a family of four). At this new level, an estimated 341,957 or 59 percent of income-eligible three and four year olds were not served by Title 5 programs, TK, or Head Start in 2017. To address this challenge, legislation enacted in 2019 will provide \$124.9 million in ongoing funding for phasing in an expansion of the California State Preschool Program (CSPP). This expansion will include 10,000 new full-day slots in 2020, with the intent of expanding eligibility to all four year olds from low-income families.

According to analysis by AIR and the University of California, Berkeley (UC Berkeley) in 2018, access to ELC programs varies dramatically from county to county in California. For example, although San Francisco serves more than half of its three year olds

(53 percent), only 16 percent are served in Tulare County in the Central Valley. The analysis also revealed that many high-cost coastal counties have declining populations of children, while other counties in Northern California and the Central Valley, which already have higher proportions of eligible yet unserved children, are predicted to see increases in their populations of children. These demographic changes offer an opportunity to rethink the distribution of state-subsidized ELC funds as new funds become available to focus on increasing slots and building capacity in areas of the state where need is predicted to grow.

A great need exists for more public investment in infant and toddler care for subsidy-eligible children. An estimated 445,983 or 87 percent of eligible infants and toddlers are not served by a publicly supported program in California. The unmet need for infants (children through twelve months of age) is greater than for toddlers (93 percent, 88 percent, and 83 percent, respectively), though the need for additional slots is substantial for all children under three. As one local ELC leader stressed,

There's a gigantic, massive demand for infant toddler care, and we're just not meeting the need. There are so many families with so many children who need care and can't get care. Even for families who have the means to afford care, it can be a struggle to find good quality care. Access and quality is definitely an issue for all age groups, but I think it's especially a crisis for zero to three.

The cost of care is one of the most significant access barriers in the state: California ranks first (worst) in the nation for the cost of infant care as a percentage of the SMI for a married couple.

Wide disparities exist in access to early learning and care programs across the state and by ethnicity, race, and language. Children of color make up nearly 75 percent of all children twelve years of age and under in California, but they make up more than 86 percent of children eligible for subsidized care. For African-American children, who are the largest group of eligible children enrolled in full-day, full-year programs, approximately two out of three eligible children do not receive subsidized care. Latinx children comprise 52 percent of children under age twelve but 68 percent of children eligible for subsidized care. The level of unmet need among Latinx children varies, depending on the type of care included in these estimates. According to one study, nearly 1.4 million Latinx children were eligible for subsidized care, but only 126,100 (9 percent) were enrolled in state-subsidized child care or full-day, full-year State Preschool. A forthcoming study of characteristics of children participating in subsidized care in California found that 73 percent of children receiving a child care subsidy in 2017 were Hispanic, including both part-day and full-day State Preschool.

In California, preschool children (ages three and four years) are also less likely to be enrolled in a public or private preschool program if no adult in the household speaks English well (39 percent compared with 47 percent). Similarly, the 2019 *Getting Down to Facts II* project found that in the period between 2011 and 2015, three and four year

olds who were DLLs were less likely to be enrolled in preschool (56.6 percent not enrolled) than non-DLL children (47.9 percent not enrolled).

Greater investment—in terms of policy, research, and resources—is needed in rural areas of the state. Like many other states, California lacks comprehensive data about the characteristics of children in rural areas. At the same time, many rural counties have the highest rates of deep poverty in the state. More detailed information about the needs of children in these counties is needed. This analysis showed a slightly higher rate of unmet need for preschool services in rural areas in California compared with the state overall. (Unmet need for infants and toddlers in rural areas is similar to levels in the state as a whole, although these rates are very high in both rural and urban areas.)

In interviews, ELC leaders from rural counties emphasized the need for greater flexibility in serving young children, with more (smaller) programs spread across remote regions and with flexible enrollment requirements to accommodate the needs of rural families. Limited licensed care—and issues around transportation to and from these sites—creates significant challenges for parents in these communities who need care for their children. To the extent that center-based programs such as state preschool exist in rural counties, they tend to be located in the largest towns, not in remote rural areas. As a result, family, friend, and neighbor (FFN) care is often the primary option for ELC in the rural areas of the state.

Significant additional public investment is needed to make early learning and care in California more affordable for families. California ranks among the top five states with the highest cost of child care for both infants and preschool-age children in both center-based settings and family child care (FCC) homes. For example, center-based care for a four year old child in California costs \$11,202, amounting to 12.6 percent of the median family income for a married couple (Child Care Aware 2018). The cost of providing infant care, compared to what parents or the state can pay for it, has also limited the number of providers who offer this care. Short supply can then drive prices even higher for families.

California has significantly raised the reimbursement rate for state-contracted infant and toddler care meeting Title 5 standards. The higher reimbursement rate provides an incentive for providers to offer services for infants and toddlers. In addition, the higher rate also begins to address the true cost of a program that, because of its protective pupil-teacher ratio, is inherently more expensive than ELC for preschool-age children, which requires a lower pupil-teacher ratio.

California has invested significant resources to improve the quality of early learning and care programs. For example, Quality Counts California (QCC) supports local and regional agencies and other quality partners in their efforts to enhance the quality of ELC programs, and it informs parents on what quality levels mean in the ELC setting. QCC also oversees the state's Quality Rating and Improvement System (QRIS). The QCC has been implemented to some degree in all 58 counties of the state, but only 28.7 percent of centers, 6.8 percent of FCC providers, and some FFN providers are currently participating. Participation rates also vary notably by county. Most recently,

QCC added a special focus on tribal child care, with the Tribal Child Care Association of California (TCCAC) leading the part of the QCC system that serves tribal providers (Region 11) and providing support to participating tribal child care sites across the state. In addition, the state is reaching out to voucher providers in the Alternative Payment Program (APP) to participate in the QCC, which formerly focused primarily on state-contracted programs and federal Head Start and Early Head Start grantees.

In addition, California has funded, at the state and local level, a myriad of training and professional development efforts to promote ELC quality in licensed ELC settings. Most recently, California allocated \$195 million for the Early Learning and Care Workforce Development Grant Program to enhance and expand professional development and supports aligned with QCC for ELC providers. Other supports target FFN providers, who are unlicensed. For example, efforts are being made to improve the quality of FFN providers serving infants and toddlers. California is currently using Child Care and Development Block Grant (CCDBG) funds to support any provider who would like to be on the pathway toward improved quality, including current license-exempt providers who might consider moving to licensure in the future. More efforts are needed to support FFN providers; FFN care is among the most common forms of care for children birth to age five, yet little is known about the quality of care in these settings or the resources FFN providers might need to improve the quality of their care.

More research about California’s early learning and care workforce is needed, along with higher wages. Like other states, California faces systemic barriers that negatively affect the quality of ELC services. These barriers include the most critical component of high-quality ELC programming—a qualified and supported ELC workforce. ELC wages in California are low, particularly for infant and toddler providers. Even preschool teachers with advanced degrees earn much less than their peers in kindergarten through grade 12 (K–12). Better understanding of the ELC workforce, through more research and systemic efforts to track teacher education and compensation, should inform comprehensive efforts to improve compensation for ELC educators in California, which in turn would improve both the availability and quality of ELC slots at all ages. The state and other partners are funding the new California Early Care and Education Workforce Study, set to launch in fall 2019. This study will provide a comprehensive description of the ELC workforce across the state, including county and regional variation¹.

More support is needed for family child care. FCC plays an important role in the mixed-delivery ELC system in California, providing care for many infants and toddlers and offering more accessible and flexible child care for parents who work nontraditional hours or have variable schedules. During the Great Recession, the state’s investment in subsidized child care dropped more than \$1 billion as a result of budget constraints. Because of these cuts, lower demand for child care from working parents, and other recession-related factors, some FCC providers lost their homes. As a result, the supply of FCC providers in California dropped 30 percent between 2008 and 2017, a loss of

¹ <https://cscce.berkeley.edu/topic/workforce-data/ca-study/>

98,000 spaces for children. The rate of decline was especially high in some higher poverty counties.

FCC providers cite many reasons for exiting the field, including lack of access to benefits (vacation and sick pay, retirement, health care), difficulty paying for an assistant (in large family child care homes [FCCHs]), difficulty remaining fully enrolled, and lack of access to substitutes. FCC networks may retain providers by helping them increase their business acumen, obtain access to benefits such as sick pay and vacation, find trained substitutes, obtain access to developmental screening and early intervention services for their enrolled children, and secure financial assistance to improve the portion of their homes providing FCC.

Facilities for early learning and care programs deserve more attention and public investment. One barrier that keeps California providers from being able to provide more ELC services is a lack of facilities. More than 90 percent of Local Child Care Planning and Development Councils reported that difficulties finding a site to move into is a challenge to ELC expansion in their counties, and nearly all reported that lack of funding for facilities is a barrier. Stakeholder interviews indicated that providers rarely have the resources to upgrade or expand their facilities through regular contract funds to upgrade or expand their facilities because grant funds formerly available for this purpose were converted to a little-used loan fund. In addition, finding affordable new facilities is challenging even in the lower cost regions of the state. To help address these challenges, the 2018–19 state budget funded the multiyear Inclusive Early Education Expansion Grant Program. Under this program, funds can be used for infrastructure costs, including facility renovations and equipment, to support inclusive ELC programs. In addition, the 2019–20 state budget includes \$263 million for ELC facilities. The majority of these funds (\$245 million) are a one-time significant new investment, while the remainder of these funds (about \$18 million) are from converting the existing revolving loan fund into a grant program. ELC facilities will also be a major focus of the state’s upcoming master plan effort.

California needs better data and data systems in many areas to make important policy decisions about serving children. California continues to study issues of great importance to its children. For example, the DLL Pilot Study is under way and seeks to understand the practices that ELC programs use to support DLLs and to determine which practices are most effective and scalable. As noted earlier, the state has also embarked on an updated California Early Care and Education Workforce Study.

At the same time, policymakers have many other questions about ELC program enrollment and child outcomes that cannot currently be answered because of the lack of a longitudinal database. California needs a system that assigns unique identification numbers to children at birth or first use of a public service and follows them as they use services across sectors and into elementary school. Such a system could track children’s needs and outcomes over the long term. In addition, a unique identification system will help the state better understand the choices families make to cover their actual needs for child care (such as by using multiple programs and arrangements), the

reasons for and the extent of dual enrollment, and the outcomes over time associated with different programs and investments.

The needs assessment identified a number of state policies that have the unintended effect of operating as barriers to the provision of high-quality ELC services:

- Work and family fee requirements are inconsistently applied to programs serving preschool-age children. Although the state’s TK program has no work or income eligibility requirements, and the federally administered Head Start program has no work requirements, some state Title 5 contracts have both of these requirements. The work requirements make it difficult to provide full-day services and continuity of service to children, and the family fee requirements are burdensome to both families and providers.
- Some State Preschool contract requirements make it difficult for school-based providers to offer access to full-day, full-year ELC. For example, a state requirement specifies that in order to qualify as a full-day program, a provider must also operate 246 days per year. This requirement poses problems for school districts and other local education agencies, which administer many CSPP programs and cannot afford the additional administrative and facilities overhead costs to keep the program open the entire summer.
- Current state and federal program eligibility rules pose barriers to families who wish to enroll their children in both a formal school readiness or child development program and a subsidized child care arrangement that accommodates nontraditional or extended work hours. This analysis showed that as many as 10 percent of children have parents who work nontraditional hours and thus need care during evenings, weekends, or overnight. Unfortunately, enrollment in even a part-day Head Start program currently makes a child ineligible for the California Work Opportunity and Responsibility to Kids (CalWORKs) Child Care Program Stage 2 or Stage 3 voucher that might cover care during nontraditional hours. In addition, it is prohibited for three and four year olds to participate in part-day, part-year school readiness programs while their families maintain full subsidies using APP vouchers.
- The duration of State Preschool and General Child Care and Development (CCTR) contracts poses several barriers to enrolling the most vulnerable children. For example, a provider cannot easily reserve or set aside spaces for children experiencing homelessness; if the children do not enroll early enough in the contract year, the provider risks not earning his or her full contract and thus must return the money to the state.

To address the range of unmet needs in early learning and care availability and quality, significant additional investments are needed in the early learning and care system as a whole, and few recommendations can be addressed without new or increased sources of revenue. Although California has made great progress in increasing access to and improving the quality of many ELC programs, the funds

allocated for ELC overall are still insufficient to provide quality services to the large number of families who need help affording services in a high-cost state. Infant and toddler care in California is the most expensive in the nation and in short supply for all income groups. State reimbursement rates for ELC programs serving similar populations vary greatly by program and funding source, with little relationship to the true cost of quality. More than half of the ELC workforce is paid so little that they qualify for public assistance. New data systems are needed to support the most efficient use of state funds. Expanding and improving ELC facilities is also a major need.

Next Steps

California has made great strides in recent years in significantly expanding access to high-quality care for preschool children through its mixed-delivery system. However, gaps in infant and toddler care remain. The challenge—and opportunity—for the state is to identify and implement the necessary steps to provide access to quality ELC programs for all children. This includes identifying new stable revenue sources to support its goals.

This needs assessment and the accompanying PDG Strategic Plan will also be considered in the development of California's Master Plan for Early Learning and Care (MPELC), which was called for by Governor Newsom. The MPELC will make actionable recommendations for advancing progress toward achieving the long-term goals of universal preschool and improved quality of and access to child care and systems of services that support the healthy development of children and their families.

Introduction

The Preschool Development Grant (PDG) Birth Through Five program, a \$237 million federal grant program created by the US Department of Health and Human Services (Office of Child Care 2018), provided 46 states and territories with access to funding to analyze the current landscape of their ELC systems and to conduct in-depth strategic planning to maximize the availability of high-quality ELC services. Specifically, the PDG program supports states and territories in the following activities: (1) conducting a statewide needs assessment, (2) developing a statewide strategic plan, (3) increasing opportunities for parent choice and knowledge about high-quality ELC, (4) sharing best practices among early childhood service providers, and (5) improving the overall quality of ELC services.

In December 2018, California secured a \$10.6 million PDG grant. The California Department of Education (CDE) contracted with a variety of partner organizations to collaborate with the CDE in carrying out the activities of the grant. The American Institutes for Research (AIR) worked with the CDE and its partners to plan and conduct the ELC needs assessment in the state, building on its prior work in California in analyzing the supply of and need for ELC services.

This report is an assessment of the current state of the ELC system in California. It provides a baseline to help inform the state's PDG Strategic Plan, and it addresses the following questions, based on federal guidance for the PDG Needs Assessment:

1. **Key Terms.** How does the state define (1) quality early childhood care *and* education, (2) availability, (3) vulnerable or underserved, and (4) children in rural areas?
2. **Focal Populations of the Grant.** What are the characteristics of the children who are vulnerable or underserved and children who live in rural areas?
3. **Availability and Quality.** What is the availability and quality of existing programs in the state, including programs serving the most vulnerable or underserved populations and children in rural areas?
4. **Number of Children Served and Awaiting Service.** To the extent practicable, what is (1) the unduplicated number of children being served in existing programs and (2) the unduplicated number of children awaiting service in such programs?
5. **Data Gaps: Quality and Availability.** What are the gaps in data or research regarding the quality and availability of programming and supports for children birth through five years, considering the needs of working families as well as families with members seeking employment or in job training?

6. **Data Gaps: Supporting Collaboration.** What are the gaps in data or research that are most important for the state to fill in order to meet the goals of supporting collaboration between programs and services and maximizing parental choice?
7. **Measurable Indicators of Progress.** What are the state's current measurable indicators of progress that align with the state's vision and desired outcomes?
8. **Facilities.** What are the key concerns or issues related to ELC facilities?
9. **Funding.** What are the barriers to the funding and provision of high-quality early childhood care and education services and supports and the barriers to identifying opportunities for more efficient use of resources?
10. **Transitions.** What transition supports and gaps affect how children move between early childhood care and education programs and school entry?

In addition, the federal needs assessment guidance includes a set of probes related to these overarching research questions to guide states in assessing and describing the ELC system. Each section of this report identifies which questions the California needs assessment addresses.

California also allocated funds in the 2019 budget to develop the state Master Plan for Early Learning and Care (MPELC) and has identified the five domains the plan will address. This report highlights findings that are relevant to each of those five domains to inform the state's continued planning (see "Alignment with California's Master Plan" text box on page three). The report ends with a set of conclusions and recommendations.

Methodology

The PDG Needs Assessment used a mixed-methods approach to address the questions of interest. The AIR team's design and development of data collection tools was informed by the US Department of Education's PDG Needs Assessment guidance.

To carry out the PDG Needs Assessment, the AIR team (1) gathered and analyzed relevant extant data, (2) conducted interviews with state and local early childhood leaders, (3) reviewed prior state and local needs assessments and other publicly available reports published within the past five years, and (4) administered a survey to Local Child Care and Development Planning Councils (LPCs). LPCs are required to conduct an assessment of child care needs in their counties no less than once every five years. In addition, as of September 2019, AIR was administering a survey of center-based and FCC providers, along with FFN care providers who accept alternative payment vouchers. Results from this survey will be presented to the state in a brief memo by December 2019.

Extant Data

To describe parents' and children's access to ELC services, AIR updated and analyzed extant data housed in its Early Learning Needs Assessment Tool (ELNAT) found at <https://elneedsassessment.org/>. This tool was originally developed with support from the David and Lucile Packard Foundation to support the efforts of local planners and advocates to expand early childhood care and education services in California. The tool enables users to create custom reports by county and California legislative district, with ZIP code detail, regarding the supply of and demand for ELC. Data is available by age cohort for children ages birth through five, with some information available on school-age children. This tool includes estimates of the following data points by geographic area and age cohort:

- Estimated number of children
- Estimated number of children with working parents
- Number of DLLs
- Number of children estimated to be income-eligible for California's subsidized ELC programs
- Number of children enrolled in various programs, including TK, State Preschool, Head Start, Early Head Start, Title 5 FCCHs, California Work Opportunity and Responsibility to Kids (CalWORKs) Stage 2 and Stage 3, and other licensed care

Alignment with California's Master Plan

The state is planning to develop a master plan for its ELC system, building on the PDG Strategic Plan and other recent statewide planning efforts. The master plan will include the following priority areas:

- *A fiscal framework that provides options for ongoing funding*
- *ELC facility needs statewide*
- *Need for ELC by families eligible for subsidies and those not currently receiving services*
- *An actionable quality improvement plan*
- *Steps to provide universal pre-K for all three and four year old children in California*

This data is compiled regularly from multiple sources, including the California Child Care Resource & Referral Network (CCR&RN), the CDE, the California Department of Public Health, the American Community Survey Public Use Microdata Sample (PUMS), and an

AIR-administered survey of Head Start programs. Data is available for 2006, 2008, 2010, 2012, 2014, 2016, and 2018. This data has been used by the CDE, its partners, and county offices of education since 2010 to estimate the unmet need for ELC programs in the state and identify the areas of greatest need for services.

Interviews

Between May and July 2019, AIR staff conducted a total of 44 phone interviews with (1) representatives of and agencies from sampled counties and (2) state-, regional-, and local-level agency leaders, association representatives, and researchers. The 60- to 90-minute interviews were recorded and then coded and analyzed transcriptions of the audio files using qualitative analysis software (NVivo).

At the county level, the team interviewed 30 representatives drawn from a sample of counties based on key attributes, beginning with region. The team used the CDE and First 5 California's 10 Regional Coordination Training and Technical Assistance Hubs (see appendix A) to ensure that all areas of the state were represented in this PDG Needs Assessment. For each of these sampled counties, staff reached out to the LPC coordinators and the representatives of resource and referral (R&R) agencies. The primary mission of the LPCs is to plan for child care and development services based on the needs of families in the community. As noted above, in addition to other responsibilities, each LPC is required to conduct an assessment of child care needs in the county no less than once every five years. The R&R agencies help families find child care that best meets their needs, recruit and train child care providers, and collect data from parents and child care providers. These agencies provide a variety of services to parents seeking care, to providers seeking professional development and incentives for remaining in the profession, and to communities seeking support for their young children. Together, the LPCs and R&R agencies are the most current and comprehensive source of county-level information about ELC programming and planning.

When the team was unable to reach a potential interviewee after repeated attempts, alternative interviewees were identified in a county within that same region. The team interviewed 14 representatives from LPCs, 15 representatives from R&R agencies, and one representative from a school district (to collect more data on a particular program). At least one stakeholder from each of the 10 regions was interviewed; in larger counties such as Los Angeles and Santa Clara, multiple people were interviewed. For example, in Los Angeles County, an LPC representative, an R&R representative, and a representative of a large school district were interviewed. Steps were taken to ensure that the sample was representative of rural counties and included counties that have the largest percentages of Native American families. Finally, steps were taken to ensure that the sample was representative of counties that had begun to implement—or plan to implement—unique administrative or program initiatives or reforms (for example, a unique child identifier, a centralized eligibility list, a local early childhood subsidy pilot, or Early TK).

In addition to these local stakeholders, AIR staff interviewed a total of 14 state, regional, and tribal representatives of agencies that serve or focus on specific populations of

interest (for example, Head Start California, the CDE's state-funded Migrant Child Care and Development Program and the CDE's federally funded Migrant Education Program, the TCCAC, the California County Superintendents' Educational Services Association, First 5 California, and Parent Voices); offer access to programming through unique strategies (for example, the California State Library); and have done extensive work related to conducting state and local needs assessments (for example, the CCR&RN).

Review of Prior Needs Assessments and Other Reports

The AIR study team collected, reviewed, and analyzed more than 70 prior needs assessments and other reports that addressed ELC access, affordability, parent need, workforce, facility, financing, health/mental health, and data issues. The reviewed reports include all known state-level ELC needs assessments conducted since 2014 as well as national reports with California-specific data from the same time period. In addition, 16 Head Start community needs assessments made available by Head Start grantees and provided by Head Start California were reviewed. Finally, 43 LPC five-year needs assessments were reviewed. These assessments represented 44 counties (one needs assessment covered both Sutter and Yuba Counties). The state requires needs assessment reports from each county no less than once every five years. Counties are required by statute to include in their needs assessment reports "all factors deemed appropriate by the LPC in order to obtain an accurate picture of the comprehensive child care needs in the county," including specific requirements such as the needs of families eligible for subsidized care and the number of children needing care services by age cohort.

Survey of Local Child Care and Development Planning Councils

Knowing that rich data is held at the local level, in June and July 2019, the AIR team administered surveys to all 58 LPC coordinators across the state (one per county). The purpose of the survey was to obtain county-level data not available at the state level. Survey goals included determining how waiting lists for ELC programs are maintained at the county level and the extent to which it is possible to obtain an unduplicated count of children awaiting service; identifying local efforts to renovate or construct ELC facilities; assessing the state of the ELC workforce by gathering the number of community college and four-year college graduates in early care and education in 2019 and looking at how this number compares to those from prior years; and identifying LPC knowledge of the ELC needs of special populations such as children in tribal groups and children with special needs.

Provider Survey

The AIR team is currently administering a provider survey to gather data on estimated counts of unduplicated children served by ELC providers as well as on a variety of other critical aspects of ELC implementation, including program site characteristics, funding patterns, facilities, the workforce, and program activities to support access. The sample has been drawn from a list maintained by the CDE of licensed and license-exempt providers that accept alternative payment vouchers and a list maintained by the California Department of Social Services (CDSS) of licensed providers. Provider types on this combined list included ELC centers and large and small FCCHs. Because the

CDE and the CDSS lists did not contain email addresses, AIR staff contacted sampled providers in advance to introduce the study and obtain this information for online administration.

The sampling frame was developed by first selecting a group of 17 counties representative of the geographic, demographic, and programmatic diversity of California's 58 counties. These counties were drawn from the six regions defined by the CDSS in 2001 (CDSS 2002), which have been used in prior AIR and Child Trends studies. The study team further divided the Northern/Mountain, Central/Southern farm, and Southern California regions into two subregions to ensure representation of mountain and inland regions. The CDE requested that five counties in three regions (the Bay area, the inland central farm region, and the northern region) be purposefully sampled. e randomly selected one to three more counties within each region or subregion to create the overall survey sampling frame.

A sample of 1,605 sites was drawn, aiming for a final analytic sample of 700 (excess sampling was done to account for potential redundancy in provider data from the CDE and the CDSS, inability to identify emails for sampled providers, and nonresponse to distributed surveys). This sample was representative of the number of provider types across the state, which have roughly equal percentages (centers, 36 percent; large FCCHs, 28 percent; small FCCHs, 36 percent). To oversample rural counties and achieve variation across counties and program setting types, a minimum of 18 sites per county (six for each program setting type) were selected. Ten FFN providers were selected in each county, with the exception of Mariposa, where there were only two. The final number of sampled providers was 1,767. For a full description of the provider survey methodology, see appendix B.

Analysis

Descriptive analyses of the extant data were conducted to address key questions for the PDG Needs Assessment. To estimate unmet need for ELC services statewide, the population of children in each age cohort (younger than one year and one, two, three, and four year olds) was estimated. Next, the subset of those children who were income-eligible for State Preschool (at 85 percent of the SMI or below) and those who were eligible for other subsidized child care services (qualifying based on income and a qualifying need for care) were estimated. From these counts, the number of children enrolled in any ELC program was subtracted to estimate unmet need, using information provided by Head Start California to take into account documented dual enrollment between State Preschool and Head Start.

Using data from the National Center for Education Statistics' Common Core of Data, rural ZIP codes were also identified, and unmet need was calculated for these ZIP codes alone.

The California Department of Developmental Services (DDS) and the CDE provided data on children with Individual Family Service Plans (IFSPs) and Individualized Education Plans (IEPs), respectively. First 5 California provided data on the number of providers participating in QCC and the number of children they serve. This data was summarized descriptively.

Qualitative data from the interviews and surveys was coded using NVivo software and analyzed this data for themes at different levels of the system and in the different topical areas (for example, ELC workforce and ELC facilities). Data from LPC surveys was analyzed to provide an assessment of local waiting lists and other pertinent information and to describe what data is available locally. Additional survey data will come from providers in the fall of 2019. The AIR team will analyze this data to calculate estimates of unduplicated enrollment in ELC programs statewide.

Definitions of Key Terms

To develop a shared understanding among the diverse group of stakeholders involved with the PDG grant, the AIR team facilitated a process to review draft definitions and gain consensus on a set of key terms, as identified in the HHS federal guidance. Exhibit 1 includes definitions of five of those terms: (1) quality ELC, (2) availability of ELC, (3) underserved children, (4) vulnerable children, and (5) children in rural areas. Although the federal guidance combined the terms *underserved* and *vulnerable*, California has chosen to develop separate definitions of these two terms.

Exhibit 1. Key Term Definitions

Key term	Definition
Availability	Availability of (or access to) early learning and care means that parents, with reasonable effort and affordability, can enroll their child in an arrangement that supports the child’s development and meets the parents’ needs.
Quality	Quality early learning and care means safe and healthy learning environments in which staff are supported in acquiring or increasing the knowledge and skills to promote relationships, interactions, and activities that support all children’s growth and development to prepare them for school and life.
Underserved children	Children who meet the eligibility requirements for subsidized child care in California but who are not served either because of insufficient funds or barriers including but not limited to lack of facilities, having special needs (children with developmental delays or children with disabilities) or other vulnerabilities, or living in a rural area.

Key term	Definition
Vulnerable children	Children in need of special care, support, or protection because of age, disability, or various risk factors that include but are not limited to poverty, low parental education, health and special needs, child abuse and neglect, homelessness, and other adverse child experiences (ACEs). ACEs include child abuse (emotional, physical, or sexual), neglect (physical and emotional), and household challenges (growing up in a household in which there is substance abuse, mental illness, violent treatment of a mother or stepmother, parental separation/divorce, or a member of the household went to prison).
Rural (three subcategories of rural are used, based on the definition developed by the National Center for Education Statistics)	<p>Fringe. Census-defined rural territory that is less than or equal to five miles from an urbanized area, as well as rural territory that is less than or equal to 2.5 miles from an urban cluster.</p> <p>Distant. Census-defined rural territory that is more than five miles but less than or equal to 25 miles from an urbanized area, as well as rural territory that is more than 2.5 miles but less than or equal to 10 miles from an urban cluster.</p> <p>Remote. Census-defined rural territory that is more than 25 miles from an urbanized area and is also more than 10 miles from an urban cluster.</p>

In addition to these key terms, the California PDG Core Team² developed a working definition of *dual language learners* as children under the age of eight with at least one parent who speaks a language other than English at home (Park, O’Toole, and Katsiaficas 2017).

Overview of California’s Early Learning and Care System

California has a complex ELC delivery system, funded by local, state, and federal monies. This section provides a brief description of the ELC programs implemented in the state to set the stage for the PDG Needs Assessment findings. In addition to identifying the overall supply of care in licensed settings and the various forms of publicly subsidized ELC, this section describes the state’s quality improvement system, known as Quality Counts California (QCC); the CCR&RN; and local ELC governance and coordinating bodies.

² The PDG Core Team represents the primary agencies with authority within California’s current early childhood landscape. The team was established to provide technical assistance and advice to the PDG effort. The group includes leaders from the Governor’s Office, the CDE, the CDSS, California Health and Human Services Agency, and First 5 California.

Licensed Settings

As of May 2019, California had roughly 14,000 licensed child care centers (with separate licenses for infant, preschool, and school-age children) and 28,000 licensed at-home centers (including 16,000 small homes and 12,000 large homes) under the oversight of the Community Care Licensing Division of the CDSS. Centers must obtain separate licenses for the care of infants (ages birth to two with a license option to serve toddlers up to age two), preschool-age children (ages four and five with a license *option* to serve toddlers as young as eighteen months), and school-age children (age six and up and younger children who are enrolled in school). However, newly passed Assembly Bill 605 (Chapter 574, Statutes of 2018) requires the CDE to adopt regulations by January 2021 that would create a single child care center license to serve infant, toddler, preschool, and school-age children for new applicants. The bill also requires all existing licensed centers to transition to a single license before 2024. FCCHs may be licensed either as small homes (serving up to eight children) or large homes (serving a maximum of 14 children), depending on the ages of the children (for more information, see Family Child Care Home Capacity Requirements document found at <https://www.cdss.ca.gov/Portals/9/CCLD/CCP%20Documents/Capacity%20Requirements%20FCCHs.pdf?ver=2019-06-28-121849-180> on the CDSS licensing website).

Publicly Supported Early Learning and Care

The state has four types of publicly supported ELC. Three of these programs serve low-income children who meet specific income eligibility requirements and other purposes of care: state-contracted Title 5 programs, the federally administered Head Start and Early Head Start programs, and state and federally subsidized voucher programs available in both licensed and license-exempt FFN settings. The latter funding is provided through the CalWORKs program or through Alternative Payment Programs (APPs). CalWORKs Stage 1 is administered by the CDSS and Stage 2 and Stage 3 are administered by the CDE. Access to subsidized child care is a virtual entitlement for CalWORKs participants. CalWORKs serves low-income families who are not enrolled in CalWORKs child care, and access is available only to the extent that funding is available.

In addition to the state and federally funded ELC programs available to low-income families, California has a state-supported TK program for four year olds. This program is available to all children who meet the age requirements, regardless of family income. (In 2019, a child must turn five between September 2 and December 2 to qualify for TK; however, some school districts have established Early TK programs to serve those four year olds who turn five between December 2 and the end of the school year.)

State-Contracted Title 5 Programs

Title 5 programs are supported by state and federal funds and administered by the CDE. Child care programs that meet the regulations specified in Title 22 of the California Code of Regulations, which is based on the Health and Safety Code, are referred to as Title 22 programs. The state-subsidized child care centers that meet *Education Code (EC)* requirements, which set stricter pupil-teacher ratios and staff qualifications than Title 22, are referred to as Title 5 programs (California Child Care Council of Santa Clara County, n.d.). The two largest Title 5 programs are the CCTR and the CSPP (CDE 2018a). The CCTR program funds programs that are operated or

administered by public or private agencies and local education agencies (LEAs), which can be child care centers or Family Child Care Home Education Network (FCCHEN) programs. The FCCHEN programs support educational objectives for children in licensed centers that serve families eligible for subsidized child care (CDE 2018a). These programs provide child development services for children from birth through twelve years of age and also serve older children with exceptional needs, such as children with disabilities. According to the CDE, the programs provide an educational component that is “developmentally, culturally, and linguistically appropriate for the children served. The programs also provide meals and snacks to children, parent education, referrals to health and social services for families, and staff development opportunities to employees” (CDE 2019h). A large share of the children served by the CCTR program are infants and toddlers. Title 5 services that are similar to those funded through the CCTR program but specifically target migrant families are offered through the Migrant Child Care and Development Program. Specifically, this program serves families who earn at least 50 percent of their total gross income from employment in fishing, agriculture, or agriculturally related work during the 12-month period immediately before they apply for the program (CDE 2019h). In 2018, the Migrant Child Care and Development Program served 2,052 children (CDE 2019b). Title 5 also includes the California State Program for Severely Disabled Children (CHAN), which in 2018 served 20 children in several San Francisco Bay Area counties (AIR Early Learning Needs Assessment Tool, www.elneedsassessment.org).

The CSPP, which serves three and four year old children who are eligible based on family size and income (prioritizing families with need for services), is the largest state-funded preschool program in the nation (CDE 2018a). The program provides both part-day and full-day services and mandates a core curriculum that is required to be developmentally, culturally, and linguistically appropriate for the children served. The program is administered through LEAs, higher education institutions, community agencies, and private nonprofit agencies. The availability of CSPP-funded program slots is determined by state budget allocations.

Federally Administered Head Start, Early Head Start, and Title I Programs

In FY 2018, Head Start programs in California served 86,070 preschool-age children in 77,973 slots (US Department of Health and Human Services 2019, as cited in Allen, 2019). Although Head Start enrollment has declined by more than 15,000 since 2015, according to Head Start California, Early Head Start enrollment has increased by approximately 7,000. California’s Head Start programs are administered through a system of 199 grantees and 91 delegate agencies. The majority of these agencies also have contracts with the CDE to administer CCTR or CSPP programs. Many of the programs are located at the same sites as the Head Start programs.

Title I Preschool. Even though Title I, Part A of the Elementary and Secondary Education Act reauthorized as the Every Student Succeeds Act (ESSA), primarily funds programs and services in K–12 school systems, the use of Title I funds for preschool programs is expressly allowed and encouraged. In California, it is estimated that only about 1 percent of eligible school districts use Title I funds to support preschool

programs; exact numbers are unknown because school districts are not required to report Title I expenditures for preschool.

Title I, Part C Preschool. The Migrant Education Program (MEP) is a federally funded program authorized by Part C of Title I. The program is designed to support high-quality and comprehensive educational programs for migrant children to help reduce the educational disruption and other problems that result from repeated moves. The California MEP is the largest in the nation and currently has 20 regional subgrantees that receive funding from the MEP for their regional migrant education programs. In 2017–18, the California MEP identified more than 81,198 migrant students statewide, including prekindergarten and out-of-school youth. Close to 90 percent of the total migrant student population in more than 541 school districts receive MEP services, and 8,897 of the 81,198 were identified as preschoolers three to five years of age.

In order to ensure that the educational needs of migrant preschool children are met, the CDE's Migrant Education Office (MEO) allocates a portion of each region's total funding for Migrant Education School Readiness Programs (MESRPs). These in-home and site-based programs provide support for migrant children who will soon be entering kindergarten and are not enrolled in other State Preschool programs. Among the MESRPs is the Migrant Education Family Biliteracy Program (FBP), a statewide school-based family biliteracy education program that families may replicate at home to provide high-quality literacy instruction for children ages three to five years. This program is crucial to the MEP, as it not only assists migrant children but also encourages their parents to value literacy in the home language as well as the school language.

State and Federally Funded Voucher Programs

In addition to the state and federally contracted programs described above, California offers two major voucher programs to help families purchase child care: CalWORKs and APP. These voucher programs are intended to help families work, go to school, and participate in other types of welfare-to-work activities such as job search and on-the-job training. The vouchers may be used in a variety of licensed settings as well as license-exempt FFN care settings that may more easily accommodate nontraditional work hours than do the contract- and grant-funded programs described above.

California Work Opportunity and Responsibility to Kids Child Care. CalWORKs is a welfare program that gives cash aid and services to eligible needy California families. Current or former CalWORKs cash aid recipients are eligible to receive assistance with paying for child care with a provider of their choice if they are employed or participating in county-approved Welfare-to-Work activities.

The CalWORKs child care program is administered in three stages. CalWORKs Stage 1 is administered by each of California's 58 county welfare departments or their contractors. The program begins when a family starts receiving CalWORKs cash aid, and CalWORKs clients may be served in Stage 1 until the county determines that the family situation is stable or if no funds are available in Stage 2. Former CalWORKs clients are also eligible to receive child care services in Stage 1 and Stage 2 for a total of no more than 24 months after they stop receiving cash aid.

The CDE administers Stage 2 through contracts with APPs (described below). The APP agencies contract with the CDE to make payments to subsidized child care providers and to provide other related child care and development services. Stage 2 serves CalWORKs recipients whose situation has stabilized or families that are transitioning off of CalWORKs. Families that receive lump-sum diversion services may receive child care in Stage 2 if no funding is available in Stage 3. Families leave Stage 2 when they have been off of cash aid for 24 months.

The CDE also administers CalWORKs Stage 3. Stage 3 provides services for former CalWORKs families after they have been off of cash aid for 24 months and for families that receive lump-sum diversion services. A family remains in Stage 3 until their income exceeds 85 percent of the SMI or until the children are over the eligibility age (CDSS, n.d.-a).

Alternative Payment Program. The APPs are funded with state and federal funds and offer vouchers to help parents purchase their choice of child care arrangement, which may include licensed or license-exempt care. The APP is designed for low-income families that are not engaged in CalWORKs. Access is based on need and is determined on a first-come, first-served basis. The APP is intended to increase parental choice and accommodate the individual needs of families. A similar program, the Migrant APP, is available for migrant families as they move from place to place for agricultural work.

Transitional Kindergarten

Transitional Kindergarten is a state-supported program that serves children, including children with disabilities, who are 4 years of age and who turn five between September 2 and December 2 (inclusive). While serving children the same age as some children attending preschool, TK uses a modified kindergarten curriculum that is age- and developmentally appropriate. The TK curriculum is intended to align with the California Preschool Learning Foundations and the California Preschool Curriculum Frameworks developed by the CDE. If an elementary school or unified school district offers kindergarten, then they must also offer TK classes for all children who are eligible to attend. Children who complete the TK program are expected to continue in kindergarten the following year.

System-Level Initiatives to Improve Child Care Quality and Access

Quality Counts California is a statewide system of locally implemented quality rating and improvement systems (QRISs) that helps to connect parents and families to high-quality ELC programs and ensures that infants and toddlers and preschool-age children have quality early learning experiences in their communities. The QCC also provides resources and support to ELC providers so they can create nourishing and effective ELC programs that will help children grow and thrive. Within the QRIS Block Grants, the required consortium participants include at a minimum five entities: the local First 5 California agency, the local R&R programs, the LPCs (each of which is described below), the County Office of Education, and a local institution of higher education.

First 5 California, an independent state commission funded by tobacco taxes for child development and family strengthening issues, supports child care through its First 5 IMPACT (Improve and Maximize Programs So All Children Thrive) initiative. First 5 IMPACT is funded in all 58 counties as a partner in QCC. The program works with counties to support child care providers to achieve high-quality standards associated with improved child development and outcomes. First 5 IMPACT also seeks to actively engage families in the early learning process, thus increasing both the supply of and demand for high-quality child care.

Resource and referral programs provide information to parents and to the community at large about the availability of child care in their area. These state- and county-funded programs assist potential child care providers in the licensing process; provide direct services to child care providers, including training; and coordinate community resources for the benefit of parents and child care providers. These programs are available in all 58 California counties.

