Excerpt from Expanding High-Quality Child Care for Infants & Toddlers

Lessons from Implementation of Early Head Start – Child Care Partnerships in States
# Early Head Start – Child Care Partnerships

## Awards and State Profiles

### Total Annual Partnership Awards to All Grantees

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<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>ALABAMA</td>
<td>$ 8.3 million</td>
<td>$ 2.2 million</td>
<td>$10.5 million</td>
</tr>
<tr>
<td>DISTRICT OF COLUMBIA</td>
<td>$ 0.9 million</td>
<td>$ 3.0 million</td>
<td>$ 7.6 million</td>
</tr>
<tr>
<td>GEORGIA</td>
<td>$16.2 million</td>
<td>$ 2.1 million</td>
<td>$20.1 million</td>
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<tr>
<td>LOUISIANA</td>
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<td>$ 5.2 million</td>
<td>$15.5 million</td>
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<tr>
<td>MARYLAND</td>
<td>$ 3.4 million</td>
<td>$ 0</td>
<td>$ 4.5 million</td>
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<td>OKLAHOMA*</td>
<td>$11.8 million</td>
<td>$ 7.8 million</td>
<td>$24.3 million</td>
</tr>
<tr>
<td>WASHINGTON</td>
<td>$ 8.4 million</td>
<td>$ 4.1 million</td>
<td>$13.3 million</td>
</tr>
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### Note:

- **Round 1 Grants** – In Fiscal Year (FY) 2014, Congress allocated $500 million for the first round of EHS expansion and EHS-CC Partnership grants. ACF awarded the grants for this first round to state and local agencies in winter 2014. Grantees must reapply for these awards every five years.
- **Round 2 Grants** – Congress allocated an additional $135 million for new EHS expansion and EHS-CC Partnership grants in FY 2016. ACF awarded the grants for this second round of funding in winter 2017.
- **Round 3 Grants** – Congress allocated a combined $165 million for new EHS expansion and EHS-CC Partnership grants between FY 2018 and FY 2019. ACF awarded the grants in spring 2019. Spring 2019 awards also included grant renewals for state and local agencies that had received Round 1 awards in winter 2014.

### Endnote:

- **A** Calculated by the author based on information on the federal fiscal year 2014 awards, found at [https://www.acf.hhs.gov/ecd/early-learning/ehs-cc-partnerships/grant-awardees](https://www.acf.hhs.gov/ecd/early-learning/ehs-cc-partnerships/grant-awardees).
- **C** Data provided by the Office of Head Start, Administration for Children and Families, U.S. Department of Health and Human Services, via email on August 16, 2019.
- *** Oklahoma funding amounts include grants to two tribal EHS-CC Partnerships grantees.**

To see the full report, please visit: [www.theOunce.org/Partnerships](http://www.theOunce.org/Partnerships)
The DC Quality Improvement Network (QIN) works with a total of 14 child development centers and reaches 400 children to provide high-quality child care and comprehensive health, mental health, nutrition and family engagement services.
District of Columbia (DC) Profile

DC’s Story
In the District of Columbia (DC), the Office of the State Superintendent for Education (OSSE) has responsibility for several early childhood programs, which are funded in part by the federal Child Care and Development Block Grant, including oversight of the subsidized child care program, child development facility licensing and the Head Start State Collaboration office. Improving the supply of quality infant and toddler child care was already a priority for District leaders when the federal Partnerships funding opportunity announcement (FOA) was released. DC’s universal pre-kindergarten program was enacted in 2008 and is currently reaching the majority of 3- and 4-year-old children through a mixed delivery system comprised of DC Public Schools (DCPS), public charter schools and community-based licensed child development centers. Local leaders knew that infants and toddlers living in low-income working families also needed the city’s attention, especially in Wards 7 and 8 where there was a concentration of children under age 3 with little access to quality child care. DCPS had also pioneered a school-wide Head Start model that allowed comprehensive services to be delivered at all Title I elementary schools.

