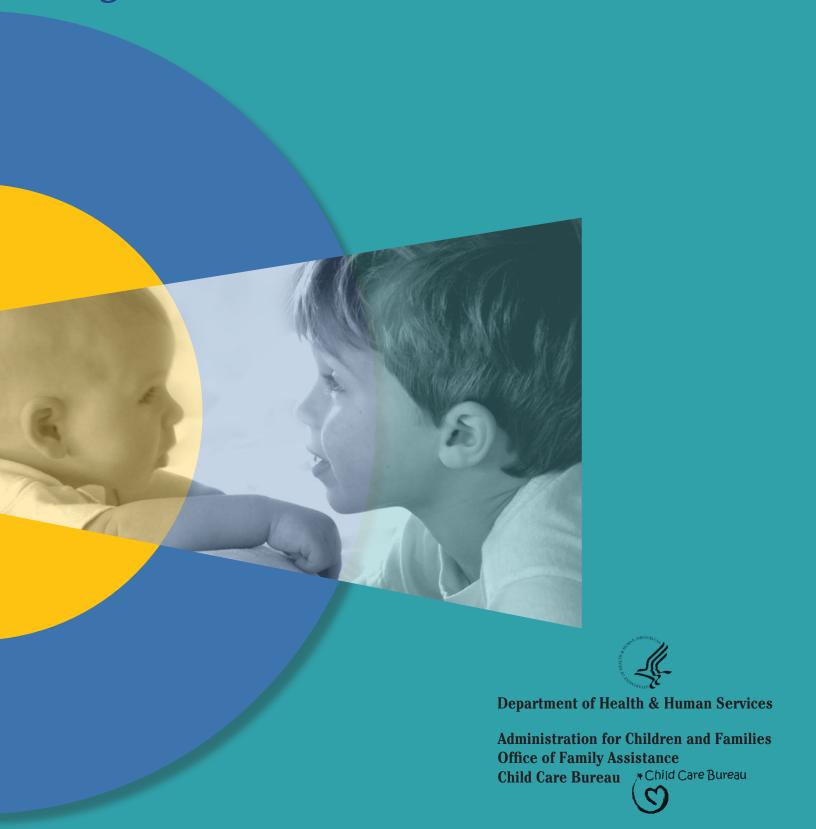
Planning for the Child Care and Development Fund Targeted Funds for Infants and Toddlers





A Planning Tool for the Child Care and Development Fund Targeted Funds for Infants and Toddlers

ince FY 1998, Congress has set aside Child Care and Development Fund discretionary funds for the specific purpose of improving the quality of infant and toddler care. As of FY 2007, the designated amount equaled approximately \$100 million per year. These targeted funds support access to safe, reliable child care programs, a necessity for parents working to achieve and maintain self-sufficiency—a primary function of the Child Care and Development Fund.

In the years since the targeted funds were initiated, a variety of activities to improve the quality of infant-toddler care have been implemented by States and Territories. The Child Care Bureau has provided technical assistance to States to help plan, implement and evaluate the effectiveness of quality improvement efforts. In addition, in October 2002, the Child Care Bureau began the National Infant & Toddler Child Care Initiative to work collaboratively with Child Care and Development Fund administrators and other partners to improve the quality and supply of infant and toddler child care.

This publication was developed at the request of the Child Care Bureau by the National Infant & Toddler Child Care Initiative to support States and Territories to plan for the effective use of targeted funds.

Supporting Quality in Child Care for Infants and Toddlers: Use of Targeted Funds by States and Territories

n FY2006-2007, States and Territories implemented a variety of innovative activities through the targeted funds for infants and toddlers to improve the quality of care, which in turn supports the needs of low-income, working families. A Fact Sheet describing these activities can be found at http://nccic.acf.hhs.gov/itcc/publications/index.htm

Highlights of current activities include **SUPPORT FOR QUALITY through:**

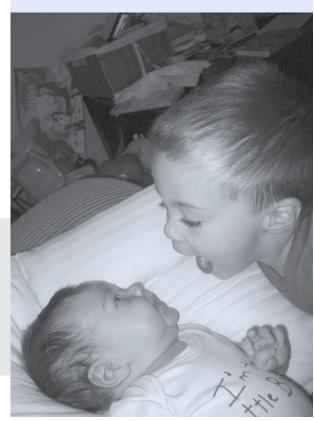
Professional Development – scholarships for caregivers to attend Infant/Toddler training; development of systems to support credentials for the Infant/Toddler workforce; implementation of Infant/Toddler Specialists to provide technical assistance and consultation to providers; systems of professional development that lead to articulation within a career lattice.

