



Strengthening Home-Based Child Care

Ideas from States Awarded Preschool
Development Birth-Five Grants



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Introduction

The federal Preschool Development Grant Birth-to-Five (PDG B-5) program was created by Congress to help states plan for better alignment of early childhood services for young children and their families. In 2018, 46 states and territories won initial one-year planning grants to conduct Needs Assessments, collaborate across agencies, gather input from stakeholders, and develop strategic plans to address the needs of children and families, especially for those with low incomes or facing disadvantages. Specifically, states needed to consider how best to enhance parental choice of a wide range of early childhood care providers, “including child care centers and home-based child care providers, Head Start and Early Head Start programs, state prekindergarten programs, and home visiting service providers across the public, private, and faith-based sectors.” As the states completed their planning year, they could re-apply for implementation grants. At the end of 2019, the Administration for Children and Families in the U.S. Department of Health and Human Services announced that 20 states had won PDG B-5 Renewal (PDG B-5) grants to implement their strategic plans over three years. Subsequently, three additional states received funding awards in 2020.

Note about Terminology: Home-based child care (HBCC) includes the full range of care providers in homes – licensed, licensed exempt, and family, friend, and neighbor care (FFN). State applications typically used the term family child care (FCC) and so that is the term used in this document. Where a state specifically wrote about FFN, that term is used.

This brief summarizes the approaches that states winning the PDG B-5 three-year implementation grants included in their applications to strengthen the supply and quality of home-based child care, including licensed and registered family child care (FCC) and unlicensed family, friend, and neighbor care (FFN). Since these awards were made, the entire early childhood system and country has vastly changed due to the COVID-19 pandemic and economic upheaval. Writing of the brief coincided with this growing recognition, and yet its findings are equally, if not more, relevant to the current situation. **As leaders in early childhood consider how best to re-open and re-build stronger and better state early childhood care systems, the ideas states proposed in Birth-to-Five PDG grants may inform their considerations about**

addressing FCC. FCC may be particularly suited to support families as the country begins to re-open due to their smaller group sizes, capacity to care for siblings and mixed ages in the same setting, desire of parents for caregivers who match family culture and values, and ability to support non-traditional hours. As states have planned for recovery, they have also noted that the nature of FCC being independent, small businesses made it harder for them to navigate the steps to access loans and other support systems in times of need.

The PDG planning grant required states to:

“Conduct or update a periodic, statewide birth-through-five Needs Assessment of the availability and quality of existing programs in the state, including such programs serving the most vulnerable or underserved populations and children in rural areas, and, to the extent practicable, the unduplicated number of children being served in existing programs and, to the extent practicable, the unduplicated number of children awaiting service in such programs.”

The PDG B-5 grant application asked states to implement strategic plans based on the findings of their Needs Assessment. The federal emphasis on **mixed delivery, underserved and vulnerable populations, and rural areas** contributed to increased understanding about FCC and how that type of care could be part of state plans to meet those needs.

This paper is meant to serve as a resource for sharing ideas among state leaders. Many of the activities described are pilot programs. Our analysis is limited in scope in that it is based on paper review of the PDG B-5 applications. The applications covered a range of required questions and were limited to 75 pages; we found that in many cases few words were devoted to describing FCC and FFN initiatives. It is possible that states not listed here have intentions to include FCC in their initiatives. Among the 19 states we found that addressed FCC specifically, we interviewed state staff responsible for PDG implementation in eight—Alabama, California, Colorado, Connecticut, Georgia, Louisiana, Michigan, and Oregon—to better understand the contexts of their plans.



How States Included FCC in PDG B-5 Applications

An overview of the 23 PDG B-5 applications that received funding found that 19 included some mention of FCC, and a handful (Alabama, California, Colorado, Louisiana, Oregon) have more systematic approaches to pilot ways to better include home-based care in their early care and education systems.

While most states included FCC groups or providers in their Needs-Assessment work, some provided more detail on how they engaged FCC stakeholders in planning. In **Colorado**, the Department of Human Services (DHS) drew on input through focus groups and surveys from the state family child care association, family child care for-profit and non-profit networks, high-quality rated family child care providers, and former family child care providers as part of a legislatively required study to develop a plan to address the decline of infant care and licensed family child care (Colorado Senate Bill 19-063). The process raised awareness about the needs of the home-based population and challenges to becoming licensed due to multiple regulatory schemes, including building codes, zoning ordinances, and homeowner's associations. **California** engaged the BUILD initiative in helping to develop processes to convene diverse stakeholders across the state with the explicit goal of addressing inequities that might exist in the system, including for FCC. Georgia's Professional Family Child Care Alliance participated in advisory sessions with the state to inform the development of the state PDG B-5 application. **Louisiana** had a working group dedicated to FCC providers and stakeholders. **Virginia** included 93 FCC providers as part of its planning grant community-based process and pilot.

Notes from the Pandemic: How Should We Think about the Future of FCC?

The future of FCC is on the minds of the eight state early childhood administrators interviewed. They are trying to track the impact on that population but say that the lack of statewide infrastructure impedes that process, as well as the state's ability to understand FCC strengths and challenges. They think FCC providers are more likely to remain open than centers - and data from the National Association for Family Child Care (NAFCC) indicate that two-thirds of FCCs are open and caring for children—although homes typically have fewer children in care and are not earning what they did before the pandemic. Thinking through the need to re-open, state leaders anticipate greater demand for the small group sizes in FCC, with implications for licensing, enrollment, subsidy, and quality systems in the state. As states sought to help providers apply for the Paycheck Protection Program and other relief, they learned that home businesses rarely had the accounting systems in place to quickly apply.

Looking forward, the child care administrators identified top needs, including:

- Recovery supports designed specifically for home providers.
- Outreach and resources to be part of state licensing, subsidy, and quality systems translated into providers' primary languages.
- New infrastructure through which state systems can provide supports and providers can connect to each other, such as staffed family child care networks.
- Business development including planning, accounting, and shared services alliances.