Local child care and development planning councils support the overall coordination of child care services in each of California's 58 counties. The LPCs are mandated to conduct assessments of county child care needs and to prepare plans to address identified needs. These assessments must contain information on the supply and demand for child care, including the need for both subsidized and unsubsidized care.

Focal Populations of the Grant

This section describes the demographic characteristics and geographic distribution of young children in the state of California and addresses the following questions from the federal guidance:

- *Who are the vulnerable or underserved children in your state? What are their characteristics in terms of race/ethnicity, recency of immigration, language spoken at home, poverty and low-income status, and concentration in certain cities or towns or neighborhoods?*
- *Who are the children who live in rural areas in your state? What are their characteristics in terms of race/ethnicity, recency of immigration, language spoken at home, poverty and low-income status? Are they concentrated in certain regions of the state or territory?*

Vulnerable and Underserved Children in California

Participants in the PDG process in California, including the Core Team and State Stewardship Team³, defined vulnerable children as those who meet the eligibility requirements for subsidized child care in the state (see exhibit 1). This means that the parents' income must be at or below 85 percent of the SMI and that the children must

³ The PDG State Stewardship Team was composed of representatives from all state agencies serving children.

have a qualifying need for care, such as having parents who are working or in school. (As of July 2019, 85 percent of the SMI threshold is \$80,623 for a family of four). In addition to understanding the number and characteristics of the children with family incomes below 85 percent of the SMI, California stakeholders were also interested in learning more about children living in deep poverty, defined by the US Census Bureau as living in a household with a total cash income below 50 percent of its federal poverty level (FPL) threshold (Ekono, Jiang, and Smith 2016). Lastly, the characteristics and circumstances of children from families with incomes below 40 percent of the SMI (the level at which families are exempt from family fees associated with most ELC programs) is examined. Exhibit 2 summarizes these three income thresholds for a family of four.

Exhibit 2. Income Thresholds for a Family of Four

Income threshold	Income for a family of four
Under 50% FPL	\$12,547
Under 40% SMI	\$37,940
Under 85% SMI	\$80,623

Source. CDE 2019f.

Approximately 2.4 million children under age five live in California. Almost 200,000 of these children (8 percent) live in deep poverty. More than 700,000 live in households earning less than 40 percent of the SMI. The majority of children under age five (58 percent) are in households earning less than 85 percent of the SMI and are thus income-eligible for state subsidized ELC programs. Approximately 1.4 million children under five fall into this last group (exhibit 3).

Exhibit 3. Estimated Number of Children by Age Cohort and by Income Level Statewide, One-Year Estimates, 2017

Age cohort	Number of children	Percentage of children living in households under 50% of the federal poverty level		Percentage of children living in households under 40% of the state median income		Percentage of children living in households under 85% of the state median income	
		Number of children	Percentage	Number of children	Percentage	Number of children	Percentage
<1 year	447,984	35,520	8%	128,228	29%	255,295	57%
1 year olds	478,843	40,921	9%	147,879	31%	278,182	58%

Age cohort	Number of children	Number of children living in households under 50% of the federal poverty level	Percentage of children living in households under 50% of the federal poverty level	Number of children living in households under 40% of the state median income	Percentage of children living in households under 40% of the state median income	Number of children living in households under 85% of the state median income	Percentage of children living in households under 85% of the state median income
2 year olds	503,456	41,410	8%	154,465	31%	297,387	59%
3 year olds	503,939	40,027	8%	148,117	29%	288,803	57%
4 year olds	515,686	34,391	7%	148,521	29%	293,839	57%
Total	2,449,908	192,269	8%	727,210	30%	1,413,506	58%

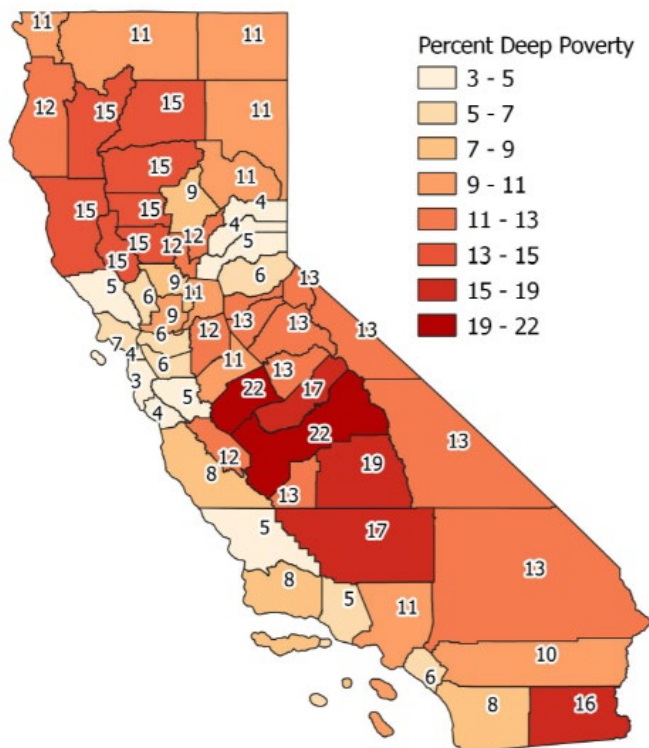
Source. California Department of Education 2019c; US Census Bureau, n.d.

Deep Poverty

Exhibit 4 shows the geographic distribution of children under age five living in deep poverty (that is, below 50 percent of the FPL). According to an analysis of five-year estimates from the American Community Survey (ACS), 36 of the 58 counties in California have more than 10 percent of young children living in deep poverty. The six counties with the largest percentage of children living in deep poverty are Fresno, Imperial, Madera, Merced, Kern, and Tulare, where 16–22 percent of children under age five live in deep poverty. Large parts of all of these counties are rural.

It is important to note that the FPL guidelines do not account for California’s relatively high regional cost of living, which may underestimate the number of children living in circumstances of deep poverty, especially in the higher cost parts of the state. If it were possible to consider the regional cost of living in California while calculating deep poverty estimates based on federal benchmarks, the estimated number of children under age five living in deep poverty would almost certainly be larger.

Exhibit 4. Map of the Average Percentage of Children Living in Households in Deep Poverty (Income at 50 Percent of Federal Poverty Level or Less), 2013–2017



This is a choropleth map of California’s 58 counties showing percentages of deep poverty in the state of California by county.

Source. Missouri Census Data Center n.d.; US Census Bureau 2017

Children Eligible for Subsidized Child Care

Estimates of the number of children under age five eligible for state- or federally subsidized services under current state regulations include those who are income-eligible and have a qualifying need for care, such as a parent who is working, in school, or looking for work. In addition, all children in foster care are automatically considered eligible. Because these eligibility requirements combine family income with other family characteristics (for example, employment status), the share of children who are eligible is lower than the share who are income-eligible. For example, while exhibit 5 shows 196,401 children who are four years of age meeting both the income eligibility requirements and the qualified need for care requirements, 288,802 four year olds meet the income-eligibility requirements alone, as indicated in exhibit 3. Given that upcoming state policy changes are set to eliminate work requirements and other “purpose of care” restrictions for some programs, the number and share of eligible children will likely increase. Moreover, the estimates presented here do not include homeless children, as the data source for these estimates is the ACS, which is a survey of households.

These conservative estimates, which include parental employment or Welfare-to-Work participation as a qualifying condition, find that approximately 37 percent of children under five (or approximately 900,000 children) are eligible for subsidized care, taking into account this qualifying need for care (exhibit 5). Using these definitions, the percentage of children eligible for subsidized care is slightly higher among older children, likely because more parents with older children are employed. Although 35 percent of infants (children younger than one) were eligible for subsidized care, 38 percent of four year olds were eligible. Exhibit 5 provides details of these estimates.

Exhibit 5. Estimated Number and Percentage of Children Eligible for Subsidized Care Statewide, by Age, 2017

Age cohort	Total number of children	Number of children eligible	Percentage of children eligible
<1 year	447,984	158,190	35%
1 year olds	478,843	164,534	34%
2 year olds	503,456	192,056	38%
3 year olds	503,939	184,816	37%
4 year olds	515,686	196,401	38%
Total	2,449,908	895,997	37%

Source. US Census Bureau 2017.

Children Who Are Vulnerable

In addition to identifying children in low-income households, the PDG Core Team (including the governor’s office, First 5 California, the California Health and Human Services Agency, and the CDSS, in addition to the CDE) and the State Stewardship Team also identified several other groups of vulnerable children in need of special care, support, or protection. This section describes the size and characteristics of these other populations of vulnerable children in the state and what is known about their needs and the services they received.

Children in Protective Services

Statewide, approximately 0.75 percent of children under age five were reported to have experienced a child welfare placement episode in 2017—that is, to be under some level of Child Protective Services (CPS) supervision during that year. Of the 18,610 children under age five in CPS in 2017, approximately two-thirds (67 percent) were infants and toddlers (younger than three) and one-third were three and four year olds (exhibit 6).

Exhibit 6. Number and Percentage of Children by Age Cohort in Child Protective Services Statewide, Point-in-Time Count, October 1, 2017

Age cohort	Number of children	Number of children in Child Protective Services	Percentage of children in Child Protective Services among all children ages 0–5 in CPS	Percentage of children in Child Protective Services for each age cohort
<1 year	447,984	4,236	23%	0.95%
1 year olds	478,843	4,472	24%	0.93%
2 year olds	503,456	3,701	20%	0.74%
3 year olds	503,939	3,309	18%	0.66%
4 year olds	515,686	2,892	16%	0.56%
Total	2,449,908	18,610	100%	0.76%

Note. The number of children in CPS is the point-in-time count (October 2017) of children in the child welfare system. It covers all children having an open placement episode in the Child Welfare Services/Case Management /System on October 1, 2017. The system has 15 placement types: Pre-Adopt, Relative/non-relative extended family members (NREFM), Foster, Foster Family Agencies (FFA), Court Specified, Group, Shelter, Non-Foster-Care (Non-FC), Guardian, Runaway, Trial Home Visit, Supervised Independent Living Placement, Transitional Housing, Other, and Missing.
Source. US Census Bureau 2017; Webster et al., n.d.

Children Experiencing Homelessness

An estimated 220,940 children under six years of age experienced homelessness in California in 2015, and nearly half of the children served by emergency/transitional housing providers funded by the Department of Housing and Urban Development in 2015 were age five or younger (US Department of Health and Human Services, 2017). Adjusting for the fact that these estimates include six year olds, a conservative estimate of the proportion of children under five who experience homelessness in California in a given year is 7.5 percent.

Some information is also available on the number of children experiencing homelessness who are served through federal education programs. In the 2016–17 school year, a total of 15,895 children experiencing homelessness under age five were served by federally funded education programs, including McKinney-Vento, Head Start, and Early Head Start (exhibit 7). Therefore, it is estimated that approximately 9 percent of children in California experiencing homelessness are served by these programs.

Exhibit 7. Number and Percentage of Children Under Age Five Experiencing Homelessness Who Were Served by Federally Funded Education Programs Statewide, by Program, for 2016–17 School Year

Number of children under age 5	Estimated number of children under age 5 experiencing homelessness	Number of children experiencing homelessness served by McKinney-Vento subgrants	Number of children experiencing homelessness served by Early Head Start	Number of children experiencing homelessness served by Head Start	Total number of children experiencing homelessness served by federally funded education programs	Estimated percentage of children experiencing homelessness served by federally funded education programs
2,449,908	183,743	12,082	1,652	2,161	15,895	9%

Note. Children experiencing homelessness served by McKinney-Vento subgrants include both children enrolled in public schools in LEAs receiving McKinney-Vento funds and children who receive indirect services through McKinney-Vento subgrants. Early Head Start and Head Start programs include the Migrant Early Head Start, Migrant Head Start, American Indian/Alaska Native (AIAN) Early Head Start, and AIAN Head Start programs.

Source. US Census Bureau 2017; US Department of Education, n.d.-c.; US Department of Health and Human Services 2018.

Children with Disabilities

In 2017, a total of 99,567 children under age five with an IFSP or an IEP were served by either the DDS or the CDE, representing approximately 4 percent of children under age five (exhibit 8).

Exhibit 8. Number and Percentage of Children With an Individual Family Service Plan or Individualized Education Plan by Age Group Statewide, 2017

n/a Not applicable

Age cohort	Number of children	Number of children with an Individual Family Service Plan served by California Department of Developmental Services*	Number of children with an Individual Family Service Plan served by California Department of Education	Total number of children with an Individual Family Service Plan	Percentage of children with an Individual Family Service Plan	Number of children with an Individualized Education Plan served by California Department of Education	Percentage of children with an Individualized Education Plan
<1 year	447,984	4,861	953	5,814	1.20	n/a	n/a
1 year olds	478,843	14,045	2,150	16,195	3.11	n/a	n/a
2 year olds	503,456	24,778	3,256	28,034	5.85	n/a	n/a
3 year olds	503,939	n/a	n/a	n/a	n/a	21,384	4.24
4 year olds	515,686	n/a	n/a	n/a	n/a	28,140	5.46
Total	2,449,908	43,864	6,359	50,043	3.49	49,524	4.86

*Data received by the California Department of Developmental Services (DDS) includes children served by the DDS and children served by both the CDE and the DDS. Data was pulled on December 1, 2017.

Note. The number of children with IEPs is estimated from the percentages of children served under Part B of the Individuals with Disabilities Education Act (IDEA) and the population estimates provided by the US Department of Education. The percentage of children receiving early intervention services under IDEA have been adjusted here to account for the differences in the population estimates between ACS 2017 data and 2017 State Population Estimates

data. The numbers of children with IFSPs served by the CDE also include children dually served by the DDS and CDE. Therefore, the total number of children with an IFSP is likely to be an overestimation.

Source. CDE 2019i (Special Education Division, Special Education Enrollment by Age and Grade, Cohort 0-4 years old Statewide Report. Reporting Cycle: December 1, 2017,

<https://data1.cde.ca.gov/dataquest/SpecEd/SpecEd1c.asp?cChoice=SpecEd1c&cYear=2017-18&clevel=State&ReptCycle=December>); US Census Bureau 2017; US Dept. of Education, n.d.-b (EDFacts Metadata

and Process System [EMAPS], Children and students ages 3 through 21 served under IDEA, Part B, as a percentage of population, by age and state, reporting cycle: 2017-18 school year, data extracted as of July 11, 2018,

<https://www2.ed.gov/programs/osepidea/618-data/static-tables/index.html>; California Department of Developmental Services, data provided to AIR on August 9, 2019.

Dual Language Learners

DLLs compose 60 percent of the young child population (ages zero to eight) in California. The growth in California's DLL population has leveled off since 2000. During the past 18 years, California experienced 6 percent growth in its DLL population, compared with a 24 percent increase nationally (on a lower initial base). Approximately 1.5 million DLLs ages birth to five live in California; of these, 865,000 are zero to two year olds, and 634,000 are three and four year olds. These represent 62.5 percent of all zero to two year olds in the state. DLLs in California are more likely to live in low-income families than non-DLL children (Park, O'Toole, and Katsiaficas. 2017). More than a third of the children entering kindergarten are DLLs (Stipek and Pizzo 2019).

Children with Working Parents and Children Needing Care during Nontraditional Hours

An estimated 62 percent of children ages birth to five (1.5 million children) are in families with parents in the workforce, and most are in need of child care. The percentage of children with working parents increases as children age. For example, 65 percent of four year olds need child care, as compared with 56 percent of infants (children younger than one). The percentage of children ages birth to five whose parents work is similar across income levels.

Of children with working parents, approximately 10 percent have a need for care during nontraditional working hours (evenings, overnight shifts, or on weekends). In this analysis, children were considered to have a need for care during nontraditional working hours under the following conditions: (1) a child has two working parents who both work nontraditional hours or (2) a child lives in a single-parent household and the single parent works nontraditional hours. The percentage of children ages birth to five who have working parents and have a need for care during nontraditional working hours is similar across income levels (exhibits 9, 10, and 11).

Exhibit 9. Estimated Number and Percentage of Children by Age Cohort With Working Parents and Needing Care During Nontraditional Working Hours Statewide, Year Estimates 2017

Age groups	Number of children	Number of children with working parents	Percentage of children with working parents	Number of children who need care during nontraditional hours	Percentage of all children with working parents who need care during nontraditional hours
<1 year	447,984	251,320	56	21,273	8
1 year olds	478,843	286,226	60	28,609	10
2 year olds	503,456	319,248	63	31,048	10
3 year olds	503,939	314,841	62	30,776	10
4 year olds	515,686	335,672	65	35,284	11
Total	2,449,908	1,507,307	62	146,990	10

Source. US Census Bureau 2017.

Exhibit 10. Estimated Number of Children in Families with Incomes Under 40 Percent of the State Median Income by Age Cohort by Number and Percentage With Working Parents and Needing Care During Nontraditional Working Hours Statewide, One-Year Estimates, 2017

Age groups	Number of children with working parents	Number of children in families under 40% State Median Income	Number of children in families under 40% State Median Income with working parents	Percentage of children in families under 40% State Median Income with working parents	Number of children in families under 40% State Median Income who need care during nontraditional hours	Percentage of all children in families under 40% State Median Income with working parents and in need of care during nontraditional hours
<1 year	251,320	162,012	85,940	53	9,546	11
1 year olds	286,226	185,029	108,560	59	10,681	10
2 year olds	319,248	194,202	125,336	65	11,150	9
3 year olds	314,841	194,759	123,850	64	11,823	10
4 year olds	335,672	189,819	127,565	67	13,114	10
Total	1,507,307	925,821	571,251	62	56,314	10

Source. US Census Bureau 2017.

Exhibit 11. Estimated Number of Children in Families Under 85 Percent of the State Median Income by Age Cohort by Number and Percentage With Working Parents and Needing Care During Nontraditional Working Hours Statewide, One-Year Estimates, 2017

Age groups	Number of children with working parents	Number of children in families under 85% State Median Income	Number of children in families under 85% State Median Income with working parents	Percentage of children in families under 85% State Median Income with working parents	Number of children in families under 85% State Median Income who need care during nontraditional hours given parent work schedules	Percentage of all children in families under 85% State Median Income with working parents and in need of care during nontraditional hours given parent work schedules
<1 year	251,320	276,566	151,975	60	15,961	11
1 year olds	286,226	301,366	173,831	61	19,719	11
2 year olds	319,248	322,029	199,895	63	21,100	11
3 year olds	314,841	314,681	192,612	61	20,662	11
4 year olds	335,672	316,889	205,928	61	24,940	12
Total	1,507,307	1,531,531	924,241	61	102,382	11

Source. US Census Bureau 2017.

Children in Rural Areas

An estimated 784,557 children under age five live in rural areas in California, accounting for approximately 32 percent of all children under age five. An estimated 54 percent of children under age five in rural areas are Hispanic, similar to children statewide. However, a slightly larger percentage of children under age five living in rural areas are white (30 percent) in comparison to children under five statewide (26 percent). Children in rural areas are also somewhat more likely to live in low-income families. In addition, a slightly larger percentage of children under age five living in rural areas are estimated to be eligible for subsidized child care (39 percent) and living in households under 85 percent of the SMI (62 percent) in comparison to children under age five statewide (37 percent and 58 percent, respectively) (exhibit 12).

Exhibit 12a. Total Number and Percentage of Children Under Age Five Living in Rural Areas, Statewide, One-Year Estimates, 2017

Characteristics	All children under age 5	Percentage of all children under age 5	Children under age 5 living in rural areas	Percentage of children under age 5 living in rural areas
All children	2,449,563	100%	784,557	32%

Exhibit 12b. Number and Percentage of Children Under Age Five Living in Rural Areas by Race/ethnicity, Statewide, One-Year Estimates, 2017

Rounds to zero.

Characteristics	All children under age 5	Percentage of all children under age 5	Children under age 5 living in rural areas	Percentage of children under age 5 living in rural areas
White, non-Hispanic	630,201	26%	236,276	30%
Black or African American	114,225	5%	25,600	3%
Asian	226,408	9%	39,875	5%
Hispanic	1,270,446	52%	425,991	54%
Filipino	37,042	1%	7,602	1%
American Indian	9,175	#	5,996	1%
More than one race	148,142	6%	40,182	5%

Characteristics	All children under age 5	Percentage of all children under age 5	Children under age 5 living in rural areas	Percentage of children under age 5 living in rural areas
Other	13,924	#	3,035	#

Exhibit 12c. Number and Percentage of Children Under Age Five Living in Rural Areas by Eligibility, Statewide, One-Year Estimates, 2017

Characteristics	All children under age 5	Percentage of all children under age 5	Children under age 5 living in rural areas	Percentage of children under age 5 living in rural areas
Under 85% SMI	1,413,269	58%	486,685	62%
Eligible for subsidized child care	895,856	37%	308,412	39%

Source. Missouri Census Data Center n.d.; US Census Bureau 2017.

Quality and Availability of Early Learning and Care

This section describes issues related to the quality and availability of ELC in California. Specifically, it includes a description of the strengths and weaknesses of the state’s (1) ELC availability and access, (2) ELC quality, (3) ELC workforce, and (4) parent engagement initiatives. As in previous sections, this section lists the federal guidance questions that are addressed by each section of the PDG Needs Assessment. Sources of information include a review of existing needs assessments; interviews with state, tribal, and local stakeholders; and an analysis of extant data related to the birth to age five population and enrollment in ELC services.

Early Learning and Care Availability and Access

This section addresses the following federal PDG Needs Assessment questions:

- *What would you describe as your current strengths in making care available across populations and settings?*
- *What would you describe as key gaps in availability?*

Availability and Access: Strengths

In recent years, the preschool supply for four year old children has substantially expanded in California.

The growing supply of preschool slots is a major strength of the ELC system in California. When asked to identify the strengths of their county-level ELC systems, representatives from LPCs and R&R agencies across rural and urban counties emphasized the progress made in recent years in expanding access to care for four year old children. An estimated 65 percent of all four year olds are enrolled in licensed center-based care or license-exempt TK, and an estimated 69 percent of income-eligible four year olds are in some form of state-supported preschool or TK. Note that, as discussed later, estimates of subsidized enrollment may include some children more than once (Manship, Jacobson, & Fuller, 2018). In addition, providing an unduplicated count of the number (and percentage) of children served is one of the primary objectives of the ongoing data collection activities, whose results will be discussed in a later report. Access for three year olds also has expanded, but only an estimated 34 percent of subsidy-eligible children in this age group are currently served (Manship, Jacobson, and Fuller 2018).

Much of the recent increase in four year old enrollment has occurred because of the creation of TK in 2010, which now serves almost 90,000 children. This TK enrollment represents the vast majority of age-eligible children in the state. TK is the first year of what is in effect a two-year kindergarten program. The program is open to any child, regardless of family income, as long as the child meets the age requirements, which are to be at least four years and nine months of age and not to turn age five until after December 1. Some school districts have established Early TK programs that allow younger four year olds (those with birthdays between December 2 and the end of the school year) to enroll. TK has no family fee and does not require parents to fill out extensive enrollment forms, but it does carry the stigma of “disadvantage” associated with many publicly supported ELC programs. Moreover, TK promises a seamless transition into kindergarten, which makes it an attractive option even for parents who are satisfied with their other preschool options and can afford them. At the same time, many TK programs are half-day programs despite the fact that most parents work full-time, and therefore they are not a substitute for child care. Furthermore, concerns have been raised regarding developmentally appropriate practices in TK, including a concern that pupil-teacher ratios are much higher than those recommended for four year olds.

The income eligibility threshold for subsidized child care in California is the highest allowed by federal funds, and parent fees have been reduced for most programs.

California is one of the few states where income eligibility for federally subsidized care extends to 85 percent of the SMI, which is the highest eligibility level allowed for the use of federal funds (US Government Accountability Office 2016). Raising the eligibility threshold to this level was recommended by researchers and advocates following successful pilot programs in several counties (Hahn, Rohacek, and Isaacs 2018). Having a relatively high income-eligibility threshold is especially important in a high-cost state like California, where licensed child care may otherwise not be affordable for working families.

In addition to raising the income limit for subsidized care eligibility, California also reduced the parent fee for subsidized child care, basically cutting it in half (Schulman and Blank 2017). As of the 2018–19 fee schedule, families enrolled in subsidized ELC who have incomes below 40 percent of the SMI pay no fee for subsidized child care, and families at 85 percent of the SMI pay up to approximately 9 percent of their income (CDE 2018b).

Eligibility for subsidized early learning and care through the California Work Opportunity and Responsibility to Kids program has been extended to 12 months.

In 2017, legislation was enacted to provide 12 months of continuous eligibility for CalWORKs Stage 2 and Stage 3 child care administered by the CDE, along with the other CDE-run ELC programs. The 2019–20 budget provides \$56.4 million to implement a 12-month eligibility period for CalWORKs Stage 1 recipients, who had previously been excluded from this benefit (California Budget and Policy Center 2019a). This extension of eligibility to CalWORKs Stage 1 participants is important because previously, families were unable to maintain stable licensed care arrangements when they had such a short or sporadic authorization for child care.

The state has a mixed-delivery system that allows families to choose between formal and informal subsidized arrangements.

When asked to describe the strengths of access to ELC in California, local ELC stakeholders emphasized the value of the state’s ELC mixed-delivery systems for meeting parents’ needs. County stakeholders described increased capacity across multiple settings, including State Preschool, Head Start, TK, and investments by First 5 County Commissions. This sentiment was echoed by a CDSS state official, who noted in a stakeholder interview that some of the strengths of ELC programming in California are related to the parental choice component of the system.

There are abilities for families to choose from a very large variety of settings, including relative caregivers, FFNs and so forth. I think that there has been quite a bit of investment, particularly over the last decade or so plus in a variety of quality improvement initiatives, everything from workforce development initiatives to facilities development initiatives, professional development resources and so on, so, the opportunities to engage in training and formal education have significantly increased over the past several years, with some incentive tied to it, which I think makes a huge difference.

States and tribal nations have made strides to strengthen partnerships and improve access to early learning and care for tribal children.

The tribal Child Care and Development Fund (CCDF), a federal block grant for states, tribes, and territories, reaches 80 percent of the federally recognized tribes in California (California Assembly Blue Ribbon Commission on Early Childhood Education [California Assembly Blue Ribbon Commission] 2019). In November 2018, the TCCAC, in partnership with the CDE, received a grant to implement Project HOPE (Harnessing Opportunity for Positive Equitable Early Childhood Development). Project HOPE is designed to strengthen the partnership between the state and tribal governments to engage and work with tribes to support ELC. The work will include a tribal–state strategic

plan, the development of a CDE and tribal consultation structure, and identification strategies to promote community engagement for tribal communities. This work builds on a 2017 memorandum of understanding between TCCAC and the CDE to create opportunities for the CDE, the CDSS, and the federal Office of Child Care to engage with tribes on ELC issues. Finally, the 2019 California Assembly Blue Ribbon Commission report includes a set of recommendations that emphasize funding set-asides for tribal communities, improved access to provider training and supports in remote tribal communities, and other strategies to strengthen ELC for tribal children.

New slots are being created through new or additional licenses.

According to reports from a total of 40 counties through the LPC survey, a total of 23 counties (58 percent) indicated that, since August 2018, new centers obtained first-time licenses in their county. In addition, according to reports from a total of 38 counties, 18 counties (47 percent) added new licenses to existing centers during the same timeframe (exhibit 13).

Exhibit 13. Counties That Obtained First-Time or Additional Licenses

First-Time or Additional Licenses	Counties reporting	Counties that obtained initial or additional license	Percentage
Obtained an initial license in your county since August 2018	40	23	58%
Added an additional license in your county since August 2018	38	18	47%

Source. Local Planning Council Coordinator Survey, 2019.

In the counties that reported adding new centers (23) or obtaining new licenses for existing centers (18), the expectation is that they will be serving more preschool-age children than infants and toddlers. Los Angeles County alone expects to add a total of 454 infant and toddler slots and 7,116 preschool-age slots by 2020 because of new centers opening. Exhibit 14 provides the number of additional children served because of new centers or licenses in the state and gives the county averages, based on reports from 36 counties.

Exhibit 14. Number of Additional Slots Because of New Centers or New Licenses by 2020

Additional slots because of new centers or licenses	Number of counties that reported additional slots	State total additional slots	County average additional slots	Range of additional slots	Median number of additional slots
Number of additional children under age 3 that new centers anticipate serving by 2020	15	1,519	101	2–555	24
Number of additional children ages 3–5 years that new centers anticipate serving by 2020	19	10,031	528	24–7,116	88
Number of additional children under age 3 that centers anticipate serving because of new license by 2020	12	213	18	2–55	15
Number of additional children ages 3–5 years that centers anticipate serving because of new license by 2020	9	646	72	22–214	54

Note. A total of 36 LPC coordinators responded to at least one of these items on the survey. Not all these counties had full information or were able to respond to all items. *Source.* Local Planning Council Coordinator Survey, 2019.

Availability and Access: Gaps

Although California has made great strides in expanding access to ELC services, large disparities in access remain. These gaps are driven by unavailability of slots, programs that do not meet parent needs, barriers that keep families from enrolling, and lack of parent interest in or knowledge of the programs. Gaps are seen by race and ethnicity, for infants and toddlers and three year old children compared with preschoolers, and for children with developmental delays or disabilities. Underenrollment also results from barriers such as program hours and locations that do not meet parents’ needs and some parents’ distrust of institutions. Notable differences exist by region. For example, several counties in the Central Valley experience a double-edged disparity. These counties have few existing programs and a steadily growing population (Manship, Jacobson, and Fuller. 2018). Given available data, it is estimated that more than 60 percent of children in California live in “child care deserts,” defined as areas with a ratio of more than three young children for every licensed slot in both centers and FCCHs (Malik et al. 2018).

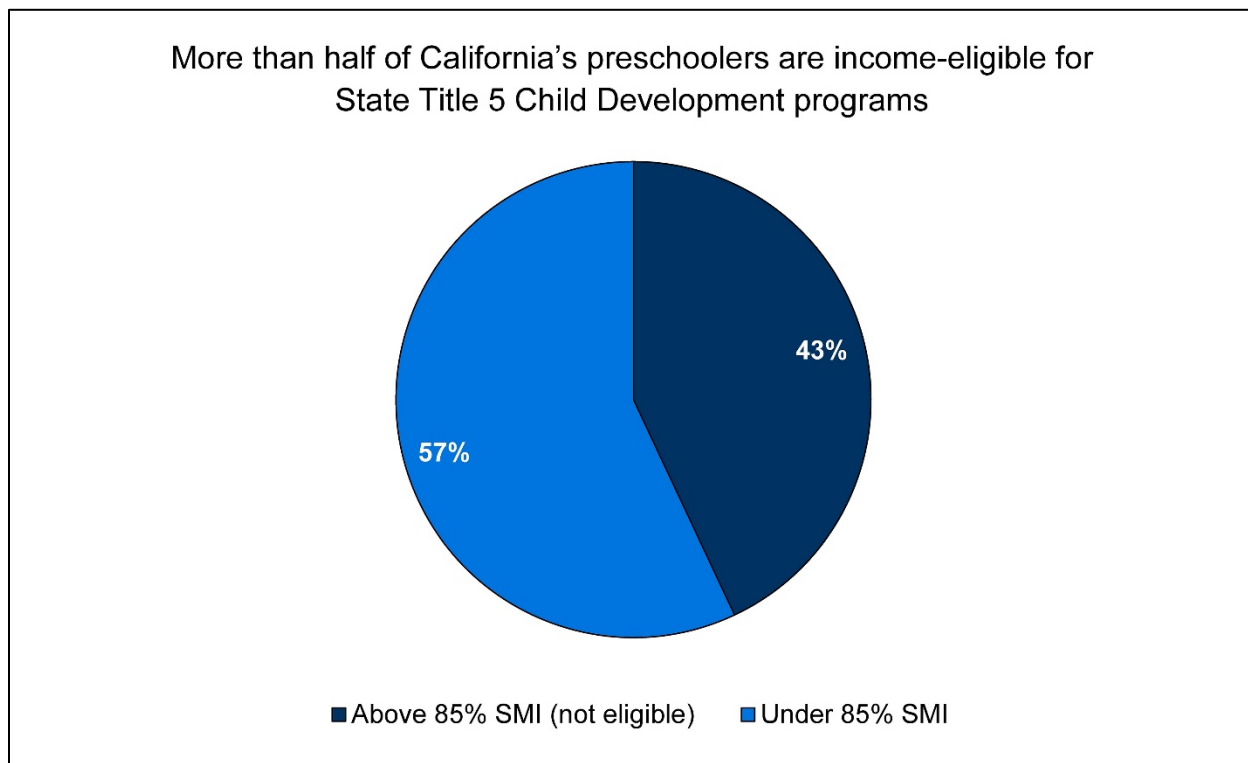
Unmet Need: How Many Children Are Eligible and Enrolled?

In order to estimate the number of children who are eligible and enrolled in publicly supported ELC programs in California, AIR used data from the ACS, the CDE, the Head Start Program Information Report (PIR) (US Department of Health and Human Services 2018), and the CCR&RN to compare the number of children enrolled in publicly supported ELC programs with the estimated number of children eligible, by age. More than half of California's children under age five are income-eligible for state Title 5 programs (exhibit 15).

The estimate of unmet need for state and federally subsidized ELC for preschool-age children takes into account Governor Newsom's goal of ensuring access to quality preschool for all children in this age group, beginning with those who are most income disadvantaged. While fully acknowledging that families rely on these programs to supervise their children while the parents work, the primary purpose of the preschool program—especially in a state where more than 60 percent of children are DLLs—is to promote school readiness. The estimate of the population of eligible children thus includes the larger numbers of income-eligible three and four year olds (288,802 three year olds and 293,839 four year olds), instead of the lower numbers in exhibit 5, which include the additional requirement of having a qualifying need for care.

Because the primary purpose of state and federally subsidized ELC for preschool-age children is to promote school readiness, exhibit 16 estimates the unmet need based on enrollment in programs that are held to standards designed to promote child development or school readiness, including those that meet California's Title 5 child development standards or the federal Head Start Performance Standards. In addition, the TK program, which employs credentialed teachers, was included. However, California also has two other publicly subsidized ELC programs: CalWORKs and APP. Although these programs are essential for providing child care that considers parents' work schedules, they are not required to meet standards to promote child development or school readiness. Rather, the CalWORKs and APP programs are, at most, required to meet the less rigorous Title 22 licensing standards, and some children served by these programs are in license-exempt FFN care (appendix C shows the standards for each program). In the sections that follow, only enrollment in the licensed or license-exempt programs designed to promote school readiness are examined. These include: the CSPP, other Title 5 programs, TK, and Head Start. However, for comparison purposes, exhibit 16 includes estimates of unmet need that consider enrollment in all publicly supported programs for preschool-age children.

Exhibit 15. Preschooler Eligibility for State Title 5 Child Development Programs



Preschoolers

As of 2017, an estimated 582,642 of California’s three and four year olds were income-eligible for the State Preschool Program and other Title 5 programs. More specifically, approximately 288,803 three year olds and 293,839 four year olds met the income eligibility requirements, which require that families earn less than 85 percent of the SMI, which was \$80,623 for a family of four in 2019. Although this figure represents 57 percent of all three and four year olds in the state, it may underestimate all children who are eligible because this figure does not include the population of children who are eligible regardless of income, such as children with special needs or those involved in the CPS system. We examined how many of these income-eligible children are enrolled in a subsidized program and how many do not receive the services for which they are eligible. The estimate of unmet need also assumes that 100 percent of preschool-age children would participate; therefore, the estimate may overestimate the number of children that actually need services.

Transitional Kindergarten

A total of 88,934 children were enrolled in TK on attendance day in the 2017–18 school year. Reliable data (for example, family income data on children enrolled in TK) is not available to estimate the proportion of children in the TK program who are also income-eligible for the State Preschool Program. However, given that in 2017, approximately 57 percent of four year olds were in households that were income-eligible for State Preschool (85 percent of the SMI) and that the study of TK conducted by AIR found that demographics in TK and kindergarten were not significantly different, and given that they

were not significantly different from the general population of four and five year olds (Manship et al. 2017), this percentage was applied to estimate the number of children enrolled in TK in 2017 that were income-eligible for State Preschool. Approximately 50,675 children of the 88,934 children enrolled in TK were from families earning under 85 percent of the SMI.

Dual Enrollment

One factor that may lead to an underestimate of unmet need for the CSPP is children's dual enrollment—that is, the extent to which children simultaneously enroll in more than one publicly supported program. However, it should be noted that in order to support a full day or year of care for children of working parents or to provide more comprehensive services, agencies sometimes combine federal and state funding sources in a single program. In such cases, services for a single child may be supported by more than one funding source. In other words, the dual enrollment does not result in duplicative services but in a longer day or year of service.

However, because neither California nor the federal government assigns unique child identification numbers to young children enrolled in publicly subsidized programs, the magnitude of dual enrollment is difficult to estimate. Some information on the extent of dual enrollment was obtained from the CSPP and Head Start. An analysis from the Public Policy Institute of California found that 44 percent of Head Start sites share an address with a CSPP site (Danielson and Thorman 2019). Additionally, based on information collected from Head Start California, during the 2016–17 program year, 32,763 children of the total 101,958 children enrolled in Head Start or Early Head Start received combination funding—that is, these children were enrolled in Head Start or Early Head Start and also received funding from the State Preschool Program, Title 5 center-based child care, or the Migrant Child Care Program. An estimated 32 percent of all children enrolled in Head Start or Early Head Start received combination funding and 68 percent received funding from Head Start only. Therefore, in estimates of unmet need, only the 68 percent of children who received funding only from Head Start or Early Head Start were included. Information on dual enrollment between other programs, such as between CSPP and APP, is not available.

To estimate unmet need, the difference between the estimated number of children who were income-eligible for Title 5 programs (85 percent of the SMI) and the actual number of children who were enrolled in the State Preschool Program, other Title 5 programs, TK, or Head Start was calculated. As shown in exhibit 16, an estimated 341,957 (59 percent) of income-eligible three and four year olds were not served by Title 5 programs, TK, or Head Start in 2017. Overall, the state serves more four year olds than three year olds. For example, only 42 percent of income-eligible four year olds are not served in a publicly supported program that has quality standards, in comparison with 75 percent of three year olds.

Exhibit 16. Estimated Eligibility, Enrollment, and Unmet Need Among California's Three and Four Year Olds

Row	Number of children ^a	3 year olds	4 year olds	Total
A	Total children	503,939	515,686	1,019,625
B	Number of children who were income-eligible for subsidized ELC (85% SMI)	288,803	293,839	582,642
C	Percentage of children who were income-eligible for subsidized ELC	57%	57%	57%

Row	Number of children enrolled by program type ^{b,c,d,e}	3 year olds	4 year olds	Total
D	Title 5 California State Preschool Program ^f	46,691	89,153	135,844
E	Title 5 Migrant Child Care Program	510	466	976
F	Title 5 center-based child care	2,234	759	2,993
G	Title 5 Family Child Care Home Network	498	369	867
H	Head Start (2016–17)	30,999	41,545	72,544
H(a)	Received Head Start funding only ^g	21,079	28,251	49,330
I	Transitional Kindergarten (2017–18)	N/A	88,934	88,934
I(a)	Estimated TK students under 85% SMI ^h	N/A	50,675	50,675
J	CalWORKs Stage 1 ⁱ	4,971	4,971	9,942
K	CalWORKs Stage 2	6,638	6,163	12,801
L	CalWORKs Stage 3	2,796	3,538	6,334
M	Alternative Payment Program	3,485	3,283	6,668
N	Total enrollment in publicly supported programs (D+E+F+G+Ha+Ia+J+K+L+M)	88,902	187,627	276,530
O	Total enrollment in publicly supported programs, excluding TK (D+E+F+G+Ha+J+K+L+M)	88,902	136,953	225,855
P	Total enrollment in publicly supported programs required to meet some quality standards (D+E+F+G+Ha+Ia)	71,012	169,672	240,685

Row	Unmet need based on eligibility for different program types	3 year olds	4 year olds	Total
Q	Unmet need in publicly supported programs	199,901 (69%)	106,212 (36%)	306,112 (53%)

Row	Unmet need based on eligibility for different program types	3 year olds	4 year olds	Total
R	Unmet need in publicly supported programs, excluding TK	199,901 (69%)	156,886 (53%)	356,787 (61%)
S	Unmet need in publicly supported programs that have quality standards	217,791 (75%)	124,167 (42%)	341,957 (59%)

^a US Census Bureau 2017.

