School Readiness Committee
Strategic Planning Retreat
Williams Mullen Center, 200 S. 10th Street, Richmond
June 7, 2019 from 10am – 3pm

AGENDA

I. Welcome and Purpose of Plan 10:00
   Gary Thomson, Chair, School Readiness Committee
   Atif Qarni, Secretary of Education
   Dr. Dan Carey, Secretary of Health and Human Resources
   Jenna Conway, Chief School Readiness Officer

II. Introductions and Overview of Agenda 10:15

III. Update on Needs Assessment and Strategic Planning Process 10:30

   BREAK 10:45

IV. Research Findings 11:00

   WORKING LUNCH 11:45

V. Principles for an Early Childhood Care and Education System 11:45

VI. Setting Goals for Virginia 1:00

   BREAK 1:30

VII. Affirming Strategies 1:45

VIII. Report Back and Large Discussion 2:10

IX. Next Steps and Evaluation 2:40

X. Closing 2:50

   Kathy Glazer, President, Virginia Early Childhood Foundation
Background Reading

Early Childhood Care and Education Strategic Planning

School Readiness Committee Retreat

June 7, 2019

1. DRAFT Vision and Principles
2. DRAFT Definitions
3. Needs Assessment and Strategic Plan Research Approach
4. Educator Focus Group and Family Interview Results
5. Stakeholder Interview Results
6. Environmental Scan Worksheets
   a. Access
   b. Workforce
   c. Finance
   d. Data
7. Draft Goals and Strategies for Strategic Plan
Vision

We envision a Commonwealth where all children, ages 0-5, thrive because they have access to quality early care and education that is affordable and delivered by a skilled and diverse workforce in safe and nurturing environments, and their families have the information and resources to support their healthy development and readiness for school.

Principles

Virginia’s early childhood care and education system will be:

1. **Equitable.** Families have access to the schools, centers, and homes that provide the care and education they need, regardless of their children’s age, income, ethnicity, race, zip code, or ability.

2. **Family Focused.** Families are engaged in guiding the policies and practices of early care and education.

3. **Accountable.** Families, programs and policy makers are accountable for children’s success guided by meaningful shared information and data.

4. **Quality.** Children are supported in their development and learning in safe, quality, and positive environments with a skilled workforce receiving competitive wages.

5. **Strategic.** Funding, policies, and standards are coordinated among state, local, and community programs and departments to better serve children and their families.

6. **Sustainable.** Financing reflects the true costs of care, incentivizes quality, and supports children’s access regardless of family income or work status.

7. **Innovative.** Incubation, testing, and scaling of successful strategies and policies are supported and result in effective practices.
<table>
<thead>
<tr>
<th>TERM</th>
<th>DEFINITION</th>
<th>ACCESSIBLE DEFINITION</th>
<th>SOURCE NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vulnerable children</td>
<td>Children who are at increased risk of being unprepared for success in kindergarten due to developmental delays, trauma or adverse childhood experiences, being English language learners, health, and/or environmental conditions such as insufficient income, housing, parental education, or safety at home.</td>
<td>Children who are less able to thrive in childcare or school due to social or emotional obstacles, health concerns, or insufficient family or community resources.</td>
<td>Synthesized based on research literature, <a href="https://www.childrenscommissioner.gov.uk/wp-content/uploads/2017/07/CCO-TP2-Defining-Vulnerability-Cordis-Bright-2.pdf">https://www.childrenscommissioner.gov.uk/wp-content/uploads/2017/07/CCO-TP2-Defining-Vulnerability-Cordis-Bright-2.pdf.</a>.</td>
</tr>
<tr>
<td>Rural</td>
<td>Any area not included in an urbanized area (of 50,000 or more people) or urban cluster (of between 2,500-50,000 people) in the United States.</td>
<td>Areas with populations of fewer than 2,500 people.</td>
<td><a href="https://www.census.gov/geo/reference/urban-rural.html">https://www.census.gov/geo/reference/urban-rural.html</a> (defined by Census block-level data every 10 years)</td>
</tr>
<tr>
<td>Kindergarten readiness</td>
<td>“A ready child is prepared socially, personally, physically, and intellectually within the developmental domains addressed in Virginia’s six Foundation Blocks for Early Learning: literacy, mathematics, science, history and social science, physical and motor development, and personal and social development. Children develop holistically; growth and development in one area depends upon development in other areas.”</td>
<td>Children are ready for success in kindergarten when they have the social, emotional, and intellectual abilities to fully engage in learning with and among peers.</td>
<td><a href="http://www.doe.virginia.gov/early-childhood/school-readiness/va_school_readiness_definition.pdf">http://www.doe.virginia.gov/early-childhood/school-readiness/va_school_readiness_definition.pdf</a></td>
</tr>
<tr>
<td>Quality early childhood care and education (ECCE)</td>
<td>The National Association for the Education of Young Children (NAEYC) suggests that a “high quality early childhood program provides a safe, nurturing environment that promotes the physical, social, emotional and cognitive development of young children while responding to the needs of families.” Quality for early care and education for children ages 0-5 is multidimensional and dynamic, including curriculum and assessment, teacher-child interaction, teacher preparation and professional development, a safe environment, child to adult ratios, and family engagement.</td>
<td>High quality early childhood care and education programs provide a safe and nurturing learning environment for children and respond to the needs of families.</td>
<td><a href="https://www.naeyc.org/our-work/families/10-naeyc-program-standards">https://www.naeyc.org/our-work/families/10-naeyc-program-standards</a></td>
</tr>
<tr>
<td>ECCE availability</td>
<td>ECCE availability means that there are sufficient opportunities for children to enroll in quality care in a given geographic area, an inclusive and welcoming environment, and the types of services needed at the hours, locations, quality level, and affordable price points that meet families’ needs and support the child’s development, within reasonable limits of effort and affordability.</td>
<td>Early care and education is available and accessible when it is affordable, convenient, welcoming, high quality, and attentive to family needs.</td>
<td><a href="https://www.acf.hhs.gov/sites/default/files/opre/cceepra_access_guidebook_final_2_13_b508.pdf">https://www.acf.hhs.gov/sites/default/files/opre/cceepra_access_guidebook_final_2_13_b508.pdf</a>.</td>
</tr>
</tbody>
</table>

**Key Early Childhood Care and Education (ECCE) Definitions**

**Impact Work Group**

April 2019
Virginia Early Childhood Care Needs Assessment & Strategic Plan
Research Design & Approach

Communitas Consulting is using a mixed-methods design for the state early childhood care and education (ECCE) needs assessment and strategic plan. The two documents will be produced concurrently; data collected for the needs assessment will feed into the strategic plan in real-time through an iterative process. The result will be a data-informed, actionable, and measurable strategic plan that Virginia’s School Readiness Committee, state legislators, and other ECCE leaders can use to guide policymaking and resource allocation.