Building new data capacity in state government has helped state leaders better understand FCC and potential parental demand for this kind of care. Whether or not state leaders embarked on their PDG planning process intending to focus on FCC, the results of required PDG B-5 Needs Assessments may have led them to include targeted initiatives. States pointed to data showing lack of access to quality care in rural and other areas of the state, lack of infant/toddler care, and the need to increase choices for dual language learning children. State leaders interviewed for this brief reviewed the Needs Assessment in developing their Strategic Plans, and brought agencies together to determine how best to address gaps in services that were limiting access to high-quality child care choices, including for families with low incomes and facing vulnerabilities. Joy Winchester, in Alabama's Department of Early Childhood Education, said, "This process asked us to break down silos and motivated state departments to come together. The Department of Human Resources (which operates state subsidy) and our agency are learning from each other and building collaborative projects that will be sustainable and breakthrough."¹

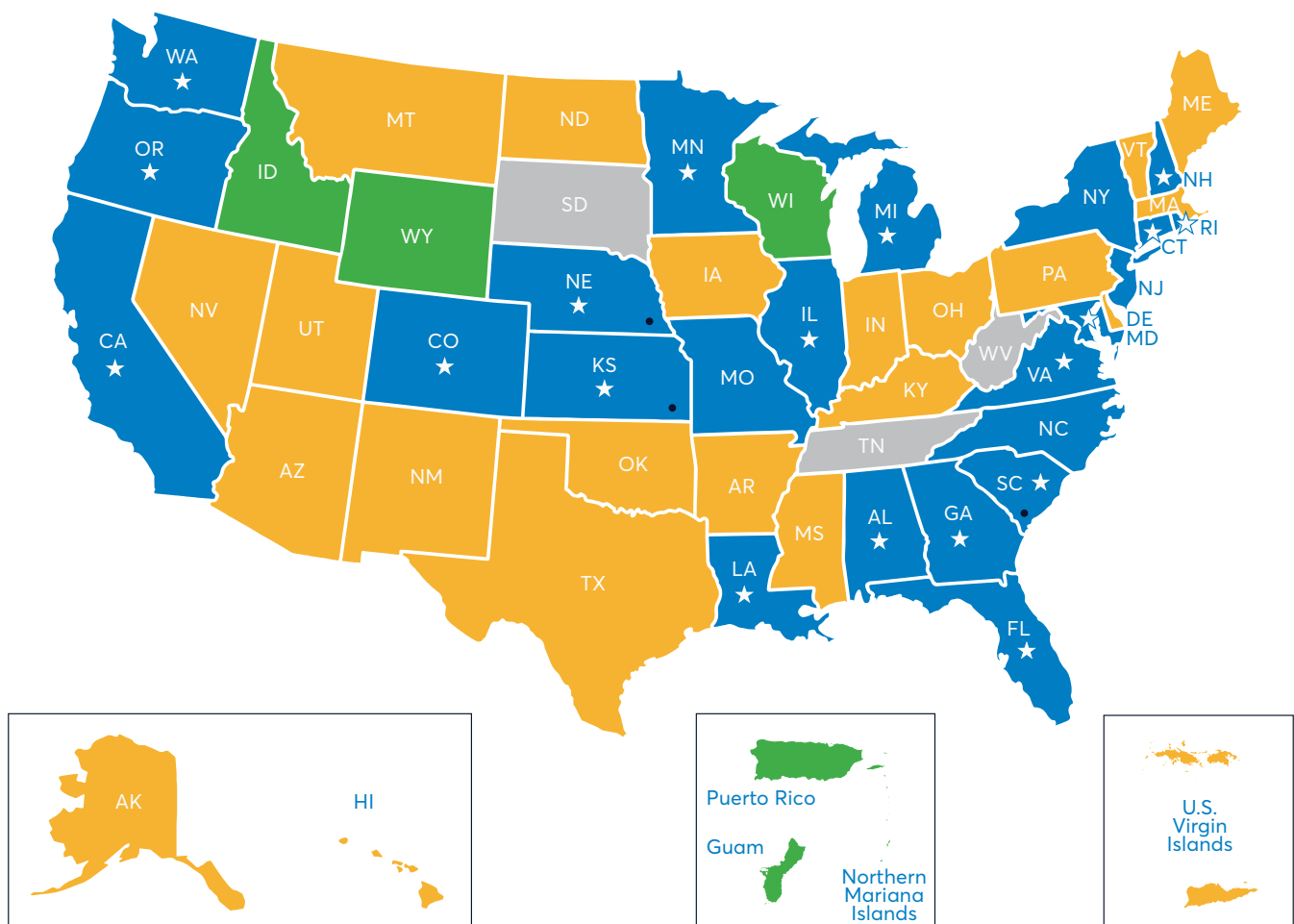
The data showed gaps in services for FCC providers. For example, **California** found that just nine percent of FCC providers participating in the state child care assistance program were part of the quality improvement system. The **Louisiana** Needs Assessment convinced the state to

State Data Capacity Enables Focus on FCC

Alabama set a specific PDG B-5 goal to increase the number of FCC providers in the state and plans to measure progress using counts that would be aggregated by rural/urban areas and utilize geographic mapping/data visualization. The state will build on data gathered as part of its participation in [Project Hope](#), a BUILD Initiative project funded by the Robert Wood Johnson Foundation. Project Hope supports states to collect data relevant to promoting the optimal health and well-being of young children, families, and communities, including information about the lived experiences of intended participants of states systems, in order to inform state actions to address and reduce racial, ethnic, geographic, and economic inequities.

focus effort on including FCC in the state early childhood system; the Needs Assessment revealed that roughly 9,000 home providers participated in the Child and Adult Care Food Program (CACFP) but few participated in state regulatory or quality systems. The PDG-5 Needs Assessment pointed out an unintended consequence to **Oregon's** leaders: by intentionally including Family Child Care as a central delivery mechanism in state-funded preschool, they were unintentionally incentivizing home-based programs to focus on preschool-aged children only. The PDG B-5 grant will address that decline by targeting contracted infant/toddler slots through Oregon's new "[Baby Promise](#)" pilot initiative to FCC programs that deliver Preschool Promise. **Washington** state learned that since most providers are small businesses, they struggled to maintain staff capacity and access expertise and financial services, which in turn made them less viable and stable. At the same time, the state determined that 63 percent of the population lived in high-quality child care "extreme access deserts."