Facilities – higher reimbursement for the care of infants and toddlers; technical assistance focusing on infant/toddler environments; grants to providers for equipment and materials to support the needs of infants and toddlers in their care.

Child Care Settings and Activities – support for Centers of Excellence or demonstration sites as models of high quality care for infants and toddlers available to providers in the State.

Planning, Research, and Evaluation – support for planning and evaluation efforts to determine the effectiveness of States' current efforts to improve child care for infants and toddlers.

Program Standards – grants to support meeting State and local standards, including regulatory, quality rating system standards, and accreditation.



The Impact of Infant/Toddler **Targeted Funds on Quality:** A Question to be Answered

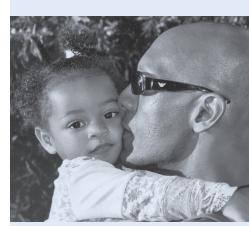
he September, 2002 GAO Report on Child Care Quality Improvement Initiatives¹ reported that although States had implemented a variety of activities aimed at improving quality for infants and toddlers, few States had actually evaluated their efforts. An April, 2006 survey of CCDF initiatives produced similar findings.² With 35 states reporting 339 initiatives, only 4 percent of the initiatives collected data on child outcomes, the ultimate indicator of quality improvement.

In fact, reliable evaluation of early childhood programs—with multiple variables having the potential to affect child and program outcomes—is a challenge and can be quite costly. With that said, it is also clear that the intent of States is to use all resources effectively. In the National Infant & Toddler Child Care Initiative publication, *At-A-Glance: Evaluation and Infant/Toddler* Child Care3 the Initiative suggests that there are ways for CCDF Administrators to address this dilemma, and consider how evaluation efforts for birth to three services can be assimilated into ongoing evaluation efforts or built into new initiatives. Suggestions include:

- Incorporating evaluation requirements in contracts, particularly for new or large initiatives,
- Working with the higher education system and researchers to develop capacity, funding and interest in evaluating initiatives to improve the quality of infant/toddler child care and caregiver practice,
- Focusing existing data and information collection efforts on infants, toddlers, and their families, and
- Insuring that evaluation tools are measuring structural and process indicators that reflect the developmental needs of infants and toddlers.

Incorporating evaluation into a State's quality initiative for infants and toddlers is vital to assuring the best outcomes for children. In the absence of reliable evaluation data regarding the impact of CCDF targeted funds on the quality of infant/toddler child care, CCDF Administrators may turn to general research findings on child care quality for guidance.





¹ U.S. General Accounting Office. (2002). Child care: States have undertaken a variety of quality improvement initiatives, but more evaluations of effectiveness are needed (GAO-02-897).

² Pittard, M., Zaslow, M., Lovelle, B., & Porter, T. (2006). Investing in quality: A survey of state child care and development fund initiatives. American Public Human Services Association and Child Trends http://

³ http://nccic.acf.hhs.gov/itcc/publications/evaluation.htm

Research on Quality in Child Care: Quality Indicators Identified Across Studies

What is known about quality in child care?

Ithough little is known about the impact of CCDF targeted funds on the quality of infant/toddler care, data has emerged from research into child care quality. The GAO report contains a summary of major reviewers' findings regarding child care quality – information that has become known to the field in the years since targeted funds were first made available.

Major Reviewers' Findings Regarding Child Care Quality Research

Author and review	Structural attributes that the review concluded contribute to children's developmental progress or caregivers' ability to create developmentally supportive environment	Aspects of child-caregiver interactions that the review concluded contribute to children's developmental progress
Jack P. Shonkoff and Deborah A. Phillips, eds., From Neurons to Neighborhoods	Staff wages Lower staff turnover Caregiver education Caregiver training	Caregiver continuity fosters the attachments that improve social development Verbal environment that child care provid- ers create contributes to children's cognitive and language development
Deborah Vandell and Barbara Wolfe, <i>Child Care Quality: Does it Matter and Does it Need to be Improved?</i>	Smaller group size Lower child-to-staff ratios Caregiver education Caregiver training	Emotionally supportive and cognitively enriching settings
John M. Love, Peter Z. Schochet and Alicia L. Meckstroth, <i>Are They in any Real Danger?</i> What Research Does – and Doesn't—Tell us About Child Care Quality and Children's Well-Being	Smaller group size Lower child-to-staff ratios Safer equipment and space	Appropriate caregiving Developmentally appropriate practice Caregiver responsiveness

U.S. General Accounting Office. (2002). Child Care Quality Improvement Initiatives (GAO-02-897).