We will utilize existing ECCE state and national reports; state databases; interviews with families of young children, community leaders and ECCE data experts; and focus groups with childcare center directors, educators, and providers who care for children to answer the following questions:

**Needs Assessment Overarching Questions**

1. To what extent are Virginia’s publicly funded ECCE programs serving families in Virginia with children ages 0 to 5?
2. What are the strengths and weaknesses of Virginia’s infrastructure supporting publicly-funded ECCE programs?
3. What data do policymakers, state agency executive leadership, early childhood program providers, and families need to make informed decisions about early childhood programs and infrastructure? To what extent is that data available in the state of Virginia?

**Strategic Plan Overarching Questions**

1. What actions would enable Virginia’s publicly funded ECCE programs to better prepare all Virginia’s children, especially those from under-resourced communities, for kindergarten?
2. What changes to ECCE infrastructure would better enable all of Virginia’s children ages 0 to 5, especially those from under-resourced communities, to access to publicly-funded ECCE programs that help prepare children for kindergarten?
3. What measures should be used demonstrate progress and foster accountability for the above actions and changes?
4. What can we learn from VA’s mixed delivery pilots’ experience regarding what works well and where there are barriers?
Methodology

As the needs assessment and strategic plan will be produced simultaneously, the components below represent categories of work that take place throughout the project.

Component 1: Secondary Data Review

- Review ECCE reports, including but not limited to “Improving Virginia’s Early Childhood Development programs” (JLARC, 2017), “Virginia Integrated Early Childhood Fund” (VDOE, 2018), and “Childcare Market Rate Survey” (VDOE, 2018)
- Review data from federal and state databases, including but not limited to data from the US Census, VDSS, VDH, and VDOE
- Identify topics to further explore in interviews and focus groups, and Impact Work Group meetings
- Identify data gaps for an early childhood integrated data system

Component 2: Primary Data Collection

- Prioritize topics to further explore in interviews and focus groups
- Partner with Smart Beginnings communities to recruit interview participants to best reflect the geographical and racial diversity of the state of Virginia
- Conduct interviews with:
  - Families with children enrolled in public ECCE programs
  - Families with children not enrolled in public ECCE programs
  - Experts in integrated data systems
  - Community leaders
- Conduct focus groups with:
  - Center directors of public ECCE programs
  - Teachers of public ECCE programs
  - Childcare providers participating in the subsidy program, with a focus on in-home providers
- Conduct interactive session with Mixed Delivery pilot sites

Component 3: Data Analysis and Synthesis

- Analyze and synthesize secondary and primary data to answer research questions

Component 4: Environmental Scan

- Review additional reports and conduct interviews with community leaders to gather contextual factors that may affect the identification and implementation of strategic priorities

Component 5: Create Needs Assessment and Strategic Plan Reports

- Compile and synthesize secondary data and primary data to create needs assessment document
- Integrate needs assessment findings with environmental scan and Impact Committee recommendations to create strategic plan document
- Impact Committee to review and provide feedback
- Finalize needs assessment and strategic plan documents
BACKGROUND
In order to gather diverse perspectives from families, community leaders, and educators on early childhood care and education (ECCE) in Virginia, the study team collaborated with eleven Smart Beginnings partners from across the state to recruit participants for interviews and focus groups. In total, 6 focus groups with members of the ECCE workforce and 46 phone interviews with families of young children and community leaders were conducted.

Families generally spoke **positively about their experiences in early childhood education**, and also spoke about the **need for broader support** for their children beyond care and education. **Connections within families and social networks** within communities are an important asset for getting direct assistance and finding out about ECCE opportunities and other child and family supports. **Perceptions of quality care and education varied** among the interview and focus group participants, with center directors taking the broadest view most aligned with evidence-based quality standards, teachers and family day home providers emphasizing personal connections, and families valuing social and life skills as much as learning.

FAMILY SUPPORT NEEDS/INCOME

Time Away from Home for Work or School
- About half reported 40+ hours
- About half reported less than 40 hours away, either due to working part-time or not working

Family Support Needs
- 23 report using public assistance (e.g., Medicaid, WIC, SNAP)
- When asked to describe a time when they needed assistance:
  - About half reported getting help from family or friends
  - About half reported getting government assistance
- Educators are commonly approached to assist with families’ basic needs

Income
- 22 below $50,000
- 3 approximately $50,000
- 1 above $50,000

FAMILY AND COMMUNITY STRENGTHS
- Families value **social connections within their families**
  - Love/closeness
  - Understanding and supporting each other
  - Spending time together
  - Having good morals and instilling these values in their children
FAMILY, EDUCATOR, AND COMMUNITY LEADER FINDINGS

ACCESS POINTS
- All but one family heard about ECCE or other public programs from a peer (e.g., friend or family member)
- A large majority were also linked to public programs/services via the Department of Social Services or Health Department
- Less than half accessed services through nonprofit organizations, such as the United Way or Partnership for Families
- A number of community leaders spoke about how their organizations disseminate information to connect people to services

ECCE PROGRAM STRENGTHS
- Families enrolled in ECCE programs generally spoke positively about them
  - Dedicated, caring teachers
  - Creative or enriching activities
  - Academic and cognitive learning
  - Seeing tangible results in their children

ECCE WORKFORCE STRENGTHS
- Passion and dedication
  - “Loving children as if they are your own”
- Resourceful
  - Many hats – training, collaboration, substitute bus driver, help parents
  - Engaging with and assisting students and families on a personal level
- Teaching social and life skills
- Promoting learning and a love for learning
- Providing a predictable and safe environment

IMPORTANT FACTORS FOR “QUALITY”