PDG B-5 State and Territory Status



- States/territories that were awarded initial planning grants late 2018.
- States/territories that were awarded initial planning grants in December 2019.
- States that were awarded implementation grants in December 2019.
- States/territories that indicated involvement in FCC work in the PDG B-5 renewal application.
- States that received funds in April 2020.

State Application Activities

State applications described activities to address these concerns that fall into three main areas:

- 1) Increasing the supply of FCC in underserved areas of the state.
- 2) Strengthening supportive infrastructure for FCC.
- 3) Adapting state quality improvement and professional development systems to meet FCC needs.



This process asked us to break down silos and motivated state departments to come together. The Department of Human Resources (which operates state subsidy) and our agency are learning from each other and building collaborative projects that will be sustainable and breakthrough.”

Joy Winchester, Alabama’s Department of Early Childhood Education

STRENGTHENING HOME-BASED CHILD CARE
Ideas from States Awarded Preschool Development Birth-Five Grants

State	Average Monthly Percent of Children with CCDBG assistance in FCC or Group Home Care	PDG Grant Amount	Specific FCC Activity	Increase Supply	Strengthen Infrastructure	Adapt Quality and PD Systems
Alabama	5%	\$11,178,750	•	•	•	
California	47%	\$13,414,500	•	•	•	•
Colorado	8%	\$11,171,969	•	•	•	•
Connecticut	35%	\$8,943,000	•		•	•
Florida	5%	\$13,414,500	•			•
Georgia	3%	\$3,721,584	•		•	•
Illinois	42%	\$13,414,500	•			•
Kansas	47%	\$8,943,000	•		•	
Louisiana	3%	\$11,178,750	•	•	•	•
Maryland	30%	\$8,942,996	•		•	
Michigan	34%	\$13,413,552	•		•	•
Minnesota	17%	\$8,941,881	•		•	
Missouri	17%	\$11,176,961				
Nebraska	24%	\$8,943,000	•		•	•
New Hampshire	7%	\$8,942,186	•	•		
New Jersey	7%	\$11,178,750			•	
New York	45%	\$13,414,500				
North Carolina	4%	\$13,414,500				
Oregon	56%	\$8,866,711	•		•	•
Rhode Island	21%	\$8,943,000	•		•	•
South Carolina	4%	\$11,146,654	•	•		•
Virginia	13%	\$11,178,750	•		•	•
Washington	19%	\$11,175,769	•		•	
National Avg.	20%	National Total = 23 grants	19	6	15	13

Sources: Administration for Children and Families, Office of Child Care, FY 2018 Preliminary Data Table 3 - Average Monthly Percentages of Children Served by Types of Care, <https://www.acf.hhs.gov/occ/resource/fy-2018-preliminary-data-table-3>. First Five Years Fund, Preschool Development Grant Birth through Five Fact Sheet. <https://www.ffyf.org/preschool-development-grant-birth-through-five/>.



The sections below provide examples of the activities states proposed in the three areas.

1) Increasing the Supply of FCC

For some time, state administrators have raised concerns about dwindling numbers of licensed FCC providers and the impact this has on parents' child care choices. According to analysis by the [National Center for Early Childhood Quality Assurance \(NCECQA\)](#), about 90,000 licensed FCC homes closed between 2005 and 2017 although overall licensed capacity increased by seven percent, mostly due to increased center capacity.² The federal Office of Child Care calculated that the number of children in families with low incomes who received child care assistance in a home (child's home or providers home) fell by 35 percent between 2011 and 2016.³ National analysis has pointed to challenges with participating in state licensing and in operating a small business as contributing factors.⁴ Winning PDG B-5 applications in six states (Alabama, California, Colorado, Louisiana, New Hampshire, and South Carolina) described approaches to increase supply in the following two ways: a) supporting existing non-licensed caregivers to become licensed or recruiting new people to the field and b) working in partnership with business stakeholders. Other approaches embedded in FCC networks are addressed in the next section.

A. RECRUIT INDIVIDUALS TO CONSIDER OPENING A BUSINESS OR HELP EXISTING CAREGIVERS TO BECOME LICENSED

- **California** plans to expand the [Child Care Initiative Project \(CCIP\)](#) statewide by adding the program as a required feature in each of the [county-based Quality Counts Consortium \(QCC\)](#)—agencies that operate the state Quality Rating and Improvement System at the local level. "Although the Consortia were started as part of the California Race to the Top-Early Learning Challenge federal grant years ago, we learned through our QCC data and PDG Needs Assessment that they were mostly focused on centers,"

said Sarah Neville-Morgan, deputy superintendent of Public Instruction at the California Department of Education.⁵ Through CCIP, the child care resource and referral network recruits participants, offers them intensive training to help them successfully complete the licensing process and meet federal health and safety requirements, and coaching to improve their quality. The PDG B-5 plan says that in addition to the current model of CCIP, QCC will develop methods of linking children and families in FCC to additional comprehensive services as part of statewide public health priority to address trauma and the impacts of Adverse Childhood Experiences (ACEs).

- **Colorado** has multiple strategies to build its FCC provider base. Lindsey Dorneman, director of the PDG B-5 grant at the DHS Office of Early Childhood, shared, “We know that in some mountain and rural areas of our state the business model for a full center will not work.”⁶ Colorado plans to use the PDG B-5 funds to distribute microgrants through the state to its local system of regional Early Childhood [Councils](#) to centers and home providers to help them address start-up costs, such as meeting health and safety requirements, to become licensed. Colorado leaders learned in their stakeholder engagement process that those wishing to start FCC businesses faced barriers to doing so due to homeowner association and local zoning rules; they are considering how to address this with local leaders.
- **Louisiana** is using PDG B-5 funds with the goal of better integrating FCC into state early learning systems. The state doesn’t have extensive participation by FCC providers in the child care subsidy program, there are currently no licensure options for FCC, and no FCC providers currently participate in the QRIS program. The state’s Needs Assessment showed that this is restricting choices for families, especially in rural areas. The state will use the PDG B-5 funds to provide funding to at least one community that has a child care desert to pilot high-quality seats in FCC settings that participate in a pilot FCC quality rating process, using a quality FCC rate.
- **New Hampshire** set ambitious goals to expand the current licensed family child care supply by 50 percent and increase by 50 percent the number of FCCs that accept children in the state child care assistance program over the three years of the grant. The state said it would convene an FCC subcommittee to develop more details and a pilot in the second year, focusing on growing the supply of infant/toddler care in FCC settings.
- **South Carolina** will launch a “Family Child Care Initiative” and campaign to recruit new providers in areas of the state in which parents have low accessibility to care. The program will provide grants to cover the cost of equipment and materials needed as well as consultation on the standards in the state QRIS. To provide stable business income in their first year in the program, FCC providers will be awarded a contract that pays for three child care slots as part of the state child care assistance program for children in families that qualify for assistance. The contracts will target children experiencing disadvantages such as homelessness, disabilities, or trauma.