The District applied for a state Early Head Start-Child Care Partnership grant in 2014 to test a unique community-based strategy with the hope of expanding access to high-quality early care and education to more infants and toddlers. OSSE proposed to build a Quality Improvement Network (QIN) that would work with a total of 14 child development centers and reach 400 children to provide high-quality child care and comprehensive health, mental health, nutrition and family engagement services meeting federal HSPPS. District and private foundation funds now support additional centers and 19 child development (family child care) homes as well. DC designed its federal grant application to target the funds to pay for quality enhancement and comprehensive services meeting the federal Head Start Program Performance Standards (HSPPS), which would be layered on top of higher “QIN” subsidy payment rates available only to child care partners. OSSE planned to collaborate with other District agencies serving families experiencing homelessness, receiving income support through Temporary Assistance for Needy Families (TANF), and in foster care to prioritize access for children and coordinate services.

All Partnerships grantees had 18 months to bring their child care partners up to HSPPS standards. As OSSE began to roll out the program, city officials realized that differences in group size and teacher-child ratios between DC licensing and HSPPS were going to affect the bottom line of earnings for providers. Providers had to take care of fewer children in a group in the Partnerships than District licensing would have allowed. OSSE increased the daily rate for QIN slots by $20 over the highest QRIS rate for both child development centers and homes. Then the District conducted a cost estimation model methodology to further understand

District of Columbia (DC) Federal Award

<table>
<thead>
<tr>
<th>Amount</th>
<th>Federal Years</th>
<th>Round</th>
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<tbody>
<tr>
<td>$0.9 million</td>
<td>2015-2019</td>
<td>1</td>
</tr>
<tr>
<td>$3.0 million</td>
<td>2017-2021</td>
<td>2</td>
</tr>
<tr>
<td>$7.6 million</td>
<td>2019-2023</td>
<td>3</td>
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</table>
the actual costs of care at different levels of quality for different ages of children, and did so for child development centers and child development homes. The results of the cost estimation model informed the historic increase of the Fiscal Year (FY) 2019 payment rates for subsidized child care in the District. The payment rates were increased for all age groups, in all settings across all Capital Quality (DC’s redesigned Quality Rating and Improvement System (QRIS)) designations to a level sufficient to enable child care providers to meet federal HSPPS and local health, safety, quality and staffing requirements.

For OSSE leaders, being involved in ensuring that HSPPS were fully implemented had an impact on the larger early care and education system in DC. The District made multiple changes to its policies governing eligibility for participation in the subsidized child care program as it was implementing the Partnerships and in response to changes in the CCDBG law and regulations. Some of the changes included eliminating copayments for families with incomes at or below 100% of the federal poverty level (FPL) and allowing families receiving Temporary Assistance for Needy Families (TANF) to qualify for the child care subsidy once they completed their Individual Responsibility Plan. Additionally, the District expanded its definition of vulnerable populations to children with special needs, children experiencing homelessness, and children in foster care in order to give them priority access to subsidy. HSPPS standards informed OSSE leadership when they updated licensing and subsidy rules. For example, the agency incorporated versions of the checklist systems required by HSPPS to maintain compliance with program standards for health and safety.

“Ultimately, the Partnerships had an impact on more than the 400 children in the QIN, but also the approximately 5,000 infants and toddlers enrolled in the District’s subsidized child care program” said Elizabeth Groginsky, the assistant superintendent for early learning at OSSE.

More recently, the District applied for expansion funding when Congress added $150 million to the Partnerships in the federal budget. In 2019, OSSE was awarded a $1.7 million grant to expand and enhance its QIN. The grant will help provide high-quality, comprehensive and continuous Partnerships services to an additional three child care facilities that will serve 72 vulnerable infants and toddlers in Wards 7 and 8. In addition, the grant will expand mental health consultation and enhance services for 94 children currently served at three QIN centers through a public-private partnership with the Bainum Family Foundation. OSSE will fund the project by layering EHS, local child care subsidy, and private-sector funds.

What Were DC’s Strategies?

**Leveraged multiple funding sources and state systems to support program success and quality.**

- Raised the payment rates for subsidized child care for children in Partnerships settings to reflect the higher EHS quality standards.
- Collaborated with other District child and family serving agencies (DC Health, Department of Behavioral Health, Department of Health Care Finance, Department of Human Services and Child and Family Services Agency) to coordinate services and support for the children and families enrolled in the QIN partner sites.