^b CD-801A Monthly Report, October 2017, California Department of Education.

^c The American Institutes for Research’s survey of all Early Head Start and Head Start grantees, including Migrant and American Indian and Alaska Native grantees. Enrollment in all program options for children is included. Enrollment in programs for pregnant women is excluded. Respondents reported enrollment for children in Early Head Start or Head Start in total and were not asked to specify those enrolled in Early Head Start, Head Start, or other specific programs alone. Enrollment for October 2016 was collected by age and ZIP code of child’s residence.

^d CDE n.d.-f.

^e CDSS 2017.

^f Includes enrollment in both full-day and part-day California State Preschool Program.

^g Thirty-two percent of Head Start enrollment was excluded to avoid double counting students who received funding combinations from more than one program and were already counted in other programs in this exhibit. The combination funding percentage estimate is based on the total number of children enrolled in Early Head Start and Head Start who received combination funding in State Preschool, center-based child care, or the Migrant Child Care Program and the total funded enrollment in the 2016–17 school year reported by Head Start California. In the 2016–17 school year, 32,763 children received combination funding, and a total of 101,958 children were enrolled in Early Head Start or Head Start. Therefore, an estimated 32% (32,763/101,958) of all children enrolled received combination funding and 68% received funding from Head Start only.

^h US Census Bureau 2017. In 2017, 57% of four year olds were in families under 85% SMI.

ⁱ During October 2017, 19,886 children ages two to five in Stage 1 received child care. An estimated one-fourth of these children were in each age cohort between ages two and five.

The California Department of Finance and the Legislative Analyst’s Office (LAO) both completed independent estimates of unmet need for four year olds (2019b). Using a participation rate assumption of 85 percent, the Department of Finance’s analysis estimates that approximately 30,000 four year olds are income-eligible for state programs but they are unserved in any subsidized care. The LAO’s analysis estimates an unmet need of approximately 27,000 for four year olds. Applying an 85 percent assumed participation rate to the unmet need estimates presented in exhibit 16 yields an estimate of just under 62,000 unserved. Differences in these estimates result from different assumptions, such as assumptions about the number of children served in TK and Early

TK programs who are income-eligible for state programs, different figures for the number of children enrolled in CSPP, and the extent of dual enrollment in Head Start and the CSPP. (For the latter, the estimate in exhibit 16 used data collected and provided by Head Start California.)

Infants and Toddlers

In contrast to the estimate for preschool-age children, the unmet need estimate for subsidized ELC for infants and toddlers (children younger than three years old) is based on: (1) income eligibility (for example, family income less than 85 percent of the SMI) and (2) a qualifying need for care, such as a parent who works, is in school, is looking for work, or is incapacitated. In addition, all children in foster care are automatically considered to be eligible. The rationale for the different approach to eligibility for infants and toddlers is as follows: While at least two-thirds of four year old children in the state of California attend some type of ELC program, only 12 percent of children under age three attend a licensed program (Manship, Jacobson, and Fuller 2018). Infant and toddler participation in formal, licensed ELC is the exception, not the rule. Thus, for children under the age of three, the estimate of unmet need is based on the Title 5 child development program income eligibility and qualifying “need for care” requirements. Other subsidized programs may have slightly different eligibility requirements, as noted above. This method likely underestimates the number of children who are eligible for subsidized care for three reasons. First, the method does not include children experiencing homelessness (who are also eligible but not counted in the American Community Survey sample). Second, not all subsidized programs require that parents have a “need for care.” Third, for some subsidized programs, children with special needs are eligible regardless of income. However, families with infants and toddlers often prefer to take exclusive care of their young children, and so it is likely that even if the state had space available for all eligible infants and toddlers, not all of these eligible families would elect to have their children participate. Therefore, it should be acknowledged that, although this estimate of eligible infants and toddlers might be an underestimate, it also assumes that 100 percent of eligible infants and toddlers would participate. Therefore, it might overestimate the number of children that actually need services.

As of 2017, an estimated 514,780 (36 percent) of infants and toddlers in California were eligible for subsidized care. More specifically, approximately 158,190 infants (children younger than one), 164,534 one year olds, and 192,056 two year olds were eligible for subsidized care.

In that same year, a total of 62,893 infants and toddlers were enrolled in a publicly supported program (for example, Title 5 programs, Head Start or Early Head Start, CalWORKs, or APP). However, only 28,795 infants and toddlers were enrolled in a publicly supported program with quality standards (for example, Title 5 programs, Head Start, or Early Head Start).

To estimate unmet need, the difference between the estimated number of children eligible for subsidized care and the actual number enrolled in all publicly supported programs was calculated. As shown in exhibit 17, an estimated 451,887 (88 percent) of eligible infants and toddlers were not served by a publicly supported program. The unmet need for infants

(93 percent) is greater than the unmet need for one or two year olds (88 percent, and 83 percent, respectively); however, the need for additional slots is substantial for all children under three.

In one stakeholder interview, a representative from a large multicounty provider of ELC services in an urban and suburban area reflected on the shortage of infant and toddler programs. The representative noted that,

There’s a gigantic, massive demand for infant toddler care, and we’re just not meeting the need. There are so many families with so many children who need care and can’t get care. And even for families who have the means to afford care, it can be a struggle to find good quality care. Access and quality is definitely an issue for all age groups, but I think it’s especially a crisis for zero to three.

Exhibit 17. Estimated Eligibility, Enrollment, and Unmet Need Among California’s Infants and Toddlers

Row	Number of children ^a	<1 year old	1 year olds	2 year olds	Total
A	Total children	447,984	478,843	503,456	1,430,283
B	Number of income-eligible children with qualifying need for care	158,190	164,534	192,056	514,780
C	Percentage of income-eligible children with qualifying need for care	35%	34%	38%	36%

Row	Number of children enrolled by program type ^{b,c,d}	<1 year old	1 year olds	2 year olds	Total
D	Title 5 California State Preschool Program ^e	0	0	174	174
E	Title 5 Migrant Child Care Program	101	292	392	785
F	Title 5 center-based child care	1,524	3,790	8,648	13,962
G	Title 5 Family Child Care Home Network	161	428	617	1,206
H	Early Head Start (2016–17)	3,445	5,811	9,373	18,629
H(a)	Received Early Head Start funding only ^f	2,343	3,952	6,374	12,668
I	CalWORKs Stage 1 ^g	3,770	3,770	4,971	12,511
J	CalWORKs Stage 2	1,705	4,072	5,906	11,683
K	CalWORKs Stage 3	826	1,263	1,735	3,824
L	Alternative Payment Program	792	2,069	3,219	6,080
M	Total enrollment in publicly supported programs (D+E+F+G+H+I+J+K+L)	11,222	19,636	32,036	62,893

Row	Number of children enrolled by program type ^{b,c,d}	<1 year old	1 year olds	2 year olds	Total
N	Total enrollment in publicly supported programs required to meet some quality standards (D+E+F+G+Ha)	4,129	8,462	16,205	28,795

Row	Unmet need based on eligibility for subsidized care (income-eligible + need for care)	<1 year old	1 year olds	2 year olds	Total
O	Unmet need in publicly supported programs	146,968 (93%)	144,899 (88%)	160,020 (83%)	451,887 (88%)
P	Unmet need in publicly supported programs that have quality standards	154,061 (97%)	156,073 (95%)	175,851 (92%)	485,985 (94%)

^a US Census Bureau 2017.

^b CD-801A Monthly Report, October 2017, California Department of Education.

^c The American Institutes for Research’s survey of all Early Head Start and Head Start grantees, including Migrant and American Indian and Alaska Native grantees. Enrollment in all program options for children is included. Enrollment in programs for pregnant women is excluded. Respondents reported enrollment for children in Early Head Start or Head Start in total and were not asked to specify those enrolled in Early Head Start, Head Start, or other specific programs separately. Enrollment for October 2016 was collected by age and ZIP code of the child’s residence.

^d CDSS 2017.

^e Includes enrollment in both full-day and part-day California State Preschool Program.

^f Thirty-two percent of Head Start enrollment was excluded to avoid double counting students who received funding combinations from more than one program and are already counted in other programs in this table. The combination funding percentage estimate is based on the total number of children in Early Head Start and Head Start who received combination funding in State Preschool, center-based child care, or the Migrant Child Care Program and the total funded enrollment in the 2016–17 school year reported by Head Start California. In the 2016–17 school year, 32,763 children received combination funding, and a total of 101,958 children were in Early Head Start or Head Start. Therefore, an estimated 32% (32,763/101,958) of all children enrolled received combination funding and 68% received funding from Head Start only.

^g During October 2017, 7,540 children ages birth to one in Stage 1 received child care. Half of these children were estimated to be less than one year old and half were one year olds. During October 2017, 19,886 children ages two to five in Stage 1 received child care. We estimated that one-fourth of these children were in each age cohort.

The survey of LPC coordinators also gathered available data about the number of new providers, the number of new licenses being issued to providers in their communities, and how many new children would be served through these new providers and licenses. In the counties that had information available to them, more than 1,700 new slots were

anticipated for infants and toddlers by 2020, and almost 11,000 were anticipated for preschoolers (exhibit 18).

Exhibit 18. Number of Additional Slots Anticipated From New Centers or New Licenses by 2020

Additional slots because of new centers or licenses	Number of counties reporting	Counties with additional slots	Total for reporting counties	County average	Range	Median
Number of additional children under age 3 that new centers anticipate serving by 2020	36	15	1,519	101	2–555	24
Number of additional children ages 3–5 years that new centers anticipate serving by 2020	36	19	10,031	528	0–7,116	88
Number of additional children under age 3 that centers anticipate serving because of new licenses by 2020	34	12	213	18	2–55	15
Number of additional children ages 3–5 years that centers anticipate serving because of new licenses by 2020	32	9	646	72	22–214	54

Source. Local Planning Council Coordinator Survey 2019.

Unmet Need in Rural Areas

Unmet need for preschool services is greater in rural areas in California than in the state overall. However, unmet need for infants and toddlers is as high in rural areas as in the state as a whole.

As shown in exhibit 19, an estimated 197,923 or 61 percent of three and four year olds in rural areas are income-eligible for subsidized ELC. In 2017, an estimated 121,268 or 61 percent of income-eligible three and four year olds were not served by Title 5 programs, TK, or Head Start. As with the state overall, more four year olds than three year olds are served in rural areas. However, a slightly greater percentage of preschool-age children in

rural areas are unserved (61 percent compared with 59 percent statewide). The differences are greater when comparing specific age cohorts.

Exhibit 19. Estimated Eligibility, Enrollment, and Unmet Need Among California’s Rural Three and Four Year Olds^a

Row	Number of children ^b	3 year olds	4 year olds	Total
A	Total children	159,574	164,852	324,426
B	Number of children income-eligible for subsidized early learning and care (85% SMI)	95,600	102,323	197,923
C	Percentage of income-eligible children	60%	62%	61%

Row	Number of children enrolled by program type ^{c,d,e,f}	3 year olds	4 year olds	Total
D	Title 5 California State Preschool Program ^g	13,851	27,839	41,690
E	Title 5 Migrant Child Care Program	410	375	785
F	Title 5 center-based child care	514	212	726
G	Title 5 Family Child Care Home Network	169	137	306
H	Head Start (2016–17)	9,351	13,183	22,534
H(a)	Received Head Start funding only ^h	6,359	8,964	15,323
I	Transitional Kindergarten (2017–18)	N/A	28,717	28,717
I(a)	Estimated TK students under 85% SMI ⁱ	N/A	17,825	17,825
J	CalWORKs Stage 1 ^j	1,430	1,430	2,860
K	CalWORKs Stage 2	1,950	1,809	3,759
L	CalWORKs Stage 3	822	964	1,786
M	Alternative Payment Program	1,331	1,166	2,497
N	Total enrollment in publicly supported programs (D+E+F+G+H+I+J+K+L+M)	26,836	60,721	87,557
O	Total enrollment in publicly supported programs, excluding TK (D+E+F+G+H+J+K+L+M)	26,836	42,896	69,732
P	Total enrollment in publicly supported programs required to meet some quality standards (D+E+F+G+H+I)	21,303	55,352	76,655

Row	Unmet need based on income eligibility	3 year olds	4 year olds	Total
Q	Unmet need in publicly supported programs	68,764 (72%)	41,602 (41%)	110,366 (56%)
R	Unmet need in publicly supported programs, excluding TK	68,764 (72%)	59,427 (58%)	128,191 (65%)
S	Unmet need in publicly supported programs that have quality standards	74,297 (78%)	46,971 (46%)	121,268 (61%)

^a Note that the most granular level of data available from the one-year American Community Survey (ACS) is the Public Use Microdata Area (PUMA) level. Therefore, county and ZIP Code Tabulation Area (ZCTA) level estimates using conversion factors from the Missouri Census Data Center’s (MCDC) Geocorr Tool allowed for the generation of geographic correspondence files based on overlapping geographic areas. Rural areas were defined as ZIP codes assigned to the National Center for Education Statistics locale code for Rural—Fringe (41), Rural—Distant (42), and Rural—Remote (43). Given this approach, counties and ZIP codes with smaller populations that share a single PUMA are estimated using the same sample. However, because the ACS data does not include a rural indicator, this methodology provides one way of estimating the characteristics of children living in rural areas of the state.

^b US Census Bureau 2017. American Community Survey, Public Use Microdata Sample (PUMS) one-year estimates data file 2017, produced by American Institutes for Research.

^c CD-801A Monthly Report, October 2017, California Department of Education.

^d The American Institutes for Research’s survey of all Early Head Start and Head Start grantees, including Migrant and American Indian and Alaska Native grantees. Enrollment in all program options for children is included: center-based full-day, center-based part-day, home-based, combination, family child care, and locally designed. The number of children enrolled in home-based programs is unknown. Enrollment in programs for pregnant women is excluded. Respondents reported enrollment for children in Early Head Start or Head Start in total and were not asked to specify those enrolled in Early Head Start, Head Start, or other specific programs separately. Enrollment for October 2016 was collected by age and ZIP code of the child’s residence.

^e CDE n.d.-f.

^f CDSS 2017.

^g Includes enrollment in both full-day and part-day California State Preschool.

^h Thirty-two percent of Head Start enrollment was excluded to avoid double counting students who received funding combinations from more than one program and are already counted in other programs in this table. The combination funding percentage estimate is based on the total number of children in Early Head Start and Head Start who received combination funding in State Preschool, center-based child care, or the Migrant Child Care Program and the total funded enrollment in the 2016–17 school year reported by Head Start California. In the 2016–17 school year, 32,763 children received combination funding, and a total of 101,958 children were in Early Head Start or Head Start. Therefore, an estimated 32% (32,763/101,958) of all children enrolled received

combination funding and 68% received funding from Head Start only. This estimate for combination funding is not specific to Head Start enrollment in rural areas.

^l In 2017, 62% of four year olds were in families who were income-eligible for subsidized ELC. US Census Bureau 2017.

^j The enrollment of children in rural areas in CalWORKs Stage 1 is not available. This enrollment was estimated by assuming that the state-level percentage of children enrolled in CalWORKs Stage 1 of all children enrolled in Stages 1–3 is similar among children in rural areas.

Approximately 39 percent of infants and toddlers in rural areas are eligible for subsidized ELC. This figure is slightly greater than that for infants and toddlers statewide (36 percent). In 2017, a total of 19,909 infants and toddlers in rural areas were enrolled in a publicly supported program (for example, Title 5 programs, Head Start or Early Head Start, CalWORKs, or APP). However, only 9,785 infants and toddlers in rural areas were enrolled in a publicly supported program with quality standards (for example, Title 5 programs or Head Start or Early Head Start). To estimate unmet need, the difference between the estimated number of children eligible for subsidized care and the actual number of children enrolled in all publicly supported programs was calculated. As shown in exhibit 20, the AIR team estimates that 89 percent of eligible infants and toddlers in rural areas were not served by a publicly supported program. The unmet need for infants (children younger than one year) is greater than the unmet need for one or two year olds (93 percent, 89 percent, and 86 percent, respectively).

Exhibit 20. Estimated Eligibility, Enrollment, and Unmet Need Among California’s Children Birth Through Two Years in Rural Areas^a

Row	Number of children ^b	<1 year old	1 year olds	2 year olds	Total
A	Total children	141,258	151,777	167,097	460,132
B	Income-eligible and with qualifying need for care	54,080	57,194	69,463	180,737
C	Percentage of children income-eligible and with qualifying need for care	38%	38%	42%	39%

Row	Number of children enrolled by program type ^{c,d,e}	<1 year old	1 year olds	2 year olds	Total
D	Title 5 California State Preschool Program ^f	0	0	0	0
E	Title 5 Migrant Child Care Program	86	242	319	647
F	Title 5 center-based child care	500	1,177	2,328	4,005
G	Title 5 Family Child Care Home Network	48	111	163	322
H	Early Head Start (2016–17)	1,341	2,327	3,407	7,075

Row	Number of children enrolled by program type ^{c,d,e}	<1 year old	1 year olds	2 year olds	Total
H(a)	Received Early Head Start funding only ^g	912	1,582	2,317	4,811
I	CalWORKs Stage 1 ^h	1,062	1,062	1,430	3,554
J	CalWORKs Stage 2	452	1,193	1,695	3,340
K	CalWORKs Stage 3	208	362	463	1,033
L	Alternative Payment Program	296	768	1,133	2,197
M	Total enrollment in publicly supported programs (D+E+F+G+Ha+I+J+K+L)	3,564	6,497	9,848	19,909
N	Total enrollment in publicly supported programs required to meet some quality standards (D+E+F+G+Ha)	1,546	3,112	5,127	9,785

Row	Unmet need based on eligibility of children for subsidized care (income-eligible + need for care)	<1 year old	1 year olds	2 year olds	Total
O	Unmet need in publicly supported programs	50,516 (93%)	50,697 (89%)	59,615 (86%)	160,828 (89%)
P	Unmet need in publicly supported programs that have quality standards	52,534 (97%)	54,082 (95%)	64,336 (93%)	170,952 (95%)

^a Note that the most granular level of data available from the one-year American Community Survey (ACS) is the Public Use Microdata Area (PUMA) level. Therefore, county and ZIP Code Tabulation Area (ZCTA) level estimates using conversion factors from the Missouri Census Data Center's (MCDC) Geocorr Tool allowed for the generation of geographic correspondence files based on overlapping geographic areas. Rural areas were defined as ZIP codes assigned to the National Center for Education Statistics locale code for Rural—Fringe (41), Rural—Distant (42), and Rural—Remote (43). Given this approach, counties and ZIP codes with smaller populations that share a single PUMA are estimated using the same sample. However, because the ACS data does not include a rural indicator, this methodology provides one way of estimating the characteristics of children living in rural areas for the state.

^b US Census Bureau 2017.

^c CD-801A Monthly Report, October 2017, California Department of Education.

^d The American Institutes for Research's survey of all Early Head Start and Head Start grantees, including Migrant and American Indian and Alaska Native grantees. Enrollment in all program options for children are included. Enrollment in programs for pregnant women are excluded. Respondents reported enrollment for children in Early Head Start or Head Start in total and were not asked to specify those enrolled in Early Head Start, Head Start, or other specific programs separately. Enrollment for October 2016 was collected by age and ZIP code of the child's residence.

^e CDSS 2017.

^f Includes enrollment in both full-day and part-day California State Preschool Program.

^g Thirty-two percent of Head Start enrollment was excluded to avoid double counting students who received funding combinations from more than one program and are already counted in other programs in this table. The combination funding percentage estimate is based on the total number of children in Early Head Start and Head Start who received combination funding in State Preschool, center-based child care, or the Migrant Child Care Program and the total funded enrollment in the 2016–17 school year reported by Head Start California. In the 2016–17 school year, 32,763 children received combination funding, and a total of 101,958 children were in Early Head Start or Head Start. Therefore, the AIR team estimated that 32% (32,763/101,958) of all children enrolled received combination funding and that 68% received funding from Head Start only. This estimate for combination funding is not specific to Head Start enrollment in rural areas.

^h The enrollment of children in rural areas in CalWORKs Stage 1 is not available. This enrollment was estimated by assuming that the state-level percentage of children enrolled in CalWORKs Stage 1 of all children enrolled in Stages 1–3 is similar among children in rural areas.

Characteristics of Children and Families Using Subsidized Child Care

According to the *California Child Care Study*, the primary reason parents gave for needing child care assistance was that the parent was working (61 percent). Most parents worked one job (91 percent). Health care and social assistance, retail, and food services were the top three work sectors employing parents. About 21 percent of parents reported going to school. More than half of children receiving a subsidy were preschoolers ages three to five (59 percent). In addition, 22 percent were school aged, and 19 percent were children younger than age three (King et al. 2019).

Access to subsidized programs is not equal across racial groups. Only 8.3 percent of eligible Asian and Pacific Islander children were enrolled. Even among black children—the demographic group with the highest share of eligible children enrolled in full-day, full-year programs—two out of three eligible children did not have access (King et al. 2019).

Parent Preferences

Parent preferences should be considered when developing policies to address unmet need. According to the recent *California Child Care Study*, proximity to home (31 percent) was the most common reason parents gave for choosing their current child care provider. Quality (29 percent) and affordability (27 percent) were the next most commonly reported reasons (King et al. 2019).

Other Access Gaps

Wide disparities in early learning and care access exist across the state and by ethnicity, race, and language.

Other recent reports have looked at disparities in access by race. Children of color make up nearly 75 percent of all children twelve years of age and under in California, but they

make up more than 86 percent of children who are eligible for subsidized care. For African-American children, which is the largest group of eligible children enrolled in full-day, full-year programs, approximately two out of three eligible children did not receive subsidized care. Latinx children make up 52 percent of children under age twelve but they account for 68 percent of children who are eligible for subsidized care. The level of unmet need among Latinx children varies, depending on the type of care included in the estimates. According to one study, nearly 1.4 million Latinx children were eligible for subsidized care, but only 126,100 (9 percent) were enrolled in state subsidized child care or the full-day, full-year State Preschool program (Schumaker 2019b). The same study found that children of color are less likely to be enrolled in an ELC program than white, non-Latinx children (42 percent compared with 55 percent) (Schumacher 2019b). The *California Child Care Study* examined participation in a broader set of ELC programs, including both part- and full-day State Preschool and found that 73 percent of children receiving a child care subsidy in 2017 were Hispanic (King et al. 2019).

In California, preschool children (ages three and four years) are also less likely to be enrolled in a public or private preschool program if no adult in the household speaks English well (39 percent compared to 47 percent). The *Getting Down to Facts II* project also found that in the period between 2011 and 2015, three and four year olds who were DLLs were less likely to be enrolled in preschool (56.6 percent) than non-DLL children (47.9 percent) (Stipek 2019a).

Particular access challenges exist for children experiencing homelessness.

Experiences of homelessness in early childhood are associated with poor early development and education outcomes. As reported above, an estimated 220,940 children under age six in California experienced homelessness in 2015. And only 9 percent of children experiencing homelessness in the state were served by Head Start or Early Head Start or by McKinney-Vento–funded ELC programs (US Department of Health and Human Services 2017). It is important to note that not all families self-identify as homeless—for example, those who may be staying with one or more other families in a home may not report themselves as homeless because they have a living environment.

It is difficult to know exactly how many young children experiencing homelessness are served in other ELC programs because families may not identify themselves as homeless. Although all state and federally subsidized programs such as State Preschool give priority to children experiencing homelessness, they do not reserve spaces for these children. A CDSS official noted the dilemma faced by providers: “If they reserve spaces for homeless or other vulnerable children, and the children do not appear in time to use the funds available, the program may be penalized for under-enrollment.” The federal Head Start Performance Standards allow programs to reserve up to 3 percent of funded enrollment for pregnant women and children experiencing homelessness and children in foster care, but only for up to 30 days.

Few licensed centers offer care during nontraditional hours.

Most licensed centers do not offer care during nontraditional hours such as during evenings, overnight, or weekends and are unable to accommodate variable work schedules. The CCR&RN (2018) found that 13 percent of families request evening,

weekend, or nighttime care, similar to the estimate that 10 percent of working parents need such care. However, the CCR&RN found that only 3 percent of centers and 41 percent of FCCHs offer care during these nontraditional hours. The survey of LPCs showed similar results: Only 3 percent of centers serving infants and toddlers and 2 percent of centers serving preschoolers offered care during nontraditional hours, while 23 percent of licensed FCCHs did. However, a recent study reported somewhat higher need among parents for care during nontraditional hours as well as the number of ELC programs offering this type of care. *The California Child Care Study* found that approximately 33 percent of parents used care on the weekends, evenings, or overnight and that 14 percent of centers offer evening care. Among FCCHs, 41 percent offer evening care, 36 percent offer weekend care, and 28 percent offer variable schedules (King et al. 2019).

According to the LPC survey responses from 39 counties, at least 5,102 requests for care during nontraditional hours were made to local R&R agencies during the period from January 1, 2019, to March 31, 2019. Exhibit 21 illustrates the number of family requests to R&R agencies for nontraditional care hours during this period. The exhibit also includes the type of sites providing care during nontraditional hours, including the state total, the county average, the percentage of the state total, and the percentage of the county average for sites providing care during nontraditional hours by age group and for FCCH.

Exhibit 21. Care During Nontraditional Hours

Care during nontraditional hours	Number of counties reporting	Total for all counties reporting	County average
Number of licensed FCCHs	51	25,607	502
Number of centers serving infants and toddlers	48	2,539	53
Number of centers serving preschoolers	48	8,707	181
Requests for care during nontraditional hours	39	5,102	131
FCCs providing care during nontraditional hours	44	5,779	131
Centers serving infants and toddlers that offer care during nontraditional hours	43	100	2
Percentage of infant and toddler sites that offer care during nontraditional hours	43	3%	4%
Centers serving preschoolers that offer care during nontraditional hours	44	143	4
Percentage of preschool sites that offer care during nontraditional hours	44	2%	2%

Note. The numbers of licensed FCCs and centers serving infants and toddlers and preschoolers in this exhibit are based on reports from the LPC coordinators that

responded to these items. These numbers may therefore be different from numbers reported elsewhere in this report.

Source. Local Planning Council Coordinator Survey, 2019.

The APP helps to address nontraditional work hours by allowing parents to use FFN providers, who are more likely to provide weekend or evening care than licensed centers or FCCHs. Therefore, many parents have applied for APP vouchers, and long waiting lists exist, even though some of the parents on these waiting lists are income-eligible for other programs. According to a representative from a statewide parent advocacy group, “The number one thing that is really challenging for families right now is the 1.8 million kids on the waiting list for APP vouchers.” This interviewee added that families need care “that really meets the needs of the new sort of workforce that we have in California, which is not the nine-to-five jobs of the past.” While the lack of a centralized, frequently updated waiting list using a unique child identifier makes it difficult to verify the precise number of children on the waiting list for any subsidized ELC program, many local APP administrators confirmed the unmet need is large.

Most early learning and care programs still operate as part-day and part-year programs and do not accommodate standard work hours.

Less than half of the state-subsidized ELC programs are full-day programs, and many of the full-day programs operate only seven hours per day. Only one in four children enrolled in CSPP attends a full-day program, compared with two-thirds of those attending TK. A major obstacle to greater full-day access is that the CSPP rules require full-day programs to operate at least 246 days per year unless their contract specifies a lower minimum. Yet two-thirds of CSPP slots are operated by school districts, which are typically open for only 180 days per year. The school districts find it difficult to stay open longer because of the overhead cost of keeping the school open just for CSPP in the summer (Melnick et al. 2018).

Evidence shows that inefficiencies are associated with part-day programs. In San Joaquin County, for example, while the population of young children is growing, the supply of preschool care is insufficient. However, the county had to send back \$1.7 million in CSPP funds to the state because parents who work irregular or unpredictable hours could not use the part-day spaces available. As a result, some providers have unfilled slots, while programs and providers that are compatible with nontraditional hour schedules have waiting lists (Manship, Jacobson, and Fuller 2018).

A similar pattern affects Head Start in California. Of the 77,973 children enrolled in Head Start during the 2017–18 program year, less than half (30,305) attended full-day Head Start, only 12,533 attended for a “full working day,” and only 3,542 attended for a full calendar year (Allen 2019).

Reflecting on the mismatch between parental work hours and the hours of operation of most formal ELC programs, local stakeholders recommended providing wraparound services in FCCHs and other settings for children in part-day CSPP and TK programs. County representatives for ELC reported that they increased efforts to develop strategies to ensure full-day care by integrating TK or part-day State Preschool programs with FCC or other care.

Barriers to Access

Interviews with stakeholders revealed several challenges that may contribute to the considerable unmet need and access gaps described above.

The cost of infant and toddler care is high for parents and providers.

In discussions with ELC leaders, the high cost of infant and toddler care was among the most common topics raised by stakeholders. Respondents pointed to the expense of financing low pupil-teacher ratios, compensating qualified staff, and purchasing appropriate facilities and supplies. There is a limit on what parents can pay for care, and so demand decreases if costs are too high, introducing a downward cycle in which resources become scarcer. According to one southern California county ELC stakeholder, many school districts that formerly operated Title 5 CCTR programs have discontinued them. “Many of our districts have been unable to sustain their infant and toddler programs because it’s so costly to manage the program.”

Part- and Full-Time Care

Current state definitions of the hours of publicly supported care differ based on the program; full-day means four hours or more in contracted Title 5 programs such as CSPP or state-funded TK; full-year means 246 days in CSPP but 180 days in TK. For other state and federally subsidized programs, such as APP, the hours of care funded are based on the parent's work or school schedule and "maximum hours of need," and the program includes a provision for a variable schedule based on the parent's greatest number of hours of work in the preceding four weeks.

Part-Day, Part-Year: *CSPP services are defined as at least three hours and less than three hours and 59 minutes each day, for at least 175 days per year, unless the contract indicates a lower number of days (CDE, n.d.-e).*

Full-Year, Full-Day: *CSPP services shall be available at least 246 days per year, unless the contract indicates a lower number of days, and for the number of hours necessary to meet the child care and development needs of the families being served. The minimum number of hours is not explicitly specified, but it must be at least four hours per day to exceed the maximum hours for part-day CSPP (CDE, 2018a, n.d.).*

Part-Day, Part-Year TK or Kindergarten: *At least 3.8 hours of class instruction, 180 days per year—typically six hours actually in school but not all class time (National Center for Education Statistics, n.d.).*

Another common theme that emerged from the discussions with state and local ELC leaders was that the push toward universal preschool—especially the establishment of the TK program, which does not charge families a fee—may have inadvertently exacerbated a decline in infant and toddler care. Many stakeholders from county LPCs and R&R agencies pointed out that in the private centers, providers have frequently helped finance the more expensive care of infants and toddlers (which is unaffordable to parents if left unsubsidized) by charging slightly more for preschool-age children than the service requires. Thus, as one R&R representative commented, "In the private sector with a push towards universal preschool, a lot of the private sector lost its preschoolers to free care and so it was the preschool piece that supported the infant/toddler piece and so a lot of those programs have disappeared over the last 10 years that were there."

Extant data from the ELNAT confirms this trend toward fewer slots for infants and toddlers. More than 60,000 children under thirty-six months were enrolled in publicly subsidized child care and development programs in 2010 (Title 5 programs, CalWORKs

Stages 2 and 3, and the APP) but this number had fallen to only slightly more than 38,000 by 2016.

The same R&R representative suggested that, as a result of the recent increases in the reimbursement rates for infant and toddler care, “we may see some re-engagement of centers that are getting public funding because it now becomes viable, economically, for them to do it. And they don’t need the preschoolers, necessarily, to do that. But, finding people who have the credentials to work with anybody at this point has become challenging.” Stakeholders also note that, after a challenging period of adjustment, the decline in private sector ELC programs serving preschool-age children—which Head Start and State Preschool staff often refer to as “the loss of the four year olds”—may have the benefit of freeing up space in existing programs to serve infants and toddlers and three year olds.

Reflecting on the high cost of infant and toddler care, another county stakeholder pointed out that the shortage of infant and toddler care also affects middle-income families. Acknowledging that “these are big dreams,” this stakeholder said that “more supports need to come from the state for all families. ... Not just low-income families but middle-income families with infants and toddlers. To really cover the costs of the high cost of care.”

Rural areas have unique challenges to increasing access to early learning and care.

Stakeholders from rural counties pointed to gaps in remote communities. Limited licensed care—and issues around transportation to and from these sites—creates significant challenges for parents in these communities who need care for their children. As a rural county R&R agency representative stated, “Our county is very large geographically and very sparsely populated. So ... in some of the outlying areas you might be 20 or 30 miles from the nearest ELC facility,” requiring a 40- to 60-mile drive roundtrip per day. To the extent that center-based programs such as CSPP exist in rural counties, they tend to be located in the largest towns, not in remote rural areas. As a result, FFN care is often the primary option for ELC in the more rural areas of the state.

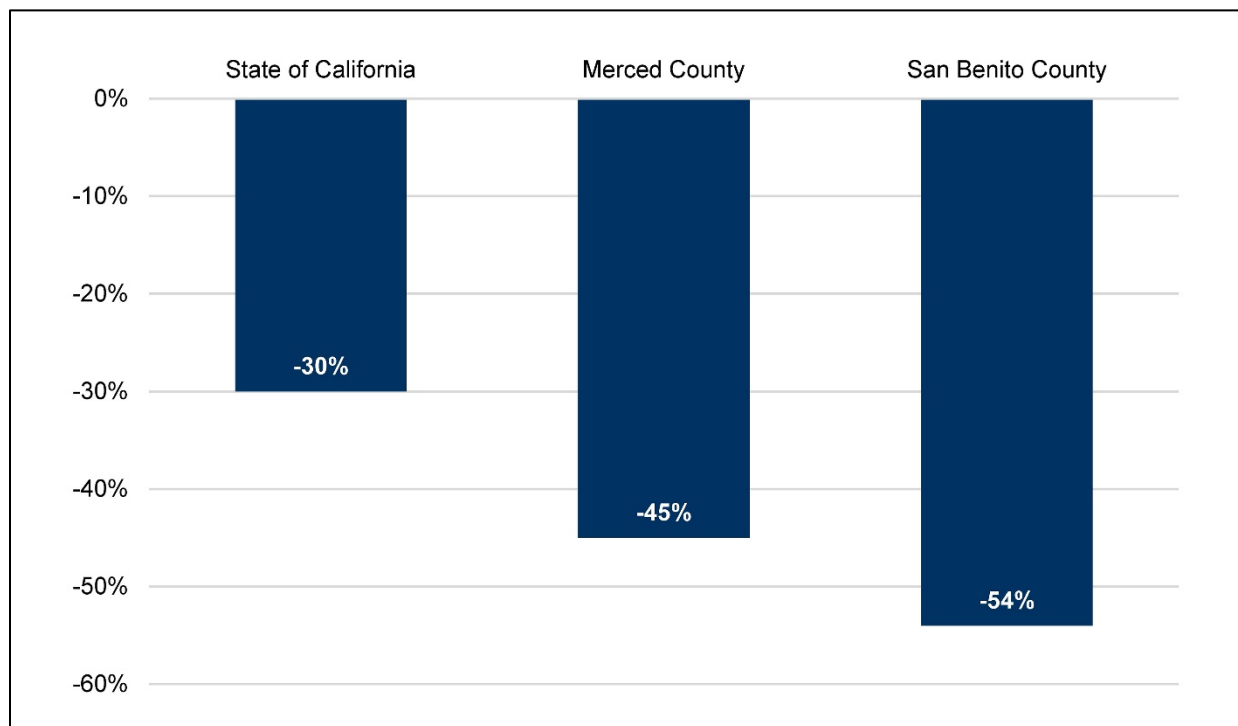
Early learning and care stakeholders from rural counties also pointed to the challenges in filling state-subsidized programs in remote areas. These communities need and could fill smaller classrooms, yet the state reimbursement system is based on classrooms with 24 children and does not support the added cost of smaller classrooms. Stakeholders in rural counties emphasized that more flexibility is needed within the subsidized ELC system to adapt program hours and days of service to the context and demand of rural areas.

The number of family child care homes has substantially declined in California.

During the Great Recession, the state’s investment in subsidized child care dropped nearly \$1 billion as a result of budget constraints. Because of these cuts and lower demand from working parents, some FCC providers lost their homes. As a result, the supply of FCC in California dropped 30 percent between 2008 and 2017, a loss of 98,000 spaces for children (exhibit 22). The rate of decline was especially high in some high-

poverty counties. For example, Merced County lost 46 percent of its FCCHs, and San Benito County lost 54 percent of its FCCHs (CCR&RN 2019a).

Exhibit 22. Loss of Family Child Care Homes, 2008–2017



Family child care providers face a number of challenges, including low wages, lack of benefits, and not being able to enroll children in their program to licensed capacity. For FCCHs that have closed, the most common factors were family circumstances, needing employment options with benefits, and housing (CCR&RN 2019c).

The reduction in the number of FCCHs may have particularly affected access to infant and toddler care. In a survey of large and small FCC providers in seven counties (Ventura, San Bernardino, San Luis Obispo, Fresno, Nevada, El Dorado, and Plumas), 97 percent of the 237 respondents said they served children from birth to age three; thus, a reduction in the overall availability of FCCHs most likely disproportionately affected children under the age of three (CCR&RN, 2019b).

Although restoration of FCC is an important tool for expanding access to infant and toddler care, it is important not to overstate the potential importance of FCC in serving this age group. Family child care providers typically serve a mixed age range of children, often from the same family, and, as in center-based programs, economics may favor including older children in the mix. As one local ELC stakeholder in a largely rural county pointed out, while licensing regulations allow an FCCH provider to care for up to four infants at a time, “pretty much nobody does that. ... They pretty much self-limit to maybe one or two infants.” Family child care providers typically serve a balance of infants and preschoolers, this stakeholder noted, such as three infant toddlers under two and three preschoolers, or two infants or toddlers and four preschoolers, adding up to a total of six children under

school age. Of the 35 FCCHs in this stakeholder's county, most of the providers serve one or two infants. "Some don't [take] care [of] infants at all, or if they do, they do like the centers and they won't [admit the children] until they're a year or eighteen months. ... The slots are really ... minimal for those really little ones, and ... there's just a lot of parents that don't get any maternity leave."

However, several county representatives suggested that some programs are considering adjusting their programs to serve younger children as a result of the expansion of TK and the resulting loss of four year olds from many programs. A representative from a large subsidized provider stated,

I think districts in general are going to expand TK. ... We are starting to see that we have more three year olds and [fewer] four year olds, and I think that's a trend that will continue. And we might end up with, down the road, being more of a zero to three provider. We're probably going to be expanding infant and toddler care [and making] some adjustments to our program to accommodate younger children.

The high cost of child care in California places quality early learning and care services out of reach of many families who do not meet the official state or federal definition of poverty.

Overall, the availability of ELC cannot be separated from affordability in California. California ranks as one of the least affordable states in the nation when it comes to child care. In a family with two low-wage working parents, each parent would have to work 147 hours per week to be able to pay no more than the federally recommended 7 percent of income for the care of one infant (Schumacher 2019a).