We know that in some mountain and rural areas of our state the business model for a full center will not work.”

Lindsey Dorneman, Director of the PDG B-5 Grant at the DHS Office of Early Childhood

B. PARTNER WITH BUSINESS STAKEHOLDERS

- **Alabama** is planning to build supply around manufacturing plants, such as Honda, by partnering with companies to grow capacity to address swing shift needs. In the future, Alabama leaders hope to include FCC in the state pre-kindergarten program to reach more areas of the state.
- **Colorado** wants to raise the profile of FCC as a viable small business option. The Office of Early Childhood is building partnerships through state agencies, including the Department of Labor and Employment, to activate local agencies and chambers of commerce to recognize and include child care businesses in local outreach and initiatives.



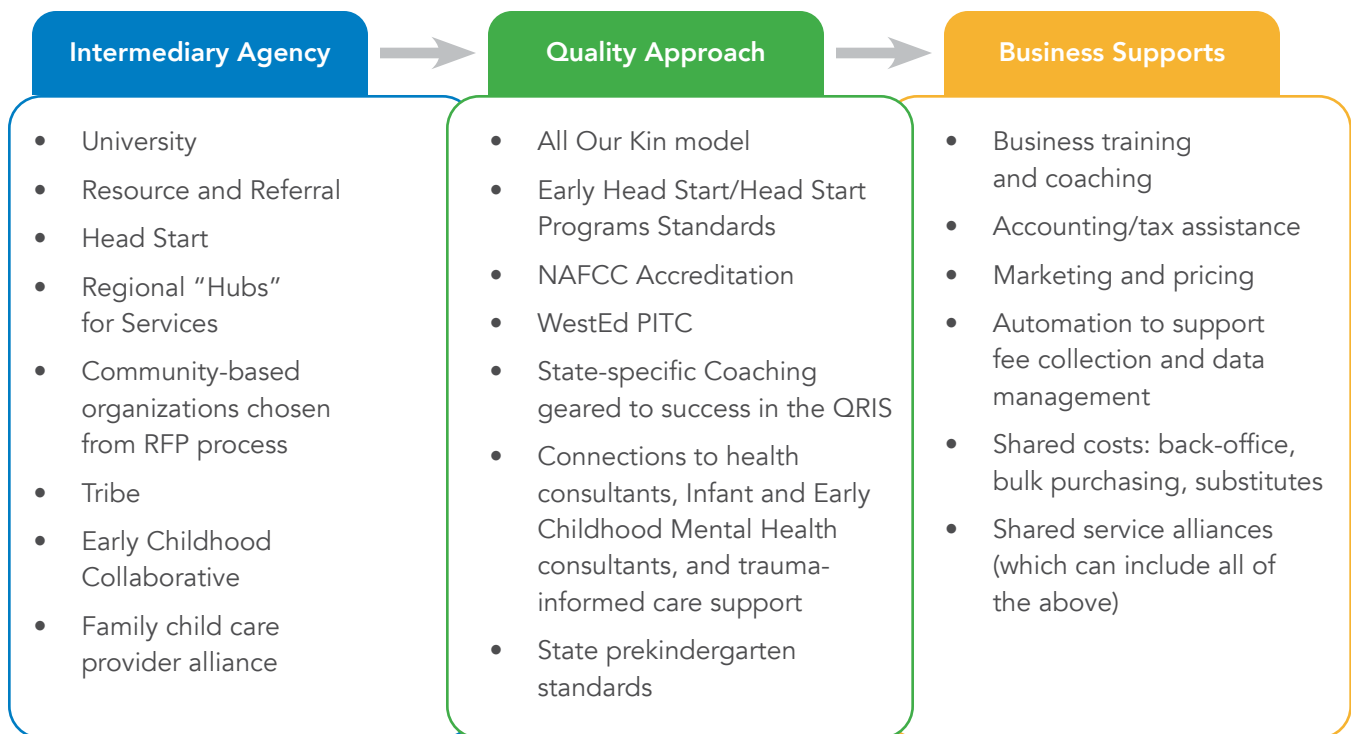
2) Strengthening Supportive Infrastructure for FCC

FCC providers typically work independently, leaving them responsible for caregiving and the educational program (e.g., implementing curriculum, daily schedule, family engagement) and business operation (e.g., accounting, billing, working with state licensing and subsidy systems, and food procurement and preparation). With the COVID-19 crisis, providers may be alone in managing the challenges. NAFCC reports that two-thirds of providers say they are operating even though they have many fewer children in care. FCC providers need help securing health and sanitation supplies, could benefit from access to health and child mental health consultants, and may need technical assistance to apply for federal and state emergency resources.⁷ States are piloting ways to build more supportive infrastructure for providers to link them to each other and to community-based agencies that can help them on a variety of levels, for example, to achieve and maintain quality standards, strengthen their business, share expenses, and link to other services. PDG B-5 applications from 16 states (Alabama, California, Colorado, Connecticut, Georgia, Kansas, Louisiana, Maryland, Michigan, Minnesota, Nebraska, New Jersey, Oregon, Rhode Island, Virginia, and Washington) described activities to:

A. PILOT OR BUILD ON FAMILY CHILD CARE NETWORKS

Federal Child Care and Development Block Grant regulations recommend “improving the supply and quality of child care programs and services for infants and toddlers through activities, which may include establishing or expanding the operation of community—or neighborhood-based family child care networks.”⁸ Nine states (Alabama, Connecticut, Georgia, Louisiana, Maryland, Michigan, Nebraska, Oregon, Rhode Island and Washington) wrote in their PDG B-5 plan that they would pilot or expand existing community-based networks to address a range of issues. Although the term “network” is commonly used across states, there is no one understanding of what the term means and or what services one should offer. NCECQA [developed tools](#) to help those interested in networks to consider what services to include in them. Experts at the Erikson Institute defined a “staffed family child care network” as an “organization that offers home-based child care providers a menu of quality improvement services and supports including technical assistance, training, and/or peer support delivered by a paid staff member” as part of the [first national study of such networks](#).⁹ Opportunities Exchange co-founder Louise Stoney has written that effective networks must [strengthen both business and pedagogical leadership](#) of providers with the most in-depth services adding shared back office and staffing to reduce overhead costs.¹⁰ At a high level, the following describes the approach of each state.

Components of Staffed FCC Networks in PDG B-5 Renewal Applications




- **Choice of “hub”:** **Alabama** plans to expand on an existing Family Child Care Partnership network managed by Auburn University to which the state provides grant funding. **Connecticut** will build on an existing network pilot in a new [Connecticut CARES for FCC](#) program. The original pilot included five diverse organizations selected through a request for proposals, and the state planned to add to it with PDG. With the pandemic’s impact on FCC, the state launched the Cares program to get to statewide coverage with help from philanthropy. **Georgia** will likely continue to partner with a child care resource and referral agency with which it successfully implemented the state’s Early Head Start-Child Care Partnership grant in an FCC network. The state plans to spend year one of the PDG B-5 considering how best to add more partners, including other resource and referral agencies and the state’s network of technical colleges. **Maryland** plans



to partner with a state FCC Alliance. **Oregon** has a state-to-regional “[Early Learning](#)” hub structure through which the state coordinates child and family services at the local level at 16 sites. The Hubs, often co-located with child care resource and referral agencies, will receive funding to provide the staffing for networks of 10-15 culturally and linguistically diverse FCC providers. **Nebraska** is working with the [Nebraska Early Childhood Collaborative](#) to develop networks in the state for English- and Spanish-speaking providers. Two states, Michigan and Rhode Island, plan to leverage the federal investment in Early Head Start–Child Care Partnerships to reach more FCC providers. Rhode Island will expand capacity of the existing Partnership grantee. **Michigan** plans to partner with a tribe to add 60 slots in homes and centers. **Washington** plans to work with a selected organization in two geographic regions of the state.

- **Focus on quality:** All the networks address quality. **Alabama**’s partnership with Auburn University provides mentoring for FCC providers to gain National Association for Family Child Care accreditation. The state plans to build on the existing FCC quality network of 200 homes and the federal Early Head Start–Child Care Partnership grant, which now includes 43 homes working to meet federal Head Start Program Standards. Connecticut will include in-home coaching in the FCC networks and train in WestEd’s Program for Infant Toddler Child Care (PITC) approach. **Georgia** proposed that its FCC Learning Networks would use a relationship-based approach that addresses program quality, provider stress, and assessment of impacts on children and families. Helping child care partners to meet Early Head Start standards in FCC homes will be the focus of **Michigan** and **Rhode Island** expansion. Maryland hopes to have FCC deliver care meeting prekindergarten standards. **Michigan** plans another FCC network that would have “flexible supports for quality improvement” that could include coaching and mentoring, access to training, peer-to-peer supports, substitute pools, and business supports. **Nebraska** is working with the New-Haven-based [All Our Kin](#) to pilot an adaptation of that model of relationship-based support and quality enhancement. **Oregon** places Quality Improvement Specialists in each regional hub to support implementation of best practices with infants and toddlers and program standards. **Rhode Island** will expand staff in Parents as Teachers networks to be able to visit family child care providers to cut down on isolation. **Washington** is integrating coaching supports.

- **Connect to array of support services:** **Washington** started its hub pilot with the first PDG planning grant—to make it easier for providers to access nutrition, developmental screening, and other family support services. The implementation grant will support connecting other existing services such as child care health consultants, infant and early childhood mental health services, and trauma-informed services. These “Shared Services Hubs” will be available to support providers and also to help them connect families to available services.
- **Strengthen business practices:** Some of the networks plan to address business practices or build shared services alliances. **Alabama**’s hub model includes a module focused on business skill development. **Connecticut** partners with the Opportunity Exchange to build shared services business alliances within networks. **Georgia** will provide business resources through the hubs it creates after researching the best approach to this for the state. **Nebraska** includes a focus on strengthening business practices to develop a Nebraska All Our Kin model that will work in rural areas of the state. **Washington** state includes business development supports in its hub plan to address billing, accounting, payroll, and human resource management.
- **Research to support continuous quality improvement of the network:** **Georgia** will evaluate its pilot of three to five network models to consider how best to scale across the state to meet different purposes, e.g., building new licensed supply in rural areas, supporting learning for children who are dual language learners, and/or improving quality of existing providers. **Oregon** is currently working with researchers at Oregon State University (OSU) to identify how to provide more robust support through FCC networks by evaluating the ability of networks to raise quality. The OSU partnership will help keep Oregon’s investments aligned with the most up-to-date research on elements of effective staffed FCC networks and to ensure the most impactful elements are included in all FCC networks. **Louisiana** plans to use PDG funding to review data from the first-year cohort of its network pilot as it finalizes its strategic plan. In two regions of the state, the Department of Education contracted with child care resource and referral agencies to operate FCC networks reaching a total of 38 homes. The participants received coaching, monthly professional development, and support from local infant/toddler mental health consultants. The Louisiana State University collected CLASS® observations and Family Child Care Environmental Rating Scale scores to evaluate the pilot and for continuous quality improvement and reflection with providers.