For Center Directors
- Curriculum and facilitating learning
- Quality teachers and good teacher/child interactions
- Balanced schedule and routine
- Clean environment with safe and accessible equipment, materials
- Encouragement of positive behaviors (age-appropriate)
- Understanding of children’s health and mental health needs

For Teachers
- Providing opportunity for children to develop and grow
  - Formal and ongoing training, plus learning through experience
  - Developmentally appropriate materials and activities
- Positive, trusting relationships between teachers and children
FAMILY, EDUCATOR, AND COMMUNITY LEADER FINDINGS

For Family Day Home Providers
- Love for children
- One-on-one care and attention
- Comfortable, clean, safe environment
- Healthy meals

SUPPORTS TO MAINTAIN AND ENHANCE “QUALITY”

For Center Directors
- Training and technical assistance (Smart Beginnings)
- Community partnerships
- Peers
- Virginia Quality

For Teachers
- Dedicated, committed administrators and classroom staff
- Classroom materials
- Training

For Family Day Home Providers
- Little discussion

CHILDCARE SUBSIDY PROGRAM

Provider Entry Points
- Peer or colleague
- DSS

Family Access Points
- DSS
- Child care provider
- Peers

Strengths
- Helps families
- Business opportunity for providers
- Allows providers to access trainings and resources

Weaknesses
- Administrative burden for providers
- Payment and reimbursement issues for providers
- Child support requirement a barrier for families to participate
- Lack of awareness of program among families
FAMILY, EDUCATOR, AND COMMUNITY LEADER FINDINGS

BARRIERS TO QUALITY ECCE

- Cost
- Funding (slots, staff, materials)
- Availability
  - Infant/Toddler Care and After Care
  - Lack of Slots, Waitlist
- Getting to and from
  - Transportation
  - Convenience
  - Schedule
- Need for Broader Support
- Family Engagement (including language barriers)
- Staffing Challenges (turnover, unprepared)
To inform the Preschool Development Grant strategic planning and needs assessment process, the Communitas Consulting team conducted nine interviews in May 2019—six with statewide stakeholders representing schools, community action agencies, and state departments, and three with data experts in integrated data systems for early childhood development in Virginia. These conversations are part of a broader outreach and engagement process that included focus groups with educators and one-on-one conversations with families of young children and community leaders who work with them.

Major themes from stakeholders are highlighted in this report.

**Strengths and Improvements**

The six stakeholders reported strong early childhood education and care programs in Virginia (noting, for example, Head Start, effective Pre-K programs based in schools, parent coaching and home visiting programs, Early Intervention, Medicaid, and innovative programs for children with disabilities). When asked for areas of improvements in their own departments and agencies, stakeholders noted:

- **Availability and analysis of data, especially in long-term outcome tracking** of children, better data integration, and reduced reliance on restrictive data-sharing agreements
- **Greater attention to children’s mental health** within the ECCE system
- **Legislators with increased understanding of and political will** to put money into early childhood

**Collaboration**

When asked to describe effective coordination between departments or agencies, the six stakeholders listed examples of collaborations that had been successful, such as Virginia Department of Social Services (VDSS) and Virginia Department of Education (VDOE)’s joint suspension and expulsion paper for the state board of education, and ongoing collaboration between the Virginia Department of Health (VDH) and DSS on nutrition related to the Child and Adult Care Food Program (CACFP). Qualities and attributes that stakeholders felt contributed to effective collaboration included:

- **State contracting with nonprofits** for greater flexibility and responsiveness
- **Using a PDSA (Plan, Data, Study, Act) approach**; allowing space for failure and being comfortable with risk
- **Unifying funding streams** while avoiding creating different silos, for a seamless family experience
- **Regular environmental scans** to identify gaps and opportunities for collaboration
- **Trusting and respectful personal relationships** between leaders and commitment to avoid duplication of efforts

**Funding**

Participants suggested ideas that might generate additional funding to support young children and families. These included:

- **Adopt a tax credit program to incentivize quality for providers, businesses, and teachers**
Draft Synopsis of State & Data Stakeholder Perspectives
PDG B-5 Project
May 30, 2019

- Implement a family-based treatment model
- Train and support professionals in methods of trauma informed care with a whole-family focus
- Exploring getting early intervention reimbursed through Medicaid for home visiting—waiting on a decision

Family Engagement and Perspectives
Participants gave examples of how family perspectives had been incorporated into policy making, mentioning the policy councils within Head Start programs, a regional coalition of families working on an early hearing detection process, elements of “systems of care” with parental input, and sharing of case manager perspectives derived from work with parents. Suggestions for greater family voice were:
  - Bring families in at the beginning of policy processes (not after decisions are made)
  - Invite more families to be members of professional work groups like the School Readiness Council
  - Convene neighborhood advisory groups with parents and community members
  - Create environments that welcome client input and listen
  - Engage family members as advocates with state legislators

Broader Supports
Suggestions for reaching families in a simple, convenient, and coordinated manner to get the supports needed tended to focus on single or simple point of access, such as:
  - Centralize information and access to nutrition resources and standardize reporting requirements
  - Expand community partners providers’ capacity to focus on more early prevention
  - Implement a common application for ECCE programs, and the ability to track children across community-based programs

Kindergarten Transition Supports
Participants were asked about specific supports that would help families with the transition to kindergarten. Several interviewees mentioned establishing relationships between preschool, parents, and schools, and providing more education to public officials and political leaders about the importance of school readiness. Others spoke of the importance of collaboration between state agencies, and the value of state groups such as the School Readiness Council and Children's Cabinet, one noted a desire to mirror these types of committees locally.

Data Availability and Coordination
This section combines all nine interviews—six statewide stakeholders and three data experts. When asked what measurable indicators currently exist that can be used to track progress in achieving the goals of ECCE programs in Virginia, responses included references to QRIS, VLDS, and VDH’s records (such as birth records, hearing and speech screenings, immunizations.). Participants noted that
indicators currently being tracked by distinct public programs include number of children served in programs, number of available ECCE slots, number of providers in the QRIS system, demographics, enrollment, early literacy screenings, special education, and indicators for B-3, 4-5.

Strengths of Current Data and Tracking Systems
Experts noted that QRIS and accreditation status is well-defined, and data is potentially shareable across systems. For those more knowledgeable about data, they noted that VLDS matches individuals and provider researchers with de-identified information. Virginia has also experienced some success in “one-off” data sharing for a particular project, and VECF has good mapping and data visualization capabilities.