California ranks number one in the nation in the cost of infant care. When measured as a percentage of the SMI, for a married couple, center-based infant care costs an average of \$16,542 per child, which is more than the cost of a year of tuition and fees at a four-year college (Child Care Aware 2018). This average cost amounts to 60.4 percent of median income for a single-parent family and 18.6 percent of median income for a married couple (Child Care Aware 2018). Family child care for an infant, at \$10,609, is less expensive but still ranks third in cost in the nation. Center-based care for a four year old in California costs \$11,202, amounting to 40.9 percent of the median income for a single-parent family and 12.6 percent of the median family income for a married couple (Child Care Aware 2018).

In other words, according to one analysis, a family in California would have to pay 22 percent of the SMI of \$83,490 to purchase center-based care that meets basic licensing standards for an infant, 37 percent of the SMI to purchase center-based care meeting higher standards, 12 percent of the SMI to purchase FCC meeting basic standards, and 26 percent of the SMI for FCC meeting higher quality standards (Workman and Jessen-Howard 2018).

According to the recent *California Child Care Study*, on average, families receiving a subsidy earned \$24,900 a year, or 33 percent of the SMI for a family of three (\$74,394).

CalWORKs Stage 1 families earned the lowest income (\$1,469 per month), while families enrolled in the Migrant Care (\$2,574) and State Preschool programs (\$2,293) earned the highest incomes. Fifty-seven percent of families reported contributing toward child care costs beyond the subsidy. On average, the General Child Care Program paid the highest monthly reimbursement compared with other subsidy programs. The total amount paid per child receiving a subsidy was \$622 (King et al. 2019).

Early Learning and Care Quality

California has invested significant resources to improve the quality of ELC programs, including efforts to: (1) establish a QRIS; (2) increase the reimbursement for infant and toddler programs; (3) balance the competing values of protective pupil-teacher ratios with well-compensated, well-qualified teachers; and (4) implement an innovative approach to addressing the growing problem of trauma and challenging behaviors among preschool children. However, even licensed programs struggle to adequately compensate teachers who have earned degrees, and a large number of children are in informal arrangements that may be necessary to meet family needs but little is known about the quality of care offered in these informal arrangements. The following section provides an overview of the quality strengths and gaps in California, addressing the following questions from the federal needs assessment guidance.

- *What would you describe as your current ELC strengths in terms of quality of care across settings?*
- *What would you describe as key gaps in quality of care across settings?*

Following the overall discussion of strengths and gaps in quality, the needs assessment devotes a section to the challenges of strengthening the ELC workforce and the workforce's impact on quality. A separate section addresses specific initiatives to engage parents and families.

Quality: Strengths

California has implemented Quality Counts California in all 58 counties, although the level of implementation varies across counties.

Quality Counts California, a voluntary system for assessing and supporting program quality, is implemented to some degree in all 58 counties of the state. Most recently, QCC added a special focus on tribal child care, with the TCCAC leading the part of the QCC system devoted to tribal providers (Region 11) and providing support to participating tribal child care sites across the state.

Quality Counts California emphasizes seven elements of quality that are widely accepted in the early childhood field: (1) ratios and group size, (2) teacher qualifications, (3) program leadership, (4) teacher-child interactions, (5) developmental and health screening, (6) child observation, and (7) program environment (Quick et al. 2016).

These seven elements are mapped across three overarching core areas in the QCC rating matrix. The core areas include: (1) child development and school readiness,

(2) teachers and teaching, and (3) program and environment. To ensure implementation fidelity across all counties, participating sites are rated on either seven elements (for centers) or five elements (for FCCHs) by raters and external assessors (exhibit 23). These elements were identified by the QCC implementation guide, which was initially developed by local or regional consortia. A rating is calculated using the total point values for all five or seven elements to arrive at a final program quality score for each site that falls under one of the five tier rating categories. Tier 5 represents the highest quality and Tier 1 is the most basic quality (exhibit 24).

During FY 2017–18, , 6,264 centers and FCCHs in California participated in the QCC rating system, and 4,477 of them (71.5 percent of all participating sites) have received the appropriate and complete element scores and tier ratings. Most early learning sites participating in the QCC rating system are licensed centers or FCCHs. However, other types of early learning sites, such as California School Aged Families Education (Cal-SAFE) child development programs and classrooms operated by school districts with Individuals with Disabilities Education Act (IDEA) funding, are also eligible for rating and make up of a small percentage of participating sites.

Exhibit 23. Quality Counts California Rating Core Areas and Associated Elements

CORE	Elements
Core 1: Child Development and School Readiness	Element 1. Child Observation Element 2. Developmental and Health Screenings
Core 2: Teachers and Teaching	Element 3. Early Childhood Educator Qualifications: Minimum Qualifications for <i>Lead Teacher</i> /Family Child Care Home Element 4. Effective Teacher-Child Interactions
Core 3: Program and Environment	Element 5. Licensing and Regulatory Requirements: Ratios and Group Size (Centers Only) Element 6. Program Administration and Leadership: Environment Rating Scale(s) – ECERS-R, ITERS-R, FCCERS-R Element 7. Program Administration and Leadership: Director Qualification (Centers Only)

Source. CDE 2017.

Exhibit 24. Quality Rating and Improvement System Tier Rating Chart

Site type	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5
Centers	7 points	8–19 points	20–25 points	26–31 points	32 points or more
Family child care homes	5 points	6–13 points	14–17 points	18–21 points	22 points or more

Source. CDE 2017.

It is important to note that QCC is much more than a rating system. It also provides a variety of supports to help providers improve quality. For example, according to a state CDE official, the \$50 million California State Preschool QRIS Block Grant offers funds to programs rated at Tier 4 or 5 to use in whatever manner they choose, whether to increase salaries, purchase materials, or for professional development. For settings not yet at the Tier 4 level, a majority of programs use coaching as their primary strategy for quality improvement. The remainder of the block grant is used to support periodic ratings and assessments, but because more programs have reached Tiers 4 and 5, according to the same CDE official, in most counties less than 20 percent is used for that purpose. Because the funding for this block grant comes from Proposition 98 funds, the fiscal agent has to be an LEA, and so the majority are county offices of education.

Although the majority of the centers participating in QCC have been state or federally contracted programs such as State Preschool, CCTR, Head Start, and Early Head Start, that profile may be changing. As the state CDE official commented, although the emphasis in QCC is still to bring in the Head Start and state-contracted programs serving the most vulnerable children, the state is also trying to recruit “those private programs that are accepting vouchers for children. ... So we’ve asked the APPs to come to the table” to help identify and reach out to those programs.

In one recent survey in Los Angeles, 95 percent of respondents reported that participating in the QCC/QRIS enhanced their ability to provide quality services; providers have been able to identify areas of their programs that need improvement, purchase educational play equipment, and offer professional development (Child360 and First 5 LA 2018). As described in more detail later, the locally managed QRIS has also helped to improve the level of collaboration and partnership among the organizations involved in providing quality improvement support, monitoring, and governance of the systems.

Reflecting on the status of the QCC in the state, and in particular, its voluntary nature, a state-level CDE leader commented, “If this had been a top-down kind of thing, I think we would be much slower into implementation. Even when you think of the percentage of centers that are participating, our goal is to have 75 percent of centers and 50 percent of FCCHs. Okay we’re one-third of our way toward our goal for centers. That’s not really too bad.” The CDE official added that “we’re a long way off in terms of family child care, I don’t think we would have had nearly the kind of success” if the state had started with a

compulsory system because a mix of state and local ownership is key to sustained participation in the system.

Annual licensing visits, as well as technical assistance for license-exempt providers, are being implemented.

After many years of unannounced licensing visits taking place only once every five years, some type of visit now takes place every three years (Stipek and Bardack 2019). The state has used a small portion (11 percent) of the 2018 substantial increase in the federal CCDBG quality set-aside dollars to hire new licensing specialists in order to begin implementing annual visits to licensed programs.

At the same time, as part of a corrective action plan in conjunction with the CCDBG, the CDE is planning to provide technical assistance to up to 7,000 license-exempt providers in CalWORKs Stage 2 and Stage 3 and APPs that are partially funded by the federal CCDBG. In addition, the 2014 federal CCDF reauthorization requires that any teachers or teacher aides, including license-exempt providers, have pre-service training or orientation to ensure they all have essential health and safety training, including safe sleep practices, safe handling of medications, pediatric first aid, and cardiopulmonary resuscitation (CPR). "What we're looking at is what other states have done," a CDE official noted, also adding

It's not meant to be a licensing visit but ... essentially, we want to ensure that when subsidized children are in these homes, they can be safe. So ... do they have a fire extinguisher? If they don't, then we can provide that to them. The state is trying to determine how to provide the technical assistance to family, friend and neighbor care without seeming invasive to these providers.

Transitional kindergarten classroom teachers have bachelor's degrees and are compensated similarly to K–12 teachers.

Another strength of ELC in California is its TK program. The TK program has achieved what no other statewide, publicly supported ELC programs in California have been able to—require all teachers to have bachelor's degrees and provide pay parity with teachers in the K–12 system. As discussed below, not all aspects of TK conform to nationally recommended quality standards. For example, TK classrooms typically have two to three times the pupil-teacher ratios recommended by the National Association for the Education of Young Children (NAEYC) and the National Institute for Early Education Research (NIEER) (Friedman-Krauss et al. 2018). However, based on a study using a regression discontinuity design and comparing child outcomes for TK with those of other preschool programs in California, TK was found to improve academic skills and engagement in learning activities in the classroom at kindergarten entry, with a particularly strong impact on math skills for low-income children and on English learner students' language, literacy, and math skills (Manship et al. 2017).

Some school districts have unified standards for State Preschool and transitional kindergarten and have established early transitional kindergarten programs.

Another identified strength is the Early TK program, which represents a successful alignment between TK and State Preschool. The Early TK in the Los Angeles Unified School District (LAUSD), which serves younger four year old children who do not yet qualify for TK itself, has tried to unify CSPP and TK standards for this younger group, adopting the highest quality features of each program. Thus, Early TK uses the Title 5 CSPP pupil-teacher ratio of 1:8 while still offering teachers with similar educational qualifications the same compensation as TK teachers. All programs use the CDE's Developmental Frameworks and the same curriculum as the CSPP (Melnick et al. 2018).

Promising Practices

Some districts use the Local Control Funding Formula (LCFF) or Title I funds to expand access to preschool. Long Beach Unified School District (LBUSD) expanded access to pre-K by blending Title I funds with LCFF funds to provide pre-K to all children who meet eligibility requirements. Elk Grove, Fresno Unified, San Francisco Unified School District (SFUSD), LAUSD, San Diego, and Oakland have all used LCFF funds to serve a larger portion of age-eligible children in their pre-K programs. (Stipek 2019a)

Eighty-two percent of CSPP teachers (or approximately 700 State Preschool teachers) in LAUSD have bachelor's degrees, and the Early TK programs have a teacher and two aides, just as in CSPP, according to the director of LAUSD's early care and education programs. Although CSPP teachers are paid about \$20,000 less than TK and elementary teachers, they have the same health, dental, and vision benefits, and all of the CSPP and Early TK/TK teachers belong to the same union. The Early TK program and quality improvement in CSPP in LAUSD are made possible in part by the district's investment of LCFF dollars in the programs. According to the program director, studies indicating that children attending the programs have about 1.8 days more attendance than their peers who did not attend have helped to gain district support for the investment of local funds. The program director notes, "When you talk about 20,000 kids that have a day and a half better attendance, it adds up." In particular, this better attendance contributes to improved state funding to the district based on average daily attendance.

In the West Contra Costa County School District, all CSPP and TK teachers have multisubject credentials and child development certificates, according to the district's early learning program coordinator. The CSPP and TK teachers are compensated on the same schedule as other teachers in the district. Moreover, the TK program in this district has two adults in every classroom, with a pupil-teacher ratio of 1:12, the same ratio proposed in recent legislation by Representative Kevin McCarty (AB 123). Although higher than the current CSPP pupil-teacher ratio of 1:8, the 1:12 ratio is significantly smaller than the ratios typically seen in TK, which averaged 20:1 in AIR's study of TK. In addition, some programs had an aide for a portion of the day (Manship et al. 2017).

Two-thirds of Head Start teachers in California now have bachelor's degrees, and Head Start Classroom Assessment Scoring System scores have improved.

Another strength in California's ELC system is the increased qualifications of Head Start teachers. In the 12 years since the Improving Head Start for School Readiness Act of 2007 was enacted, Head Start programs have placed a major emphasis on quality improvement. In California, 66 percent of lead teachers in Head Start now have bachelor's or advanced degrees in early childhood education, an 18 percent increase since 2012 (US Department of Health and Human Services 2019). In 2011, the Office of Head Start began to use the Classroom Assessment Scoring System (CLASS) as one of the quality benchmarks for the program. Based on average CLASS domain scores aggregated during CLASS monitoring reviews across 1,370 Head Start grantees nationwide from 2012 to 2015, California grantees scored slightly higher than the national average (6.1 versus 6.0) on the emotional support domain, the same as the national average (5.7) on the classroom organization domain, and slightly lower than the national average (2.8 versus 2.9) on instructional support domain (cited in Allen 2019). Moreover, some evidence from other studies shows that Head Start's instructional support scores, which are typically significantly lower in preschool classrooms than scores on the other CLASS domains, improved from 1.9 in 2006 to 2.4 in 2014 (Aikens et al. 2016).

The reimbursement rate for infants and toddlers in state-contracted General Child Care and Development programs has substantially increased.

The state significantly raised the reimbursement rate for state-contracted infant and toddler care meeting Title 5 standards. The higher rate not only provides an incentive for providers to offer services for infants and toddlers, but it also begins to address the true cost of a program that, because of its protective pupil-teacher ratio, is inherently more expensive than ELC for preschool-age children. The state now pays an adjustment factor for infants from birth to eighteen months of age that is 2.44 times the standard reimbursement rate of \$47.98 for CCTR (or \$117.80 per day) and a factor of 1.8 times the standard reimbursement rate for toddlers age eighteen months to thirty-six months (or \$86.36 per day) (CDE 2019g).

An R&R representative from a large urban county affirms the importance of the increase in the state reimbursement rate for infants and toddlers in Title 5 center-based and FCCHEN homes and states, "In this last year, we've seen that the reimbursement rate for infant/toddler care has gone way up ... we may see some re-engagement of centers that are getting public funding because it now becomes viable, economically, for them to do it." Increases to date have helped, but not resolved, the complex issue of infant and toddler care. As one Northern California ELC county stakeholder noted, the Standard Reimbursement Rate (SRR) is still lower than the regional market rate (RMR) allowed for APP voucher programs, which are held to lower quality standards. For a more complete discussion of the policy issues surrounding payment rates for subsidized ELC programs, see the Funding Barriers and Opportunities section later in this report.

Legislation has been enacted to combat preschool expulsion and suspension and to increase access to early childhood mental health consultation.

In 2017, California enacted AB 752, a law to help combat preschool expulsion and suspension. A Yale Child Study Center found that nationally, preschool children are

expelled at three times the rate of students in grades K–12 (Gilliam 2005). Moreover, preschool expulsion disproportionately affects boys of color, particularly African Americans, and has hence been described as the first stop in the “preschool-to-prison” pipeline. The law does not ban expulsions and suspensions outright but rather requires providers in Title 5-contracted programs to undertake a series of interventions and referrals to prevent expulsion and, if those efforts fail, to identify an alternative placement for the child.

In a further effort to help combat preschool expulsion, in 2018, California enacted a law that allows providers to use state contract funds for early childhood mental health consultation (ECMHC) services. Assembly Bill 2698 (Chapter 946, Statutes of 2018) added the *EC* Section 8265.2, which defines and clarifies ECMHC services that can be made available to children in the following programs: (1) CSPP programs, (2) CCTR programs with children zero to thirty-six months of age, and (3) CCTR programs with children zero to sixty months of age served in a FCCHEN setting. Additionally, AB 2698 added a new “adjustment factor” of 0.05, which increases the amount of funding a provider qualifies for by 5 percent for all children within a classroom or FCC setting when ECMHC services are offered (CDE 2019a).

In May 2019, the CDE released a management bulletin outlining the provisions for the reimbursable ECMHC services and the required qualifications for the consultants. To be eligible for the adjustment factor, the program must provide the following: (1) on-site consultation, (2) documentation of behavior plans by a licensed ECMHC consultant, (3) an outline of steps to maintain children’s participation in the program in consultation with teachers and parents, and (4) support for children with persistent and challenging behaviors. Any ECMHC consultant providing or supervising services must be licensed as a marriage and family therapist, clinical social worker, professional clinical counselor, psychologist, or child and adolescent psychiatrist (CDE 2019e).

Kidango, the largest nonprofit provider of preschool services in the San Francisco Bay Area, championed the ECMHC legislation and was among the first to implement it. Of Kidango’s 50 centers, approximately 20 now have access to a weekly visit from an ECMHC consultant, in part supported by Head Start funding to address social–emotional needs and challenging behavior. With the new access to an adjustment factor for State Preschool and CCTR funds to support ECMHC, Kidango hopes that every center will have access to a consultant on a regular schedule. One purpose is to help teachers support children’s social–emotional development, helping to mitigate the effects of trauma. According to Kidango’s chief early learning officer, “We want to be not just trauma-informed, but to be a trauma-healing organization.” Another main purpose of ECMHC is to help teachers learn to approach challenging behaviors in the classroom with empathy and compassion and to reach out to families and work with them to resolve whatever issues they might encounter. Kidango also added that ultimately, the goal “is doing what’s best for the child and keeping the child in our program and meeting their needs as best they can.”

The state is seeking to improve the quality of family, friend, and neighbor care and other license-exempt alternative settings for infants and toddlers.

Through QCC, efforts are being made to improve the quality of FFN serving infants and toddlers. One CDE official reported during an interview that CCDBG funds are being used for any provider who would like to be on the pathway toward quality, including license-exempt providers who might consider moving to licensure at some point in time.

Based on interviews with other state-level ELC stakeholders, some counties in California are using funding from First 5 California to improve access to quality care for infants and toddlers and older children up to age five in a still broader range of alternative settings. These are settings that provide school readiness services to children and families, but not traditional child care. These include: (1) libraries, (2) home visiting programs, (3) family resource centers, and (4) sites arranged through parks and recreation departments.

Some cities have also leveraged family resource centers to provide socialization groups, developmental play groups, and parent education for families with infants and toddlers. Although these services are valuable resources and may be the only option for many families with young children, they should be regarded as a supplement or gateway to more formal services. As one ELC stakeholder commented, “The alternative settings do not substitute for having regular quality care available to the families who need it.”

Quality: Gaps

Several gaps in quality remain in California’s system, as along with opportunities to continue improving.

Title 22 licensing standards in California are still among the least stringent in the nation.

California ranked number 48 in rigor of licensing benchmarks based on 2015 Administration for Children and Families (ACF) guidance, meeting only 4 percent of national standards for centers and 1 percent for FCC (Child Care Aware 2017). Standards include: (1) requirements for pupil-teacher ratios, (2) pre-service training and orientation, (3) first aid, (4) safe sleep practices, (5) sign-out systems, (6) first aid, (7) cribs, and (8) play yards. States were rated either “meets” or “does not meet,” and no leeway was allowed for partially meeting a standard. One of the largest contributing factors to California’s low rating was the five-year standard for frequency of inspections, which California has since taken action to address. Similarly, in 2018, Child Care Aware ranked California number 48 in licensing benchmarks, above only Nebraska and Idaho (Stipek and Bardack 2019). Benchmarks were generally grouped into oversight and program requirements. Here, again, California was just beginning to improve frequency standards from five years to three years, but the impact of that implementation was not captured by this benchmark assessment; this contributed to the low rating. The state’s movement to implement annual licensing inspections is the most significant effort to date to improve the state’s performance in licensing and should greatly improve California’s ranking. It will have a significant and positive impact on the quality of health and safety monitoring in licensed child care, enabling greatly improved child outcomes.

Both Title 22 licensing requirements and Title 5 state contract standards for teacher qualifications are low.

California's educational requirements for teachers of preschool-age children are among the lowest in the country (Stipek 2019a). Although Title 5 program standards set modest requirements for preschool teachers (24 units of college-level work in early childhood education, including designated core courses, and 16 general education units), Title 22 licensing standards only require teachers to have 12 postsecondary units in ECE, and license-exempt providers have no educational requirements at all.

Neither the California State Preschool Program standards nor the transitional kindergarten program standards meet the preschool benchmarks used by the National Institute for Early Education Research for the *State of Preschool Yearbook*.

The CSPP, which for many years met only 4 of the 10 NIEER quality benchmarks for preschool, now meets 6, which include: (1) early learning development standards that are comprehensive, aligned, supported, and culturally sensitive; (2) curriculum supports with an approval process; (3) training specific to pre-K; (4) a pupil-teacher ratio of 1:10 or better; (5) screening and referral; and (6) continuous quality improvement involving structured class observations. The CSPP falls short on the NIEER benchmarks in two main areas: (1) class size and (2) teacher qualifications. Although the CSPP has a low pupil-teacher ratio of 1:8, the program allows class sizes of 24, higher than the NIEER benchmark of a maximum class size of 20. Regarding teacher qualifications, the CSPP does not require a bachelor's degree for teachers or a child development associate (CDA) credential or the equivalent for teacher assistants (Friedman-Krauss et al. 2018).

The NIEER *State of Preschool Yearbook* gives California's TK program high marks for giving its teacher's salary parity with K–3 teachers, an area relatively new to the NIEER analysis. However, the program meets only two of the NIEER's quality benchmarks—for curriculum supports and the bachelor's degree requirement for TK teachers. Primary deficits on the NIEER benchmarks include class size, which is allowed to be as high as 33, far higher than the NIEER benchmark of 20. In addition, having a teacher assistant is not required in TK, nor are there specified qualifications for the teacher assistant position.

California has a high proportion of young children in license-exempt care.

California ranks number 11 in the nation for having high percentages of children in license-exempt care (Stipek 2019a). Nearly half of the children in CalWORKs Stage 1 supported care are in license-exempt or FFN care. Furthermore, for families in the early stages of CalWORKs, who are unlikely to have stable employment, informal care arrangements may be their only option. As noted elsewhere in this report, licensed centers and FCCHs are unlikely to accept a child for a few hours of sporadic care. In addition, even for children who are already enrolled in a formal program designed to promote child development and school readiness, informal care may be needed to accommodate nontraditional hours of care that are far easier to find in FFN settings.

Little research has been done on the quality of FFN care. However, one study found that, on average, children in an FFN engage in fewer learning activities to promote cognitive development than do children in formal arrangements (Malik et al. 2018). For example,

preschool children in an FFN watch two hours of television per day compared with those in formal programs, who watch seven minutes. In addition, 93 percent of children in formal arrangements are read to every day, compared with 67 percent of children in an FFN. Many counties have programs in place to support FFN providers and encourage them to become licensed. Recently, Sesame Street Workshop has pilot tested a new curriculum in California to improve FFN providers' capacity to provide developmentally appropriate care, build strong relationships with parents, and recognize the important role they play in the lives of the children for whom they care. Participating FFNs expressed strong satisfaction with the program, which, based on self-reports, appears to have improved the quality of care they offered (Fain 2019).

Compared with other states, California ranks low in access to developmental screening.

Despite a range of screening options in California, in 2011–12, 28.5 percent of children age ten months to five years received developmental screening, with California ranking number 30 in the nation (Stipek and Hunt 2019). However, this may be improving; according to the latest *California Child Care Study* (King et al. 2019), 82 percent of all providers reported assessing children's development or screening for developmental delays. Furthermore, California has a poor record of identifying young children with disabilities and providing them with services. The state is below the national average for every ethnic group in the percentage of infants and toddlers in early intervention services. The state also lacks a centralized, systematic screening program. Because of a shortage of spaces for children with special needs in regular preschool programs, the state's preschoolers with disabilities are more likely to be served in segregated settings (Stipek 2019a).

Participation in the Quality Counts California varies widely by county, as does the quality of programs by region across the state.

As of September 2017, only 28.7 percent of licensed centers and 6.8 percent of licensed FCCs participated in the QCC (Stipek and Bardack 2019). According to the forthcoming *California Child Care Study*, however, not all providers are eligible to participate. More than half of child care centers and licensed FCCs were eligible, but only 6 percent of license-exempt providers were. Among those that were eligible, participation rates were higher; 75 percent of child care centers in the study reported they were participating (King et al. 2019). Participation in the QCC varies considerably across regions of the state—for example, 46 percent of centers in San Francisco, 40 percent of centers in El Dorado, 17 percent of centers in Santa Clara, and 4 percent of centers in Alameda participate in the program (Stipek and Bardack 2019). These differences may be explained in part by local funding priorities and other contextual factors, including the degree to which providers compete with one another for customers. During FY 2017–18, only 17 percent of centers and less than 2 percent of licensed FCCs statewide were rated in the highest tiers (Tiers 4 and 5), with notable differences across counties in the number and percentage of sites rated as Tier 4 or 5 (exhibits 25 and 26). Counties with the highest percentages of Tier 4 or 5 child care centers include Inyo, Colusa, Glenn, and Santa Barbara, with at least 45 percent of all centers in those counties achieving a Tier 4 or 5 rating. Nevada County has the highest percentage of licensed FCCs with Tier 4 or 5 ratings, at 14 percent. Five counties have no Tier 4 or 5 child care centers or licensed FCCs at all, including Del

Norte, Lassen, Mariposa, Mendocino, and San Benito. However, with the low overall QCC participation levels, these cross-county comparisons may not fully reflect actual county differences in quality.

Exhibit 25. Number of Licensed Child Care Centers Participating in Quality Counts California That Received Full Ratings and Tier 3, 4, or 5 Quality Ratings, 2017–18 Program Year

n/m Reporting standard not met. Cell size too small to report.

County	Total number of licensed centers	Total number of centers participating in Quality Counts California	Total number of centers that have received full ratings	Total number of Quality Counts California-rated Tier 3 centers	Total number of Quality Counts California-rated Tier 4 and 5 centers	Total number of Quality Counts California-rated Tier 3, 4, and 5 centers	Percentage of licensed centers that are rated Tier 4 or 5
California statewide	14,722	3,826	3,342	561	2,561	3,122	17%
Alameda	774	189	180	35	134	169	17%
Alpine	n/m	n/m	n/m	n/m	n/m	n/m	n/m
Amador	15	10	n/m	n/m	n/m	n/m	n/m
Butte	102	23	12	n/m	10	n/m	10%
Calaveras	19	12	12	8	n/m	n/m	n/m
Colusa	15	7	7	n/m	7	n/m	47%
Contra Costa	531	95	71	15	49	64	9%
Del Norte	13	10	n/m	n/m	n/m	n/m	n/m
El Dorado	82	41	38	6	28	34	34%
Fresno	397	107	101	n/m	98	n/m	25%
Glenn	11	13	6	n/m	n/m	n/m	n/m
Humboldt	66	11	n/m	n/m	n/m	n/m	n/m

County	Total number of licensed centers	Total number of centers participating in Quality Counts California	Total number of centers that have received full ratings	Total number of Quality Counts California-rated Tier 3 centers	Total number of Quality Counts California -rated Tier 4 and 5 centers	Total number of Quality Counts California-rated Tier 3, 4, and 5 centers	Percentage of licensed centers that are rated Tier 4 or 5
Imperial	65	n/m	n/m	n/m	n/m	n/m	n/m
Inyo	14	8	8	n/m	8	n/m	57%
Kern	252	69	69	14	47	61	19%
Kings	47	32	21	n/m	20	n/m	43%
Lake	23	12	9	n/m	9	n/m	39%
Lassen	15	6	n/m	n/m	n/m	n/m	n/m
Los Angeles	3,471	656	639	235	314	549	9%
Madera	63	37	27	n/m	27	n/m	43%
Marin	184	48	25	n/m	21	n/m	11%
Mariposa	n/m	n/m	n/m	n/m	n/m	n/m	n/m
Mendocino	42	n/m	n/m	n/m	n/m	n/m	n/m
Merced	107	42	35	n/m	35	n/m	33%
Modoc	10	7	n/m	n/m	n/m	n/m	n/m
Mono	12	8	6	n/m	n/m	6	n/m
Monterey	147	42	39	6	33	39	22%
Napa	63	27	6	n/m	6	n/m	10%
Nevada	43	23	19	n/m	14	n/m	33%

County	Total number of licensed centers	Total number of centers participating in Quality Counts California	Total number of centers that have received full ratings	Total number of Quality Counts California-rated Tier 3 centers	Total number of Quality Counts California-rated Tier 4 and 5 centers	Total number of Quality Counts California-rated Tier 3, 4, and 5 centers	Percentage of licensed centers that are rated Tier 4 or 5
Orange	1,165	295	246	8	214	222	18%
Placer	196	37	20	n/m	20	n/m	10%
Plumas	11	6	n/m	n/m	n/m	n/m	n/m
Riverside	559	224	202	8	180	188	32%
Sacramento	664	231	200	23	155	178	23%
San Benito	21	9	n/m	n/m	n/m	n/m	n/m
San Bernardino	596	123	121	22	95	117	16%
San Diego	1,225	223	207	6	199	205	16%
San Francisco	395	153	151	30	121	151	31%
San Joaquin	294	107	103	21	77	98	26%
San Luis Obispo	132	39	32	n/m	26	n/m	20%
San Mateo	385	80	74	14	59	73	15%
Santa Barbara	188	91	91	n/m	84	n/m	45%
Santa Clara	883	119	115	18	93	111	11%

County	Total number of licensed centers	Total number of centers participating in Quality Counts California	Total number of centers that have received full ratings	Total number of Quality Counts California-rated Tier 3 centers	Total number of Quality Counts California -rated Tier 4 and 5 centers	Total number of Quality Counts California-rated Tier 3, 4, and 5 centers	Percentage of licensed centers that are rated Tier 4 or 5
Santa Cruz	134	45	43	n/m	41	n/m	31%
Shasta	86	55	41	18	20	38	23%
Sierra	n/m	n/m	n/m	n/m	n/m	n/m	n/m
Siskiyou	23	19	14	9	n/m	n/m	n/m
Solano	130	34	21	n/m	18	n/m	14%
Sonoma	192	64	46	n/m	45	n/m	23%
Stanislaus	168	52	50	n/m	37	n/m	22%
Sutter	50	25	11	n/m	9	n/m	18%
Tehama	34	26	12	n/m	7	n/m	21%
Trinity	n/m	9	n/m	n/m	n/m	n/m	n/m
Tulare	125	37	35	n/m	35	n/m	28%
Tuolumne	23	13	8	n/m	6	n/m	26%
Ventura	307	105	98	7	88	95	29%
Yolo	116	46	38	7	31	38	27%
Yuba	25	15	11	n/m	9	n/m	36%

Note. Sites' overall QRIS tier rating refers to the most up-to-date QRIS tier rating for the reporting period. All sites with tier ratings of 4 or 5 are either centers or licensed FCCH.

Source. CDSS 2019a, 2019b.

Exhibit 26. Number of Licensed Family Child Care Homes Participating in Quality Counts California That Received Full Ratings and Tier 3, 4, or 5 Quality Ratings, 2017–18 Program Year

n/m Reporting standard not met. Cell size too small to report.

County	Total number of licensed family child care homes	Total number of family child care homes participating in Quality Counts California	Total number of family child care homes that have received full ratings	Total number of Quality Counts California-rated Tier 3 family child care homes	Total number of Quality Counts California-rated Tier 4 and 5 licensed family child care homes	Total number of Quality Counts California-rated Tier 3, 4 and 5 licensed family child care homes	Percentage of licensed family child care homes that are rated Tier 4 or 5
California statewide	26,815	2,438	1,135	250	355	605	1%
Alameda	1,394	85	35	11	10	21	1%
Alpine	n/m	n/m	n/m	n/m	n/m	n/m	n/m
Amador	33	6	n/m	n/m	n/m	n/m	n/m
Butte	113	12	n/m	n/m	n/m	n/m	n/m
Calaveras	32	n/m	n/m	n/m	n/m	n/m	n/m
Colusa	46	n/m	n/m	n/m	n/m	n/m	n/m
Contra Costa	932	62	26	n/m	15	n/m	2%
Del Norte	37	7	n/m	n/m	n/m	n/m	n/m

County	Total number of licensed family child care homes	Total number of family child care homes participating in Quality Counts California	Total number of family child care homes that have received full ratings	Total number of Quality Counts California-rated Tier 3 family child care homes	Total number of Quality Counts California-rated Tier 4 and 5 licensed family child care homes	Total number of Quality Counts California-rated Tier 3, 4 and 5 licensed family child care homes	Percentage of licensed family child care homes that are rated Tier 4 or 5
El Dorado	76	47	43	6	n/m	n/m	n/m
Fresno	563	41	39	n/m	34	n/m	6%
Glenn	44	14	n/m	n/m	n/m	n/m	n/m
Humboldt	117	19	n/m	n/m	n/m	n/m	n/m
Imperial	266	17	n/m	n/m	n/m	n/m	n/m
Inyo	21	17	n/m	n/m	n/m	n/m	n/m
Kern	626	59	57	21	7	28	1%
Kings	175	29	n/m	n/m	n/m	n/m	n/m
Lake	61	n/m	n/m	n/m	n/m	n/m	n/m
Lassen	14	n/m	n/m	n/m	n/m	n/m	n/m
Los Angeles	5,678	278	220	56	26	82	0%
Madera	131	9	n/m	n/m	n/m	n/m	n/m
Marin	175	13	n/m	n/m	n/m	n/m	n/m
Mariposa	15	6	n/m	n/m	n/m	n/m	n/m

County	Total number of licensed family child care homes	Total number of family child care homes participating in Quality Counts California	Total number of family child care homes that have received full ratings	Total number of Quality Counts California-rated Tier 3 family child care homes	Total number of Quality Counts California-rated Tier 4 and 5 licensed family child care homes	Total number of Quality Counts California-rated Tier 3, 4 and 5 licensed family child care homes	Percentage of licensed family child care homes that are rated Tier 4 or 5
Mendocino	72	n/m	n/m	n/m	n/m	n/m	n/m
Merced	198	44	28	n/m	n/m	n/m	n/m
Modoc	16	5	n/m	n/m	n/m	n/m	n/m
Mono	12	8	8	n/m	n/m	n/m	n/m
Monterey	361	28	24	n/m	19	n/m	5%
Napa	76	12	n/m	n/m	n/m	n/m	n/m
Nevada	64	22	13	n/m	9	n/m	14%
Orange	1,119	64	52	12	18	30	2%
Placer	302	86	14	n/m	n/m	n/m	n/m
Plumas	28	n/m	n/m	n/m	n/m	n/m	n/m
Riverside	1,479	173	111	29	14	43	1%
Sacramento	1,217	46	25	n/m	14	n/m	1%
San Benito	64	12	n/m	n/m	n/m	n/m	n/m
San Bernardino	981	58	58	11	9	20	1%

County	Total number of licensed family child care homes	Total number of family child care homes participating in Quality Counts California	Total number of family child care homes that have received full ratings	Total number of Quality Counts California-rated Tier 3 family child care homes	Total number of Quality Counts California-rated Tier 4 and 5 licensed family child care homes	Total number of Quality Counts California-rated Tier 3, 4 and 5 licensed family child care homes	Percentage of licensed family child care homes that are rated Tier 4 or 5
San Diego	3,352	174	n/m	n/m	n/m	n/m	n/m
San Francisco	759	250	22	6	16	22	2%
San Joaquin	669	47	47	19	12	31	2%
San Luis Obispo	222	42	35	n/m	n/m	n/m	n/m
San Mateo	595	25	21	6	n/m	n/m	n/m
Santa Barbara	360	58	31	n/m	25	n/m	7%
Santa Clara	1,462	188	39	11	12	23	1%
Santa Cruz	281	32	31	6	24	30	9%
Shasta	110	24	n/m	n/m	n/m	n/m	n/m
Sierra	n/m	n/m	n/m	n/m	n/m	n/m	n/m
Siskiyou	24	n/m	n/m	n/m	n/m	n/m	n/m
Solano	399	28	n/m	n/m	n/m	n/m	n/m

County	Total number of licensed family child care homes	Total number of family child care homes participating in Quality Counts California	Total number of family child care homes that have received full ratings	Total number of Quality Counts California-rated Tier 3 family child care homes	Total number of Quality Counts California-rated Tier 4 and 5 licensed family child care homes	Total number of Quality Counts California-rated Tier 3, 4 and 5 licensed family child care homes	Percentage of licensed family child care homes that are rated Tier 4 or 5
Sonoma	341	39	20	n/m	19	n/m	6%
Stanislaus	301	34	26	n/m	n/m	n/m	n/m
Sutter	84	10	n/m	n/m	n/m	n/m	n/m
Tehama	50	16	6	n/m	n/m	n/m	n/m
Trinity	10	n/m	n/m	n/m	n/m	n/m	n/m
Tulare	430	82	20	n/m	19	n/m	4%
Tuolumne	36	11	n/m	n/m	n/m	n/m	n/m
Ventura	538	47	44	10	28	38	5%
Yolo	178	21	6	n/m	n/m	n/m	n/m
Yuba	73	11	10	n/m	n/m	n/m	n/m

Note. Sites' overall QRIS tier rating refers to the most up-to-date QRIS tier rating for the reporting period. All sites with tier ratings of 4 or 5 are either centers or licensed FCCHs.

Source. CDSS 2019a, 2019b.

In addition to the variation in QCC participation across counties and the types of providers participating, according to a state CDE official, a lack of consistency exists in what the ratings mean. This inconsistency is a problem, the official notes, if the state wants to move toward a tiered reimbursement system. In that case, the official stresses, “We have to make sure that actually when we say somebody is at a four it is a four whether you’re in the north or the south [of the state]. So we have to really work ... to ensure that there’s fidelity and consistency, and equity about how that is all happening.”

As the state moves toward long-term planning for the QCC system, consideration is being given to how other states administer their QRIS. One strategy is to require any provider who receives a subsidy to participate in the QRIS. Another strategy is to provide higher reimbursement to providers who reach higher tiers. Finally, the CDE state official highlights the need to create a cost-efficient model for the QCC, noting, “because if the cost for rating is so high, then how does that leave ... funds that can be used for tiered reimbursement to reward quality?” Cost savings might also result from reducing investments in the highly popular but expensive component of coaching and instead encouraging programs to implement internal systems of ongoing continuous quality improvement whereby the coaches are part of a periodic check to see what is happening. According to the state official, the cost model for the QCC program must be “viable on three fronts—quality improvement, the rating and assessment, and the reimbursement.”

Relatively few early learning and care programs in California are nationally accredited.

In general, California has not promoted national accreditation as a strategy for quality improvement. Instead, the state has emphasized the QCC/QRIS as its primary rating system to incentivize quality. Thus, it is not clear that a low accreditation rate represents a quality gap. That said, the NAEYC accreditation standards are widely used by both federal agencies and advocacy organizations such as Child Care Aware to rate states on quality benchmarks. Only 2 percent of licensed centers and FCCHs in California are nationally accredited (see exhibit 34 in appendix C for details). A variety of factors may contribute to this low accreditation rate, including the relative expense and time required to obtain accreditation. According to the NAEYC Accreditation Fee Sheet (NAEYC, n.d.), expenses for the four-step accreditation process vary based on center size, with fees for a center serving 61 to 120 children totaling about \$2,500. The timeframe for completing the accreditation process is said to be 18 months to two years. For FCC accreditation, the National Association for Family Child Care (NAFCC) offers an accreditation package that costs \$945 for members and \$1,340 for nonmembers.