 **We launched this pilot with deliberate, intentional plans and processes for listening to family child care providers and engaging in frank, honest discussion with them through focus groups and network meetings; working to provide them with needed supports and resources, including training, coaching, and materials; and building and expanding on the providers’ sense of belonging to a network and cohort of unique and respected professionals...and we believe that that has made all the difference.”**

Karen Powell, Director of Child Care Partnerships at Volunteers of America Greater Baton Rouge, a child care resource and referral partner with the DOE of Louisiana

B. STRENGTHEN BUSINESS PRACTICES OF PROVIDERS

In addition to supporting business skills within the framework of networks, states also described other approaches to building business capacity into their system.

- **Train the trainer: Colorado and New Jersey** plan to implement the federally funded National Center for Early Childhood Quality Assurance (NCECQA) [train-the-trainer series on Strengthening Business Practices for Child Care Programs](#). **Colorado** will target areas of the state with low supply and by type of provider, including family child care businesses. Training will be offered via regional Early Childhood Councils and in partnership with the [Colorado Small Business Development Network](#), funded in part by federal funds. The state Needs Assessment found that center- and family-child care home providers identified key gaps in their business practices that contributed to loss of this type of care, including: “lack of ability to plan for systemic factors that impact program operations, inefficient recordkeeping, lack of technology use for routine operational activities, limited knowledge of methods for improving the financial and programmatic sustainability of child care programs, and challenges recruiting and retaining employees.”¹¹ **New Jersey** plans to offer training statewide in English and Spanish, and to offer additional supports specific to FCC providers, including budget scenarios and fiscal examples specific to FCC business operations.
- **Business toolkits: Colorado** also plans to develop “Business Toolkits” for family child care homes and child care centers to provide a foundation of knowledge about fiscal management and business operations. The Toolkits will include templates that providers can use to manage their business.
- **Capitalize digital access applications: Nebraska** Early Childhood Collaborative will help the state pilot the for-profit business application “[Wonderschool](#),” made explicitly for FCC in the state to support rural area FCC. The Wonderschool platform “helps providers set their rates, market their program, bill and collect, and communicate with parents.” **Washington** plans to provide access to business training through its network of hubs that will have online access to an array of services.

C. ENGAGE FCC AND FFN AT THE COMMUNITY LEVEL AS PART OF THE MIXED DELIVERY SYSTEM

States may find it difficult to reach home-based providers without the partnership of a trusted local agency to conduct the outreach. This is especially the case for FFN caregivers or those who are exempt from licensure or registration and not participating in subsidy or quality systems. **Colorado** set a specific goal that “informal ECE environments (friend, family, and neighbor care) are enhanced to enrich and support children’s physical, social, emotional, and cognitive development.” Six states are using diverse community partners.

- **Grants to communities to design systems and services that include home-based providers:** The **Kansas** application described a community-based strategy that will provide local organizations the opportunity to apply for grants to build the infrastructure of support in rural areas. The state found that 93 percent of rural counties could not meet demand for child care for children birth to age five. It set a goal to increase supply in centers and family child care by 25 percent by the end of 2022. The state plans to award 10-15 grants. Applicants will choose from a menu of the following activities: “1) implement a rural co-op model to support providers by offering substitute providers for all types of child care settings (paid time off, sick time, and PD time for providers); 2) provide shared services to administer benefits (health insurance), payroll, participation in Child Care Subsidies and the Child and Adult Care Food Program, and technology upgrades to access online professional development opportunities; 3) implement innovative approaches to child care and workforce development by integrating early childhood content into middle and high school Family and Consumer Science curricula and offering opportunities to work in on-site child care settings; 4) increase business involvement in the development and sustainability of child care; 5) incentivize businesses to cover start-up costs for on-site child care; 6) reimburse costs associated with child care licensing, including finger printing, background checks, etc.”

Virginia will expand on [10 pilots started with the PDG planning grant](#) that enabled innovative local efforts to build relationships, increase access, strengthen quality, and deepen family engagement. The model currently includes 93 FCC homes reaching about 20 percent of the state. Specifically, these family day homes, most of which take child care subsidy, are part of these innovative local efforts to build relationships, increase access, strengthen quality, and deepen family engagement. Virginia intends to extend and expand these efforts statewide through the PDB B-5 renewal, ultimately seeking to involve every family day home that takes subsidy in the state.

- **Place resources in libraries and trusted community organizations:** **California** said that it would encourage the local quality improvement Consortia to partner with libraries to offer events designed for FFN and to train librarians to support language and literacy. **Colorado** will extend “Growing Readers Together” – an initiative that placed three Early Literacy Specialists as state library system staff to enhance early literacy offerings statewide and ensure that services are designed to build caregiver skills with children, particularly targeting informal child care. **Minnesota** is planning to ensure culturally and racially affirming access to an array of whole family supports and services targeted on supporting pregnant and parenting families through regionally located “implementation” hubs. This work will also include a focus on supporting FFN providers, in addition to parents and primary caregivers, given the preponderance of use of FFN care by Minnesota’s families with children under age three and by racially and culturally diverse communities.
- **Partner with and provide grants to tribes to support their FCC providers:** In the PDG B-5 applications, **Oregon** proposed building partnerships with nine tribes in the state to contract with them for 40 slots in FCC homes. The state will hire a tribal liaison to work with programs. The project will include training for providers on the competencies needed to meet the needs of infants and toddlers in their care and on program standards supported by the Quality Improvement Specialists housed in the state’s CCR&R network. Oregon plans to evaluate the results of the program.