**Supported continuous access to infant and toddler child care for working families earning low incomes.**

- Provided continuous eligibility in the QIN authorizing law to ensure children enrolled in QIN remain eligible for subsidized child care until they transition into a pre-kindergarten or Head Start preschool program.
- Eliminated copayments for subsidized child care for families at or below 100% of the FPL.

“Ultimately, the Partnerships had an impact on more than the 400 children in the QIN, but also the approximately 5,000 infants and toddlers enrolled in the District’s subsidized child care program.”

ELIZABETH GROGINSKY, Assistant Superintendent for Early Learning at OSSE
• Developed child care partnership agreements with child development centers to provide quality funding tied to reaching and maintaining HSPPS to serve children who were dually eligible for EHS and subsidized child care.
• Paid child care providers serving EHS children regardless of days children might be absent.

**Raised the bar for what quality infant and toddler child care could and should be.**
• Created the QIN by providing grants to local trusted entities with experience in early childhood, to employ coaches to build relationships with and among child care partners to meet HSPPS standards in child development centers and child development homes. Coaches model best practices with infants and toddlers and they partner with the QIN mental health consultants/coaches to support best practices and provide strategies to support children’s social and emotional development.
• Used a cost estimation model which led to a substantial increase in the provider payment rates for subsidized child care for all age groups and quality designations. DC moved away from relying on market rate surveys, which essentially base payment rates on what parents can afford rather than what it costs to provide child care of a certain quality.

**Built a higher education pathway for the infant and toddler workforce.**
• Leveraged the District’s professional development information system (PDIS), including an online professional development platform called Quorum, as well as scholarships available to support the cost of achieving the Child Development Associate (CDA) Credential, associate (AA) degree or bachelor’s (BA) degree for the early childhood workforce.
• Integrated HSPPS requirements into the QRIS continuous quality improvement plan.

**Piloted reforms that could be expanded statewide to improve care for many more infants and toddlers.**
• Raised infant and toddler payment rates for subsidized child care and eliminated copayments for families with incomes under 100% of the FPL.
• Changed licensing requirements for group size from nine to eight for infants (0-12) and for toddlers (12-24 months) and raised the floor for minimum teacher credentials to a CDA Credential by 2019 and an associate degree for lead teachers effective 2023. In DC, the percentage of licensed family child care providers with at least a CDA has grown from 20 to 90 since the December 2016 change in the new education requirements.

**USEFUL LINKS AND CITATIONS**


**QIN authorizing code:** [https://code.dccouncil.us/dc/council/code/sections/4-415.html#](https://code.dccouncil.us/dc/council/code/sections/4-415.html#)

**DC’s subsidized child care** may be found under District of Columbia Municipal Regulations, Title 5. Education, Subtitle A. Office of the State Superintendent of Education, Chapter A2. Child Development Facilities: District-Subsidized Child Care Services.

**DC’s QRIS:** [https://osse.dc.gov/page/capital-quality-qriss](https://osse.dc.gov/page/capital-quality-qriss)


**New education requirements** for DC’s early childhood workforce and available resources: [https://osse.dc.gov/eceresources](https://osse.dc.gov/eceresources)


**STATE CONTACTS**

Dr. Kathryn Kigera
Director of Quality Initiatives
Division of Early Learning
Office of the State Superintendent of Education
Phone: (202) 481-3763
Email: Kathryn.Kigera@dc.gov
The Ounce of Prevention Fund (the Ounce) gives children in poverty the best chance for success in school and in life by advocating for and providing the highest-quality care and education from birth to age five. The Ounce envisions a world in which high-quality early learning opportunities beginning at birth are an integral part of our nation’s education system. With commitment to quality as our guiding principle, the Ounce works at the intersection of practice, policy and research and forges public-private partnerships. Over the last 30 years, the Ounce has developed an effective approach to advancing knowledge, testing ideas in real-world settings, advocating for policy change, engaging champions and training practitioners and leaders.