The NAEYC and NAFCC offer voluntary accreditation systems to early childhood education (ECE) providers and FCC providers, respectively. The NAEYC accreditation process evaluates the quality of early learning provision based on the following: (1) 10 evidence-based benchmarks, (2) encompassing program environment parameters, (3) teaching and curriculum effectiveness, (4) family and community engagement, and (5) children’s developmental outcomes. Similarly, the NAFCC accreditation process assesses FCC quality in the following five domains: (1) relationships, (2) curriculum, (3) teaching, (4) assessment of child progress, and (5) health.

As of June 2019, a total of 633 child care centers and FCCHs in California have received and maintained their accreditation status through the NAEYC or NAFCC (which represents 2 percent of all licensed centers and FCCHs in the state). The county with the largest percentage of NAEYC- or NAFCC-accredited licensed centers and FCCHs is Santa Barbara, with 15 percent of its licensed facilities having NAEYC or NAFCC accreditation. This relatively high accreditation rate may be attributed to the effective collaboration between First 5 Santa Barbara County and NAEYC directed toward aligning the local QRIS rating system with NAEYC's accreditation process and standards. By setting the NAEYC accreditation status as a prerequisite for the highest tier rating in the California QRIS rating system, Santa Barbara County has increased the number of NAEYC-accredited programs from 6 in 2000 to 60 in 2019 (Santa Barbara County Quality Counts 2019). In comparison, 21 out of 58 counties in California have no accredited centers or FCCHs, and only 10 counties in the state have more than 2 percent of their licensed centers or FCCHs accredited.

Workforce

A qualified and supported workforce is the foundation for high-quality ELC programming. This section presents a portrait of California's ELC workforce, including issues related to compensation, staff turnover, and training. This section relates to the following question from the federal needs assessment guidance, with the focus specifically placed on workforce issues:

- *What do you see as your biggest need and opportunity in improving the quality and availability of care, particularly for vulnerable or underserved children and those in rural areas? This should include a discussion of needs and opportunities related to strengthening the early care and education workforce in terms of training and the retention of high-quality staff and spaces across the early care and education system, including both center-based and family child care providers.*

Workforce Size and Education. According to the Bureau of Labor Statistics (BLS), as of May 2018, California had 60,460 child care workers (BLS 2019). The Center for the Study of Child Care Employment (2018) estimates the state's paid ECE workforce to be between 103,000 and 120,000, excluding FFN providers (Austin, Edwards, and Whitebook 2018). A different study that included FFN providers estimated that 46 percent of the ECE workforce is employed by center-based providers, 5 percent is employed in licensed FCCHs, and 49 percent is employed as FFN care providers. This data is based on workforce size estimates from the 2012 National Survey of ECE. Forty-seven percent of center-based teachers hold a college degree or higher, compared with 15 percent of aides and assistants (Austin, Edwards, and Whitebook 2018).

Compensation. Early learning and care staff wages in California are low. In 2012, 36 percent of all center-based teaching staff (teachers and aides) earned between \$10.10 and \$14.99 per hour, with 14 percent of these staff earning less than \$10.10 per hour. Staff working with preschool-age children earned more than those serving infants and toddlers (\$16.90 versus \$14.20 per hour in 2012). According to the BLS, California child care workers earned an average of \$13.77 per hour as of May 2018. A 2018 report found

that 58 percent of child care workers in California depend on at least one source of public income support to make ends meet (Loeb et al. 2018).

Early childhood education teachers make much less than teachers in K–12. In 2017, the median wage for child care workers in California was \$12.29 per hour, compared with \$38.33 per hour for kindergarten teachers (California Assembly Blue Ribbon Commission 2019).

The average annual salary for child care workers is \$24,150 while preschool teachers receive an average annual salary of \$31,720, and kindergarten teachers research \$63,940 on average annually (Melnick et al. 2018). The differences in pay are partially explained by the lower degree requirements facing ECE teachers. However, even for teachers with the same credentials, substantial differences in pay still exist between those working in ECE settings and those working in K–12. California is 1 of 26 states without a pay parity policy. According to *Getting Down to Facts II: Early Childhood Education in California* (Stipek, 2019b), no other state policy will do more to promote better pre-K–3 alignment than creating training and pay equity between pre-K and elementary teachers.

Teacher Preparation. In addition to compensation, great disparity exists in teacher preparation for pre-K and elementary school teachers. The certification requirements for preschool teachers in California are among the lowest in the country—24 college units and no supervised field practicum (Stipek 2019b). California elementary teachers, in contrast, must have both a Bachelor of Arts (BA) and complete a yearlong post-BA program in teaching. Although there is movement in the state to increase the certification and degree requirements for preschool teachers, such plans are unrealistic without also increasing compensation to make salary commensurate with those requirements.

Between the 2004–05 and 2013–14 academic years, the number of institutions offering ECE degree programs increased by 9 percent from 136 to 145. In addition, the number of programs that are focused on infants and toddlers is underrepresented at the BA and Master of Arts levels, and as interviewees pointed out, these programs do not offer much hands-on training (Austin et al. 2015).

Professional Development. Despite low wages, ELC providers are engaged in myriad efforts, supported by federal, state, local, and foundation funds, to improve the quality of care they offer. Most recently, California allocated \$195 million for the Early Learning and Care Workforce Development Grant Program to support professional development and supports aligned with QCC for ELC providers. A long-standing resource in California is the Program for Infant/Toddler Care (PITC), a partnership between WestEd and the CDE, which has provided statewide training to thousands of providers serving infants and toddlers. Quality Counts California supports providers with training and support to further their professional development and improve their QCC ratings. The AB 212 Child Care Salary Retention Program provides funding to LPCs in participating counties in an effort to improve retention of child development staff. The funds may be used for professional development, financial aid for further education, and increasing staff compensation and benefits. The First 5 Improve and Maximize Programs So All Children Thrive initiative grants support counties in engaging families in early learning with their children,

increasing high-quality programming, and coordinating professional development work groups and QRIS participation for child care providers. In addition, training has been offered on the *Responsive Early Education for Boys of Color: Strength-Based Approaches to Improve Equity* book project, a collaboration between WestEd and the CDE. This training has included highlighting research on inequitable outcomes; discussing the role of bias and stereotypes; and introducing a range of responsive, strengths-based practices and family engagement strategies to help young boys of color thrive.

County ELC leaders also discussed their efforts to raise the quality of license-exempt FFN care through professional development. They noted that many licensed home-based providers were not as interested in participating in QCC as their center-based counterparts. Strategies targeted to FCC and FFN providers include partnerships with local colleges and universities to offer FCC credit-bearing units taught in multiple languages (English and Spanish). The R&R agency representatives also emphasized that they invite all caregivers—licensed providers as well as FFN care providers—to trainings and that they offer special events and activities to FFNs, such as play groups held at family resource centers.

According to ELC stakeholders in interviews, common training topics included: (1) providing trauma-informed care, (2) supporting children with special needs, (3) addressing challenging behaviors, and (4) supporting children from migrant communities. In particular, working with DLLs is a high training priority for many counties and providers. It is important to note that currently, in order to obtain a Child Development Permit in California, no course about language development for DLLs is required.

A survey conducted by the CDE in the spring of 2019 indicated that teachers identified two hurdles to participation in professional development: (1) a lack of funds and (2) a lack of time. To increase engagement in professional development, survey respondents suggested that funds to offset the costs for college-level courses or training, paid time off to attend these offerings, and compensation that increases with higher levels of education and tenure in the field would make a big difference (Early Edge California 2019a). In interviews with LPCs and R&R agencies, respondents cited other practical and logistical challenges to raising the quality of the workforce through training. Transportation and technology are significant barriers in some of the more rural counties in California. The long distances that ELC staff must travel to participate in professional development can deter workers from attending a training. In addition, some mountainous rural counties lack consistent internet service, which can make training and coaching via Skype and the internet a challenge. Fortunately, this latter challenge is being addressed by efforts to bring high-speed internet to even the most remote parts of the state.

Recruitment and Retention. Early learning and care teacher recruitment and retention is a continuing challenge. In discussions, ELC providers repeatedly mentioned having to close centers or reduce operational hours from full year to part year because they were unable to find or retain qualified staff. A stakeholder from a rural county said, “One access gap is finding qualified people to run the programs. We’re having a hard time finding people that have the qualifications to operate a State Preschool or even be a teacher in a

State Preschool.” Low compensation contributes to staff recruitment and retention challenges (Stipek 2019a). A representative from a rural county shared that “AB 212 funds that we get to train up our State Preschool folks, we get maybe \$8,000 a year to do that. And so, we’ll train somebody up and then they’ll leave and get a job with a school district that pays a lot more or leave the county.”

Because all of these challenges are linked, tackling only one part of the problem is not sufficient. Recruitment, retention, and raising qualification requirements are linked to compensation, which is linked to reimbursement rates, as noted by several interviewees. An ELC leader in a large urban county said, “What we hear is that it’s challenging to recruit and keep people because that’s a compensation issue. And I think tied to that too, particularly for these subsidy programs that the reimbursement rates do not pay for what it costs to operate a program and to pay salaries that keep people on board.”

Still, people are continuing to pursue degrees in early childhood education and child development. According to survey responses from 32 LPC coordinators, a total of 1,312 associate degrees in these fields were expected to be awarded in their counties in spring 2019. According to reports from 28 counties, a total of 915 bachelor’s degrees were expected to be awarded in the same time period (exhibit 27).

Exhibit 27. Number of Associate and Bachelor’s Degrees in Child Development or Early Childhood Education Expected to Be Awarded in Spring 2019

Type of degree	Numbers of counties	Total for responding counties	County average
Associate degrees	32	1,312	41
Bachelor’s degrees	28	915	33

Source. Local Planning Council Coordinator Survey, 2019.

In the same survey, approximately half (47 percent) of 36 LPC coordinators reported an increase in the number of associate degree graduates in the past three years, and one-third (33 percent) of the reporting 30 counties n increases in the number of bachelor’s degrees. More often, counties reported stable numbers of bachelor’s degrees, and fewer counties reported decreasing numbers of associate degree graduates (22 percent) and bachelor’s degree recipients (27 percent) in the field (exhibit 28).

Exhibit 28. Change in Associate and Bachelor’s Degree Graduates in Child Development Over the Past Three Years Among Reporting Counties

Change in associate and bachelor’s degree graduates in child development	Associate degree percentage (n = 36)	Bachelor’s degree percentage (n = 30)
Decreasing	22%	27%

Change in associate and bachelor's degree graduates in child development	Associate degree percentage (n = 36)	Bachelor's degree percentage (n = 30)
Stable	31%	40%
Increasing	47%	33%

Source. Local Planning Council Coordinator Survey, 2019.

Availability of Programs and Supports for Special Populations

This section describes the types of programs and supports that are available to support young children and their families in California. For this needs assessment, the focus is on how the state supports children with developmental delays, tribal children, children who are DLLs, and families in crisis.

Children with Developmental Delays

California has state and local systems and services to support children with developmental delays. This section addresses the following questions in the federal needs assessment guidance:

- *What programs and supports do you have available to identify children who are developmentally delayed and connect them to services?*
- *How effective is the connection between these programs and supports and your early care and education system?*

The CDE and the DDS collaborate to provide services to children with developmental delays and disabilities. Overseen by the DDS, the Regional Centers' Early Start Program is the main provider of early intervention services, serving about 33,500 infants and toddlers with special needs (Taylor 2018). The state has recently expanded services for inclusive ELC settings, with approximately \$167 million in funding to increase access for young children from birth to five years of age.

For preschool children, site-based support services are provided in regular ELC programs or in pull-out (not maximally inclusive) arrangements. For example, special education preschools (called "special day classes" by some) are in many cases in separate classrooms and do not include children without special needs. Individuals with Disabilities Education Act data reported to the federal Office of Special Education and Rehabilitative Services by California for 2017–18 indicated that 50.9 percent of the 83,853 children with special needs ages three to five were served in a setting other than a regular ELC classroom (US Department of Education, n.d.).

Site-Based Services

- *Developmental screening (universal)*
- *Vision/hearing/dental screenings*
- *Observations (assessments)*
- *Behavioral/early childhood mental health services*
- *Social–emotional development, early literacy, math, science*
- *Speech therapy, occupational therapy, social work, nursing*
- *One-on-one staffing*
- *Parent navigation and follow-up on referrals/placements*
- *Parent educational nights*
- *Wraparound services*

In interviews, many ELC leaders acknowledged the important role they play in connecting children with special needs and their families with services in the community, if available, or in neighboring counties if needed. Respondents also described other county- or regional-level programs that helped identify and provide supports. In particular, many talked about services in alternative natural settings or provided by systems external to ELC (settings different from ELC program sites), including libraries/librarians, pediatrician’s/doctor’s offices, crisis nurseries, and programs for women and children experiencing homelessness. Services included developmental screening; literacy activities; and referrals to connect families to needed education, health, and social services and promote their engagement in those services. A statewide representative from the California State Library provided this insight:

They’re working with children with special needs, and the special needs story time, and out in the community ... because the librarians are trusted, any partners we bring in, they are trusted because so often these at-risk populations do not want to talk to people who are authority figures, because they don’t trust them after a lifetime of [negative] experiences.

Professional development to build the capacity of the workforce to effectively identify and serve children with special needs is critical. Interview respondents described many different agencies that provide the ELC field with training, technical assistance, consultation, and other forms of professional development. These supports focus on supporting children with special needs; managing challenging behavior/positive behavior intervention and supports, trauma, adverse childhood experiences; understanding IEPs, and understanding supports needed for families with children with special needs. In addition, stakeholders emphasized the importance of helping teachers manage stress and avoid burnout in working with this population.

Early learning and care stakeholders described a number of barriers to supporting children with developmental delays. For example, funding sources that incentivize service access and inclusion are not readily available at the local level, are allowed to expire, or have policy restrictions constraining their use, which is a challenge for local contexts where the required types of service providers or programs may not always be available. A

few interview respondents stated that teachers were not paid enough and that programs were not receiving the resources they needed to provide high-quality services to children with special needs.

System capacity, site-based support, and professional development challenges included: (1) a lack of qualified staff and training (particularly in rural areas), (2) a lack of resources for sites to install accommodations in their facilities and otherwise equip the programs to serve children with special needs (particularly in smaller and rural programs), and (3) a lack of services and supports for infants and toddlers with special needs. A rural LPC coordinator explained that when trying to embed more supports within the county, the reaction received is, “You guys are just too small. We can’t afford to put anybody up there.”

Recommendations for Increasing Access for Children with Special Needs

Interview respondents identified the following strategies to support access to high-quality and appropriate ECL for children with special needs, touching on funding policy, professional development, and cross-system collaboration and coordination at the county level:

- Increase dedicated funding for children with special needs.
- Loosen restrictions around grant funding so that it can be spent on local agencies and resources to address locally identified needs, particularly private agencies that are part of inclusion collaboratives.
- Increase the availability of state or locally funded training and supports for providers serving children with special needs, including professional development on preventing and reducing preschool expulsion and promoting provider well-being.
- Enhance cross-system collaboration and connection to other services in the county to support effective referrals and coordination of services, including providing the resources needed to engage in collaboration and service coordination and facilitating formalized referral processes between services for children and families.

Tribal Children

Efforts in California are addressing the need to build stronger partnerships between tribes and the state, promote increased collaboration between local county early learning and care leaders and tribes, and improve access to high-quality care for tribal children.

According to the most recent census data, California is home to more people of Native American/Alaska Native heritage than any other state (Center for Families, Children and the Courts 2012). California is home to 109 federally recognized Indian tribes, approximately 45 tribal communities of formerly recognized tribes terminated as part of the United States’ 1950s termination policy, and tribal communities that were never recognized by the federal government. Tribes are everywhere throughout the state,

including near highly populated cities like Los Angeles, San Francisco, San Diego, and Sacramento, and in rural areas such as the mountains of Northern and Eastern California and the high deserts of Southern and Southeastern California (Center for Families, Children and the Courts, n.d.). Eighty percent of federally recognized tribes in the state receive Tribal CCDF dollars, which are used to provide ELC services through center-based programs, regulated FFN care, and licensed facilities (California Assembly Blue Ribbon Commission 2019).

Tribes have a long and rich history of raising healthy children. At the same time, colonization, forced assimilation, and intergenerational trauma have created social conditions that threaten the well-being of tribal children. In some communities, traditional practices and beliefs have diminished or eroded. Yet the strengths of the culture that once ensured healthy and strong children are still viable assets for helping overcome chronic health problems and negative social conditions created by past trauma and current disparities. Increasingly, tribes are in a process of recovery, rehabilitation, and cultural restoration. Ensuring that tribal children have access to culturally responsive, high-quality ELC is a critical component of this work.

In interviews with ELC leaders, some respondents spoke to the lack of tribal representation on ELC agencies, including at LPC meetings. Limited participation in county ELC organizations has led some tribal members to feel “out of the loop.” One respondent shared that “the state tends to think that tribal populations can fend for or take care of themselves.” Another common theme was that tribal programs located in rural communities are isolated from the county R&R agency and other county-level initiatives. The respondent added, “There is a thought that the tribes can take care of their own, so there is no outreach as far as I am aware of.”

Tribal representatives identified several needs within their respective communities and provided general observations regarding the provision of high-quality ELC services to tribal children. In particular, they pointed to a large unmet need for infant and toddler care in addition to services for preschool-age children. They also emphasized the need for a trained ELC workforce and the importance of efforts to increase public knowledge among tribal members about the components and characteristics of high-quality care.

In the survey of LPCs, coordinators from only nine counties reported that they had data on the tribal affiliations of children in their county.

Recognition of the historical trauma faced by tribes is a critical aspect of building and strengthening relationships between tribal nations and the state.

Every tribe and every community is going to have their own history and story, depending on what has happened in the past with collaboration with the tribe, or even a lot of the intergenerational and historical trauma at the local level that people don't ever really talk about when it comes to tribes. When you work with the Department of Social Services, many, many years ago, when Social Services came knocking at the door, they were taking

your children away. It didn't mean that they were coming to help and that they saw it as they're stealing our children.

This stakeholder continued, "I've heard things like, 'Well, we've invited the tribes and they just don't show up.' But there's that misstep in understanding that it's very, very uncomfortable for tribes to go where they haven't always been welcomed. If there's been a time where they've felt disrespected, it's hard to go back to that and revisit it again without remembering that experience."

Developing stronger partnerships between counties and tribes must include more education about the nature of tribal governance and sovereignty. For example, an interviewee said,

Certain things like the CACFP [the Child and Adult Care Food Program], in the beginning, we were told that we couldn't access that program as well because we weren't state-licensed. I had to actually find regulation that stated that Native American tribes were almost the same as a military base, is that it's sovereign land and that they could have access to the program, but nobody knew where that was in the regulation. Anyway, long story short, we've jumped a lot of hoops, and we've come a long way. There's been a lot of education, a lot more collaboration and partnerships and understanding, and of course, leadership as well. I think leadership is huge to the changes.

The CDE was praised by tribal interview respondents as making important strides to ensure the Department was inclusive of tribal nations.

There was a shift in the last probably four, five years in the willingness to come together in more meaningful conversation. I don't know if we were completely there, but there definitely was a shift and a coordinated effort to communicate and collaborate. I think we've since learned what it looks like in an equitable way with tribes, and not fully but at least we're having the conversations about it. That's probably since we've gotten Project HOPE that we really had those good conversations.

Project HOPE California is a partnership with the TCCAC and the CDE. It has support from BUILD and the Robert Wood Johnson Foundation, Boston Children's Hospital, and other stakeholders in California. The objective of Project HOPE is to build capacity at the local level to engage with the tribal community around early learning issues.

"I think [a] strength is that there's many tribes that are incorporating their culture and language into their [ELC] programs. I think that's a strength, to be able to really feel that they have the ability to enrich the lives of the children and who they are as people and their identity in their culture."

—Tribal ELC Leader

Another recent development to strengthen tribal ELC services relates to QCC, California's QRIS. Tribal communities across the state now will be included in a new region within the QCC (Region 11), whose creation was supported by a QCC Regional Certification and Coordination Grant. The TCCAC QCC activities are financed by the QCC-QRIS Block Grant. A representative from TCCAC noted the increased level of information available to tribal CCDF grantees, including self-assessment tools to help sites determine the level of quality they offer to young children and families. The TCCAC was planning to launch a QCC tribal region kickoff meeting in September 2019.

Dual Language Learners

California supports its diverse community of dual language learners in a variety of ways, including through state policies and resources, investments in research, and professional development. At the same time, training and supports for providers to build their capacity in serving dual language learners vary significantly across the state.

California is one of the most diverse states in the nation. Although nationally, DLLs make up about 30 percent of children from birth to age five, in California the rate is twice that (First 5 California 2019). To serve this large population of DLLs, California has created new policies, published resources to support practitioners serving young DLLs, and commissioned research studies to learn how to best serve these children.

This section addresses the following federal needs assessment questions:

- *What programs and supports do you have available to support children who are non-English speaking or reflect different cultures that connect them to services?*
- *How effective is the connection between these programs and supports and your early care and education system?*
- *Are these programs reaching children from vulnerable and underserved populations?*

The California English Learner Roadmap State Board of Education Policy: Educational Programs and Services for English Learners was passed by the State Board of Education on July 12, 2017. This policy is intended to guide the CDE in providing guidance to LEAs in order to welcome, understand, and educate the diverse population of students who are English learners attending California public schools. It articulates a common vision and mission for educating English learners and supports LEAs as they implement the State Board of Education policy (CDE 2019d).

In addition to legislation, the CDE has provided practitioners serving young DLLs and their families with several valuable resources, such as *California's Best Practices for Young Dual Language Learners: Research Overview Papers*, published in 2013. This publication provides early childhood educators with valuable information on the most current research on the development of young DLLs. This research review informed the *California Preschool Program Guidelines* (CDE 2015), a publication that addresses how

to provide high-quality developmentally and individually appropriate preschool services for young children. The state's commitment to DLLs continues with the DLL Pilot Study, commissioned by First 5 California in 2017. This pilot study aims to develop a deeper understanding of the learning experiences of DLL infants and toddlers and preschool-age children, including those who speak Spanish as well as those who speak other languages, across a variety of settings in California (First 5 California 2017).

When it comes to implementing state policies and guidelines, the programs and services available to support children who are non-English-speaking vary across different linguistic and geographic communities in California. Some areas of the state offer dual language immersion programs, with local ELC county stakeholders encouraging the state to expand these types of offerings. Local ELC interview respondents shared that there have also been cultural competency trainings and other professional development opportunities offered to help providers to better serve DLLs and their families. Even with these trainings, some stakeholders who were interviewed found it challenging to connect families with services in the ELC system, creating a service gap for some linguistic communities, including around transitions across services (for example, preschool to kindergarten).

Local ELC representatives mentioned specific challenges to effectively serving children who are DLLs and their families. For instance, many non-English-speaking families are afraid to use services in their communities because of concerns over their immigration status. In both urban and rural areas of the state, it is difficult to reach the families who are non-English-speaking or non-Spanish-speaking because sometimes particular communities lack ELC providers who speak the languages of children who make up a small share of the population in those communities.

Dual Language Learner Pilot Study Under Way.

The AIR is currently partnering with First 5 California to conduct the DLL Pilot Study. The study, which began in 2017 with a stakeholder engagement process, followed by a landscape study to understand practices used in diverse ELC programs around the state to support the learning and development of DLLs, including the promotion of their home languages. The study began with focus groups with key stakeholders in the study's 16 sample counties to understand the context in each county and the supports available to programs. Focus groups revealed strong overall beliefs among stakeholders in the value of bilingualism for children and an interest in promoting such skills. Stakeholders described challenges in supporting the ELC staff who educate DLLs, including difficulties finding, retaining, and training dual language teachers and caregivers. Few trainings are available to staff in their native languages. In particular, supports for caregivers of infants and toddlers and for children in license-exempt settings are especially limited. Some counties, however, have made an effort to provide coaching, DLL-specific trainings, and professional learning communities focused on caring for DLLs. Focus groups also revealed that instructional practices to support DLLs were sometimes intentional, but often were not, and they varied substantially from county to county and even among programs within counties and were influenced by the priorities of local leadership. Accountability and data systems are another challenge in California; because sites are not required to collect information on DLLs' learning in their home language and do not

have to report outcomes by language, these sites place little emphasis on collecting accurate data about DLLs and tracking their progress comprehensively. Even when data is collected on DLLs, the information is not collected in a consistent manner across systems and programs across the state—or even within counties—making monitoring across systems more difficult.

Dual Language Learner Professional Development Grants Awarded.

California is also making significant investments in professional development for teachers who serve DLLs. In 2018, the CDE awarded more than \$4 million in grants to organizations to provide educators with professional development specific to DLLs. These professional development offerings include training and coaching on specific models such as the Sobrato Early Academic Language (SEAL) model and the preschool Guided Language Acquisition Design (GLAD) model. Many sites using these models or participating in these funded trainings are included in the DLL Pilot Study described above.

Families in Crisis

California families face significant challenges, including poverty, homelessness, trauma, and natural disasters, among other obstacles. Families in crisis appear to benefit from initiatives designed to help them navigate systems of care and to promote mental health.

A strong and effective ELC system serves not just young children but their families as well. Interventions are most useful when they are part of a coordinated system of supportive services for families that include needed child care as well as such services as housing and transportation assistance, nutritional support, employment opportunities, and health care (Anderson et al. 2003). This section addresses work being done to support families in crisis in three areas: (1) supporting children and families experiencing homelessness, (2) supporting children in foster care, and (3) addressing the mental health needs of children and their parents. The following questions from the federal needs assessment guidance informed this section:

- *What programs or supports do you have available that help ensure that early care and education settings are able to connect families in crisis to needed programs or services (for example, family violence programs, emergency economic assistance, mental health care, and substance abuse treatment)? What in these programs and supports works well? What could work better?*

Homelessness. In 2018, the state's rate of homelessness was 33 per 10,000 residents, which is among the highest rates in the country (Cuellar Mejia and Hsieh 2019). Not surprisingly, some of the largest and most populated counties in the state tend to have the highest numbers of people experiencing homelessness. For example, in 2017, Los Angeles County had the highest population of homeless people in all of California, at roughly 55,000 (Cabales 2018). However, homelessness affects families and communities throughout the state. During interviews, ELC stakeholders from large and urban counties as well as those from small and rural counties reported that homelessness was a significant problem in their counties.

Members of families experiencing homelessness tend to face other challenges that are caused or exacerbated by their situation, such as mental health issues, poor physical health, substance abuse, and domestic violence. For example, in one meta-analysis, researchers found that 10–26 percent of preschool children experiencing homelessness had mental health problems requiring clinical evaluation (Bassuk et al. 2014).

Some agencies, programs, and child care settings prioritize or focus on finding child care for children of families in crisis. For example, representatives of two different R&R agencies explained that they prioritize child care programs for children who are at risk of or are experiencing neglect and physical, sexual, or emotional abuse (for example, children experiencing homelessness and children in CPS). Children experiencing homelessness are also automatically eligible for Head Start, regardless of income; however, as stated earlier, Head Start prohibits reserving spaces for children, so a place may not be open when a child experiencing homelessness needs it. Some other programs have staff dedicated to serving families experiencing homelessness. For example, the LAUSD has a Homeless Education Program designed to provide assistance to students and families experiencing homelessness in compliance with the McKinney-Vento Homeless Assistance Act (Los Angeles Unified School District, n.d.). Every local subdistrict in this large school district has access to a foster youth advocate, which one stakeholder likened to a mental health consultant. Foster youth advocates work specifically with children who are experiencing homelessness or who are in foster care. One stakeholder shared that in one county, a chapter of a statewide program is collaborating with the county office to develop and implement a program to offer child care and services to families experiencing homelessness, adding, “They are doing a remarkable job not just providing child care, but really providing navigation services for these families to help navigate all of the different systems of care that they need support with.”

Establishing trust and building relationships with at-risk families is especially important when working with these families. According to local ELC leaders, this work is sometimes easier in small rural counties than in densely populated, sprawling urban areas, where it can be particularly difficult to develop or maintain one-on-one relationships with families and with staff from other agencies that serve the families. As one urban county ELC stakeholder shared,

What we would like is if we could do warm handoffs to other service agencies, but usually what happens is that there’s so much turnover at these agencies, that once we make a good contact with one person, a few months later they’re no longer there. We end up having to provide parents and some of our child care providers with the general phone number versus we wish we could have the ability to just do a warm handoff of calling a specific person and saying, ‘Hey I’m going to send this person over, can you take care of them?’ In [our] county, that is increasingly difficult.

Children in Foster Care. The Emergency Child Care Bridge Program for Foster Care Children (Bridge Program) provides access to child care for relatives and other foster or resource parents who might not otherwise be able to assume the care of children in foster

care. Although other programs such as Head Start and CSPP give priority to children in foster care and others in the CPS system, the programs do not reserve spaces for these vulnerable children. The Bridge Program offers a child care navigator to help parents find care, at least six months of funding to pay for child care until the child transitions to permanent ELC from subsidized ELC, and trauma-informed care training for participating providers.

Early Childhood Mental Health. Vulnerable children cannot benefit from ELC if they are not present—whether because they have been expelled because of behavioral issues or because they are chronically absent. Providers are seeing more behavior problems and other social–emotional issues among young children (Manship, Jacobson, and Fuller 2018). In response, as indicated in the section on state strengths in ELC quality earlier in this report, two advances in California include 2017 legislation that prohibits Title 5 providers from expelling or suspending children without making an effort to help the child remain, and subsequent 2018 legislation that allows Title 5 providers to apply an adjustment factor to their existing funds that enables them to hire ECMHC consultants (Hinton 2018). In addition, as of 2016, school districts began tracking chronic absence among kindergartners as part of the California Longitudinal Pupil Achievement Data System (CALPADS), with the first ever chronic absence reports posted on California's DataQuest system (H. Chang, personal communication, April 4, 2019).

Promising Local Practice

Although Head Start and State Preschool prioritize children and the homeless in the child welfare system, most ELC programs run on a first-come, first-served basis. As a result, subsidized child care funding is not always directed toward the most vulnerable children. However, a pilot program in the LAUSD works with the local Department of Children and Family Services to identify areas with a high percentage of foster youth. Each school or Head Start calls individual families to encourage them to enroll in ELC services (Melnick et al. 2018).

The use of infant and ECMHC consultants has proven to be an effective strategy to address these issues. For example, the use of a mental health consultant improves providers' capacities to address challenging behavior in young children, reduces stress in parents and teachers, and decreases the rates at which children are expelled from early childhood programs for behavior problems (ZERO TO THREE 2016). Mental health consultants have specific knowledge and competencies to deliver effective prevention and mental health promotion services as well as specialized knowledge of ELC systems and child development. They understand the effects of stressors on child development and mental health, how substance use and domestic and community violence can affect mental well-being, and the relationship between adult mental illness and infant social–emotional development.

Some counties and programs are also working to address the mental health needs of children and their families. Recent adjustments at the state level are meant to facilitate

this work. As discussed earlier in this report, AB 2698, which took effect in January 2019, amended California *EC* 8265.5 to “add a new adjustment factor of 0.05, which can be claimed in addition to any other single adjustment factor and would apply to all children within a classroom or FCC setting when ECMHC services are provided.” These statutory additions build on a statewide focus on (a) addressing challenging behaviors in classrooms and FCCH settings by supporting children and families through ECMHC services and (b) encouraging contractors to provide such services through an additional adjustment to the standard reimbursement rate to reflect the cost of providing such services (CDE 2019e).

In 2009, California and its pilot site, Alameda County, received a grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to implement Project LAUNCH (Linking Actions for Unmet Needs in Children’s Health), a project designed to promote the wellness of young children birth to age eight by integrating mental health supports into child- and family-serving systems. A key component of the project was supporting ECMHC in ELC settings and home visiting. In 2015, the state and Alameda County received a second grant to expand their work by helping three diverse counties (San Francisco, Fresno, and Nevada) to add mental health consultation to existing home visiting programs, strengthen parent leadership and engagement strategies, and improve cross-sector collaboration and systems integration efforts. Similar ECMHC efforts are under way in many other counties, including Los Angeles and San Francisco. These efforts must be rigorously evaluated in order to ascertain whether such investments pay off by achieving better long-term outcomes for children and for the providers that serve them.

Children Served or Awaiting Services in Early Learning and Care Programs

This section presents the unduplicated number of children served or awaiting services. The federal needs assessment guidance also includes questions related to the strengths and gaps of this data. This issue is addressed in the next section, which summarizes data issues across several of the domains in the guidance.

- *What data do you have describing the unduplicated number of children being served in existing programs? What are your biggest data gaps or challenges in this area?*

Unduplicated Number of Children Served and Children Awaiting Service

Limited information is available on the unduplicated number of children served. As mentioned above, Head Start California reports that during the 2016–17 program year, 32,763 children received combination funding—that is, these children were enrolled in Head Start or Early Head Start and also received funding from State Preschool, Title 5 center-based child care, or the Migrant Child Care Program.

Data from Santa Clara County’s new and growing child-level data system, which incorporates unique identifiers for children when they enter the system at different points, shows similar overlap. Data provided by the Santa Clara County Office of Education (SCCOE) estimates that between 390 and 400 children are enrolled in both a State Preschool program and Head Start. This represents almost three-quarters of children enrolled in the county’s half-day State Preschool programs. A snapshot of data from Santa Clara County’s data system from spring 2019 and observed overlap from different dates is presented in exhibit 29.

Exhibit 29. Dual Enrollment From Santa Clara County’s Child-Level Data System, Spring 2019

Type of Dual Enrollment	1/3/2019	2/22/2019	3/18/2019	4/8/2019	5/17/2019	6/17/2019
Children enrolled in both half-day State Preschool and Head Start	156	155	155	156	157	96
Children enrolled in both full-day State Preschool and Head Start	242	239	242	244	241	226
Subtotal	398	394	397	400	398	322

Source. Data provided by SCCOE, July 2019.

Information on the extent of dual enrollment in other programs—such as both Head Start and the APP—is not available. The American Institutes for Research will be administering a survey to a representative sample of providers (including APP providers) in fall 2019 to ask questions about children supported by multiple funding streams or enrolled in multiple programs. This will be the first time the state has attempted to collect data to estimate this unduplicated count across multiple programs.

Children on Waiting Lists

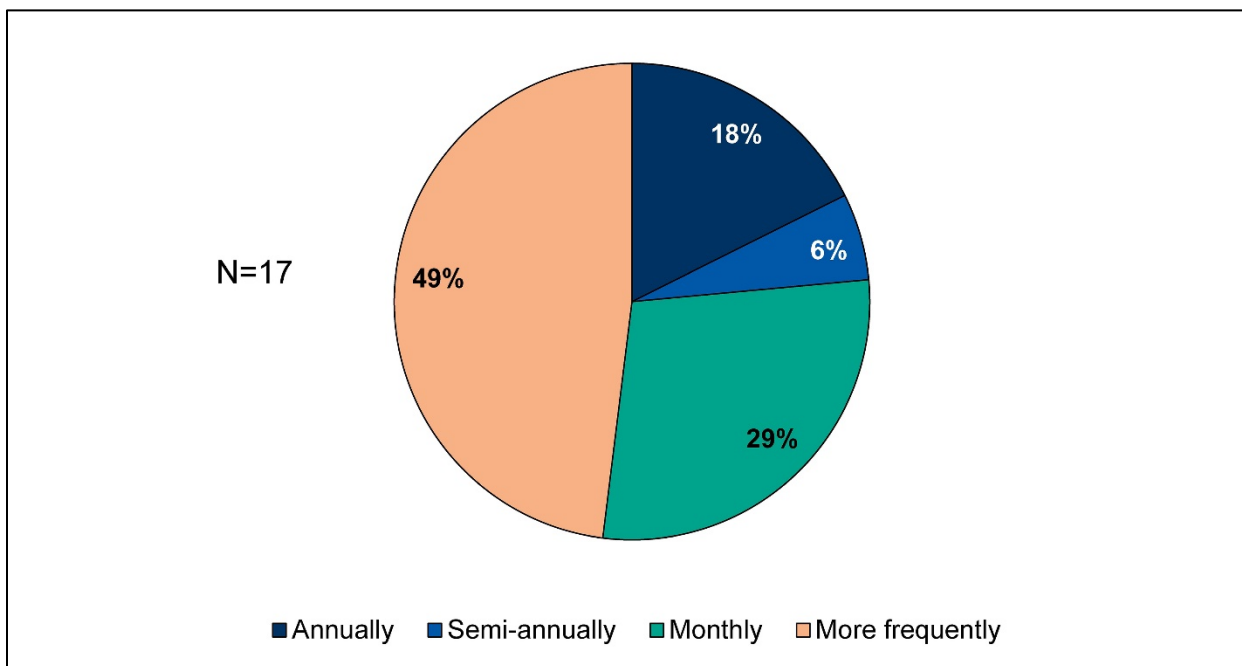
Although far from a perfect indicator of need for care, an important factor to consider in estimating unmet need is the number of children currently on waiting lists. According to the survey of LPC coordinators, 19 of California’s 58 counties currently operate Centralized Eligibility Lists (CELs). In 18 of these counties, the average per-county number of children currently on CELs is 1,723. That is, a total of more than 31,000 children were on a CEL in these 18 counties alone, representing 3.11 percent of all children under five in these counties.

Local Planning Council coordinators in counties with CELs most often reported that the CELs were updated at least monthly (exhibit 30).

Local Planning Council coordinators also reported on other waiting list numbers available to them, for individual agencies or providers. In the 42 counties that provided this information, at least 82,734 children were on waiting lists; 10,584 were reported to be

waiting to enroll in a CSPP program, and more than four times that many (46,342) were awaiting APP vouchers. The extent of duplication on these lists is yet unknown.

Exhibit 30. Frequency of Updates to Centralized Eligibility Lists



Data Gaps and How to Address Them

California faces significant gaps in data needed to answer important questions about early learning and care in the state. However, new and proposed investments in data systems, reporting requirements, and research will significantly improve the availability of this data in the future.

In completing this work, it was important to learn about gaps in the availability of information regarding California’s ELC system. The state ranked poorly in a 2013 Early Childhood Data Collaborative survey of 50 states and the District of Columbia. For example, 30 states linked their individual ECE data to K–12 data; 20 linked ECE data to social service data; 12 linked ECE data to state public health records; and 32 states have developed a statewide longitudinal ELC data system. None of these milestones have been accomplished in California (Stipek and Anantharajan 2019).

The following sections discuss data gaps and strengths in four areas: (1) the ELC workforce, (2) child-level information, (3) ELC programming, and (4) ELC systems. Data issues in relation to ELC facilities and ELC financing are integrated into later sections on these topics.

Early Learning and Care Workforce Data

This section first discusses existing data gaps regarding the ELC workforce. It then highlights some initiatives under way in the state to address those gaps, including

enhancing California's Workforce Registry, developing a unique identifier (ID) system for young children, and launching a new early childhood workforce survey.

Early Learning and Care Workforce Data: Existing Gaps

The Center for the Study of Child Care Employment (CSCCE) is the leading organization in California examining issues related to the ELC workforce. In a brief (Austin et al. 2018), the CSCCE identified critical policy questions that cannot be answered currently because of gaps in available workforce data. California lacks detailed and comprehensive information about teachers' education, compensation levels, turnover, retention, and other factors that can be used to answer questions about ELC providers in general as well as differences across types of providers (TK teachers, providers participating in QCC, and so forth).