Regarding VLDS, it was noted that the program is in the early stages of linking information about enrolled vs. non-enrolled preschool children and primary and secondary school performance. VLDS was described as relatively new but is expanding, with the following agencies currently on board — Virginia Department of Education (VDOE), the State Council of Higher Education for Virginia (SCHEV), the Virginia Employment Commission (VEC), the Virginia Department of Social Services (VDSS), the Virginia Community College System (VCCS), the Virginia Department for Aging and Rehabilitative Services (DARS), and Virginia Department of Health Professions (DHP).

Weaknesses of Current Data and Tracking Systems for ECCE
Weaknesses of the current system include:
- QRIS participation is not required
- Some data is collected but is not used
- Data is difficult to pool together across disparate providers
- Many programs are designed to help people as they move on to self-sufficiency but lack data on why participants left program (dropped out; passed eligibility threshold)
- Outcomes are difficult to measure because children are not in the system for long enough and there is no data once they are out of the system or program
- Special education and indicators for B-3, 4-5 data sit in isolation
- There could be better indicators to measure longitudinal trends

Limitations to sharing data across systems were mentioned by more than half those interviewed. Although technical barriers exist, they emphasized that privacy rights and questions or concerns regarding legality were the most significant barrier to data sharing. Additional barriers included restricted data use agreements that hinder data transfer and data storage, the need to document legal authority to share the data for a particular purpose, and cost and funding.

Coordination and Leadership across Systems
Respondents report data about children in early childhood care and education as fragmented, with no one department responsible for all programs. Respondents noted that putting all data together is a
challenge and consolidating it all under one agency is difficult. Agencies are perceived to have a “provincial” or “siloed” focus, for example, only focusing on health, vs. health and education. There is no overall accountability for collecting, reporting on, and using data effectively. Other general weaknesses include an internal resistance to sharing data with other agencies (“data hoarding”).

All data experts expressed a desire to define a purpose and utility among public agencies to show why data sharing is needed and what data will be used for. Respondents noted a need for a strong governance and security process, and for agencies to have a say in data processes while maintaining stewardship over the data. Interviewees expressed a desire for developing relationships and building trust in the system. Data experts suggested that Virginia needs to establishing priorities for “connecting data dots” and determine which children are missing and fill gaps in data systematically.

Additional suggestions to reduce data sharing barriers and achieve greater policy alignment and coordinated implementation include:

- Finding leadership champions at the state and local levels, and engaging grassroots, community, and agency participants
- Having staff in each agency who deeply understand the nuances of the legal requirements that their data fall under (FERPA, HIPPA, unemployment law, privacy laws)
- Establishing priorities for “connecting data dots” and determining which children are missing and fill gaps in data systematically
- Identifying executive leadership support with accountability for the whole child, in addition to program-specific

Future Trends

All participants were asked about trends that the Commonwealth of Virginia should pay attention to in the next three years. Interviewees mentioned the need for continued focus on affordability and availability of care (particularly for infants and toddlers) as well as increasing demand for special education, trauma informed care, and support for families with substance use issues.

Magic Wand

All participants – data experts and state stakeholders - were asked what they would choose if they could wave a magic wand and do two things to improve quality of and access to programs that serve children preschool age and below in their community. Responses included:

Accessible, Affordable Early Education and Care
- Fully fund high quality pre-school for all children
- Incorporate more quality elements into licensing systems

Better Paid Skilled ECCE workforce
- Deal with compensation issue to reduce turnover
- Have teachers in pre-school visit other classes for better sense of what children are learning
Draft Synopsis of State & Data Stakeholder Perspectives
PDG B-5 Project
May 30, 2019

Greater Family Support and Prevention
- Target new and young parents with \textit{home visiting} to lower abuse and neglect
- Help parents use their knowledge base to \textit{get employment, life skills}
- \textbf{Serve more children with disabilities}, identify more children earlier, and use data to inform decisions

State Leadership and Coordination
- Create an \textit{integrated data system} to inform decision making
- Get \textit{legislative and administrative support at the state level}, engaging decision makers, and bringing partners to the table early

Data experts were asked a more specific question on “waving a magic wand” for an integrated data system with information from multiple ECCE programs. Suggestions fell into three categories: \textbf{building support for and expanding data sharing systems}; \textbf{adding specific data to tracking systems}; and \textbf{finding resources to support system improvements}. They suggested:

Build Legislative Support For Data Sharing, Expand Data Sharing Systems
- Support a governor-level push for a vision on data-sharing
- Make data sharing vertically (state, regional, local) and horizontally (across agencies) easier
- Have user-friendly data reports to provide the information that the right people care about, and program providers who aren’t data people can use to make investment decisions

Link Additional Information to Data Tracking Systems
- Add VDH birth data and early childhood intervention data to VDLS
- Put more data about children into VLDS (earlier or later in life)

Leverage Resources
- Find existing resources to support this effort, including academic resources
ENENVIRONMENTAL SCAN
EXTERNAL ANALYSIS FOR PDG B5 STRATEGIC PLAN

<table>
<thead>
<tr>
<th>External Dimension</th>
<th>Access &amp; Affordability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person Reporting</td>
<td>Communitas Consulting</td>
</tr>
</tbody>
</table>

Sources of Information


Summary of Findings

1. ECCE’s cost makes it particularly inaccessible to low-income and other vulnerable families.

A Bipartisan Case indicates that:

1. Costs are prohibitive (average costs for infant care/preschool in Virginia are respectively 97% and 75% of public college tuition costs and across the U.S. they exceed transportation and food costs and often also exceed housing costs), even as more parents are working and often working non-traditional hours (“Fewer than one in three children having a parent who stays home full time”).

2. Vulnerable children are most at risk for inadequate healthy development and school readiness. Challenges are greatest for children “in single-parent households and in families that are stressed by financial pressures, food or housing insecurity, poor health, or exposure to substance abuse or violence.” There is a link “between financial stability in the early years and academic achievement, behavior problems, and mental health in children,” with research showing “early development suffers when children lack access to basic needs like safe housing, health care, and nutritious food.”

