#### **CCDBG Requirement**

**Workforce Development:** Requires state to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. States strongly encouraged to link CCDF required health and safety trainings and child development trainings and education to this broader professional development framework. 658E(c)(2)(G).

Deadline for compliance: September 30, 2016

**Quality:** States required to reserve and use an increasing portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. States must use the quality set-aside to fund at least one of the 10 designated activities, including:

- 1) Supporting training and professional development;
- 2) Improving on development/implementation of early learning and development guidelines;
- 3) Developing, improving a tiered quality rating system;
- 4) Improving the supply and quality of care for infants and toddlers;
- 5) Establishing, expanding child care resource and referral services;
- 6) Supporting licensing, inspection, monitoring, training and health and safety compliance;
- **7)** Evaluating quality of child care programs;
- 8) Supporting providers in voluntary pursuit of accreditation;
- **9)** Supporting program standard related to health, mental health, nutrition, physical activity and development;
- 10) Other activities related to quality as long as outcome measures are possible. Section 658 (G).

### **Deadline for compliance:**

Increased Quality Set-Aside: At least 7% in FY 2016/17 At least 8% in FY 2018/19 At least 9% in 2020/21

*Infant and Toddler Set-Aside:* 3% by FY 2017

### California's Current Law or Practice

- 1) CA has child development permit requirements (currently being updated by CTC and will be completed by June 2016) that guide level of education and ongoing professional development providers/teachers in Title 5 centers and FCCNHs and Title 22 centers. However the Permit Matrix does not apply to all providers/programs touched by CCDF. A significant portion of children in CalWORKs Stage 1-3 and Alternative Payment programs are served in Family Child Care Homes or License-Exempt settings.
- 2) Licensed Family Child Care providers must complete licensing orientation and 16 hours of health and

safety training (including new nutrition component). Currently no training is required for license-exempt providers. Additional modules are being developed to meet the health and safety preservice/orientation requirements. Please see the write up on Health and Safety for more information.

- 3) CA currently invests CCDF quality set-aside funds in over 30 different initiatives, including workforce development and quality improvement activities. The FY 2015-2016 budget dedicated approximately \$76 million toward these activities (includes \$2.9 million in one-time federal carry over). The amount has decreased by approximately 30% since 2008. Funded initiatives also include infrastructure supports like resource and referral services and local child care planning councils.
- 4) Institutions of higher education, particularly community colleges, are critical to the delivery of workforce preparation and ongoing professional development, but do not directly receive quality improvement funding to support these efforts. Several workforce development programs funded through the quality set-aside provide support to early childhood instructional programs and students at community colleges and four-year institutions.
- 5) Other state-level quality improvement investments (that are not considered part of quality set-aside) include:
  - \$50 million CSPP QRIS block grant (ongoing, funded through Prop 98).
  - \$24.2 million Infant-Toddler block grant (one-time through 2017, General Fund)
  - First 5 CA IMPACT (\$190 million over 5 years to counties to develop/enhance quality improvement systems, building off \$75 million RTT-ELC grant ending June 2016)
  - Head-Start Child Care Partnerships (\$64.1 million in federal funds directly to grantees but state contracted programs impacted by partnerships)
  - \$25 million for TK and preschool professional development activities (one-time, Prop 98).
- 5) Counties leverage multiple funding streams to support workforce development and quality improvement efforts, including QRIS. Other entities such as R&Rs and APPs also leverage and match funds to provide workforce and quality supports.

#### **Points of Agreement**

#### Workforce:

- 1) The State should not consider the professional development requirements fully implemented:
  - Certain components of a professional development framework currently exist or are in development, some of them even supported via the last CCDF State Plan and the quality set-aside, however our professional development system still remains "piecemeal".
  - The state's myriad training and professional development initiatives (using CCDF quality dollars as well as other funding streams) do not currently reach the entire workforce and are not necessarily aligned and coordinated to create a progressive career ladder (for license or license-exempt providers, if they so desire) that aligns with workforce registry, stipend and training programs, and institutions of higher education.
- 2) The state's ability to better identify needs of the workforce, track professional development efforts and their impact can be strengthened through widespread participation in a workforce registry. The infrastructure and expansion of a workforce registry should be supported. The registry should connect with the consumer education database that is being developed and counties' QRIS, and

could serve as a training registry as well. Utilization of workforce development programs could be tracked through registry rather than current evaluation process CDE has tried to implement (and for which data has been difficult to consistently collect). There is the CDTC training portal, though it has been difficult to collect the information and ramp up its use statewide.

Whatever "package" of training and professional development CDE considers should be competency-based, span the age spectrum of 0-12, align and/or coordinate with health and safety trainings, CTC permit requirements, and quality improvement systems. The state should incentivize unit bearing courses and trainings through community colleges and state universities if possible. Recent research indicates that professional development and training on infant and toddler development could be strengthened.

3) Once the permit matrix is updated, institutions of higher education will support implementation of the new requirements as they have done successfully in the past, however additional resources may be needed.