California has a nascent system to house data on ELC staff, funded by First 5 California and private foundations, but participation is limited at this point in time. With support from multiple funders, the Child Care Alliance of Los Angeles (CCALA) leads the implementation of the web-based Early Care and Education Workforce Registry. This registry is designed to capture and track employment, training, and education information about registered ELC staff. In July 2019, Early Edge California gathered information from CCALA to provide an update on the registry (Early Edge California 2019b). The CCALA reported that approximately 68,000 ELC staff participate in the registry, including 10,000 FCC providers. In discussions with ELC leaders, both LPC and R&R agencies' staff reported that when ELC providers are encouraged to use California's workforce registry, they sometimes lack enthusiasm and often find the system interface difficult to use.

Early Learning and Care Workforce Data: Efforts to Address Gaps and Make Improvements

Several efforts are under way to address the ELC workforce data gaps in California, both in regard to the Workforce Registry and new data collection efforts to develop a better understanding of the state's workforce. Despite reported challenges with the registry, interviews with ELC leaders revealed that participation in the system can be increased by providing hands-on support to providers. As one interviewee from a large urban county explained,

The workforce registry was a huge initiative in the last year. We had staff from the registry come out and train our staff. All of our workshops and professional development conferences, everything, is entered into the registry. We had sessions where we actually helped providers register themselves. We would open up on a weekend and invite providers in and walk them through step by step on how to register and get their registry ID. Then our RSVPs for our workshops or providers are done online and we do require their work registry number. And if somebody wishes to attend and they don't have a registry number, we actually will register them and there.

In addition, the state is implementing new requirements to improve the participation rate in the registry. Since January 2017, the CDE has been requiring participants in its quality improvement professional development activities to register with the registry.

Furthermore, by 2020, all QCC trainers, coaches, and educators will be required to use the Workforce Registry (QCC, n.d.).

Plans are in place to expand the Workforce Registry. The CCALA reported that its short-term goals include ensuring consistent data collection across counties, establishing data-sharing agreements with all QCC counties, and developing a version of the registry that can be used on mobile phones. The CCALA identified a number of long-term goals and recommendations focused on increasing the participation rate among providers, adding training modules, and linking the registry to other relevant data systems.

Other initiatives to improve the quality of California's ELC workforce data include the work under way by the CSCCE. This organization will be conducting a new ECE workforce study in fall 2019, in partnership with the CCR&RN and with support from the CDE, First 5 California, the Heising-Simons Foundation, and the David and Lucile Packard Foundation. The study is designed to provide a one-time comprehensive snapshot of the ELC workforce across the state, including cross-county and regional variations.

Child-Level Data

States can benefit greatly from having a unified system that captures child-level ELC participation data. For example, when each child is assigned unique ID, it is possible to obtain an “unduplicated count”—meaning that if a child attends two different ELC settings, the data can show that this is a single child going to two care arrangements, not two separate children. Such child-level tracking can also capture how multiple funding streams are combined to serve a single child. A unified system can also show the extent to which the same child may be on a waiting list for more than one ELC setting. This information is essential for accurately capturing how many children are being served and under what combination of provider types and funding streams and what children are waiting for ELC services. Ideally, unique child IDs would link children's information across child-serving systems, providing more holistic information about their needs and service use. Finally, child-level IDs with demographic information can provide an effective means to capture equity in the provision of quality ELC.

Children Served: Data Strengths and Gaps

For more than a decade, AIR has hosted the Early Learning Needs Assessment Tool (ELNAT) <https://elneedsassessment.org/>, which enables users to estimate ELC enrollment by age cohort, program setting, and ZIP code. The tool also allows users to track enrollment by the type of state-funded or federally funded program as well as by the supply of licensed center-based or family child care. When combined with demographic data, the ELNAT is able to identify the neighborhoods and communities experiencing the highest levels of unmet need (sometimes referred to as “child care deserts”). Given the complex nature of ELC in California—where three different systems of subsidized child care for economically disadvantaged children exist, along with a TK program for age-eligible four year olds regardless of family income—this tool is unique in documenting the number of spaces by program across all these systems. In addition, the ELNAT is the only ELC database in California that tracks demographic characteristics and enrollment in the broad array of ELC programs by the smallest unit of service, the ZIP code.

Promising Local Practice

When statewide funding for the CELs ended in 2011 because of state budget cuts, San Francisco—with local funding from the Office of Early Care and Education and the Mimi and Peter Haas Fund—continued its CEL, known as the San Francisco Child Care Connection (SF3C). It is administered by the Children’s Council of San Francisco, a resource and referral agency. SF3C is a web-based system where income-eligible families can apply online for subsidized care rather than having to go to each contracted center or FCCH to apply and fill out numerous applications. Parents can apply through one form and submit their information online, by phone, via mail, or at the Children’s Council. The CEL also enables providers to fill their vacancies efficiently and helps policymakers better allocate resources (San Francisco Child Care Planning and Advisory Council 2017).

Through the development of the ELNAT, AIR has learned that California faces a number of challenges in accurately estimating counts of children served (and those awaiting service) by ELC programs. These barriers include the following:

- It is difficult to estimate current enrollment because California does not have a unique child identifier, and hence, counting the number of children enrolled per program may overstate enrollment because of dual enrollment or duplicated enrollment counting.
- It is difficult to estimate unmet need based on waiting lists because one child might be on multiple lists, and, again, no unique child identifier exists.
- Most counties lack a CEL, and one analysis found that many waiting lists are not kept up to date (US Government Accountability Office 2016). According to the survey of LPC coordinators, only 19 counties currently have a CEL, but most of these are updated more often than monthly.
- Although families in CalWORKs are guaranteed access to child care subsidies, equally needy low-income parents who are not CalWORKs participants are placed on a waiting list (Taylor 2014). As a result, other eligible parents may not sign up because they know there is a significant waiting list, they are unaware that they are eligible, or the enrollment process is burdensome (US Government Accountability Office 2016).

Accurate information about the number of children waiting to be offered a slot in an ELC program is also lacking. Only 11 county needs assessment reports included information about the number of children on waiting lists. In the survey of LPC coordinators, coordinators from 22 out of the 53 responding counties reported that they have little to no access to waiting lists for providers in their counties or are not able to regularly consult waiting lists for their needs assessments (exhibit 31).

Exhibit 31. Number and Percentage of Counties Reporting Access to Waiting Lists for Subsidized Child Care

Local Planning Council use of waiting lists	Number of counties	Percentage (n = 53)
LPC agency administers a Centralized Eligibility List	3	6%
LPC agency consults waiting lists administered by other agencies for LPC needs assessment or to help inform annual list of ZIP codes for priority for new spaces	30	56%
LPC agency has little or no access to waiting lists or does not regularly consult waiting lists	22	42%

The lack of a unique child identifier is one of the most pressing ECL data issues in California. Some other states have made significant progress in this work, providing potential models. For example, in Pennsylvania, the PAsecureID is a 10-digit number generated by the Pennsylvania Department of Education for each student. The PAsecureID is unique to each student and protects the confidentiality of individual students. This unique identifier is used by the Office of Child Development and Early Learning (OCDEL) to produce an unduplicated count of children served through early childhood programs and services (Sirinides 2013). In the state of Georgia, every student enrolling or enrolled in a publicly funded K–12 Georgia school or program, three year olds receiving Babies Can’t Wait services through a public school system, and all preschool students funded by lottery funds in both private and public pre-K programs are each assigned a Georgia Testing ID (GTID). The GTID assigned to a student is the student’s unique identifier; it does not change as the student moves through the system (Georgia Department of Education 2018).

In interviews, stakeholders expressed keen interest in creating a similar single ID–based system in California. Several stakeholders who were interviewed specifically mentioned the benefits of a unique child identifier, including that it can help determine the degree to which children are served in more than one child care program or setting and can also be used to track children’s outcomes when they enter the TK–12 system.

Early learning and care leaders indicated that California faced negative consequences because of the lack of child-level identifiers that are usable across systems. They mentioned that the state has insufficient or inaccurate data on particular populations of children, such as children with special needs, DLLs, children experiencing homelessness, and children from tribal families. One county-level stakeholder explained that very little is known about how many children with special needs are served in FCCHs or for-profit child care centers, likening the lack of knowledge about enrollment in these child care settings to “a black box of information.” Two different stakeholders raised concerns about the degree to which children from tribal families are accurately reflected in needs assessments.

Child-Level Data: Initiatives Under Way to Address Gaps and Make Improvements

California is making plans to significantly enhance its ability to track service use by children and families. AB 2960 (California Legislative Information, n.d.-a), which unanimously passed the Senate and the Assembly, requires the Superintendent of Public Instruction to develop an online portal to provide parents with information on comprehensive child care and development services. The portal will include: (1) program and eligibility information, (2) an online eligibility screening tool, (3) the opportunity to connect with R&R agencies, (4) assistance with selecting and assessing local child care programs, and (5) access to placement on local subsidized child care program lists (California Legislative Information, n.d.-a). As a result of AB 2960, the CDE and First 5 California began the process of planning and designing an Early Childhood Integrated Data System (ECIDS) along with a QRIS data system. This ECIDS will help integrate data from across early childhood programs and systems for informed statewide decision-making by agencies, policymakers, and other stakeholders.

The 2019 state budget allocates \$10 million for an early childhood database to connect unique data on children younger than five with K–12 data systems.

Meanwhile, several counties have already made progress in this area. For example, Santa Clara County is currently working to develop an integrated data system (IDS), building on its DataZone IDS, operated by the county office of education. Through this system, children in the county are assigned a unique child identifier (SSID) at birth or at first contact with a public service or agency. In Lake County, practitioners have created unique identifiers for children served in State Preschool programs, enabling them to follow these children through high school. Fresno County is also engaged in a pilot project to develop a system to assign a unique identifier to every child and create a database so that the children can be tracked.

Program-Level Data

This section discusses gaps in program-level data related to ELC availability as well as program quality and effectiveness (that is, child outcomes).

Program-Level Data: Gaps in Information on Availability

The state suffers from limited information on the number of available spaces in ELC programs as well as up-to-date information on the number of families who are eligible for those slots. Statewide, timely data is needed to better estimate participation rates for those slots. Statewide, timely data is needed to better estimate participation rates for each age cohort, particularly given that the participation rate for infants and toddlers is likely very different from that for preschoolers (Anthony et al. 2016).

Also missing is comprehensive data on the specific number of hours that ELC programs operate. The definition of full-time, for example, can vary by the type of child care setting, funding, and program. Many parents need full-time child care, but the state lacks data on how many of the “full-day” child care programs operate between 4 and 6 hours a day versus up to 10 hours a day and how many are open full year as opposed to only 8 or 10 months (Stipek 2019a). In addition, a gap exists in data regarding the enrollment of children in part-day versus full-day programming (including children who attend a

patchwork of two or more part-day programs to allow the families to get the care hours they need).

Work schedules are a critical factor affecting both parents' and providers' needs. Many children may be eligible for subsidized child care, but their parents' irregular or nonstandard work schedules may make using those child care programs impossible.

As noted above, an estimated 10 percent of children under five need care during nontraditional hours because of their parents work schedules. However, better data is needed on how many such spaces are available and the extent to which supply matches demand. Also noted earlier, only 41 percent of FCCHs and only 3 percent of centers offer care during nontraditional hours, according to the CCR&RN (2018). The LPC survey conducted for this needs assessment suggested a somewhat lower availability of care during nontraditional hours, with only 23 percent of FCCHs, 3 percent of infant and toddler centers, and 2 percent of preschool centers offering such care. According to the *California Child Care Study*, approximately one-third of parents surveyed used care on the weekend, evenings, or overnight. One in four families used care on a variable schedule, meaning that the days and hours when care was needed varied each week. This study also noted that license-exempt home-based providers offered more flexible hours and schedules for care compared with other types of facilities (King et al. 2019).

At the state level, changes are under way to track and address parents' needs. The CDE contracted with the California Child Care Resources & Referral Network (CCR&RN) to build the My Child Care Plan consumer education and referral website (CCR&RN 2019c). The CCR&RN anticipates that this website, expected to be completed by June 2020, will include a provider portal, a two-way system that allows child care providers to enter information about their programs and enables parents to search for child care. This system will build on a database that the CCR&RN is already implementing. As of late May 2019, 16 counties had switched from their existing local databases to the CCR&RN's database. The goal of My Child Care Plan is to allow users and providers to upload information directly to the state database. In counties that have their own systems, data will be uploaded locally first and then will be uploaded to the state level. In areas where providers do not update their information regularly, the R&R will contact them quarterly to determine the number of available slots.

Program-Level Data: Gaps in Information on Quality and Effectiveness

Only a relatively small number of ELC programs are involved in California's QCC QRIS system, which means that very little is known about the quality of the majority of child care programs in the state. As noted earlier, 28.7 percent of all licensed centers, 6.8 percent of FCC providers, and some FFN providers participate in QCC (Stipek and Bardack 2019).

In addition, recent research (California Assembly Blue Ribbon Commission 2019; Melnick et al. 2017) points to the lack of data on outcomes for children served in different kinds of ELC settings. Although some research has been done on the impact of quality standards on child outcomes for children in TK (Manship et al. 2017), little research has been done on outcomes for children in various preschool settings. Furthermore, even less is known about the quality of license-exempt care (Stipek and Bardack 2019). The lack of a unique child

identifier, discussed above, also makes it extremely difficult, if not impossible, to track the impact of different elements on child outcomes (Stipek and Pizzo 2019).

Work focused on measuring children’s progress is being done in some child care settings. For example, state-contracted programs use the Desired Results Developmental Profile (DRDP), which is designed to improve the quality of programs and services provided (a) to all children birth through twelve years of age who are enrolled in early care and education program, and before- and after-school programs and (b) to their families. The desired results are defined as the conditions of well-being for children and their families. Each desired result defines an overall outcome. The system was developed based on six desired results—four for children and two for their families (CDE n.d.-d)

System-Level Data

Opportunities exist to improve system-level data in the state.

System-Level Concerns: Inconsistency in Terminology

An estimate of unmet need depends to some extent on the definition of terms; challenges can arise when definitions vary. One such example is the variance in what constitutes “preschool.” In one study, for example, AIR and UC Berkeley included all licensed center-based care and TK, resulting in an estimated 65 percent participation rate for four year olds in preschool (Manship, Jacobson, and Fuller 2018). However, in the NIEER *State Preschool Yearbook* (Friedman-Krauss et al. 2018), the definition of “preschool” was limited to the CSPP, Head Start, TK, and special education; based on that definition, only 48 percent of four year olds were enrolled in preschool. Similar issues apply to estimating the rate of preschool participation in states that offer free universal preschool—it is important to take into account the methodology used by the researchers and which groups were included in the estimates.

Estimates of supply and demand can also be complicated by different definitions of age cohorts. For example, agencies might include different ages when referring to “infants,” “toddlers,” and “preschoolers.” One agency might only include three and four year olds in their preschool cohort; another might include three, four, and five year olds; and yet another might include two through five year olds.

System-Level Concerns: Fragmentation of Information Across Child-Serving Systems

A lack of data and program coordination makes it difficult to determine the degree to which all children—and particularly children with special needs, those in foster care, children experiencing homelessness, and children who are DLLs—are served across agencies. Data is fragmented across program and geographic lines, counties lack staff and technical capacity, and data collection is regarded as an unfunded burden (Melnick et al. 2018). The state has limited data on preschool suspensions and expulsions across a range of child care settings (Stipek and Hunt 2019) and a lack of data on chronic absences in ELC settings—issues that may point to physical or mental health issues of the children or their families (H. Chang, personal communication, April 4, 2019).

Issues related to data sharing and collaboration among agencies at both the state and local levels were also raised during the stakeholder interviews. For example, one state-level interviewee said, “I think we have some more work to do on data integration and data sharing between not only the two departments administering child care, but also just the larger safety net.” According to a focus group with a Statewide Stewardship Team composed of the CDE, the CDSS (including the Community Care Licensing Program), the DDS, and other agencies, challenges in data sharing across agencies include outdated technology systems and equipment and a cumbersome state information/technology project approval process; lack of understanding of what can be shared for cross-agency collaboration versus public reporting; lack of agreements or legislation that would allow data sharing; and decentralized systems that result in the use of different systems across counties (systems that are incompatible in that they cannot merge or share information).

System-Level: Initiatives to Address Data Gaps and Facilitate Collaboration

Several initiatives and projects are in the planning stage or in progress to address the aforementioned data gaps and to facilitate collaboration across programs and agencies.

Updating and Revision of the Early Learning Needs Assessment Tool. An update and revision of the ELNAT is one current effort to address data gaps and encourage collaboration among programs and agencies. The AIR is currently working on three primary tasks around the ELNAT: (1) using existing data to create a page with publicly available maps and charts of unmet need, (2) adding indicators for the number of children with special needs down to the county level and their enrollment in ELC settings, and (3) adding estimates of the number of families who need care during nontraditional hours.

*In California, a significant need exists for comprehensive data regarding **ELC facilities** as well as information on **ELC financing**. A detailed discussion of these issues is provided in the **ELC Facilities** section and the **Funding Barriers and Opportunities** section of this report.*

At the state level, the ELC system might look to statewide data-sharing and collaboration efforts being implemented in other systems, such as the progress made by the Children’s Data Network (see the box below). Although the Children’s Data Network has focused primarily on social services and health, its efforts include the development of a unique identifier that aims to promote communication and better serve clients.

INNOVATIONS IN ACTION: DATA SHARING

California’s Health and Human Services Agency (CHHS) administers services to millions of the state’s most at-risk and vulnerable residents. As part of the agency’s efforts to have a more client-centric approach to delivering services, it has partnered with the University of Southern California’s (USC) Children’s Data Network (CDN) to develop its first “record reconciliation,” which links and organizes client-level administrative records across eight major CHHS programs: (1) CalFresh (the Supplemental Nutrition Assistance Program); (2) CalWORKs; (3) Child Protection; (4) Developmental Services; (5) Family Planning, Access, Care, and Treatment (Family PACT); (6) In-Home Supportive Services; (7) Medi-Cal; and (8) Women, Infants, and Children (WIC).

This data integration effort has resulted in the development of an encrypted master intraagency client identifier, which facilitates the exchange of statistical information both within and between CHHS departments. It also helps with the generation of important information about service involvement at both the client and population levels. In addition, it constitutes an important first step toward organizing CHHS data into family units and households, which can help in (1) understanding CHHS clients and their service experiences and (2) developing longitudinal, cross-sector data sets for collaborative research, evaluation, and everyday operations. In sum, this CHHS collaboration is helping to break down program siloes and create a more holistic view of clients and their cross-program experiences (Children’s Data Network, n.d.).

The ELC system might look to this model for lessons learned, both on implementation and findings. According to a state-level interviewee, this effort will help analyze the types of supports that families are using, the sequence in which they use them (for example, whether enrolling in a child care program might make a family more likely to enroll in CalFresh), and potential child and family outcomes (for example, whether a family able to obtain and use a child care subsidy and CalFresh shows improved outcomes). As the interviewee explained, “Just the opportunity to be looking at families across the board and sharing data and looking at that granularity, I think is really, really helpful to know what difference we’re making.”

Plan to Develop and Track Measurable Indicators of Progress

What measurable indicators currently exist that can be used to track progress in achieving the goals of this grant and your strategic plan? What are the strengths and weaknesses of these indicators? Include the extent to which they can be used to describe the current conditions experienced by vulnerable, underserved, and rural populations. What opportunities are currently under way involving the development of additional

measurable indicators to track progress in achieving the goals of this grant and your strategic plan?

Through AIR's ELNAT, data from several sources is combined to support examining the supply of and demand for ELC programs in the state. First 5 California also maintains the Common Data File of all QCC ratings for participating programs that local consortia submit annually. Using this available data, the state can track several measurable indicators:

- The proportion of children, by age cohort, who are eligible for subsidized child care under state programs but not enrolled in a publicly supported ELC program
- The proportion of preschool-age children (three and four year olds) participating in a licensed ELC program
- The proportion of children, by age cohort, living in a “child care desert” with a ratio of more than three young children for every licensed slot (including both center-based and FCC slots)
- The proportion of children, by age cohort, enrolled in a Tier 4 or 5 QCC-rated program

To continue the discussion of measurable indicators, at a recent PDG State Stewardship Team meeting, the AIR team led a conversation (in which state agency representatives participated) about the information they need to easily have access to and track in order to know if they are meeting their goals to serve children and families. Suggested measurable indicators that came out of this conversation were as follows:

- Percentage of incoming kindergartners with ELC experience (or the percentage who are “school ready”)
- Time period between identification of special needs and onset of services
- Number of migrant children with a Title 5 migrant program in their community
- Proportion of DLLs in an early learning program with home language support
- Percentage of lead teachers in licensed programs with bachelor's degrees
- Percentage of lead teachers in licensed programs with bachelor's degrees that leave ECE for the K–12 system annually
- Percentage of FFN care providers with access to trainings or support
- Number of unlicensed child care centers operating

The state will continue to work to identify measurable indicators that stakeholders agree are critical to track in state data systems in order to understand the progress made.

These conversations will continue through the state's upcoming master plan development efforts.

Early Learning and Care Facilities

Efforts to expand and ensure access to high-quality ELC programming for young children must address ELC facilities. At issue is the cost not only of expanding and constructing new programs but of retrofitting existing facilities. Nationally, the Office of Head Start has estimated the average age of Head Start facilities as 40 years and the cost of making repairs at \$3.8 billion, at a cost of \$488,703 per center (National Academies of Sciences, Engineering, and Medicine 2018). In California, facilities have been especially neglected since the recession began in 2008. For example, a study in Los Angeles found that lack of facility space was one of the most commonly cited reasons for not applying for new State Preschool funds (Child360 and First 5 LA 2018). Similarly, every year San Mateo County turns down \$1 million in State Preschool funds because of lack of facilities (Dewan 2018; Melnick et al. 2018).

This section addresses the following questions from the federal needs assessment guidance:

- *What issues have been identified involving ECE facilities?*
- *What innovative efforts have taken place to improve ECE facilities? Have these efforts targeted vulnerable or underserved children and those who live in rural areas?*
- *What current plans are in place to address ECE facility issues?*
- *What opportunities exist for different ECE programs and systems to work together collaboratively on ECE facility improvement?*

Early Learning and Care Facility Issues

California has experienced a decline in the number of early learning and care facilities.

Since 2008, when the state had almost 1.1 million licensed child care spaces, the overall ELC system in California has lost 91,000 licensed spaces (CDE, n.d.-a). The state has seen a particular decline in FCC spaces, with 30 percent of spaces lost statewide between 2008 and 2017 (CCR&RN 2019a). The factors leading to facility closure are complex, including loss of subsidized funding for direct services to children; fewer parents working and needing child care; and for some FCC providers, the loss of the provider's home. From 2009 to 2011, subsidized ELC programs in California lost nearly \$1 billion (Schumacher 2017; Stipek and Pizzo 2019). As a result, many centers and FCC providers had to close their doors, resulting in a substantial reduction in ELC facilities. Some of the buildings used for center-based programs have been repurposed, and the FCC providers may have turned to other occupations. Thus, the cost of replacing the

facilities lost adds to the challenge of restoring the program’s operational dollars (Stipek and Pizzo 2019).

Multiple barriers to the expansion of early learning and care facilities exist.

Efforts to strengthen ELC facilities in California must address a complex set of issues. Common challenges to ELC facility expansion across the state include finding appropriate land and space that meet regulations and local zoning requirements, lack of technical assistance, and navigating multiple funding sources to develop a fund base for a quality facility (Howell et al. 2019).

According to a survey of Local Child Care Planning Councils conducted by AIR for this needs assessment, nearly all of the 53 counties that responded noted lack of funding (98 percent) and difficulty finding a site or existing space (91 percent) as barriers to child care expansion. Exhibit 32 shows the percentage of counties reporting on key barriers to expanding child care. The survey found three major barriers directly related to facilities. However, according to the survey, even if these three barriers were addressed, lack of qualified staff might pose a fourth barrier to expansion.

Exhibit 32. Percentage of Counties Reporting Key Barriers to Expanding Child Care

Barriers to expanding child care	Percentage (n = 53)
Lack of funding	98%
Difficulty finding a site	91%
Lack of qualified staff	89%
Lack of expertise to manage an expansion project	51%

Source. Local Child Care Planning Council Survey, 2019.

The most detailed information available about ELC facilities comes from a few counties that have conducted systematic facilities studies. Data from local facilities studies was cited in six county needs assessments and it provides some insight into facilities issues around the state. (Ten counties in total reported having such reports, through the LPC survey.) For example, in Santa Clara County, when asked about the obstacles encountered in opening, maintaining, enhancing, or expanding facilities, providers reported that the top five barriers to ELC expansion were lack of space (35 percent), difficulty finding a site (33 percent), lack of local or state funding (25 percent), issues obtaining a license (20 percent), and local zoning or land use restrictions (20 percent) (Dewan 2018).

The average cost of facility development varies widely by type of setting. For example, building a new center in Santa Clara County has an estimated cost of \$53,800 per child space, more than twice the cost of purchasing a portable, at \$25,412 per child space (Dewan 2018). In the San Mateo Early Learning Facilities Study (Davis Consultant Network & Brion Economics 2016), the overall average cost for all types of spaces was

estimated at \$40,717 per child space. Thus, for many school districts and other providers, portables may be the only realistic option in the short term, even though constructing a building, which would probably have a much longer life span, might be a financially wiser investment in the long run.

It is not known how many localities include child care as an element in their city and county plans. Some cities impose regulatory barriers. For example, many require small FCC providers to obtain a zoning permit if they want to become large FCCHs, and some localities require large investments to complete the application process and permit fees to expand or construct a center or to convert from a small center to a large FCCH (Howell et al. 2019).

Given these challenges, the Advancement Project recommends including ECE as a legal element in state general plan guidance for local jurisdictions. California law already requires each plan to address seven elements: (1) land use, (2) circulation, (3) housing, (4) conservation, (5) open space, (6) noise, and (7) safety. “Missing within these guidelines is the long-term planning for a sustainable ECE infrastructure,” according to the Advancement Project (Howell et al. 2019).

The state lacks an ongoing dedicated funding source for early learning and care facilities.

For many years, California has lacked an ongoing dedicated funding source for ELC facilities. Reimbursement rates for Title 5—contracted State Preschool and General Child Care do not allow for the cost of retrofitting or expanding facilities (California Assembly Blue Ribbon Commission 2019). Until the full impact of the recession hit California’s ELC programs, the CDE offered a grant fund for ELC facilities to renovate and thereby address health, safety, and security concerns. For example, in Contra Costa County, from 2007 until 2012, a provider with 14 child care centers supported by State Preschool, Head Start, General Child Care, and CalWORKs Stage 2 and Stage 3 vouchers received approximately \$200,000 per year in grant funds to address such issues as replacing the roof on a modular building, installing carbon monoxide detectors, adding exterior surveillance systems and bullet-resistant film to windows, replacing broken floors, and installing safer playground surfaces and structures. But the grant fund, another casualty of the 2008 recession, was converted to a no-interest 10-year loan fund (Petek 2019). The Child Care Facilities Revolving Loan Fund (CCFRF) offers loans for the purchase of facilities and for renovation and repair, but it is only available to CDE-subsidized providers. The same provider who successfully obtained at least five grants from the previous state facility grant fund indicated she would not consider applying for a loan from the reconstituted loan fund. “The loan program created an undue burden and uncertainty on the financial viability of the child care program that has been underfunded by the state,” this provider stated. “With the rising operational costs and the threat of funding reductions during the economic downturn, providers assume great risk in complying with the obligation to pay the interest on the amount earned.”

As of 2019, the CCFRF fund balance was \$26.8 million, of which \$10 million is set aside for CSPP, with few applicants. The fund can only be used to purchase portables or for minor center renovation, and few providers can afford to pay back the loan (Melnick et al.

2018). In interviews, many LPC coordinators expressed concerns that providers cannot afford to take on the liability of a loan. As a short-term strategy to address ELC facilities, the Advancement Project, in a 2019 policy brief, recommended converting the existing CCFRF from a loan program to a well-funded grant program. In addition, it recommended expanding eligibility to support FCC and Early Head Start providers and thus address the facilities gap. As a longer term strategy, the organization recommends creating a statewide ELC facilities bond to ensure that that facilities in the highest need areas have a dedicated funding stream (Howell et al. 2019).

As will be described below in the section on Current Plans to Address Facility Issues, in 2019, legislation was enacted to transfer the balance from the CCFRF, along with one-time funding of \$245 million, to a grant fund (while keeping \$18 million in the revolving loan fund).

A lack of technical assistance exists for facilities development.

Even when funding is available to expand or retrofit facilities in California, no technical assistance is available for facility development (AIR 2012; California Assembly Blue Ribbon Commission 2019; Santa Clara County Office of Education 2017). Child care operators lack the proper services and resources to guide them through all stages of facility development and financing (AIR 2012).

As a midterm strategy, the Advancement Project (Howell et al. 2019) recommends establishing an ECE facility technical assistance office within the CDE to support providers, especially those located outside of school districts, given that these districts can leverage their internal facility development experts.

Another approach recommended by some local and state ELC stakeholders in interviews is for the state to contract with an independent consulting group similar to the Low Income Investment Fund to provide technical assistance. This approach is preferred by an East Bay provider of 15 centers in four counties, who says, “If the state doesn’t do that, we will be bombarded before we begin. There is not even a list of contractors or architects to help guide early childhood leaders who want to expand or renovate their facilities.” Providers need help identifying and blending multiple funding sources. “It’s really kind of a nightmare,” commented this provider, adding that “while I pursued education in early childhood, it might have been better to get an MBA!”

Another approach to providing technical assistance is to provide funding directly to localities. The LAO recommended \$4 million for the Local Child Care Planning Councils to hire facility specialists to offer technical assistance to providers on facility projects. The LAO estimate assumes funding for a facility expert for every large county and sharing experts in counties with smaller populations (Petek 2019).

Current Facility Efforts to Help Children Who Are Vulnerable

The CDE has released an RFA for the Inclusive Early Education Expansion Program, which provides \$167 million for grants to support one-time infrastructure costs with the goal of increasing access to subsidized inclusive ELC programs for children birth to age five. The grant supports the inclusion of children with disabilities and exceptional needs,

including children with severe disabilities, in ELC settings pursuant to Parts B and C of the federal Individuals with Disabilities Education Act. Funds for new construction are limited to sites owned by LEAs, and the grant cannot exceed \$500,000 per site. Renovations are limited to \$250 per square foot and to \$5,000 for FCCHs. LEAs applying for these funds must provide a 33 percent cash or in-kind match (CDE, n.d.-c).

Current Plans to Address Facility Issues

Two legislative actions related to facilities aim to address the lack of funding for ELC facilities. The first was a provision in the 2019–20 California budget, signed into law on June 27, 2019, that includes a \$245 million one-time infrastructure grant program and an additional \$18 million in a revolving loan fund. This fund will be augmented by eliminating the CCFRF described above and transferring the balance of funds to these facility grants (as well as the Inclusive Early Education Expansion Program). These monies can be used by licensed child care and preschool providers to enhance their capacity to serve more children through renovating, retrofitting, or expanding their facilities. An intermediary organization will also be funded to provide technical assistance to providers. Priority for funding will be given to subsidized child care or preschool programs in areas with higher unmet need for ELC services. Although not constituting a permanent new funding source for facilities, the funds will be disbursed over a four-year period and provide recipients with an important opportunity to improve their facilities so that they may serve more children, including those with special needs who require structural accommodations and who as a group have higher levels of unmet need (California Budget and Policy Center 2019a).

The second was recently passed Assembly Bill 48, the Kindergarten Through Community College Public Education Facilities Bond Acts of 2020 and 2022, which authorizes the allocation of state funds for construction and modernization of child care or preschool facilities at LEAs in schools that do not have such facilities or where the existing facility is inadequate. These funds would come from a \$13 billion school construction state bond measure to be placed on the 2020 ballot and would represent the first time that preschool facility funding would be included along with K–12 construction and renovation funding. However, the exact amount to be allocated for preschools has yet to be determined (Fensterwald 2019).

Opportunities to Address Facility Issues Collaboratively

In general, state-funded ELC programs do not provide reimbursement levels sufficient to support repair and renovation, much less expand existing sites. However, having Head Start money in the mix as opposed to state funding alone, according to an East Bay provider of 15 centers, has been a significant factor in the expansion and renovation of facilities for both the Head Start and State Preschool programs.

Federal Head Start and Early Head Start grants, especially in the start-up years, are more generous than state start-up funds. When the above provider took over a Head Start program two years ago, the new grantee received \$2 million in start-up funds that is helping to renovate a former gym into six classrooms funded by the Early Head Start, State Preschool, General Child Care, and Head Start programs. Federal Head Start

grants, allow grantees, on a continuous basis to roll over funds and request up to \$50,000 or more in repair or renovation funds.

Nonetheless, it is also clear that creativity and knowledge of the funding landscape play an important role in making facility expansion or renovation possible. For example, the CSPP does allow 15 percent for start-up purchases such as furniture, but, as the East Bay provider noted, “You have to ask.”

Declining school enrollment in some areas of the state may offer opportunities to address facility issues. LAUSD was able to provide facilities for its Early TK program because placement of the new program was targeted at schools where another program (the School Readiness Language Development Program) had recently ended. That said, a few of the LPC coordinators who were interviewed expressed frustration with school districts that either did not make unused classrooms available for ELC or, once having done so, took back the space for another purpose.

As a short-term strategy, the Advancement Project (Howell et al. 2019) recommends conducting an inventory of state-owned property and land that may be converted or developed into ELC facilities. A regular inventory of unused classroom space in school districts with declining enrollment might also help identify sites for ELC programs.

Funding Barriers and Opportunities

This section discusses the funding barriers to providing high-quality ELC programs and the opportunities to address these barriers. Although the primary barrier is insufficient funding to serve the current population of children eligible for subsidized care (much less the larger number of young children just above the eligibility threshold whose families cannot afford high-quality ELC in a high-cost state), some state and federal policies also impose barriers to the most efficient use of the available funds as well as competing priorities. This section discusses options for more efficient allocation of any new resources across the system. Finally, some successful efforts in the state to improve the efficient use of existing resources are presented. The section addresses the following federal needs assessment guidance questions:

- *What barriers currently exist to the funding and provision of high-quality early childhood care and education supports? Are there characteristics of the current governance or financing of the system that present barriers to funding and the provision of high-quality ECE services and supports? Are there policies that operate as barriers? Are there regulatory barriers that could be eliminated without compromising quality? For this question, you should be able to include a discussion of supports in the broader early childhood system, not just the ECE system. Are there opportunities for a more efficient allocation of resources across the system? Have there been successful efforts in the state at implementing strategies that have improved the efficient use of resources? Have there been efforts that were undertaken but did not show positive results?*

Funding Barriers to the Provision of High-Quality Early Learning and Care and Education Supports

The central issue is that the funds allocated for early learning and care in California are still insufficient to provide quality services to the large number of families who need help in order to afford early learning and care in a high-cost state.

As indicated in the Quality and Availability of Early Learning and Care section of this report, California's ELC system consists of a multitude of programs that are funded by one or more sources with different quality standards and different accountability, monitoring, and eligibility requirements (Allen 2019). The state invests \$5.4 billion a year in these programs, drawing on the state's General Fund, revenues raised by taxing cigarettes, the federal CCDF, Temporary Assistance for Needy Families (TANF), IDEA, the Child and Adult Care Food Program (CACFP), and Title IV-E of the Social Security Act (Allen 2019).

Of the \$5.4 billion in available funds, the CDE provides the largest support, \$4.9 billion; the CDSS provides \$371 million; First 5 California provides \$100 million; and the DDS provides \$78 million. In addition, Head Start and Early Head Start grantees receive \$1.2 billion in federal funds, and federally recognized tribes receive \$12 million in CCDF funds to provide child care services (Allen 2019). Finally, although not officially considered part of the state's ELC system, California also serves 88,934 four year olds through public education funding for the TK program (LAO 2019b).

However, based on AIR's most recent needs assessment, this large investment of state and federal funds was sufficient to serve at most two-thirds (65 percent) of income-eligible four year olds and one-third (32 percent) of three year olds, with even a higher rate of unmet need if only enrollment in programs meeting school readiness standards is included. Previous needs assessments have had similar findings, with at most one-third of income-eligible three year olds served and at most 12 percent of income-eligible infants and toddlers enrolled (AIR 2012; Anthony et al. 2016; California Assembly Blue Ribbon Commission, 2019; Danielson and Thorman 2019; Manship, Jacobson, and Fuller 2018; Melnick et al. 2018; Schumacher 2019a; Stipek 2019a). Although up to two-thirds of income-eligible four year olds are enrolled in some type of publicly supported program, the expenditure per child varies drastically across programs serving preschoolers, leaving many programs with insufficient resources to provide high-quality services.

The fundamental challenge is that California is both a high-poverty state and a high-cost state. Sixty percent of children under age five are income-eligible for free or reduced-price lunch. In 2019, a family of four could have an income of no more than \$33,475 to be eligible for free meals or no more than \$47,638 to be eligible for reduced-price meals. Yet, as noted by the California Budget and Policy Center, in order to afford the four basics—food, health care, transportation, and rent—a family of four in Sacramento, California, needs \$66,641 a year (California Budget and Policy Center 2017). In addition, the cost of ELC for infants and toddlers in centers meeting even basic licensing standards is \$16,542 per child (Child Care Aware 2018), more than the cost of in-state tuition at a four-year college or university.

Recognizing the high cost of child care, California has set the income threshold for subsidized child care at 85 percent of the SMI, or \$76,601 for a family of four, the highest threshold allowed using federal funds (CDE 2018b). But with insufficient funds allocated to serve all income-eligible families, California has prioritized child care assistance for CalWORKs participants, who are required to work or engage in other activities to promote transition off cash assistance. As a result, CalWORKs families, at least in theory, are guaranteed a child care subsidy. Meanwhile, however, large numbers of equally low-income families who do not participate in CalWORKs wind up on the waiting list; California is one of 20 states where access is often frozen (Schulman and Blank 2017).

Although the state's 85 percent of the SMI threshold for subsidy eligibility is generous compared with other states, many families just above that threshold have great difficulty paying the median price of care (for the amount a single parent at median income would have to pay for even one infant in center-based care, see the section Quality and Availability of Early Learning and Care). In the LAUSD, less than half of the 38,000 children entering kindergarten attend ELC programs administered by the district, according to the coordinator of the program.

State reimbursement rates for early learning and care programs serving similar populations vary greatly by program and funding source, with little relationship to the true cost of quality or the overall cost of care in the part of the state where the service is provided.

Title 5 programs are paid a flat standard reimbursement rate of \$45.73 per day in every county, regardless of the economic cost drivers in that county (Reimbursement Rate Workgroup 2018). Meanwhile, APP and CalWORKs vouchers reimburse programs that are only required to meet Title 22 standards, which are less stringent than Title 5 standards, based on the results of the RMR Survey, which considers the private market for child care and services. The RMR sets the rate at the 75th percentile of the regional market, ranging from \$47.74 to \$79.47 per day, based on the market rate in the county.

Quality Counts California, California's QRIS system, has established a tiered structure for assess ELC quality. But the QCC does not provide differential funding for higher quality programs, as other states have done, with some demonstrated positive effects (Stipek 2019b). Noting differences in per-child expenditures unrelated to quality provisions for programs with similar purposes serving same-age children, an analysis conducted for First 5 California recommends the establishment of a single regionalized rate system for child care, preschool, and early learning services that compensates all teachers and providers based on the true cost of providing ELC—that is, that reimburses them at rates that reflect the economic diversity of California, recognize the cost of meeting different quality standards and regulations, and strengthen the ability of the state's mixed-delivery system to provide quality early learning programs (Reimbursement Rate Workgroup 2018). Recommended steps to establish the new rate structure include but are not limited to the following:

- Ensure that no child care providers and state-contracted programs receive a lower reimbursement than their current rate.