3. Convenience and cost are priorities for families. Cost, convenience, and hours are key factors
in the selection of child care. “Many parents, especially those struggling to make ends meet through a patchwork of part-time and/or low-wage jobs, simply don’t have the luxury of prioritizing quality or in some cases safety in their child care arrangements.”

**Child Care Aware** states that “access to quality requires access to child care.” Yet Virginia is one of the 10 least affordable states for family toddler care, with care for one child requiring 35% of the median income for a single parent family, and 10% for a married couple family. Access is particularly limited for families living in under 200% of the poverty level in Virginia, for whom care for two children requires 38% of all income. For context, HHS announced in 2016 that the standard for affordable child care is no more than 7% of family income.

2. **For many families, care is not available in the areas and timeframes needed.**

**Provision of Care After Hours** indicates that flexible scheduling is more commonly available through home-based (82% of unlisted, unpaid home-based providers, 63% of unlisted, paid home-based providers, and 34% of listed home-based providers offer it) than center-based providers (8% offer it). Flexibility in scheduling is more common than flexibility in payments.

**Childcaredeserts.org** demonstrates that 47% of people in Virginia—and 50% of Hispanic/Latino families, 63% of rural families, and 61% of low income families—live in a child care desert.

3. **Families of color face particular challenges to ECCE quality and affordability.**

**Baldiga et al.** report that while child care is unaffordable for a majority of working families in the U.S., it is particularly inaccessible for low-income and black and Hispanic families. Cost of care (without subsidy) exceeds the HHS child care affordability benchmark for 95% of low-income parents. There are additional racial disparities in family income: “while only 13% of white working parents are low income, two-fifths (40%) of Hispanic and one-third (32%) of black working parents are low income….Therefore, a higher proportion of Hispanic and black working parents are vulnerable to child care affordability challenges.”

**Dobbins et al.** note that while “access to quality early childhood education narrows the opportunity gap,” children of color—especially black preschoolers—are least likely to have access to high-quality ECE. Barriers to access identified include (1) lack of affordable ECE, (2) desire for ECE that is responsive to family needs, culture, and language (including the need for nontraditional hours of care), and (3) unreliable data collection and research on children of color and access to ECE.

**Communitas Consulting**’s scan notes that access to programs varies across Virginia. Overall, there is insufficient public capacity for all children in need, with the greatest gaps for infants, toddlers, children with special needs, and families eligible for subsidies.

The **Impact Work Group**’s “quality” small group discussion recommended a focus on equity when discussing access to quality. Without incentives quality is haphazard, yet if we generate rewards for only programs that are currently doing well, we are not increasing equity.
Key Insights from Findings

Implications/Consequences for the Organization

Expanding access and affordability is prerequisite to children obtaining the benefits of quality ECCE. Because it is currently especially difficult for children of color and children in single-parent or low-income households to access ECCE, particular attention to barriers to their participation is necessary for policies to reach children equitably.

Any approach to address gaps in public sector ECCE needs to take into consideration the attributes of private and in-home care (in some cases, greater flexibility in hours, geographic proximity) as a competing and/or compatible approach.

Without a true count on the informal, unlicensed care in Virginia, there is not a true picture of the number of children in day care, and not a true estimate of the actual “gap” in number of openings for children.

Affordability and convenience in terms of hours and flexibility in scheduling need to be considered in attracting and enrolling working parents.

Opportunities Presented

Reducing the costs of child care to fit within a working family’s budget through child care subsidy policies.

Supporting child care programs in being responsive to families cultural, language, and workforce needs.

Ensuring all ECCE programmatic data collection includes race.

Focusing resources on the most vulnerable families with children.

Addressing child care deserts in partnership with communities.

Challenges Presented

The costs of center-based care are prohibitive for many working parents.

Home-based care offers more of the flexibility and extended hours than publicly-funded programs that working parents seek, but is of undetermined quality.

Residents in almost half of VA do not have sufficient access to licensed child care, and there is insufficient public funding to address these gaps.

Top Two Recommendations

1

2
**External Dimension**
- Early Childhood Workforce

**Person Reporting**
- Communitas Consulting

**Sources of Information**

<table>
<thead>
<tr>
<th>Source</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td><em>A Bipartisan Case for Early Childhood Development,</em> Bipartisan Policy Center, October 2017.</td>
</tr>
<tr>
<td>4</td>
<td><em>Virginia Early Childhood Workforce Survey 2017.</em> Virginia Early Childhood Foundation.</td>
</tr>
</tbody>
</table>

**Summary of Findings**

1. **Highly qualified teachers are fundamental to improving quality.**

   *Transforming the Financing* indicates that a highly qualified workforce is necessary for ECE quality. To achieve a highly qualified workforce, “educators and staff need to be well compensated, have affordable opportunities to access higher education, and receive appropriate ongoing support and professional development.

   *A Bipartisan Report* also indicates that a consistent, stable, and “competent and skilled workforce” is essential for “high quality learning programs.” It notes that “the parent-child relationship is obviously foundational, but for children who spend significant amounts of time being cared for by adults other than their parents, the quality of their interactions with these adults also matters a great deal.”

2. **Childcare teaching practices have not kept up with science on effectiveness.**

   *A Bipartisan Report* indicates that “expectations for these professionals often have not kept pace with what the science indicates children need, and many current policies do not place enough value on the significant contributions these professionals make to children’s long-term success.”

3. **Childcare workers are poorly compensated, even as requirements grow.**
Summary of Findings

A Bipartisan Report notes “Private child care workers earn even less than public pre-K teachers: Their wages often fall below poverty guidelines and below that of workers whose jobs involve taking care of animals or cooking for fast food establishments.”

As Emily Workman notes, “…. over the past two decades, policymakers have gradually increased credentialing requirements for teachers. In 2007, the reauthorization of the Federal Head Start Act set a requirement that 50 percent of its teachers hold a bachelor’s degree within five years. At present, 35 state-funded pre-K programs require that lead teachers have a bachelor’s degree and 17 programs require degree specializations in a field related to early childhood education or child development.”

VECF’s survey confirms a portrait of a poorly compensated ECCE workforce with high turnover in VA, with 55% of the workforce reporting salaries of $25,000 or less, low average starting wages ($11.67 in family day homes, $12.83 in private centers, and $20.95 in school-based programs). Wages affect turnover in Virginia: “more than a third of private centers report turning over 20 percent or more of their staff each year and often have difficulty filling those roles, particularly in areas that serve high numbers of at-risk children. Wages are the top reason cited by teachers who plan to leave the profession.”