3) Adapting Quality and Professional Development Systems to Meet Home-Based Providers' Needs

The PDG B-5 application asked states to describe how they would improve quality of services in their mixed delivery systems, and defined “mixed delivery” as being inclusive of family child care. It can be labor intensive to reach home providers with coaching, content, and supportive services because their homes are individually operated and often in remote rural areas. As sole proprietors, home providers typically do not have access to substitutes or supports to be able to attend training during the day. Providers may speak languages other than English or face transportation barriers to accessing higher education or training. To address these challenges, 13 states (California, Colorado, Connecticut, Florida, Georgia, Illinois, Louisiana, Michigan, Nebraska, Oregon, Rhode Island, South Carolina, and Virginia) proposed activities in their PDG B-5 applications:

A. INCREASE DELIVERY OF SUPPORTS FOR BEST PRACTICE IN HOMES

- **Include FCC and FFN in home visitation models:** Colorado plans to expand current programs to conduct home visits for FCC. Colorado has already piloted expansion of the Parents as Teachers (PAT) and the Home Instruction Program for Preschool Youngsters (HIPPI) models to reach more licensed and legally exempt FCC homes and strengthen family engagement. To date, 45 homes have participated, serving 230 children. The state plans to expand and evaluate the model using PDG B-5 funds. Rhode Island also plans on expanding PAT to 300 more children, including by increasing staffing capacity in PAT agencies to work with early childhood networks in communities and connect home visitors with FCC. Michigan will investigate ways of delivering more professional development content in homes, by adapting and expanding a model of consultation developed to support the Quality Rating and Improvement System (QRIS). South Carolina will expand the reach of 37 PAT affiliates located in 28 out of 46 counties in the state to reach FFN and FCC providers with twice-monthly visits. Participating programs and the home visitors will receive financial incentives for retention and completion of the model.
- **Grow the supply of coaches and consultants qualified to support family child care.** Georgia plans to recruit family child care providers into a new “foundations of coaching” course to expand the number of effective coaches working in the professional development and QRIS systems in the state. For example, Georgia will recruit for the course from those FCCs that have achieved a higher QRIS rating or previously provided peer-to-peer assistance. California will expand contracts with its system of early childhood mental health consultants to reach more home-based child care and make training on trauma-informed care available in regions of the state with high rates of ACEs.
- **Develop and market online training modules to support family child care:** Rhode Island plans to conduct outreach to family child care providers to learn from online modules to promote better practices related to social-emotional health and trauma-informed care. Colorado will be using online modules to help with pre-licensure preparation and translating into Spanish training that can be accessed remotely.
- **Use video technology for delivering coaching content in homes:** Colorado plans to pilot and scale a technology model currently used in the Early Intervention program to virtually connect FCC providers in remote areas of the state with coaches for the QRIS and a state infant/toddler quality initiative. PDG B-5 funding will allow the state to employ and train staff in these methods to supplement the on-the-ground model that is currently operating.

B. MAKE QUALITY RATING AND IMPROVEMENT SYSTEMS (QRIS) WORK FOR FCC

- **Conduct a Comprehensive Review of QRIS:** **California** plans to increase participation of providers underrepresented in the Quality Counts California (QCC) Consortium as currently operated, including FCCs and FFNs. **California's** Needs Assessment during the planning phase showed that 32 percent of the state's under-five population lived in rural areas and, if it received a child care subsidy, this population mostly utilized home-based child care care, both licensed and legally exempt. Yet, just nine percent of licensed FCC providers in the state were found to participate in the QRIS, with variation across the counties ranging from zero to a third of FCC homes participating. The state set a goal to increase the number of FCC providers participating in QRIS by 25 percent. In the first year of the grant, the state will form a workgroup to make recommendations on how to increase incentives and system effectiveness to support FCC and FFN to achieve quality requirements. Using these recommendations, the state plans to implement changes to roles and responsibilities at the state, regional, and local system levels. **Georgia's** application described a statewide plan to enroll all child care providers that participate in the child care assistance program in the quality rating system by the end of 2020 (although that deadline will be extended due to the pandemic). The PDG B-5 application notes that this will change the make-up of QRIS participants, and that ensuring the system is ready and able to support quality among the diverse participants, including family child care, is important. The state plans to conduct a review to ensure that inclusivity. Susan Adams, deputy commissioner for Pre-k and Instructional Supports said, "Georgia is very interested in developing robust supports and resources to ensure Family Child Care Learning Homes are a viable child care option for Georgia's families." **Illinois** plans a comprehensive revision of QRIS standards for home-based child care providers so that it can engage in continuous quality improvement and reflective practice. **Louisiana's** Needs Assessment showed that lack of integration of the FCC population into the state's early childhood education and quality improvement strategy needs to be addressed to improve access to high-quality early childhood education for "economically disadvantaged children." **Nebraska** will examine how to make the QRIS more accessible and available to FCC homes, including considering language translations.



Georgia is very interested in developing robust supports and resources to ensure Family Child Care Learning Homes are a viable child care option for Georgia's families."

Susan Adams, Deputy Commissioner
for Pre-K and Instructional Supports

Evaluate and Improve the Effectiveness of Career Pathways and the State Scholarship Program

Georgia has a statewide scholarship program and a career pathway that requires licensed providers to earn at least a Child Development Associate (CDA) credential. The state agency plans to review the effectiveness of the scholarship program to support current and potential family child care providers to achieve the family child care CDA, and to try new strategies to recruit new early educators by piloting a High School CDA, Bilingual CDA, and Apprenticeship programs in both rural and urban communities. The state wants to focus on supporting bilingual educators and family child care providers, with an eye toward improving recruitment and retention in rural areas of Georgia.

- **Develop Community-Level Quality Support Strategies for FCC:** **Illinois** plans to develop a community-based strategy to support CQI and reflective practice among FCC providers in the QRIS. **South Carolina** will support FCC providers as cohorts in Community of Practice models operated by local child care resource and referral agencies. The facilitator will convene the group monthly to discuss the process as the FCC providers experience it and also visit the FCC homes regularly to provide support and link providers to other services in the community.

C. REVISE PROFESSIONAL DEVELOPMENT SYSTEMS TO BETTER INCLUDE FAMILY CHILD CARE

Four states described efforts to better engage FCC providers in state professional development systems.

- **Target PDG B-5 resources to assist FCC providers to increase credentials, with a focus on the CDA.** **Connecticut** plans to bundle CDA coursework and offer it to cohorts within staffed FCC networks to help providers attain this credential, and also offer a one-time \$500 award to providers who earn their CDA.
- **Redesign curriculum and implementation strategies for family child care homes:** **Oregon's** Early Learning Division requires providers to use research-based curricula and provides funding to purchase them, and plans to use PDG B-5 resources to research how those curricula are implemented, including in FCC. The state wants to focus on FCC because the population is critical to the child care assistance system, but curricula may not meet provider needs for addressing mixed-age groups or be linguistically and culturally appropriate for the population. Oregon will contract for a Supportive Environment for Quality Underlying Adult Learning (SEQUAL) analysis, to learn how family child care providers and teachers are handling curriculum implementation. Recommendations from the research will be considered by the Early Learning Division for making changes in policy.
- **Partner with institutions of higher education to support cohorts of FCC providers to achieve credentials/degrees.** **Illinois** plans to support up to six two-year cohorts of 20-40 participants with similar backgrounds, including a cohort of family child care providers. The cohorts will have access to advising and mentoring, job-embedded coaching, technology access and skills support, transportation, child care, credential-application fee waivers, and scholarships.