More recently, a 2005 summary of current research on infant/toddler child care quality conducted by the National Center for Children in Poverty (NCCP) found that across all non-maternal child care settings, **lower child-adult ratios and smaller group sizes** were the strongest predictors of quality of all factors considered in their review, as a direct effect or as a moderator of caregiver-child interactions. A second set of factors demonstrating a positive effect on quality in infant/toddler care were related to the **education and specialized training** of caregivers, followed by **higher wages** for staff. ⁴

In 2006, a study conducted by the National Institute

of Child Health and Human Development (NICHD) concluded that child care quality was best measured in two categories: regulable and process features. Regulable features that indicate quality included adult-to-child ratio, group size, and caregiver education. Process features related to quality included positive caregiving as the strongest predictor of quality for young children in child care settings.⁵

The critical question for CCDF Administrators is how can these consistent research findings be translated into effective quality enhancements through the use of CCDF Targeted Funds for Infants and Toddlers and Quality Expansion Funds?

System Planning:

CCDF Targeted Funds for Infants and Toddlers as a Part of the Early Childhood System

his tool was developed to assist in the process of effective, strategic planning for the use of targeted funds for infants and toddlers. The goal is to maximize quality with available funds, through sound decision-making regarding planned initiatives.

Planning for Sustainability: A Systems Approach

Planning for use of the CCDF infant/toddler targeted funds offers an opportunity for States to strategically maximize the impact of targeted funds on the quality of child care for babies and toddlers.⁶ A systems approach is the most effective means of assuring sustainable quality for infants and toddlers within the context of State early childhood systems. Based on the planning process used with States and Territories participating in the National Infant & Toddler Child Care Initiative, the following suggestions may guide effective planning:

- Use a systems planning process Consider how each element of the early care
 and education system addresses the needs of babies, toddlers and their families.
 A description of these elements can be found at http://www.nccic.acf.hhs.gov/itcc/
 publications/earlycareandeducation.htm
- 2. **Develop a long range strategic plan with shorter term goals and objectives** Systems change can take a long time and it is important to build in achievable steps along the way.
- 3. **Align the strategic plan with other system planning efforts** Many States have existing plans that may just need to be revisited to ensure they adequately address the child care needs of babies and toddlers. Considerations for assessing the State's system for infants and toddlers include asking if early childhood system development efforts include:
 - a. Representation from infant/toddler programs,
 - b. Data/information on infants, toddlers, and their families,
 - c. An assessment of how available programs meet the needs of low-income, working families,
 - d. Goals/objectives/benchmarks specific to infants and toddlers,
 - e. An assessment of all early childhood system elements and their interrelationship, and
 - f. An analysis of the effects of system change on services to children under three.
- 4. Strategically align the targeted funds for infants and toddlers with the system plan Is there evidence that the current use of targeted funds is producing the desired results? If changes need to be made consider and evaluate the system impact.

⁴Kreader, J. L., Ferguson, D., Lawrence, S. (2005). Infant and toddler child care quality. National Center for Children in Poverty

⁵ National Institute of Child Health and Human Development. (2006). *The NICHD study of early child care and youth development: Findings for children up to age 4 ½ years* (NIH Publication No. 05-4318). Washington, DC: U.S. Department of Health and Human Services.

Making the Most of Targeted Funds for Infants and Toddlers

ow can State and Territory planning teams determine which initiatives will make the greatest improvements in quality for infants and toddlers?

Assess the overall quality of infant-toddler child care in your State or Territory.

As with any critical planning process, knowing current status relative to the goal is essential to moving forward effectively. The challenges and time constraints of a rigorous evaluation prevent most States from accomplishing a comprehensive assessment. However, much can be learned by involving a group of informed leaders in a survey or focus group designed to offer a glimpse of the quality of infant-tod-dler care across the geographic and economic strata of your State, at the program and system level.