4. New educational requirements may impact the diversity in the ECCE workforce.

Workman notes that a risk of increasing requirements is a loss of diversity, currently a strength of the child care field. She shares that “state and local districts have begun looking to Registered Apprenticeships as an effective way to break down some of the barriers believed to be preventing [early childhood educators] from accessing higher education and setting them on a pathway to earning a bachelor’s degree.”

5. Support the ECCE workforce in obtaining skills needed for quality care.

Transforming the Workforce recommends that practice- and competency-based qualification be strengthened, and programs supporting higher education among care and education professionals be developed and enhanced.

6. Tax credits can incentivize and improve quality among ECCE providers.

A Bipartisan Report highlights two states—Louisiana and Nebraska—who have developed tax credits to incentivize quality.

- “Louisiana’s program provides four different tax credits to parents, child care providers, child care directors and staff, and businesses that support child care centers participating in the state’s quality rating and improvement system (QRIS).….Eligibility for the tax credits, which are relatively valuable, is tied to QRIS ratings. (see http://www.policyinstitutela.org/school-tax-credits).

- “…Nebraska is offering two tax credits totaling up to $5 million per year for early childhood programs and qualified early childhood professionals participating in the state’s Step Up to Quality program…”
### Key Insights from Findings

#### Implications/Consequences for the Organization

To improve quality requires improving teacher preparation and professional development statewide, and improving wages.

To incentivize gains in quality, VA can employ strategies such as tax credits.

To mitigate the burden of additional educational costs on child care workers, VA can support dual enrollment or apprenticeship programs. This requires agreements with community colleges and centers.

#### Opportunities Presented

The opportunity for Virginia is to increase the status, pay, and expectations of childcare workers.

VA can build on existing coordination with community colleges around curriculum and credentialing for early child care apprenticeship programs.

Work Group members suggested that Medicaid expansion infuses resources for childcare workforce; consider experiences of young adults as parents (3/19 Impact Work Group)

#### Challenges Presented

Tax credits will not address current low wages of ECCE workforce. Downsides (from Lieberman) include “that the credit comes in full, one time per year. Families living in poverty, as much of the ECE workforce is, may benefit from higher wages or benefits on a regular basis instead of waiting all year for the credit. This workforce often does not earn enough to have sufficient savings and might need money available for day-to-day expenses or an emergency.”

#### Top Two Recommendations

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>
ENVIROMENTAL SCAN
EXTERNAL ANALYSIS FOR PDG B5 STRATEGIC PLAN

<table>
<thead>
<tr>
<th>External Dimension</th>
<th>Financing &amp; System Governance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person Reporting</td>
<td>Communitas Consulting</td>
</tr>
</tbody>
</table>

**Sources of Information**


2. “Financing High-Quality Center-Based Infant-Toddler Care: Options and Opportunities” Louise Stoney, Early Educator Central, 2015.


**Summary of Findings**

1. **Public subsidies to ECCE providers do not cover the full cost of care.**
   Public subsidies to child care providers cover only a portion of ECCE costs. The public reimbursement rates and cost estimates often rely on assumptions of full enrollment and full attendance at market-based infant and toddler care centers, rather than a more realistic 85% enrollment rate for budgeting purposes. Stoney notes, “full enrollment is a cornerstone of ECE finance, regardless of whether the program relies primarily on public subsidy funds or private tuition or a combination.”

   To cover costs, competitive centers generally serve more older children.
   “The quickest way to balance a child care budget is to eliminate the Infants and Toddlers” classroom…… and this is often an unintended consequence of investments focused solely on preschool for 4 year olds.”

   **Public subsidies are inconsistent and put centers at economic risk.**
### Summary of Findings

“…many child care centers cannot count on consistent funding [from subsidies] every month—especially if they are located in a low-income community—even when they are serving children who are categorically eligible for assistance…When states fail to authorize a full-time child care subsidy, pay for absence days, or re-determine eligibility frequently, child care centers are not paid.”

**Competition with “free” pre-K programs can put high quality private care models out of business**

“Parents with limited incomes are likely to choose a program with no fees even if there is a significant difference in program quality. As a result, in some low-income neighborhoods, top-quality, fee-based ECE programs may struggle to remain fully enrolled when PreK and Head Start classrooms open nearby.”

#### 2. State and local coordination can increase ECCE capacity.

**Local ECCE business models can be fragile**

To sustain a quality ECCE system, Stoney argues for more attention to leadership structures of child care centers, including sharing services for business operations. “For many years state leaders have focused on building systems designed to provide essential ECE supports—including professional development systems, technical assistance, coaching linked to QRIS and much more…. [M]ore work needs to be done to build stronger leadership structures and systems at the center level.”

**State level financing practices create disjointed and inequitable distribution of quality care**

The National Academy of Sciences made several recommendations for state governments to address a “fragmented and inconsistent system.”

- Establish consistent standards for high quality across all ECE programs…with funds linked to “attaining and maintaining these quality standards” and payments that cover the full cost of care.”
- Give all children and families “access to affordable, high-quality early care and education” which is not “contingent on the characteristics of their parents, such as family income or work status.”
- For states ready to implement, “state governments or other state-level entities should act as coordinators for the various federal and state financing mechanisms that support early care and education….”
- “…Increase funding levels and revise tax preferences to ensure adequate funding.”
- Reduce payments to “zero for families…at the lowest income level” and introduce sliding fee scales for those with adequate income.
- Provide “financial assistance to increase practitioners’ knowledge and competencies, and to achieve required qualifications through higher-education programs, credentialing programs, and other forms of professional learning.”

#### 3. School systems are not generally accountable for Pre-K Success

In a recent paper, “Why the K-12 World Hasn’t Embraced Early Learning,” Elliot Regenstein argues that school districts should include Pre-K in school accountability measures and
Summary of Findings

strengthen “the capacity of school leaders and teachers to understand child development and partner more effectively with early learning providers” to incentivize greater collaboration and support. He notes:

- “Many school administrators have little to no background in early learning or even early elementary…
- State accountability systems for schools and districts focus exclusively on third grade and up……
- States reinforce their accountability systems with improvement processes for the lowest-performing schools that focus on the [3-12] assessed years.
- Preschool funding often comes from the federal government (Head Start) or the state (state pre-K) without requiring district investment
- When districts do look to invest in early learning, they sometimes face pressure not to do so from key constituencies: their existing staff (who want the money spent on raises) and existing early childhood providers (who don’t want the competition).”