D. STUDY HOW TO TIE PAYMENT RATES FOR QUALITY IN FAMILY CHILD CARE

Four states wrote in their plans that they would study the rates paid to FCC providers in their state child care assistance programs. Three plan to calculate the true cost of meeting quality standards in homes.

- **California** will build off the efforts of a previous rates workgroup to determine what can be added into the state [Master Plan for Early Education and Care](#) to potentially address ways to tie the payment rates for subsidy in the state to the quality of the program or provider and/or participation in QCC. Related to this, California will encourage more FCC providers to participate in the quality improvement system and is moving to a model that focuses more on the improvement supports than the rating. This is part of a systematic effort to attract more home-based providers, particularly those serving infants and toddlers and in rural areas, to be part of that system.
- **Florida** conducted a cost of quality study with its PDG B-5 planning grant, and will build on that work to focus on family child care with renewal funds. The state plans to review the basic and differential payment structure in each of the 67 counties to see if it is paying or can pay the 75th percentile of market rate, including for family child care homes. Using PDG B-5 dollars, Florida plans to have a consultant conduct research specific to the family child care cost of quality, taking into account the differences across the counties that impact costs. This information will be factored into a plan to phase-in more equitable payment rates and improve quality across the state.

- **Oregon** also plans to review the cost of meeting quality standards in different settings and parts of the state to make sure rates are based on current and specific data, including for FCC. This is part of a larger effort to consider how best to include small FCC homes in the preschool expansion underway in the state.
- **Virginia** plans to expand a piloted project that offered financial incentives (up to \$1500) to all FCCs that participate in the child care assistance program in certain areas of the state.

Recommendations for Strengthening Home-Based Child Care

States can:

- 1) Use data collected as part of their PDG B-5 Needs Assessment and other state data to identify where children and families in the state could most benefit from strengthened FCC and FFN.
- 2) Convene or create an advisory of HBCC providers and stakeholders to gather input on strengthening supports for providers and caregivers, and meet regularly to increase communication between the state and providers.
- 3) Consider the three identified activities in this paper – increasing supply in underserved areas; strengthening supportive infrastructure; and adapting state quality improvement and professional development systems to better meet HBCC needs – in rebuilding state child care systems after the impact of the COVID-19 pandemic.
- 4) Reach out to peer states directly (or let BUILD know if you want to help form peer learning communities) to learn more about other state approaches.

Federal leaders can:

- 1) Provide technical assistance on the three approaches identified in this paper, including supporting peer to peer learning through Communities of Practice.
- 2) Use federal funding to support state research and evaluation on HBCC issues and strengthening initiatives.
- 3) Increase funding for the Child Care and Development Block Grant so that states have sufficient resources to help child care providers, including HBCC, recover. Include dedicated funding to build supportive infrastructure for HBCC, such as staffed FCC networks.

Conclusion

The federal PDG B-5 grant program is being used by 19 states across the country to try new approaches to include home-based child care providers in state early childhood systems and improve access to quality services for children and families. What these states are trying to achieve—to build the supply and parent choices in underserved communities, to strengthen the infrastructure of supports for these traditionally independent early educators, and to adapt state quality and professional development systems to better reflect home-based providers' needs—is critical to the future of child care. Given the impact of the COVID-19 pandemic and economic fallout on the child care industry, leaders across the states may find these ideas useful as they consider how to re-build the child care system to be stronger and more equitable.

FOOTNOTES

- 1 Interview with Joy Winchester, Director, Early Childhood Development and Professional Support, Alabama Department of Early Childhood Education. March 2020.
- 2 National Center on Early Childhood Quality Assurance (revised March 2020). Addressing the Declining Numbers of Family Child Care Providers in the United States. Retrieved from: https://childcareta.acf.hhs.gov/sites/default/files/public/addressing_decreasing_fcc_providers_revised_march2020_final.pdf
- 3 National Center on Early Childhood Quality Assurance (April 9, 2019). Strategies for Strengthening Family Child Care: Using Data to Inform Policy Change (webinar presentation). Retrieved from: <https://childcareta.acf.hhs.gov/resource/strategies-strengthening-family-child-care-using-data-inform-policy-change>
- 4 National Center on Early Childhood Quality Assurance (revised March 2020). Addressing the Declining Numbers of Family Child Care Providers in the United States. Retrieved from: https://childcareta.acf.hhs.gov/sites/default/files/public/addressing_decreasing_fcc_providers_revised_march2020_final.pdf
- 5 Interview with Sarah Neville-Morgan, Deputy Superintendent, California Department of Education, and Kris Perry, Deputy Secretary and Senior Advisor to the Governor at California Health and Human Services Agency, California, April 30, 2020.
- 6 Interview with Lindsey Dorneman, Director, Colorado Preschool Development Grant B-5, and Kristen Lang, Program Access Manager, Colorado Department of Early Childhood, April 9, 2020.
- 7 National Association for Family Child Care. (2020). Family Child Care and COVID-19: Survey Two Results. <https://www.nafcc.org/coronavirus>
- 8 Child Care and Development Fund, 45 C.F.R. § 98.53(a)(4)(i) (2016).
- 9 Bromer, J., & Porter, T. (2019). Mapping the Family Child Care Network Landscape: Findings from the National Study of Family Child Care Networks. Executive Summary. Chicago, IL: Herr Research Center, Erikson Institute.
- 10 Stoney, L. (2020). Defining Staffed Family Child Care Networks. Opportunities Exchange. https://opportunities-exchange.org/wp-content/uploads/OpEx_2020_StfdChldCrNtwrks_InfoGraphic.pdf
- 11 Colorado PDG B-5 application. (2019).

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