- Create a new county SRR that reimburses all programs at the current RMR ceiling of their county (base rate), incentivizes quality by providing additional funding (adjustment factors) for meeting higher quality standards, and incentivizes full-day programs.
- Ensure that the next iteration of the RMR survey methodology supports efforts to bring together the two existing reimbursement systems by setting common age ranges and times of care.
- Incorporate a cost analysis into future iterations of the RMR survey methodology and move toward more robust incorporation of the true cost of care in future rate-setting methodologies.
- Refine the RMR survey and future rate-setting methodologies to address equity issues.

One concern regarding equity is that prior procedures for determining the RMR, based solely on the price charged for child care locally, may exacerbate inequality and institutionalize low reimbursement rates in low-income counties. It may be important to continue to acknowledge that the same quality of child care costs more in a high-income county such as Marin than it does in a lower income county such as Merced. However, it is also important for the market rate survey to acknowledge that the basic elements of high-quality care cost more than those for lower quality programs in all counties. The California Assembly Blue Ribbon Commission report (2019) therefore recommends that the state move to a market rate survey methodology that considers the true cost of quality care based on a cost estimate of the program elements involved as well as the regional cost differences.

Finally, a significant contrast exists in the public expenditure for children enrolled in TK as opposed to the CSPP even when both programs are operated by the same school district. The base per pupil grant for a child in TK in 2017–18 was \$7,941, supplemented by 20 percent for low-income children and 50 percent for TK children in schools where more than 55 percent of the children were low income (Stipek and Pizzo 2019)—adding up to as much as \$13,499 per child for a six-hour-per-day program that operates only 10 months per year on the school calendar. By contrast, the reimbursement for a full-day, full-year State Preschool program in the same year was \$11,432. One reason that school districts are opting for TK rather than CSPP expansion may be the higher per-child reimbursement for TK (Melnick et al. 2018). TK may be the only California program serving preschool-age children that is funded at a level adequate to recruit and compensate highly qualified teachers. The difference in per-pupil expenditures appears to stem primarily from the program funding source, with State Preschool supported by General Revenue and the federal CCDF and TK funded by Proposition 98, the primary state funding for TK–12.

In the LAUSD, according to the administrator who oversees both CSPP and the Early TK programs, CSPP half-day programs receive \$28 per child and full-day programs receive \$56. Meanwhile, Early TK receives \$78 per child per day when the children turn five. The

difference in the expenditure per child is reflected in teacher compensation; starting Early TK teachers earn at least \$20,000 more per year than CSPP teachers, even though more than 80 percent of CSPP teachers now have bachelor's degrees. All of the Early TK and CSPP teachers are part of the United Teachers Los Angeles (UTLA) and have the same benefit packages. According to the administrator, even increasing the maximum reimbursable amount for CSPP by \$15 a child per day would go a long way toward equalizing standards and teacher compensation across programs.

Opportunities exist for districts to use funds from the Local Control Funding Formula to help address gaps in transitional kindergarten funding.

The TK program per-child expenditure is the most generous of any publicly supported program for preschool-age children in California, and it is not subject to some of the constraints of programs funded in part by federal CCDF funds, which are limited primarily to children in families below 85 percent of the SMI. Transitional Kindergarten has no income eligibility requirements. That said, school districts administering TK and those attempting to offer Early TK to younger four year olds not yet eligible for TK must deal with a major funding gap. Current law limits TK expenditures to children who are age five. In other words, the official TK program is limited to four year olds who are too young to enter kindergarten because they turn five between September 1 and December 1 of the entry year, but the state funds do not cover the child's enrollment until the child reaches five years of age.

Some school districts, however, have found a way to cover this funding gap. The LAUSD allocated \$44 million from its general fund, funded through the LCFF, in 2016–17 to cover the cost of TK slots until children reach age five (Melnick et al. 2018). The district also helps cover some of the expenditures not covered by the state reimbursement for State Preschool, such as facility costs and routine repairs, roofing, air conditioning, and ground maintenance. In 2019, the LAUSD operated 86 stand-alone center-based programs, each with its own principal and custodian. Of the Early Education Center programs in the LAUSD, 62 have Preschool Collaborative Classrooms (PCCs) where 16 of the 24 children enrolled are children without special needs and eight are children with special needs. District support for the use of district funding for PCCs, in particular, is reinforced by the results. Of the 346 four year olds who graduated last year from PCC to kindergarten, 324 went on to a general education kindergarten, saving the district millions in special education expenditures in the long term, according to one ELC leader. School attendance was also increased by an average of 1.8 days per child.

Ultimately, elimination of financing inconsistencies in preschool programs may depend on clarifying the purpose and selecting the revenue source best suited to the purpose.

Underlying a number of the above financing barriers to high-quality ELC in California are constraints associated with the various funding sources. The state has two primarily state-funded programs serving preschool-age children: the State Preschool program and the TK program. The CSPP was established as a child development/school readiness program, but perhaps as a result of partial dependence on federal CCDF funds, the program must ensure that family income does not exceed 85 percent of the SMI, that the hours of service correspond roughly to the parents' hours of employment or preparation

for employment, or that the family meets another federally approved purpose of care. The TK program, which is also designed to promote school readiness, encounters no such constraints because it is funded by basic funding for California public schools. Having programs intended to promote school readiness with different rules poses barriers to the provision of high-quality services and may warrant further consideration.

Multiple funding barriers affect the provision of infant and toddler care.

The major barrier to the provision of infant and toddler care is its high cost. In California, it is estimated that a family would have to pay 22 percent of the SMI of \$83,490 to purchase center-based infant care meeting just basic licensing standards and 12 percent to purchase FCC meeting licensing standards (Workman and Jessen-Howard 2018). To purchase care meeting higher quality standards, Workman and Jessen-Howard (2018) estimate that a family would have to pay 37 percent of the SMI for center-based care and 26 percent for FCC.

Reducing the cost of infant care is not easy. It is labor intensive, with licensing requiring one caregiver for every four infants. On average, infant and toddler teachers earn \$2 less than preschool teachers, many of whom themselves earn so little as to qualify for public assistance (Workman and Jessen-Howard 2018).

In 2018, the state substantially increased the SRR for full-day Title 5 General Child Care and State Preschool programs by 2.8 percent to \$47.98 (CDE 2018c). Rates have increased even more for the 2019–20 program year. In addition, to support the care of infants and toddlers, the state provided an adjustment factor of 2.07 times the basic SRR for 2018–19 and 2.44 times the SRR for 2019–20. With a full-day rate of \$117.07, California now has the fifth highest reimbursement for subsidized infant care in the nation, with the gap between the state expenditure for licensed care and the true cost estimated at \$31 per month (Workman and Jessen-Howard 2018). However, the per-child expenditure is still lower than the RMR for voucher-funded care in many counties (Stipek and Pizzo 2019a), and it is insufficient to cover the full cost of programs meeting higher quality standards in many parts of the state.

It will be important to follow how the rate increase for infant and toddler care affects the percentage of infants and toddlers receiving federal CCDF-funded care in the state, estimated at 1.8 percent in California, compared with 4.2 percent nationally (Keating et al. 2019). Further research to document the reasons for this low percentage of service to infants and toddlers and the prospects for increasing it appears warranted.

Another factor undermining access to infant and toddler care is the decline in FCC documented in the section on availability above. Family child care has greater capacity to adjust to the nontraditional work hours of families and may be the preferred setting for many families for infant and toddler care. However, as noted above, FCC providers cite many reasons for exiting the field, including lack of access to benefits (vacation and sick pay, retirement, health care), difficulty paying for an assistant (in large FCCHs), difficulty remaining fully enrolled, and lack of access to substitutes. Staffed FCC networks may help address some of these issues as well as reduce the isolation of FCC providers (Workman and Jessen-Howard 2018).

One positive development in the provision of infant and toddler care in California may be a side effect of the decline in Head Start and State Preschool enrollment of four year olds as some shift to the TK program. As noted above, while Head Start enrollment has declined since 2016, Early Head Start enrollment has increased. A similar phenomenon has been indicated, at least anecdotally, among State Preschool providers moving toward the delivery of services to three year olds and of infants and toddlers in General Child Care. Any assistance the state could provide in helping providers make this transition might be well worth the investment.

One of the primary barriers to the expansion of high-quality early learning and care is the lack of funding to train, recruit, and retain an adequate number of teachers and other personnel to meet the desired workforce standards.

In 2007, Congress mandated that at least 50 percent of Head Start teachers in center-based programs have either a baccalaureate or advanced degree in early childhood education, and 66 percent of Head Start teachers in California now have bachelor's degrees (Allen 2019). But Congress did not allocate a dramatic increase in salaries to compensate people for a higher level of preparation, according to a state-level Head Start California leader. Moreover, the pay differential between a Head Start teacher employed in a school district and a teacher employed in a nonprofit or community action program could be as much as \$10,000. As a result, according to this Head Start leader, Head Start grantees have increasing difficulty filling vacant positions.

For workforce development, the National Academies of Sciences, Engineering, and Medicine (2018) recommends that the incumbent ELC workforce bear no cost for getting more education and that entering students new to the field should not have to pay more for their education than a reasonable percentage of postgraduate earnings.

"Maybe it's bringing in income tax credits for early ed teachers who go back to finish their Bachelors' degrees," suggests a southern California school district director of both CSPP and the Early TK Program.

I think we need to build those things in before we tell everybody, 'You need to go back and get your Bachelor's.' Then I think the other part ... is if we were to raise reimbursable amounts that we could cover the cost to pay them an adequate pay raise ... to bring some pay parity between them and kindergarten teachers ... I do see it as more of maybe a seven to 10-year kind of project.

This ELC administrator also suggests giving credit to ELC teachers for previous time they have spent working in the classroom as opposed to requiring a semester of student teaching.

California has a family child care network model that may be worthy of enhancement.

Family child care is the preferred form of infant and toddler care for many families and is often the only realistic option in rural areas. However, operating a FCCH can be an isolating experience; FCC providers have a more difficult time than center-based

providers in obtaining time off for vacation, substitutes in the case of illness, funding for facility improvement and materials, and assistance in getting access to developmental screening and supplemental early intervention services for the children enrolled.

Some states, such as Connecticut, have established staffed FCC networks that help address some of the above issues in FCCH (Nelson, Porter, and Reiman 2016). Opportunities may exist to use Early and Periodic Screening, Diagnosis and Treatment (EPSDT) and Medicaid funding to help support FCC network functions, including providing a nurse to visit FCC homes. California's Title 5 program has approximately 30 FCCHEN programs, and other ELC programs, such as Head Start and Early Head Start, have established some FCC networks. In the survey of LPC coordinators, nine counties reported also having other types of FCC networks. Further analysis is needed to determine the extent to which the FCCHEN and the other California-based FCC networks have access to the necessary funding to support the "staff" in "staffed FCC networks."

An innovative early childhood mental health consultation program is currently limited to Title 5 programs.

Many ELC providers in California express concern that more of the children enrolled in their programs are experiencing trauma and adverse childhood experiences (ACEs) and that providers are overwhelmed by how to address these children's behavioral challenges. In 2018, California enacted a provision that allows Title 5–contracted providers of State Preschool and General Child Care to set aside up to 1 percent of their contract to help finance the provision of ECMHC services (CDE, 2019e). Kidango, one of the largest nonprofit providers of ELC services in California, which serves more than 4,000 children in 50 centers across the San Francisco Bay Area, has begun to implement ECMHC, with access to trained counselors available to the teachers and children in about a third of its classrooms. The CDE is disseminating the rules for this innovative program. Although the funding provision is currently only available to the subset of ELC providers in the state who have Title 5 contracts, an independent evaluation is being planned to assess its results. If successful, the state may wish to consider expanding the financing opportunity to other ELC providers.

Characteristics of the Governance of Early Learning and Care Programs That Present Barriers

California has a large variety of ELC programs, and oversight is dispersed across multiple agencies and levels of governance within the early learning and care system.

Given that California is the most populous state in the nation, it is not surprising that the state has multiple ELC programs and that program governance is not limited to one entity at the state or local level. During decades of efforts to expand access to and improve the quality of ELC, multiple programs have been established with somewhat different purposes. These programs have been financed by different state and federal funding sources, resulting in different rules and admission policies. The outcome, despite best efforts and intentions, is a complex system that is difficult to administer and often confusing for families. At the most basic level, the bulk of the state-level administration of ELC programs in California is divided between the CDE, overseen by an elected state

superintendent of education, and the CDSS, whose leader is appointed by the governor. Other state agencies with significant roles in managing or overseeing ELC-related services include the DDS, the California Department of Public Health, and First 5 California. To minimize conflicts, these lead agencies participate in multiple interagency collaboration efforts, some of which are detailed later in the section System Collaboration. Responsibility for ELC governance at the local level is also dispersed across multiple entities, including county welfare departments, school districts, county offices of education, county departments of health, Special Education Local Plan Areas, and First 5 County Commissions. Although agency leaders at both the state and local levels strive to simplify and, to the extent feasible, unify the system, these goals must be balanced against the need to honor diverse goals and not inadvertently eliminate or reduce ELC services that are vitally important.

Lack of a centralized online place to apply for subsidized care is inconvenient for families and a barrier to the efficient use of funds.

One of the most obvious barriers to the efficient use of state and federal funds for ELC is the lack of a single online place where parents can apply for subsidized ELC. Until 2010, California required counties to maintain Centralized Eligibility Lists (CELs) (CDE 2019c). As is clear from the survey of LPC coordinators, these CELs had some problems. For example, they were updated infrequently, and by the time a slot opened in a program to serve a child, the family might no longer be eligible. However, technological advances may help remedy the problems with CELs. San Francisco's Child Care Connection seems to have addressed some of these issues by establishing an online portal where families can fill out a form and also express their preference for a program setting and thereby avoid going to multiple places to apply for a variety of programs (San Francisco Child Care Planning & Advisory Council 2017). The establishment of an online portal may be easier in San Francisco, not only because of access to local government and private funds, but also because the county and the city share the same geographic boundaries. But the improvements in online technology since the CELs were in place statewide a decade ago may make this process easier.

Multiple financing and governance barriers limit the provision of early learning and care to children with special needs.

Because the cost of serving children with special needs is at least 10 percent higher than that for children without special needs, and because 10 percent of children are estimated to have special needs, the National Academies of Sciences, Engineering, and Medicine (2018) recommends adding 1 percent to the total ELC budget to address the needs of this population. Currently, the state provides most of the funding for early intervention services, with the federal grant covering only about 10 percent of associated service costs (Taylor 2018).

The percentage of children birth to age five identified as needing special education might reasonably be expected to be comparable to that for children in K–12. But currently the documentation required to qualify for the special needs adjustment in Title 5 programs is burdensome, with only 3,300 children identified statewide, representing less than 1.5 percent of children enrolled in subsidized child care programs (California Assembly Blue

Ribbon Commission 2019). In addition, TK does not receive any funding for preschoolers receiving special education.

California's services for infants and toddlers with special needs currently involve three programs (Taylor 2018). The regional centers' Early Start Program, overseen by the DDS, is the main provider of early intervention services for about 33,500 infants and toddlers with special needs. The Legacy Program provides early intervention funding for 97 schools. Finally, the school-administered Hearing, Visual, and Orthopedic Impairments (HVO) Program serves about 2,500 infants and toddlers with HVO impairments (Taylor 2018). Overall, the schools spend much more per child than regional centers (about \$16,000 compared with \$10,000). Bifurcated funding for children with special needs leads to delayed transition between programs when children reach age three, leading to inadequate provision of early intervention and barriers to the establishment of inclusive ELC programs.

The LAO recommends unifying all services under the regional centers (Taylor 2018). A unified system would provide more timely services and more equal funding for each child served. The LAO also expects that a unified system would generate state savings ranging between \$5 million and \$35 million; these funds could be repurposed to enhance early intervention services. The LAO also recommended that regional centers be given flexibility to contract with schools to continue serving some infants and toddlers (Taylor 2018).

Policies That Operate as Barriers to the Provision of High-Quality Early Learning and Care and Education Supports

Work and family fee requirements are inconsistently applied to programs with similar purposes. The work requirements make it difficult to provide full-day services and continuity of service to children, and family fee requirements are burdensome to both families and providers.

The CSPP, the TK program, and Head Start share the same goal of promoting school readiness. But only full-day, full-year State Preschool (defined as operating four or more hours per day and 246 days per year) imposes work requirements and a family fee for families earning more than 40 percent of the SMI (CDE 2019g).

Meanwhile, TK, which typically operates the same or more hours per day, is free to age-eligible four year olds regardless of family income or work status. Not only must families pay a fee for full-day State Preschool, but they must go through a cumbersome application process for child care assistance and prove that they meet the income requirements (or, under previous regulations through 2018, have a qualifying need for care). The contrast in work requirements and state family copayment policies between the two programs is starkest at sites that operate both TK and CSPP, sometimes in adjacent rooms. "Title 5 rules make it difficult for families to qualify for full-day (meaning more than four hours per day) State Preschool programs," according to the coordinator of the Early Learning Program for both TK and State Preschool programs in the West Contra Costa County School District. If the parent's work does not begin until 10 a.m. or 11 a.m., in theory the child is not eligible for a program that begins at 8:15. "The state needs to

decide what it wants—preschool or day care?” this ELC program coordinator said, “We can’t have children going in and out of the program just because their parents’ work hours change.”

Prior state needs assessment reports have also recommended eliminating the existing requirement that families with four year olds provide proof of parent employment or reenrollment in higher education to access full-day State Preschool (Allen 2019). As noted in the report of the California Assembly Blue Ribbon Commission on Early Childhood Education (2019), employment conditions in the low-wage sector make it difficult for parents to participate in state child care assistance programs because of fluctuations in their work schedules, which often change weekly.

On the issue of family fees, one local ELC director of both TK and CSPP notes, “We don’t charge fees for transitional kindergarten; why charge parents for State Preschool? The \$14 we collect in parent fees is not really worth the trouble.”

Noting the inconsistencies in state policy regarding work requirements and family fees, some previous reports have recommended making all preschool programs whose purpose is to promote child development and school readiness available to all children regardless of family income or work status (California Assembly Blue Ribbon Commission 2019). The National Academies of Sciences, Engineering, and Medicine report *Transforming the Financing of Early Care and Education* (2018) recommends that ELC access not be contingent on the characteristics of parents/guardians such as income or work status and that federal and state governments should set uniform family payment standards. Governor Newsom’s new targeted universal approach is a step in that direction. Legislation enacted in 2019 will provide \$124.9 million for phasing in access to State Preschool, beginning with 10,000 full-day slots in 2020. Enacted legislation also allows State Preschool programs to serve children without a defined “need” for care (for example, parent work status) after all eligible and interested children with a need for care have been served. Finally, enacted legislation expands eligibility to all four year olds living within the boundaries of schools where more than 80 percent of children are eligible for free or reduced-price lunch.

Another approach cited by both national- and state-level assessments is to adopt a sliding fee scale for all fee-based programs, particularly for those whose purpose is to help families work and to promote child development. This approach might have the effect of reducing economic segregation, making it easier for families just above the current income threshold to gain access to ELC services. The National Academies of Sciences, Engineering, and Medicine (2018) recommends that payments be zero for the lowest income families and increase progressively if a family contribution is required. The California Assembly Blue Ribbon Commission report (2019) recommends a sliding fee scale where no family at or below the SMI pays more than 7 percent of family income. The CDE’s current fee schedule already includes many of these characteristics; it charges no fee for families below 40 percent of the SMI and up to no more than 9 percent for families at 85 percent of the SMI, the maximum income now allowed (CDE 2018b).

The sliding fee schedule could build on the current CDE family fee schedule, or the schedule could use the US military family fee schedule as a model.⁴

State Title 5 contracting policies inadvertently hinder providers from offering access to full-day, full-year early learning and care.

For several years, state policymakers have attempted to expand access to full-day, full-year State Preschool, providing a dedicated increase in funding for full-day programs. Yet less than half of the subsidized CSPP programs operate full-day, and “full-day” rarely means more than seven hours a day (Melnick et al. 2018). One obstacle to the expansion of full-day programs is a state requirement that full-day programs must also operate 246 days per year. This requirement poses problems for LEAs, which administer two-thirds of CSPP programs, according to a representative of the California County Superintendents Educational Services Association. “We would have many more full-day programs except that the school district cannot accommodate that long a school year because of the overhead costs of keeping the school open all summer for a small number of preschool children,” according to a Northern California school district director of CSPP programs. “When funds become available to expand full-day programs, schools often do not apply because of the headache of not being able to operate 246 days a year.”

Citing the same issue, both a recent Region 9 Head Start policy paper and the California Assembly Blue Ribbon Commission report recommend allowing State Preschool to operate full-day without necessarily meeting the current definition of full-year. The state needs to provide options for State Preschool in LEAs that cannot meet what it calls the “250-day per year” requirement, according to the Blue Ribbon Commission report (2019).

Of the 71,459 children enrolled in center-based Head Start in 2017–18, 40,309 slots were part-day, and of the full-day programs, only 3,542 operated for the full calendar year (Allen 2019). Innovative partnerships have developed, with many part-day Head Start programs also participating in the CSPP in order to layer funding streams to provide a full-day of high-quality ECE. Without these partnerships, which, from another perspective, constitute “dual enrollment,” very few children in Head Start would have access to full-day much less full-year programs.

State policies make it difficult for families to obtain access to both a school readiness/child development program and subsidized child care to accommodate nontraditional work hours.

As documented in AIR’s own data analysis for this needs assessment, as many as 10 percent of children have parents who work nontraditional hours. According to the CCR&RN, 13 percent of parental requests for care are for evening, overnight, or weekend care, but only 3 percent of centers and 41 percent of FCCHs offer any nontraditional hours (CCR&RN, n.d.)

In short, current state policies often force parents to make a difficult choice between a child care arrangement that keeps their child safe, that may be familiar to them, that is in the neighborhood and easy to get to, and that is willing to accommodate their

nontraditional work hours, or a child development program that has a curriculum and staffing designed to promote school readiness. The reality is that children may need both.

The current state Title 5 contract process is burdensome, undermining stability and full use of funds.

In 2016, school districts used only 1,646 of 5,830 new slots allocated for State Preschool (Melnick et al. 2018). Although one important factor was the low reimbursement rate described previously in this report, other factors included complications related to the collection of family fees and to one-year contracts. Providers must predict how much they will collect in parent fees; if they earn more than predicted, they must quickly use the funds collected to serve more children or return the funds. Another issue is one-year contracts, which have the unintended effect of penalizing providers for factors they may not be able to control, such as vacancy rates and sporadic attendance. The current contract requirements have resulted in providers having to return \$9.3 million in Title 5 funds (Santa Clara County Office of Education 2017). By contrast, Head Start provides five-year grants and allows a buffer of a few months for children to be fully enrolled (Melnick et al. 2018). The California Assembly Blue Ribbon Commission report (2019) recommends that Title 5 move to multiyear contracts that are not based on a child's daily attendance. The report also recommends that CSPP providers follow the Head Start practice of allowing providers up to 30 days to fill empty CSPP slots. To promote a stable financing structure for ELC, the National Academy of Sciences, Engineering, and Medicine (2018) also recommends moving to multiyear contracts for ELC programs.

The federal income eligibility requirements for Head Start make it difficult to fully use Head Start funds in California; Head Start enrollment is declining, although the decline is partially offset by increased enrollment in Early Head Start.

The income threshold for Head Start eligibility is the federal poverty level, or \$24,600 for a family of four, whether a child lives in California or Alabama. "We have different economies across the country," according to a Head Start California leader. Although Head Start allows providers to enroll an additional 35 percent of participants whose families are between 100 percent and 130 percent of FPL if the program proves it has made adequate outreach to lower income families, Head Start has difficulty finding families that meet that income threshold in California as well. As the California Policy and Budget Center has demonstrated, a family needs \$65,000 to afford the basic living expenses in Sacramento and far more in many other parts of the state.

According to Head Start representatives, because of income eligibility requirements that do not fit the reality of the California economy as well as the establishment of the TK program, which has no income requirements, Head Start enrollment declined by 15,869 between 2015 and 2018. This decline has been partially offset by a 7,000 increase in Early Head Start enrollment.

Noting that the income eligibility requirements are out of sync with the California economy, the California Assembly Blue Ribbon Commission Report (2019) recommends that the state apply for a federal waiver to the Head Start income-eligibility requirement (that is, that income be at or below the federal poverty level).

Different federal funding streams (the Child Care and Development Block Grant and Temporary Assistance for Needy Families) have different requirements for oversight of license-exempt care.

The CCDBG aims to ensure that any early learning and care program financed with federal dollars has some standards of quality beyond a simple criminal records and background check. The CDE is currently in the process of implementing technical assistance visits and determining how to meet training requirements for license-exempt providers in CalWORKs Stage 2 and Stage 3 funded with CCDBG funds. The federal TANF program, however, has no such requirement for the CalWORKs Stage 1 license-exempt providers funded by TANF. In practice, the two departments' policies may turn out to be less different than the law would allow, because, according to a CDSS leader, the department "would not want to see a world in which there's very different requirements for exempt providers" in the three CalWORKs stages. "But how we do that really matters ... while it may be called monitoring in the federal law, ... we'd want it to be more strength-based and a connection to other resources in that conversation as opposed to compliance-oriented business."

Regulatory Barriers That Could Be Eliminated without Compromising Quality

Sixty percent of CSPP programs are administered by LEAs, according to a California County Superintendents Educational Services Association (CCSESA) leader, but many programs are subcontracts with private nonprofit providers. Declining elementary school enrollment in some counties may make school facilities an attractive setting. But meeting both Title 5 contract standards and Title 22 licensing requirements may be problematic for schools. Blending of State Preschool and TK funds, which can help improve pupil-teacher ratios while capturing some of the benefits of TK teacher salaries, may be easier to do if schools operating these programs only have to comply with one set of health and safety standards. In previous years, CSPP providers had to comply with both Title 5 and Title 22 licensing standards. "That was problematic for a number of reasons, including the fact that in some places, those regulations conflicted," according to a CCSESA leader. However, as a result of recent state legislation, programs located on school sites that only serve four year olds have to comply with Title 5 contract standards as opposed to Title 22 licensing standards. Although a number of Title 5 programs located on school sites still choose to meet the Title 22 standards, the flexibility in compliance may be useful. At the same time, it is important to note that Title 22 standards are not primarily focused on the characteristics of the building and include many other relevant aspects, such as robust parent complaint intake and response (within 10 days) and experienced third-party investigations of reported child abuse (via trained peace officers staffed through Community Care Licensing).

The LAUSD tries to meet the Title 22 licensing standards even though that is not required for the Early TK programs in the district. However, according to a local program leader, some of the regulations are problematic. Some regulations have to do with the number of sinks and toilets. A classroom "might have one bathroom and one sink," but the licensing inspectors require a second sink, "and they won't count the classroom sink. ... It's just way too expensive to go back and add bathroom toilets ... and you can't build a bathroom

or add a toilet without having everything else be also ADA-compliant on the entire campus.”

Although some of the Title 22 and Title 5 requirements seem excessive for school settings, a local stakeholder administering both TK and CSPP sees ways that the TK standards should be adjusted to better serve young children by changing the *EC* addressing both TK and kindergarten. This stakeholder suggests a 12:1 ratio, with a teacher and a teacher’s assistant, in order to increase teacher–child interaction. Doing so would require creating a separate average daily attendance (ADA) funds for TK and kindergarten in order to finance a teacher assistant in each classroom.

Several state and local stakeholders also suggested a need to integrate Title 5 and Title 22 standards and to place more emphasis on teacher–child interaction and quality improvement than on strict compliance with health and safety requirements that largely concern the characteristics of the building. Although most stakeholders support the move to annual licensing inspections, some regret that the funds to pay for the increased number of licensing staff come from the quality set-aside for the CCDBG, thereby limiting the opportunity to use these funds for quality improvements such as tiered reimbursement or pay increases for providers. These stakeholders would prefer that the annual licensing inspections be financed with state general revenue.

Opportunities for More Efficient Allocation of Resources and Successful Efforts to Improve Efficient Use

According to a 2018 analysis by AIR and UC-Berkeley (Manship, Jacobson, and Fuller 2018), access to early learning and care programs varies dramatically in different counties across California. Statewide, a large majority of four year olds are enrolled in a licensed care program, whether financed by public subsidies or family fees. However, access to licensed centers for three year olds remains low and varies considerably across counties. For example, although San Francisco serves more than half of the county’s three year olds (53 percent), only 16 percent are served in Tulare County. The analysis also revealed that many high-cost coastal counties have declining populations of children, while many counties in Northern California and the Central Valley are predicted to see increases in the number of children, even while these growing counties already have greater existing unmet need. This presents an opportunity to rethink the distribution of state-subsidized child care funds to focus on increasing slots and building capacity in areas of the state where the population of children is predicted to grow.

Another opportunity for more efficient allocation—or at least use—of resources is blending TK and CSPP funding in one classroom. This can be done if all of the children are four years of age or older and if the services are located on a school site that already has to meet school building code standards, among several other requirements. According to a CCSESA representative, at least a dozen county offices of education are working with local school districts to move in the direction of blending TK and CSPP funds.

Transition Supports and Gaps

- *What are the strengths and weaknesses of the transition supports for children moving from the early care and education system to school entry? Are there targeted supports for vulnerable or underserved children or in rural areas? How effective are they? Have there been any innovative efforts to improve transitions? How effective were they? How do the supports differ based on the type of early care and education provider? How effective is the communication between providers and school systems?*

Interviewees and prior reports have noted several existing challenges in transitioning children from one service to another as they get older. First, as one interviewee pointed out based on her recent research, creating alignment between ELC programs and early elementary school can be challenging if early learning leaders in districts are not in cabinet-level positions, limiting their influence on elementary school decisions.

Disparate enrollment patterns are also a challenge; in some districts, children enroll in district preschool programs, only to leave that elementary school in kindergarten for another school in the district (such as in public school choice districts like San Francisco Unified) or a charter school. Even without school choice options, many ELC programs feed into elementary schools.

Transitions can be particularly difficult for some children, particularly for DLLs, who experience the additional challenge of understanding multiple languages, and for children with special needs, for whom routines may be particularly important.

The 2019 *Getting Down to Facts II* report (Stipek 2019a) also noted challenges that exist for students with special needs who transition from Early Start programs into district special education services. The report notes,

Joint administration of Part C services by CDDS and DOE may slow down access to services and transition to preschool (Part B) services. The agencies often have conflicting requirements and protocols. California should consider making the Department of Education the lead agency for Part C services in order to create a seamless system of services for children and families, administering services from birth to age 22 (p. 34).

Some efforts are under way to address these challenges. The *California Preschool Learning Foundations (CPLF)* (CDE 2015) include recommendations to support the transition to kindergarten for DLLs. Recommendations include having preschool and kindergarten teachers of young DLLs schedule joint planning time to share information about each child's skills and assessment results, services provided, and progress made. *CPLF* also recommends that children and families have the opportunity to visit new settings or classrooms the children are transitioning into in advance.

In 2013, the DDS and the CDE published a guide titled *Effective Early Childhood Transitions* (2013), which provides recommendations for smoother transitions at age

three for children with special needs who are receiving Early Start services and moving into district-provided special education services. Recommendations include the provision of interagency trainings for staff in all programs involved in the transition process, clear interagency agreements that specify steps and specific roles and responsibilities, information on transitions made available to parents in multiple formats, and individualized transition plans to meet the unique needs of each family.

According to CSSESA, many county offices of education are focusing more conversations on the importance of transitions. The CSSESA has been working to support opportunities for ELC program teachers (including child care, TK, and preschool teachers) to connect with early elementary grade teachers to begin conversations about aligning curricula.

The California Preschool Instructional Network (CPIN) offers recommendations on kindergarten transition practices in its *Transition to Kindergarten* brochure, which is available to ELC providers. The CPIN provides recommended practices for schools (for example, exchanging information with local preschools throughout the year and inviting preschool classes to spend a day in kindergarten), families (for example, taking a tour of the elementary school), and preschool programs (for example, hosting a meeting for families to allow kindergarten teachers to share expectations) to support the transition to kindergarten for children.

Many other local efforts are working to smooth transitions for children. For example, the Milpitas Unified School District has implemented an Early Learning Transitions Model (ELTM) to support children and families as they prepare for elementary school. One key feature of this model is the use of a computerized, adaptive child assessment—the Children’s Progress Academic Assessment™ (CPAA™). The CPAA assesses literacy and mathematical skills and may be used to complement the Desired Results Developmental Profile-Preschool and the DRDP-Kindergarten, in that it may provide teachers and parents with information about children’s progress with discrete skills that may be related to some of the measures in two DRDP subdomains: Literacy and Cognition: Math. As a computer-adaptive assessment, the CPAA is not used with infants and toddlers.

Evidence of the reliability and validity of the CPAA could not be found on the CPAA website; such evidence is needed to verify that the CPAA measures the discrete skills within literacy and mathematics. Additional study is also needed to determine how teachers and parents use the CPAA to complement the information that is provided from the DRDP in reports for teachers and parents. A formal alignment of the assessments and a validation research study have not yet been conducted to establish the extent to which the content of the CPAA complements the DRDP.

In a formative evaluation conducted by Mathematica Policy Research (Moiduddin et al. n.d.), most teachers reported that they shared the CPAA parent reports and recommended activities with parents, either directly or in combination with data from other assessments, sometimes focusing on parents whose children might need extra support. Several teachers also reported that they used CPAA results and activities to help parents understand how they could support their children’s learning at home. In this way, formative assessments like the CPAA can help ease transitions.

Sacramento County recently developed an Early Learning Roadmap that focuses on prenatal care through age eight. This plan sets milestones to facilitate transitions across this full age range. In Year 1, they aimed to support communication among programs serving children across the age span and to explore opportunities for a coordinated database and assessment system for the county. By Year 5, they aim to have a countywide school readiness tool to support transitions and the coordinated database in place.

The Escondido Union School District (EUSD) conducted a parent survey to gather feedback on needs and concerns related to getting children ready for kindergarten. The data led the school district to include parent training in every Parent Advisory Council meeting about kindergarten readiness and summer activities. All of the State Preschool classes in the district visit the kindergarten class on the campus where they are located each spring. Community-based State Preschool programs also visit kindergarten classrooms, tour the school, and pair preschoolers with older children to read books together. One contractor, HealthRIGHT 360, also provides students in its State Preschool program with a backpack and school supplies to ease the transition.

Kidango, a large child care provider in Northern California, has developed a set of practices to support children's transitions into kindergarten as well. Their Head Start programs are required to develop written plans for children's transitions six months before kindergarten entry. These plans involve meetings with families, family advocates, and teachers. Kidango also operates State Preschool programs on campuses in Alum Rock Union School District. In these schools, the provider invites kindergarten teachers to meet families at a parent meeting, shares information with the teachers about children, and even shares DRDPs with teachers when the parents give permission. In all of their programs, they include stories about transitions and expectations in their curricula.

System Collaboration

This section addresses the following questions from the federal needs assessment guidance:

- *What policies and practices are in place that either support or hinder interagency collaboration?*
- *What practices are in place that reflect effective and supportive interagency collaboration supporting young children and families?*

Like other states, California has several public systems that are responsible for the well-being of young children and families. Many families—especially those experiencing poverty, job insecurity, or health issues—interact with multiple service sectors, such as ELC, health care, mental health, schools, job training, substance abuse programs, and housing agencies. Too often, each agency has its own eligibility requirements, service providers, and practices, creating a burden on families and inefficient or duplicative silo services that are uncoordinated in their efforts to support families and promote the well-being of children.

State, tribal, and local efforts to increase the level of collaboration must be examined within California's complex mixed-delivery ELC system. At the state level, the CDE oversees most of the state's ELC programs, although several other agencies, including the CDSS and the DDS, also have involvement in some subsidized ELC programs. One significant example in California is the CalWORKs APP voucher system—CalWORKs Stage 1 of this program is managed by the CDSS, with the CDE overseeing Stage 2 and Stage 3. Moreover, Head Start, a major ELC program in the state, is administered by the federal government.

At the local level, each county typically has numerous agencies and organizations that play a role in delivering or supporting ELC services as well as linking ELC to other social service resources. Subsidized ELC programs are often supported by multiple funding streams, including federal, state, county, and school district funds. Families and ELC providers are faced with different and complex eligibility requirements and enrollment processes.

Policy and Practices to Promote Collaboration

Over the past several decades, California has increasingly focused on strategies to collaborate in ways that support the integrated and seamless delivery of services to young children and their families. In addition to the state department leadership, First 5 California (and local First 5 County Commissions), with significant investment from philanthropy, has served as a catalyst to design, implement, and sustain strategies to better integrate services through collaborative efforts focused on funding, policy, and program design. Most recently, Governor Newsom created a new position in his office focused on ELC, elevating the importance of ELC within the state government.

State-level efforts have recently focused on improving the capacity of the state to understand how families are participating in different services and systems. As noted in the Data Gaps section of this report, the state is working with the Children's Data Network to integrate data across agencies to develop a comprehensive picture of service use by children and families. At the same time, stakeholders (at both the local and state levels) emphasized that significant barriers to data sharing hinder efforts to integrate child- and family-serving systems. In particular, stakeholders at the county level emphasized that data-sharing agreements across agencies are difficult to develop, given privacy issues.

Discussions with county ELC leaders revealed a strong commitment to collaboration in general and a willingness to partner in order to better serve young children and their families. Consistently, LPC coordinators and R&R representatives pointed to productive partnerships among their agencies as well as with county First 5 County Commissions; county offices of education; mental health, health, and family service organizations; and school districts and higher education. Areas of growing collaboration include primary care providers, often with the facilitation of the local First 5 agency. In several of the larger urban counties, R&R agencies and LPCs also spoke favorably of collaborations with community housing agencies.

Collaboration is challenging—a lack of political will, scarcity of resources, and limited consensus on common goals are just a few of the barriers that can hinder cross-sector

partnerships. One effective entry point to collaboration, based on discussions with ELC county leaders, is advocacy and public education. Many of the counties discussed how they have convened diverse stakeholder groups to develop common messages regarding child wellness and coordinated their voices to affect state policy. Counties often use a broad early childhood stakeholder group, such as Santa Clara’s Strong Start Coalition, a group of community leaders, ELC providers, nonprofit organizations, faith-based groups, elected officials, members of the business community, and other key stakeholders committed to expanding access to high-quality early learning opportunities for all children ages zero to eight.

Collaboration can also be “baked into” specific program models. For example, Help Me Grow is a national model designed to foster collaboration across child- and family-serving systems by connecting families and professionals to a centralized R&R system. Help Me Grow helps families obtain appropriate resources for their children at an earlier age and is designed to build caregivers’ awareness of healthy child development and available resources in the community. In California, Help Me Grow served 5,576 children in 11 counties in 2016 and a total of 14,398 children from 2014 to 2016. Among these, 87 percent of the children served were ages zero to five, and 49 percent of families served predominantly speak a language other than English at home (Help Me Grow California, n.d.).

Promising Local Collaborative Model

Some counties are testing the effectiveness of delivering cross-sector services using an “early childhood hub” model. For example, in El Dorado, community hubs are funded by First 5 California and leverage resources across a variety of other county partners. The hubs provide health resources, literacy activities, and parent education. Similarly, in Alameda County, the local First 5 agency spearheaded the development of a dedicated space to deliver a variety of services for families with young children supported by county agencies and community-based organizations.