4. **There is no ECCE system.** The Education Commission of the States (ECS) notes the difference between the ECCE “system” and the K-12 system in the graphic below.

5. **Financing for individual programs is not integrated in Virginia.**

Communitas Consulting’s scan of Virginia reports notes that “[i]ndividual ECCE programs have their own funding mechanisms, databases, eligibility criteria, tracking procedures, and reporting requirements….ECCE programs are funded by a combination of limited federal and state dollars, and levels of available funding vary across Virginia. Federally-funded ECCE programs must adhere to federal guidelines and restrictions, which limit local flexibility….To manage a more unified financing system requires a coherent state policy.”

Based on writings of the Build Initiative, ECS suggests states begin with the following goals in mind rather than a model: coordination, alignment, sustainability, efficiency, and accountability.

The Impact Work Group’s “system and finance” small group discussion recommended considering a single point of entry to state systems to support families and centers.
Key Insights from Findings

### Implications/Consequences for the Commonwealth

- Any reimbursement or cost model will need to take into consideration market forces, attendance, and enrollment rates for tuition-based child care to cover true costs.
- To address financing and quality of ECCE will necessitate greater levels of coordination among state and local agencies.
- There are currently few incentives to align and coordinate requirements, funding, and practices between education districts, Pre-K and other ECCE providers.

### Opportunities Presented

- The “Child and Adult Care Food Program (CACFP) can be a significant source of revenue. Given that CACFP is one of the only remaining open-ended federal entitlement programs, boosting use of this funding stream is an important financing strategy.” (Stoney)
- Tax credits and incentives have been proven to increase the number of centers reaching quality standards.
- NAS and a bipartisan commission have recently come out with recommendations to integrate and align public financing to support the full cost of quality care for vulnerable families.

### Challenges Presented

- Public subsidies for child care for infants and toddlers are inadequate to cover real costs of quality and consistent care.
- On state-operated preschool programs, Virginia spends $3,845 per student compared to the national average of $5,008 per student.1
- School districts have no direct incentives to include Pre-K success as one of their accountability measures.

### Top Two Recommendations

1

2

---

Summary of Findings

1. **Progress in ECCE can be measured with multiple community level indicators**

The **State of Babies Yearbook** identifies three domains for babies to get a strong start in life and compares Virginia’s demographics and status on these indicators with the nation’s, as well as with good policies in each area. On a scale of 4 (1 being “working effectively” and 4 being “getting started”), **Virginia is rated**:

**Overall:** 3  **Good Health:** 2  **Strong Families:** 2  **Positive Early Learning Experiences:** 4

- **Demographics:** Race, ethnicity, level of poverty, parental employment, family structure (including grandparent-headed households), and young children in rural areas
- **6 indicators of health:** Infant mortality, late or no prenatal care, food security, mothers reporting less than optimal mental health, uninsured low income infants and toddlers, low birthweight. (Virginia Medicaid plan covers all recommended areas except for maternal depression screening in well-child visits.)
- **6 indicators of family strength:** Home visiting beneficiaries, family resilience, child maltreatment rate, housing instability, 2+ ACEs, TANF receipt.
- **6 indicators of early learning experiences:** Early Head Start access, costs of care as
**Summary of Findings**

- Percentage of income for single parents, development screening, low/moderate income children in CCSP, parent reads daily, children in IDEA Part C services.

**VECF’s biennial report card** reports risk indicators (poverty, teen births, maternal education, low birth weight) and results indicators (not meeting PALS-K benchmarks, K-3rd grade repeaters, failed 3rd grade reading SOL, failed 3rd grade math SOL, 9th grade repeaters, high school dropouts). For 2018, VECF notes that “Most early childhood risk indicators show little or no change in the last five years,” except for a decline in the child poverty rate. “School readiness results are mixed and changes are quite modest.” “Severe and very troubling racial/ethnic, economic and geographic disparities show no improvement.”

2. **At the program level, the QRIS is the most standardized method for assessing program quality.**

   *Incentives to increase QRIS ratings can improve quality and give parents more choices*

   **Bassok et al.** report that when programs in NC (voluntary 1-5 star QRIS) received lower star ratings, (1) enrollment declines (especially where parental choice and competition exist) and (2) programs respond with performance gains, including on measures of classroom quality.

   *Rigid standards can limit quality improvements*

   **Loeb** reports that US children have very different experiences in ECCE, with variation in race, ethnicity, geography. Many preschool experiences do not have positive long-term effects. Regulations are “by nature rigid, tend to set floors on quality instead of pushing toward improvement,” and outcome-based accountability at the local level leads to great variations in spending, with mixed results (push back, teaching to test).

   *Current quality measures may not assess parental partnership and/or inclusive and welcoming environments.*

   **James and Iruka** note that Black children (19% of all enrollees) are disproportionately receiving one or more out-of-school suspensions in preschool (47%). Authors argue for all programs adopting “affirming, inclusive early learning settings,” including family-school partnership, culturally-responsive practice, high expectations of children, socio-emotional learning, developmentally appropriate pedagogy with positive guidance, and trauma informed care and services. These elements can be mapped onto licensing standards, professional development and training, QRIS, wrap around supports, and data development and monitoring. “Data on the frequency and type of disciplinary actions Authors argue for tracking data on disciplinary actions (type, frequency) in all settings with public subsidy or license.

3. **There is a lack of coordination among federal and state ECCE data collection requirements.**

   The National Academies of Sciences, Engineering, and Medicine, in *Transforming Financing*, recommend aligning federal data collection requirements “across all federal ECE funding streams to collect comprehensive information about the entire ECE sector and sustain investments in regular, national data collection efforts from state and nationally representative
Summary of Findings

samples that track changes in the ECE landscape over time, to better understand the experiences of ECE programs, the ECE workforce, and the developmental outcomes of children who participate in ECE programs.” Those measures would include “adequacy of resources, accessibility for families, workforce characteristics and well-being, program quality and costs, and ultimately, measures of children’s development across a broad set of domains.”