Working within existing groups or planning initiatives focused on young children can assist with this process. Such groups might include State licensing representatives, tribal representatives, CCR&R's, State Head Start Associations, State teams involved with the National Infant/Toddler Child Care Initiative, or any State-level early childhood planning or coordinating boards, such as the Early Childhood Comprehensive Systems (ECCS) planning teams. Integrating Infant and Toddler targeted funds activities with existing planning efforts will assist in keeping targeted funds activities aligned with State system goals, as well as supporting systemic progress toward a continuum of quality early care and education for all children.

Looking at Quality:

How does the State system measure up to research-based indicators?

The following questions may guide discussion to assess the quality of infant-toddler care, relative to indicators identified in the national research:

- Do State licensing rules provide for research-based indicators of quality such as **caregiver-child ratio** and **group size** that meet the needs of infants and toddlers? Examples of existing standards include State or national accreditation standards, those set forth by State quality rating systems and Early Head Start Performance Standards.
- If current State standards do not meet ratios identified as optimal for infants and toddlers, what percentage of programs voluntarily exceed licensing standards and meet quality indicators for ratio and group size?
 - What incentives are in place for programs to achieve quality indicators?
- What systems are in place that require or offer incentive **for caregiver education** or **specialized training** in all child care settings?
 - If systems are present, what percentage of infant-toddler caregivers participate in these systems?
 - If no systems are in place, what is known about the level of education of infant-toddler caregivers in your State?
- How is quality supported in unlicensed/unregulated (family, friend and neighbor) care?

Consider current and past use of funds targeted for infants and toddlers.

With the intended outcome that targeted funds increase the quality of care for infants and toddlers, the next step is to take a look at the practice-to-outcome connection to see if past targeted funds activities have had a positive impact in your state.

Looking at Targeted Funds Activities:

What outcomes have resulted from past use?

A variety of initiatives have been supported by the CCDF since FY1998. Consideration of the following questions will assist States to determine which initiatives will be most effective in enhancing quality for babies and toddlers:

- What activities have been supported through targeted infant-toddler funds in the past?
- Have low-income, working families benefited from past initiatives?
- What information is known about outcomes related to these activities?
 - What outputs from past targeted funds use can be measured? Examples include such numbers as the increase in children served and teachers trained, or monies distributed through grants to enhance facilities and materials.
 - What is known about outcomes from these activities? Considerations may include the quality of expansion settings, retention of trained teachers, and sustainability of initial increases in ITERS scores.
- What evidence exists that past and current use of targeted funds contributed to an increase in quality for infants and toddlers?
 - What evaluation system is in place to assess outcomes of the activities put in place through targeted funds for infants and toddlers?
 - If none, what indicators demonstrate that past use has improved quality for infants and toddlers?
- Do past activities align with current system goals?
 - How do previous initiatives fit within the scope of early childhood system planning overall?



8

Plan for quality for infants and toddlers in child care.

Effective decision-making stems from consideration of relevant information. When responses to the questions above have been gathered across geographic settings and from a variety of early childhood leaders, results can be compiled and considered for discussion, analysis, and prioritization.

Planning for Quality:

Analyzing to determine the most effective use of targeted funds for infants and toddlers

In thinking intentionally about how to use targeted funds for infants and toddlers most effectively, the information gathered in the planning process may be summarized to guide decision-making toward improving the quality of child care for children birth to three. The following questions can be used to frame the decision-making process, and lead to the most effective use of targeted funds for infants and toddlers:

- What are the indicators of quality established in research?
- What is the current status of quality in our State?
- What indicators of quality demonstrate the greatest gap between current status and what is known through research to support quality for infants and toddlers?
- How have outcomes from past initiatives contributed to current quality?
- Considering infants and toddlers from an early childhood systems perspective, what are the most important priorities?
- Which infant/toddler targeted fund initiatives will support these identified priorities?

Summary

he CCDF established Targeted Funds to improve the quality of child care for infants and toddlers to ensure high quality environments and interactions. The first step in planning for effective use of these funds is to assess the current status of quality initiatives in your State or Territory. The next step is to look at your past use of funds, and determine whether or not these activities have contributed positively to the quality of care for infants and toddlers, including those from low-income, working families. Finally, it is important to take a close look at any systemic gaps between the quality infants and toddlers need and the current situation, and plan strategically to use targeted funds for infants and toddlers to make a positive difference.





10