Similarly, the structure of QCC—the state’s QRIS—also has fostered collaboration at the county level. Early learning and care leaders across counties repeatedly pointed to their locally implemented QRIS as a vehicle by which partnerships have been developed and strengthened across LPCs, R&R agencies, First 5 County Commissions, county offices of education, and local higher education. Collaborative management of these local systems was characterized by county ELC leaders as highly successful. These themes were also identified in a 2016 study of California’s Race to the Top-Early Learning Challenge Quality Rating and Improvement System (RTT-ELC QRIS). The American Institutes for Research found that the RTT-ELC QRIS enhanced collaboration and alignment among quality improvement initiatives and programs in its counties (Quick et al. 2016). In that study, QRIS administrators stressed that the RTT-ELC QRIS has enhanced the ECE system, including helping to improve alignment among its quality improvement systems, particularly regarding communication and collaboration among agencies and systems. In

addition, the RTT-ELC effort helped promote a common language among ECE professionals within and across programs and agencies.

In rural counties, ELC leaders repeatedly emphasized that collaboration among early childhood partners was strong, in part because their counties were small and involved a limited number of partners. One LPC coordinator from a rural county said, “We collaborate for everything. We collaborate with First 5, R&R, County office, LPC. We have to work together because that’s how it works in a small county. We have to do a lot of blending because we are so rural, and we don’t have a lot of people that are able to come to these things. Collaboration is a necessity.”

Other strategies to improve collaboration, based on feedback from ELC leaders, include the following:

- Funding for cross-sector workforce development, particularly to support DLLs
- Commitment from leadership for collaborative efforts and support for staff time to participate in such endeavors
- Time and resources to build and maintain personal relationships across agencies
- Inclusion of all relevant agencies at critical discussions and decision-making points

Policies and Practices That Hinder Collaboration

In discussions, ELC leaders identified various policies and practices that hinder their capacity to collaborate, both within traditional ELC stakeholder groups as well as across the many sectors that serve young children and families. Barriers included the following:

- **Limited information** about the role of various government agencies involved with supports to young children, and how those agency roles align (or not). County- and state-level ELC stakeholders clearly sought more tools to promote collaboration and strategies for information sharing across the various agencies in the ELC and broader social services system.
- **Lack of consensus on key terms** across agencies (for example, agreement on what age range defines the “infant and toddler group”).
- **Challenges with data sharing** (as described earlier and in the Gaps in Data section), including the lack of unique child identifiers, data that can be aggregated by age (for example, data for infants and toddlers separate from data for preschool-age children), and limited expertise and capacity to analyze and use data for continuous quality improvement. This was of particular concern among state-level stakeholders in regard to sharing data across agencies, specifically the CDSS and the CDE.
- **Barriers to collaboration with regional centers.** Governed by the California DDS, more than 20 nonprofit regional centers with statewide offices serve people

with developmental disabilities and their families. For families with young children, these centers offer service coordinators and early intervention specialists to help families obtain appropriate services and supports. In county discussions, ELC stakeholders emphasized that they need more support to strengthen relationships with regional centers and “get regional centers to the table.” A similar comment was made by a state-level leader in regard to the need to improve partnerships between home visiting programs and regional centers in order to improve the rates and use of developmental screenings by home visiting programs.

- **Limited focus on relationships between county early learning and care agencies and tribal and migrant communities.** Tribal representatives emphasized the need to build stronger partnerships between tribes and county ELC leaders. In addition, these efforts must treat federally recognized tribes as sovereign nations and acknowledge and be responsive to the historical trauma faced by tribal members. In addition, representatives from the Migrant Child Care and Development program emphasized that, in the past, the program was somewhat isolated from other efforts given its focus on such a specific population. Current staff are committed to ensuring the program is part of the ongoing efforts by the state to improve its ELC system, by building relationships and helping “set the table with all these different groups.”

The challenges facing the ELC system in California in improving coordination and collaboration are complex and include misalignment of policies and requirements of funding sources; the legal and technological restrictions that affect data sharing; and the sheer effort it takes to build, strengthen, and sustain cross-sector partnerships. California is engaged in several efforts to address these issues at the state level (through policy, data integration efforts, and cross-agency collaboration), with similar initiatives playing out across rural and urban counties in the state. Replication of this work will require realistic expectations about the time needed to accomplish common goals and objectives, such as institutionalizing policies and practices within agencies, increasing buy-in and support across stakeholders, leveraging community assets, and obtaining adequate resources.

Collaboration Requires System Change Training

“I think too often we bring all these partners and collaborations together with absolutely no training. No training in systems change, no training in how to work with a partner, no training in how do we determine our common goals and move forward together? Those types of trainings and supports are vital if you want that group to succeed.”

—State-level stakeholder

Summary of Findings and Recommendations

California is home to more children under age five—and more ELC programs and settings—than any other state in the nation. The state has a complex mixed-delivery system funded by a variety of sources, administered by multiple state and local agencies,

and implemented by a diverse set of home-, center-, and school-based providers. Many state, county, and tribal ELC stakeholders based in the public, private, advocacy, and research sectors have invested their time and talent in informing and promoting the expansion of quality ELC. This year both Governor Newsom and the state legislature focused heavily on improving and expanding access to ELC services. To ensure that input reflecting the diversity of the ELC landscape in California was captured, this needs assessment collected information from a variety of sources, including recent ELC reports, analysis of extant data, stakeholder interviews with leaders at all levels of the ELC system, and a survey of LPC coordinators. Key findings and recommendations developed through the needs assessment are presented below by topic area.

Availability

A great need exists for more public investment in infant and toddler care and licensed care for subsidy-eligible children. It is also important to monitor how state policies affect the supply of infant and toddler care for families across the income span.

The unmet need for subsidy-eligible infants under age one is greater than the unmet need for care for children age one or two (93 percent, 88 percent, and 83 percent, respectively); however, the need for additional spaces is substantial for all children under age three. As noted earlier, the number of CDE-administered slots for infants and toddlers has decreased notably since 2008. At the county level, ELC leaders told us the story of this data in stark terms, describing significant demand for infant and toddler care but limited supply. Both state and local stakeholders noted that the growing enrollment of four year olds in TK may have inadvertently contributed to the decline in the availability of infant and toddler care for all income groups, because fees paid for four year olds in centers often subsidized the higher cost of infants and toddlers. At the same time, the same stakeholders voiced optimism that the expansion of TK and Early TK may have a silver lining, offering an opportunity for providers who formerly enrolled more four year olds to serve more infants, toddlers, and three year old children. The state should consider studying whether the recent increase in the state reimbursement rate (SRR) for infant and toddler care succeeds in enabling more providers to serve this age group and whether further incentives such as providing start-up funds for the renovation of facilities and the purchase of equipment are also needed.

Although more income-eligible four year old children are enrolled in publicly funded programs than in prior years—and more children of age four than of any other age group—more than 100,000 income-eligible four year old children are not served.

As indicated in exhibit 16, an estimated 293,839 four year olds live in families with incomes under 85 percent of the SMI. Of these children, 187,627 are enrolled in some type of publicly supported program, and 169,672 are enrolled in programs designed to promote school readiness and child development. This results in an unmet need of at least 106,212 unserved children in publicly supported programs and of at least 124,167 unserved children in programs designed to promote school readiness and child development. Assuming an 85 percent participation rate, which the Department of Finance and LAO have used in their estimates, the unmet need would be at least 62,136.

If California's goal is to move toward providing access to universal preschool for all children aged three and four, as espoused by the new governor, a good place to start is creating spaces accessible for currently unserved but income-eligible children. The 2019–20 state budget's inclusion of 10,000 new preschool spaces targeted for children from low-income families is a step in that direction. The governor and the legislature's "targeted universal" approach removes the work or other purpose of care requirements for the children, while continuing to prioritize children whose families demonstrate a need for care. Additionally, after all children who meet income eligibility requirements are served, it allows programs to enroll children from families over the income threshold as well, if the program is operated within the boundary of a school that has 80 percent or more of its students eligible for free or reduced price meals.

As new funds for early learning and care become available, the state should develop a plan for more equitable distribution of resources.

Given that many counties in Northern California and the Central Valley are predicted to see increases in the number of children (Manship, Jacobson, and Fuller 2018), an opportunity exists to rethink the distribution of state-subsidized child care funds to focus on increasing slots and building capacity in areas of the state where the population of children is predicted to grow.

The state contract process for early learning and care programs needs to be thoroughly examined and, to the extent feasible, amended to allow for more flexibility and capacity to meet the needs of families in different regions and contexts.

Interviews with state and local stakeholders as well as the review of prior needs assessments underscore multiple areas where the current rules may be unnecessarily restrictive. For example, several interviewees said the current CSPP rule that requires programs to operate 246 days per year in order to qualify as a full-day program prevents many school districts from applying to offer these full-day programs. Although schools often offer the only available settings to expand preschool programs, they have difficulty covering the cost of keeping the school campus open for the required length of time during the summer. In interviews, one school-based provider pointed out that her school would be able to remain open for 220 days, significantly longer than the 175 days required for a part-day program, but not the required 246 days. Moreover, according to these interviewees, while most families of preschool children need full-day programs, somewhat less need exists during the summer months. Some parents may want their children to spend time with grandparents or other relatives during the summer. In programs serving a large immigrant population, providers may struggle to fill programs during the summer, when many families travel to visit their relatives in their countries of origin. Creating provisions that would allow the state to relax rules when providers can demonstrate that doing so would better serve local needs would be helpful.

Other interviewees pointed to the need to be able to adapt Title 5 rules on classroom size. The LPC coordinators in rural counties reported that smaller classrooms in more locations would better serve families in those rural areas, but when a class size of 24 children is required to earn the full contract, money is often returned to the state because

transportation barriers and other factors keep families from being able to travel to where the classrooms are available.

Finally, as indicated in the Assembly Blue Ribbon Commission Report on Early Care and Education, the current one-year contracts for Title 5 programs pose many challenges and may ironically undermine the goal of ensuring services to the most vulnerable young children. For fear of not being able to earn their contracts and hence having to return funds to the state, providers may hesitate to enroll the most vulnerable children because those children may be the most likely to be absent or drop out. Similarly, providers dare not set aside and dedicate spaces for children experiencing homelessness or other vulnerable children for fear of not being able to earn their contracts in a single year. Providers must also anticipate in advance how many parent fees they will collect: If they earn more, providers must quickly have a plan to enroll additional children or they may lose the funds. Overall, as several prior ELC needs assessments and reports have recommended, the state might consider moving to multiyear contracts that offer greater flexibility to providers.

The application process for subsidized early learning and care needs to be streamlined and placed online.

To increase ELC availability to families, one important strategy is to simplify the application process. At least one city and county, San Francisco, has developed a system where applications for all subsidized ELC programs are available online through the San Francisco Child Care Connection (SF3C), an R&R program. Families can apply online, by phone, by mail, or in person. This removes the necessity to visit multiple program offices in order to apply for services and also makes it easier for providers to fill vacancies efficiently.

A need exists to continue to strengthen engagement with tribal nations to improve access to high-quality care for tribal children.

Recent efforts to create stronger partnerships between the state government and tribal nations include Project HOPE and the inclusion of tribes in the state's QRIS system through a new tribal region in the system. In the survey, only nine county LPCs indicated that they have data on the specific tribal affiliations of children in their counties. Future efforts to engage tribal communities should include tribal nations as full partners, be responsive to the historical trauma experienced by tribes, and respect and leverage tribal culture and traditions in caring for young children.

Greater investment—in terms of policy, research, and resources—is needed in the rural areas of the state.

A need exists to build the capacity of rural counties in California in regard to various aspects of planning, implementing, and sustaining strong ELC systems. As noted in the previous finding, the state lacks comprehensive data about the characteristics of children in rural areas. At the same time, some of the state's most vulnerable children live in these regions. Several rural counties—including Fresno, Merced, Tulare, Madera, Kern, and Imperial—have the highest rates of deep poverty in the state. In interviews, ELC leaders from rural counties emphasized the need for greater flexibility in serving young children

through providing more (and smaller) programs that are spread across remote regions and have flexible enrollment requirements to accommodate the needs of rural families.

Significant additional public investment is needed to make child care in California more affordable for families.

Overall, the availability of ELC in California cannot be separated from its affordability. California ranks as one of the least affordable states in the nation. It ranks first in the nation for the cost of infant care as a percentage of the SMI for a married couple, with the average cost of center-based infant care exceeding that of a year of college tuition. It also ranks in the top five states in the high cost of child care for infants and preschool-age children, in both center-based settings and FCCHs (Child Care Aware 2018). Although this report has emphasized the unmet need for ELC for the subsidy-eligible population, the need for more affordable care far transcends the current subsidy-eligible population.

Given that infants and toddlers especially need quality care with protective pupil-teacher ratios and well-trained and better compensated staff, no single easy solution will reduce what families have to pay for infant care; rather a compendium of policies must be considered. One partial policy solution already being implemented in California is to offer paid family leave for infant care. Although paid family leave does not eliminate the need for out-of-home infant care, it reduces the number of months that working parents have to pay for it and gives them more time to find a quality arrangement that meets their baby's needs (Zigler, Muenchow, and Ruhm 2012).

Another partial, albeit controversial, policy solution is to offer free ELC to one or more age cohorts, thereby reducing the number of years families have to pay for ELC for their children under age five. Although not the expressed intent of California's TK, the program has the effect of providing free services for age-eligible four year olds and thereby reducing the amount of time families need to pay for preschool, potentially making it easier to afford the large expenses associated with infant and toddler care. The extent to which the TK class size and pupil-teacher ratios meet the developmental needs of children as young as four years old is a subject of considerable debate, as is the impact of TK on private child care providers and family access to ELC for younger children. But the popularity of two key aspects of TK—that the program is free to families and does not require them to fill out burdensome forms documenting work hours and income eligibility—is indisputable.

Ultimately the state must decide how ELC should be financed—specifically, it must decide how much of the cost should be borne by the private sector, including parents, employers, and charitable organizations, and how much should be borne by the public, including federal, state, and local taxpayers. The next step is to determine how much parents should pay and how much they could realistically be expected to pay. Currently, those families receiving subsidized ELC in California have a copay that amounts to no more than 9 percent of family income, but families just above the eligibility threshold typically pay a far larger portion of their income for ELC or cannot purchase it at all. A report by the National Academies of Sciences, Engineering, and Medicine (2018) recommends that programs that charge a fee to parents should adopt a sliding scale. More analysis is needed to determine how such a scale might work in California for families above 85

percent of the SMI and how much it would cost. An analysis of the pros and cons of a sliding fee schedule as compared with tax credits for assisting middle income families with child care expenses would also be helpful.

Quality and Workforce

The quality of early learning and care—and to a very real extent the availability—depends first and foremost on improving the compensation of early learning and care educators.

LPC coordinators and almost all stakeholders interviewed for this needs assessment reported that finding and retaining qualified staff is a major barrier to ELC quality and expansion. Wages for ELC are low, particularly for infant and toddler providers; even preschool teachers with advanced degrees earn much less than their K–12 peers. Perhaps most alarming is that more than half of child care workers depend on at least one source of public income support in order to meet basic needs. Better understanding of the ECE workforce—through more research and systemic efforts to track teacher education and compensation—should inform comprehensive efforts to improve compensation for early childhood educators in California. The state might consider a mechanism for requiring providers to use a portion of any rate increase to raise staff compensation. In addition, other options for study may include setting a wage floor for providers receiving state subsidies and establishing a tiered reimbursement system tied to approved salary schedules. The upcoming state master plan should devote considerable effort to analyzing how other states have addressed compensation issues and the lessons learned.

Equitable compensation for early learning and care educators must be accompanied by a viable and affordable pathway to higher education.

As multiple prior reports have recommended, both the current ELC workforce and new students in the field need a viable pathway to advance their education. As recommended in the National Academies of Sciences, Engineering, and Medicine (2018) report, current members of the ELC workforce should not be expected to incur debt for education required to keep their jobs, and new entrants in the field should not have to take on more debt than they can reasonably be expected to pay back. Although provisions for supervised field experience should be expanded, current members of the ELC workforce should be given some credit for their prior experience and not be expected to take extensive time off from paid employment in order to complete “practice” teaching.

More attention is needed on the quality of infant and toddler care and to incentivizing, if not requiring, quality standards for programs serving all age groups.

Although expanding access for infant and toddler care is important to support families, no age group exists for whom investment in the quality of care has a longer term benefit. For state-subsidized center-based and FCC, consideration might be given to a recommendation made by a work group for Early Edge California to adapt the Title 5 standards for General Child Care and Development programs so that they more closely align with the Early Head Start Performance Standards, not only for pupil-teacher ratios

and group size but also for access to family support services with a caseload similar to that in Early Head Start (Muenchow 2014).

As documented by this needs assessment, the Blue Ribbon Commission on Early Childhood Education (2019), and multiple state and local stakeholders, large discrepancies exist in the pupil-teacher ratio and class size requirements for the CSPP and the TK Program. Although programs staffed by certified teachers might not need to have the currently required CSPP pupil-teacher ratio of 1:8, further consideration should be given to requiring the 1:12 ratio already implemented in several school districts and to limiting class size to 24 as opposed to 30.

Finally, little is known about the quality of the vast majority of licensed child care centers and FCCHs in the state. The QCC QRIS offers a vehicle to find out. The CDE's effort to expand participation in the QCC to the noncontracted, state-subsidized providers in the APP is an important step in this direction, as is the effort to make sure that the ratings are consistently applied across the state. Ultimately, to achieve its full mission of improving quality, QCC must probably be tied to tiered reimbursement for all state-subsidized providers. The idea, as one state CDE leader put it, is to offer a carrot rather than apply a stick to promote quality improvement.

More support is needed for family child care.

In recent years, the number of licensed FCCHs in all parts of the state has declined substantially, due at least in part to financial conditions in the state. Some providers lost their homes in the aftermath of the recession; when parents lost their jobs, their children no longer needed out-of-home care. Moreover, FCC is an isolating profession, providers do not receive benefits such as sick pay or vacation, and it can be difficult to find substitutes when needed. However, as this report has documented, FCC plays an important role in the mixed-delivery ELC system in California, providing care for many infants and toddlers and offering more child care for parents across the income span who work nontraditional work hours or have variable schedules.

Surveys of FCC providers described in this report indicate several areas where the providers need help to stay in business. Evidence shows that staffed FCC networks can help FCC providers increase their business acumen, obtain access to benefits such as sick pay and vacation, find trained substitutes, obtain access to developmental screening and early intervention services for the children enrolled, and secure financial assistance to improve the portion of their homes providing FCC. California should consider the options for encouraging the development of staffed FCC networks. One possibility is to encourage the expansion of Title 5 FCCHEN programs and other networks administered by Head Start and Early Head Start. About 30 FCCHEN programs already exist, but more information is needed to determine whether they are funded at a level sufficient to provide the above types of support that have been found to be effective in strengthening FCC. In addition, the implementation of annual licensing inspections, which will focus on building relationships with home providers and increasing communication and technical assistance, may significantly improve the ability of FCCHs to operate and produce quality care outcomes.

Facilities

Facilities for early learning and care programs deserve much more attention and public investment.

One barrier that keeps California from being able to provide more ELC services is a lack of accessible facilities. More than 90 percent of LPC coordinators reported that difficulties finding a site to move into is a challenge to ELC expansion in their counties, and nearly all reported that lack of funding for facilities is a barrier. Through interviews, it became evident that providers rarely have the resources through regular contract funds to upgrade or expand their facilities. In addition, grant funds for this purpose are no longer available from the state, and finding affordable new facilities is challenging, even in the lower cost regions of the state. The 2019–20 state budget includes a one-time significant new investment in ELC facilities and converts an existing revolving loan fund into a grant program. To inform future investments in facilities, in conjunction with a new Master Plan for Early Learning and Care, the state should consider conducting an inventory of publicly owned spaces that could be used for ELC programming, assess the condition of existing facilities, and develop a plan to upgrade them.

Data

California needs better data and data systems in many areas in order to make important policy decisions about serving children.

Many questions policymakers have about ELC program enrollment and child outcomes cannot be answered at this time because of the lack of a longitudinal database. California needs a system to assign unique identification numbers to children at birth, follow them as they obtain access to services across sectors, and track children's outcomes over the long term. In addition, a unique ID system will help the state better understand the choices families make to cover their actual need for child care, the reasons for and the extent of dual enrollment, and the outcomes over time that are associated with different programs and investments.

Santa Clara County's ECIDS effort has shown that building a child-level data system takes years of coordination and scores of memoranda of understanding (MOUs). In addition, information from focus groups with state agency representatives has shown that it is not always clear to staff, even managers, when and how they are allowed to share data. The state should begin a process to develop a child-level data system, connect to CALPADS as soon as possible, and use its authority to incentivize data-sharing agreements between agencies. (CALPADS is the state's longitudinal data system for K-12, and serves as a central, cohesive system that maintains quality student-level data and provides a vehicle for tracking individual student enrollment history and achievement data.)

This needs assessment has identified a variety of other early childhood data gaps. In particular, better data about children in rural areas is also needed. Data sources such as the federal American Community Survey use samples and require larger populations to make stable estimates. As a result, in some cases, multiple rural counties in California are combined into one geographic area (PUMA) for the purpose of making estimates. Local

data is needed to better understand the numbers and characteristics of children in small counties.

The state should require local needs assessments that are based on a standardized format on a regular basis to better inform state planning and budgeting, with funds and resources provided for Local Planning Councils to perform this work.

California already has a system of 58 LPCs, which are assigned the task of submitting a needs assessment every five years. However, the local ELC landscape may change dramatically within five years. As a result, while the LPC needs assessments may provide valuable support to local planning, the data is collected too infrequently to inform state planning. Moreover, because the needs assessments are based in different years and not required to address a clear framework of common elements, the results are not comparable across the state.

As indicated in the recommendations related to availability above, the state should adopt a streamlined online application process for subsidized ELC programs, which might have the additional benefit of providing a better estimate of the number of children waiting for ELC services than is currently available. The state might consider having LPCs and R&R agencies work together to develop this process. According to the survey of LPC coordinators, only 19 counties retain centralized lists of children waiting for and applying for publicly funded services, a capacity that was lost in the wake of the recession. In addition, 22 of 53 responding LPCs do not have any regular access to waiting lists for individual ELC programs. Although waiting lists are not sufficient to estimate unmet need, they are an important indicator of family interest in services.

Finally, these recommended additional requirements for LPCs cannot be met unless accompanied by sufficient funding and/or more support at the state level. As this report has indicated, the LPCs lost approximately half of their funding in the wake of the recession, and some only have part-time staff.

The Overarching Need for Significant New Revenue

To address the range of unmet needs in ELC availability and quality, significant additional investments are still needed in the ELC system as a whole, and few recommendations can be addressed without new or increased sources of revenue.

Although California has made great progress in increasing access to and improving the quality of many ELC programs, the funds allocated for ELC overall are still insufficient to provide quality services to the large number of families who need help if they are to afford services in a high-cost state. Infant and toddler care in California is the most expensive in the nation and in short supply for all income groups. State reimbursement rates for ELC programs serving similar populations vary greatly by program and funding source, with little relationship to the true cost of quality. More than half of the ELC workforce are paid so little that they qualify for state assistance. New data systems are needed to support the most efficient use of state funds. In addition, ELC facilities need to be expanded and improved.

In exploring the most appropriate sources of new or expanded revenue to address these issues, it will be important to determine which revenue source best suits which program. The state of California has often done heroic work in blending state and federal dollars to finance improvements in both the quality and availability of ELC. But this has had unintended consequences, such as (a) the inability to use certain federal funds to address the needs of families just above the federal income ceiling for some programs, and (b) restrictions against using state education funds for ELC programs operated by non-LEAs. A systematic exploration of the attributes of both existing and potential new revenue sources will be key to expanding both the availability and quality of ELC in a mixed-delivery system.

Conclusion and Next Steps

California has recently made great strides in expanding access to high-quality care for young children through its mixed-delivery system. The challenge—and opportunity—for the state is to identify and implement the steps needed to move toward universal access to preschool services within the context of California’s complex ELC system. This includes locating funding and revenue sources. In addition, increased investment in infant and toddler care is greatly needed.

California continues to study issues of great importance to its children. The DLL Pilot Study is under way, and its goals include understanding the range of practices that ELC programs use to support DLLs and determining which are most effective and scalable. The state has also embarked on an updated California Early Care and Education Workforce Study, which will provide a statewide and regional description of the ELC workforce and will act as the foundation for an ongoing, comprehensive data system for that workforce.

This analysis has also informed the accompanying Preschool Development Grant strategic plan. As a next step for the state, this statewide needs assessment will be considered in the development of California’s Master Plan for Early Learning and Care. Called for by Governor Newsom, this plan is intended to produce actionable recommendations for achieving the long-term goals of universal preschool and improved quality of and access to systems of support for children.

Appendix A: First 5 Hub Regions



This is a color-coded map of California's 58 counties showing counties that are included in each of 10 First 5 Hub regions. Counties included in Region 1 include: Del Norte, Humboldt, Mendocino, Lake, Sonoma, Napa, Marin and Solano. Region 2 includes: Siskiyou, Modoc, Trinity, Shasta, Lassen, Tehama, Glenn, Butte, and Plumas. Region 3

includes: Colusa, Yolo, Sutter, Yuba, Sierra, Nevada, Placer, El Dorado, Sacramento, Amador, San Joaquin, Calaveras, Stanislaus, and Tuolumne. Region 4 includes: San Francisco, San Mateo, Santa Cruz, Contra Costa, Santa Clara, San Benito, Alameda, and Monterey. Region 5 includes: Merced, Madera, Mariposa, Fresno, Kings, Tulare, and Kern. Region 6 includes: Alpine, Mono, and Inyo. Region 7 includes: San Luis Obispo, Santa Barbara, and Ventura. Region 8 includes: Los Angeles. Region 9 includes: San Bernardino, Orange, Riverside, and Imperial. Region 10 includes San Diego.

Appendix B: Provider Survey Methodology

In late summer of 2019, a provider survey was launched to gather data on the estimated counts of unduplicated children served by ELC providers. The survey was also intended to collect information on a variety of other critical aspects of ELC implementation, including program site characteristics, funding patterns, facilities, workforce, and program activities to support access. The sample of providers was drawn from a list maintained by the CDE of those that accept alternative payment vouchers, which was combined with a list maintained by the CDSS of licensed and license-exempt providers. Provider types on this combined list include centers and large and small FCCHs. Because the CDE and CDSS lists did not contain email addresses, AIR staff contacted sampled providers in advance to introduce the study and obtain the required information for online administration of the survey.

To develop the sampling frame, a group of 17 counties was selected. The counties are representative of the geographic, demographic, and programmatic diversity of California's 58 counties. These counties were drawn from the six regions defined by the CDSS in 2001 (CDSS 2002), which have been used in prior AIR and Child Trends studies. The study team further divided the Northern/Mountain, Central/Southern Farm, and Southern California regions into two subregions to ensure the representation of mountain and inland regions (see exhibit 33). The CDE requested that a sample of five counties in three regions (the Bay Area, the inland central farm region, and the northern regions). One to three more counties within each region or subregion were randomly selected to create the overall survey sampling frame.

A sample of 1,605 sites was selected, with the goal of having a final analytic sample of 700 sites (excess sampling was done to account for potential redundancy in provider data from the CDE and the CDSS, inability to identify emails for sampled providers, and nonresponse to distributed surveys). This sample was representative of the number of provider types across the state, which represent roughly equal percentages (centers = 36 percent; large FCCHs = 28 percent; small FCCHs = 36 percent). This sample size enables strong precision in unduplicated count estimates and power to detect differences in comparisons among subgroups. To oversample rural counties and achieve variation across counties and program setting types, a minimum of 18 sites per county (six for each program setting type) were selected.

To gather data across all provider types that receive state reimbursements, this effort was supplemented with a survey of a convenience sample of 162 FFN care providers identified from a list available to AIR. In each county, 10 FFN providers were selected, with the exception of Mariposa County, where there were only 2. The final number of sampled providers was 1,767.

The survey was administered online using the Illume (DatStat) software platform.

Exhibit 33. Provider Survey Regions, Subregions, and County Names

* Counties that were sampled

Region	Subregion (number of counties)	County Names (*purposeful selection)	Sampled counties
Bay Area	Bay Area (10)	Alameda, Contra Costa*, Marin, Napa, San Francisco*, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma	<ul style="list-style-type: none"> • Contra Costa • San Francisco • One random: Sonoma
Southern CA	Coastal (4)	Orange, San Diego, Santa Barbara, Ventura	<ul style="list-style-type: none"> • Two random: Orange, San Diego
Southern CA (continued)	Inland (2)	Riverside, San Bernardino	<ul style="list-style-type: none"> • One random: Riverside
Los Angeles	Los Angeles (1)	Los Angeles	<ul style="list-style-type: none"> • Los Angeles
Central/Southern Farm	Coastal (2)	Monterey, San Luis Obispo	<ul style="list-style-type: none"> • One random: San Luis Obispo
Central/Southern Farm (continued)	Inland (2)	Fresno*, Imperial, Kern, Kings, Madera, Merced, San Benito, San Joaquin, Stanislaus, Tulare	<ul style="list-style-type: none"> • Fresno • One random: Kern
North/Mountain	Northern (15)	Butte, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta*, Sierra, Siskiyou*, Tehama, Trinity	<ul style="list-style-type: none"> • Shasta • Siskiyou • One random: Del Norte
North/Mountain (continued)	Mountain (7)	Alpine, Amador, Calaveras, Inyo, Mariposa, Mono, Tuolumne	<ul style="list-style-type: none"> • One random: Mariposa
Central Valley	Central Valley (7)	Colusa, El Dorad, Placer, Sacramento, Sutter, Yolo, Yuba	<ul style="list-style-type: none"> • Three random: Colusa, El Dorado, Sutter

Total Counties Sampled: 17

Appendix C: Program Standards

^a TK = Transitional Kindergarten; FCCH = family child care home; ECE/CD = early childhood education/child development.

Program	Standards
Transitional Kindergarten^b	<p><i>Teacher Credentials/Certifications</i></p> <ul style="list-style-type: none"> • Teachers must have a teaching credential. • Any current credentialed teacher who is or was assigned to teach TK, or a combination class of kindergarten and TK, on or before July 1, 2015, is “grandfathered in” to teach TK without having to meet additional requirements. • Any credentialed teacher assigned to teach TK, or a combination class of kindergarten and TK, after July 1, 2015, will have until August 1, 2020, to meet the following education requirements: <ul style="list-style-type: none"> – At least 24 units in early childhood education and childhood development – As determined by the LEA employing the teacher, professional experience in a classroom setting with preschool-age children that is comparable to the 24 units of education described in bullet above – A child development teacher permit issued by the California Commission on Teacher Credentialing (CTC) <p><i>Pupil-Teacher Ratio and Group Size</i></p> <ul style="list-style-type: none"> • The pupil-teacher ratio for TK is a local district decision and will most likely be affected by budget and contract agreements. • Transitional kindergartens have the same statutory class size limit as regular kindergartens in the school district (currently 33 students). <p><i>Health and Safety Requirements</i></p> <ul style="list-style-type: none"> • Facility requirements are the same as they are for kindergartens. • Students are required to have documentation or required immunizations or a valid exemption before admission to the first year of the TK program.

Program	Standards
<p>Head Start^c</p>	<p><i>Teacher Credentials/Certifications^d</i></p> <ul style="list-style-type: none"> • No less than 50% of all Head Start center-based teachers nationwide must have a bachelor’s degree (BA) in child development or early childhood education or have completed equivalent course work. • A Head Start program must ensure all center-based teachers have at least an associate or bachelor’s degree in child development or early childhood education or completed equivalent course work. <p><i>Pupil-Teacher Ratio and Group Size</i></p> <ul style="list-style-type: none"> • For children between ages four and five in center-based Head Start programs, the group size is 17–20 children, with a maximum of 20 children enrolled in any one class and two paid staff members per class. • For three year olds in center-based Head Start programs, the group size is 15–17 children, with a maximum of 17 children enrolled in any one class and two paid staff members per class.
<p>Head Start^c (continued)</p>	<p><i>Health and Safety Requirements^e</i></p> <ul style="list-style-type: none"> • A program must ensure that each staff member has an initial health examination and a periodic re-examination and ensure staff do not pose a significant risk to the health or safety of others in the programs. • A program must establish and maintain a Health Services Advisory Committee that includes Head Start parents, professionals, and other volunteers from the community. • A program must ensure children’s access to a source of care and health insurance and ensure up-to-date child health status. • A program must establish, train staff on, implement, and enforce a system of health and safety practices that ensure children are kept safe at all times.

Program	Standards
<p>Early Head Start^c</p>	<p><i>Teacher Credentials/Certifications</i></p> <ul style="list-style-type: none"> • A program must ensure that center-based teachers who provide direct services to infants and toddlers in Early Head Start centers have a minimum of a Child Development Associate (CDA) credential or comparable credential and have been trained or have equivalent course work in early childhood development with a focus on infant and toddler development. <p><i>Pupil-Teacher Ratio and Group Size</i></p> <ul style="list-style-type: none"> • For children between ages zero and three in center-based Early Head Start programs, the pupil-teacher ratio is 1:4. <p><i>Health and Safety Requirements</i></p> <ul style="list-style-type: none"> • The health and safety requirements for Early Head Start programs are the same as for Head Start programs.
<p>Title 5 General Child Care</p>	<p><i>Teacher Credentials/Certifications^f</i></p> <ul style="list-style-type: none"> • A permit issued by the CTC authorizing service in the care, development, and instruction of children in a child care and development program. This can be any of the following permits: <ul style="list-style-type: none"> – Regular Children’s Center Instructional Permit – Limited Children’s Center Instructional Permit – Emergency Children’s Center Instructional Permit – Child Development Master Teacher Permit – Child Development Teacher Permit – Child Development Associate Teacher Permit (Note: This permit authorizes the holder to supervise Assistant Permit holders and an aide) • OR a current credential issued by the CTC authorizing teaching service in elementary school or a single subject credential in home economics and 12 units in early childhood education and CD or two years of experience in early childhood education or a child care and development program.
<p>Title 5 General Child Care (continued)</p>	<p><i>Pupil-Teacher Ratio and Group Size^g</i></p> <ul style="list-style-type: none"> • Pupil-teacher ratio of 1:8 for three to five year olds • Pupil-teacher ratio of 1:3 for zero to two year olds <p><i>Health and Safety Requirements</i></p> <ul style="list-style-type: none"> • Must meet health and safety requirements monitored by the state.

Program	Standards
<p>CalWORKs (all stages)^h</p>	<p>Teacher Credentials/Certifications</p> <ul style="list-style-type: none"> Any requirement established by the CDE that course work in early childhood education or child development, or both, be completed in order to fully qualify as a day care center teacher may be satisfied with a valid CDA credential issued by the Child Development Associate National Credentialing Program for a center-based setting with a preschool-age level or infant and toddler-age level endorsement. The preschool-age level endorsement shall qualify the holder of the credential as a day care center teacher for ages three to five, inclusive, and the infant and toddler-age level endorsement shall qualify the holder of the credential as a day care center teacher for up to, and including, age two. The CDA credential used to qualify people as day care center teachers shall involve standards that are no less stringent than those in effect on January 1, 1988. <p>Pupil-Teacher Ratio and Group Size</p> <ul style="list-style-type: none"> For children between eighteen months and three years of age, a ratio of six children to each teacher is maintained for all children in attendance at the toddler program. The maximum group size, with two teachers or one fully qualified teacher and one aide, does not exceed 12 toddlers. <p>Health and Safety Requirements</p> <ul style="list-style-type: none"> Centers and FCCHs must meet health and safety requirements monitored by the state. License-exempt providers must self-certify that they meet modified health and safety standards.
<p>Alternative Payment</p>	<p>Teacher Credentials/Certifications</p> <ul style="list-style-type: none"> Same as CalWORKs program <p>Pupil-Teacher Ratio and Group Size</p> <ul style="list-style-type: none"> Same as CalWORKs program <p>Health and Safety Requirements</p> <ul style="list-style-type: none"> Same as CalWORKs program
<p>Migrant and Severely Handicappedⁱ</p>	<p>Teacher Credentials/Certifications</p> <ul style="list-style-type: none"> Generally, the same as for General Child Care, with certain additional programmatic components specific to special populations of children served^k

Program	Standards
Migrant and Severely Handicapped^j (continued)	<p><i>Pupil-Teacher Ratio and Group Size</i></p> <ul style="list-style-type: none"> • Generally, the same as for General Child Care, with certain additional programmatic components specific to special populations of children served <p><i>Health and Safety Requirements^l</i></p> <ul style="list-style-type: none"> • Health services in migrant child care and development programs shall include health and dental screening and follow-up treatment. The health records of any migrant child shall follow the child.

^b CDE 2016.

^c National Center on Program Management and Fiscal Operations, n.d.

^d US Department of Health and Human Services, n.d.-a.

^e US Department of Health and Human Services, n.d.-b.

^f CDE n.d.-b.

^g Community Child Care Council of Santa Clara County, Inc., n.d.

^h California Legislative Information, n.d.-c

ⁱ CDSS, n.d.-b.

^j California Legislative Information, n.d.-b.

^k A contractor providing services pursuant to a general child care contract, a campus child care contract, a migrant child care contract, or an alternative payment child care contract is subject to the requirements of the Americans with Disabilities Act.

^l California Legislative Information, n.d.-d.

Exhibit 34. Number and Percentage of National Association for the Education of Young Children/National Association for Family Child Care-Accredited Centers and Family Child Care Homes, 2019

n/m Reporting standard not met. Cell size too small to report.

Rounds to zero.

County	Total number of National Association for the Education of Young Children/National Association for Family Child Care-accredited sites	Total number of licensed centers and family child care homes	Percentage of licensed centers and family child care homes that are National Association for the Education of Young Children/National Association for Family Child Care accredited
California Statewide	633	41,537	2%
Alameda	13	2,168	#
Alpine	n/m	n/m	n/m
Amador	0	48	0%
Butte	1	215	#
Calaveras	0	51	0%
Colusa	0	61	0%
Contra Costa	26	1,463	2%
Del Norte	0	50	0%
El Dorado	1	158	1%
Fresno	29	960	3%
Glenn	0	55	0%
Humboldt	3	183	2%
Imperial	1	331	#
Inyo	0	35	0%
Kern	3	878	#
Kings	2	222	1%
Lake	0	84	0%
Lassen	1	29	3%
Los Angeles	123	9,149	1%
Madera	1	194	1%
Marin	3	359	1%
Mariposa	0	19	0%
Mendocino	0	114	0%
Merced	0	305	0%

County	Total number of National Association for the Education of Young Children/National Association for Family Child Care-accredited sites	Total number of licensed centers and family child care homes	Percentage of licensed centers and family child care homes that are National Association for the Education of Young Children/National Association for Family Child Care accredited
Modoc	0	26	0%
Mono	1	24	4%
Monterey	8	508	2%
Napa	0	139	0%
Nevada	0	107	0%
Orange	52	2,284	2%
Placer	5	498	1%
Plumas	0	39	0%
Riverside	30	2,038	1%
Sacramento	12	1,881	1%
San Benito	0	85	0%
San Bernardino	20	1,577	1%
San Diego	97	4,577	2%
San Francisco	7	1,154	1%
San Joaquin	4	963	#
San Luis Obispo	1	354	#
San Mateo	20	980	2
Santa Barbara	83	548	15%
Santa Clara	37	2,345	2%
Santa Cruz	2	415	#
Shasta	2	196	1%
Sierra	0	n/m	0%
Siskiyou	1	47	2%
Solano	7	529	1%
Sonoma	5	533	1%
Stanislaus	0	469	0%
Sutter	0	134	0%
Tehama	3	84	4%
Trinity	0	15	0%

County	Total number of National Association for the Education of Young Children/National Association for Family Child Care-accredited sites	Total number of licensed centers and family child care homes	Percentage of licensed centers and family child care homes that are National Association for the Education of Young Children/National Association for Family Child Care accredited
Tulare	0	555	0%
Tuolumne	1	59	2%
Ventura	23	845	3%
Yolo	4	294	1%
Yuba	1	98	1%

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