### For example:

- If a higher number of clinical hours are required, community college laboratory schools may struggle to meet the demand given their budgets have been greatly reduced
- Ensuring quality/compliance of professional growth hours (currently 105 over 5 years) has become a challenge. Professional Growth Advisors are no longer funded through the quality set-aside and this system is not working sufficiently.
- If professional growth guidelines are determined for non-Title 5/Title 22 providers, how would these be implemented and monitored? What role would community colleges play in supporting these providers in the community?
- State agencies will need to consider what information and resources trainers, faculty, mentors (and professional growth advisors if that model is maintained) will need in order to ensure students understand and are prepared to meet the new permit requirements.

#### **Quality Improvement:**

- 1) Our current quality investments are "piecemeal" and do not add up to a cohesive quality support system that includes all providers (license and license-exempt). There is no clear framework or "game plan" for a state infrastructure that supports local implementation of comprehensive workforce development and quality support. QRIS has grown, however, the level of implementation ranges across the counties and how the state can support its infrastructure going forward is not clear.
- 2) Stakeholders are generally supportive of an increase in spending toward these areas however the field is mindful of not wanting to compromise slots. Rates must be addressed as a foundation to quality before we can move toward a tiered reimbursement system. There has been some discussion about possible tiers (based on minimum requirements) and quality add-ons as a longer-term goal.
- 3) It is not clear what results we get for our current investments and how much more is needed. The state needs better data on current initiatives and a more coherent evaluation approach and feedback loop to ensure improvement. For example, the CCDF quality set-aside budget designates approximately \$570,000 annually for evaluation but has resulted in only a handful of individual studies and how the results can be utilized are not clear. This is complicated by the fact that the

current system to track participation (and potentially impact) in these initiatives is not sufficient.

- 4) There needs to be a formal process for aligning professional development and quality improvement initiatives (those funded through CCDF, QRIS, and other funding streams too) to provide clear framework/definition for quality improvement and create clear infrastructure to support Consortia, R&Rs, APPs implementing quality improvement at local level. This would also help address accountability and data collection issues. The field has talked about the need for this type of coordination, and CCDBG presents the opportunity to actually achieve this type of planning. We would need to identify the goals and best approach for this process.
- 5) The State must build off existing infrastructure, particularly proven models/initiatives, but also consider innovative, promising models for addressing needs of programs/providers when appropriate. There are certain models/promising approaches that the field has expressed support for, such as coaching and technical assistance.
- 6) The State needs a way of measuring whether its programs are working to prepare children for school. QRIS is more focused to support continuous program improvement, but is not necessarily the right tool for this broad question. A statewide readiness assessment system would enable the state to collect kindergarten readiness indicators and see whether early care and education investments are impacting school readiness over time.

### **Points of Slight Disagreement**

- 1) What should be the framework for quality improvement in California? Could the QRIS Continuum Framework and Pathways provide a framework to guide all types of programs/providers in ongoing improvement? Is the Framework designed more for programs serving 3-5 year olds? Could license-exempt fall within the Pathways? Possible step: Crosswalk current quality improvement initiatives with these frameworks. This type of mapping this process could help move the state toward a more coherent system. Another step: Require all programs receiving CCDF dollars to coordinate with each other at the local level and track how various funding streams are being blended to support workforce and quality improvement efforts.
- 2) Should quality set-aside funds be dedicated primarily to QRIS? How can we sustain/grow the progress that has been made with RTT-ELC funds? Should the state fund QRIS infrastructure support, such as quality assessments and ratings? Or, should there be a smaller menu of supports that Consortia can leverage?
- 3) Should the state implement more Head Start Child Care Partnerships or a similar model? These are promising models for leveraging resources and expertise to drive continuous program improvement.
- 4) While CA does invest General Fund dollars as well as the CCDF quality set-aside in these areas, there are differing perspectives on whether the investment is robust enough.

### **Points of Significant Disagreement**

### Things to Consider/Keep in Mind

- 1) Given current investments and existing workforce development and quality improvement investments (which are within the 10 specified areas), CDE could potentially argue that CA is meeting the provisions (at least until the required increase of 9%). However, it is clear to the field that there is work to be done to create a more seamless, coherent system. At the very least we need to "plan for the plan" and start addressing fundamental questions and mapping a long-term vision.
- 2) Even if the Department of Finance is hesitant to spend additional dollars, the topic of "quality" is gaining traction in the Legislature as important area of investment. We need to provide tangible plan/steps toward the quality support system we would like so that policymakers have a road map.
- 3) AIR study on QRIS should be released in January and should provide helpful data on the types of supports that are most effective for programs/providers. Emerging research on Family Child Care providers as well as license-exempt population should also be taken into account.

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☐ One Time ☐ Ongoing Cost:

The State currently spends over 4% (some estimates indicate 7%) of CCDF on workforce development and quality improvement initiatives, so the state may be close to reaching the first expected increase in FY 2016-2017. However, to establish a more cohesive workforce development and quality improvement state infrastructure, the state will likely need to invest additional funds over time, including General Fund and Prop 98. For example, Proposition 98 could be directed to Community College early childhood instructional programs and laboratory schools to ensure professional preparation, ongoing training and continued education opportunities throughout the state.

It would also behoove the State to have a coherent plan so that it will be clear to policymakers how additional required dollars should be spent.