Communitas Consulting’s scan of Virginia reports notes that “existing reports indicate that…individual programs show promising results in terms of respective child outcomes,” but with variation in “outcomes measured, the level of funding, the extent of access for families, and quality of the programs across the Commonwealth.” Programs operate largely independently of one another, with different funding mechanisms, data systems, and assessment and reporting requirements. As a result, individual programs may show promising results, but there is no clear basis for assessing the collective effectiveness of Virginia’s public ECCE offerings.

The Impact Work Group’s “data and metrics” small group discussion recommended:

- Consider outcomes beyond kindergarten (3rd grade and beyond, family stability)
- Make data readily available to families in ways appropriate to education and language barriers. Communicate importance of preschool.
- Unify data across state systems; make available to parents, policymakers, administrators.
- Ensure consistent, meaningful measurement (teacher quality, outcomes, communication)

Key Insights from Findings

Implications/Consequences for the Organization

Without an agreed upon set of measurements that each center or program is reporting on, the Commonwealth, agencies, centers, and parents will continue to have a disjointed picture of the benefit children are receiving in all early care programs, particularly those supported with public dollars.

Indicators of effectiveness are complex and require looking at aspects beyond teacher and program quality to access, funding, and inclusiveness.

Opportunities Presented

Programs sign up for QRIS when incentives are involved; parents prefer QRIS-rated centers in competitive markets.

A data system that parents can understand and access gets used.

Potential to create a more meaningful and accessible set of metrics to measure ECCE system success over time.
Challenges Presented

At the community/state level, groups are tracking more socio-emotional indicators, and indicators of health, family strength, and stability, as well as risk factors that measure long term impact, yet there is no clear linkage between program outcomes and these indicators.

Federal funding sources and regulations require tracking distinct program outcomes.

Without financial incentives or operational support to centers and day care homes, voluntary QRIS participation is low.

Capacity for child care centers to collect, enter, and share data can be limited.

Top Two Recommendations

1

2
GOAL 1: ACCESS AND AFFORDABILITY

1. Expand the accessibility and availability of quality early childhood care and education to reach all vulnerable children.

1.1 Provide accurate, updated information on the supply, enrollment, and availability of publicly-funded 0-5 care and education options for families, professionals, and policymakers.

1.2 Increase funding for and launch innovative financing incentives so all underserved communities have high quality, accessible early childhood care and education options.

1.3 Expand the availability of affordable, flexible, quality after care and infant/toddler care to meet the needs of working parents.

1.4 Target allocation and increase flexibility of public resources to maximize and increase the supply of quality early childhood education and care options in “child care deserts.”

1.5 Increase timely identification, enrollment, and retention of children with special needs who would benefit from early assistance in publicly-supported programs.

Target population: vulnerable children ages birth to five

GOAL 2: FAMILY ENGAGEMENT AND SUPPORT

2. Provide increased support to families to more easily access affordable early childhood care and education and support their children’s healthy development, learning, and well-being.

2.1 Increase awareness about early childhood care and education options to eligible families and coordinate local processes to make it easier and more affordable for families to enroll.

2.2 Ensure families can easily access resources that help them understand and support their children’s learning, development, and readiness for school.
DRAFT Goals
PDB B-5 Strategic Plan for the Commonwealth of Virginia

2.3 Increase engagement of families in guiding early childhood care and education policies and practices at the program, community, and state levels.

2.4 Increase the capacity of early childhood care and education providers to connect families to a coordinated system of community resources and support services.

Target population: vulnerable families, community service providers, ECCE providers

GOAL 3: QUALITY AND ECCE WORKFORCE

3 Reward continuous improvements in the quality of publicly-funded early childhood care and education to provide a safe and nurturing learning environment, with a skilled workforce, that prepares all children to arrive at kindergarten ready to learn.

3.1 Establish a uniform, statewide classroom quality measurement and improvement system for all publicly-funded programs, incorporating lessons learned from current approaches, and phasing in gradually to avoid any reduction in access.

3.2 Create incentives for programs, leaders, and teachers to achieve higher levels of quality while ensuring stable operations and competitive wages and providing technical assistance to meet expectations.

3.3 Adopt statewide indicators that assess multiple dimensions of children’s development.

3.4 Align preparation and professional development opportunities with statewide quality measures, create flexible and achievable pathways, and decrease costs and financial barriers for ECCE professionals to advance.

3.5 Employ performance-based contracts to centers and homes that support sustainable operations, reward quality care, and ensure adequate workplace benefits and conditions for early childhood personnel.

Target population: Policy makers, ECCE teachers, administrators, support staff; public contracting agencies.
DRAFT Goals
PDB B-5 Strategic Plan for the Commonwealth of Virginia

GOAL 4: STATE ACCOUNTABILITY

4  Align and unify state-level oversight and accountability to increase efficiency, maximize public resources, better support local efforts and improve school readiness outcomes for young children.

  4.1 Streamline and align eligibility criteria for families, and health, safety, and quality expectations and funding requirements for providers to increase efficiency of public early care and education funding.

  4.2 Increase and simplify access points for parents, guardians, and providers to understand and take advantage of ECCE opportunities for children ages birth to five.

  4.3 Establish state measures and data collection to assess and track progress over time of Virginia’s children in early childhood care and education, including access, quality, and readiness outcomes.

  4.4 Increase public will and commitment to investing in quality early childhood education and care at the state and local levels.

Target Population: vulnerable families, policy makers, public schools, ECCE providers

GOAL 5: LOCAL CAPACITY AND INNOVATION

5  Support and replicate effective local public and private efforts to unify and strengthen early childhood care and education systems to improve school readiness outcomes.

  5.1 Develop and implement collaborative, community-specific approaches to improve quality and access across ECCE programs in alignment with consistent statewide measures.

  5.2 Demonstrate and build capacity for local and regional agencies to establish unified governance, integrate funding, make allocation decisions, and maximize 0-5 resources to meet quality standards.

  5.3 Inform and support local efforts to engage families and support transitions from early childhood education and care to elementary school.

Target Population: local and regional policy makers, public and nonprofit agencies, stage agencies