

Examples of Activities That Support Key Elements³

Public Knowledge & Engagement includes activities such as media campaigns, presentations/workshops, or publications that inform the public about the importance of high quality care and build support for improving the quality of infant and toddler child care.

Planning, Research & Evaluation includes activities such as development of system benchmarks/indicators, data collection/reporting, evaluation, creation or support of planning groups, or development of strategic plans.

Financing includes examination of resource allocation, investigation into adding flexibility to categorical programs to maximize funding use, and creation of partnerships to facilitate discovery and use of new funding sources.

Federal, State & Local Policy includes family leave policies that allow parents the choice to stay home with their babies, subsidy policies that provide incentives for providers and programs to meet standards beyond those required by licensing, and policies that encourage and reward collaboration among related service providers.

Licensing & Regulations includes activities such as monitoring, enforcement and efforts to improve ratios.

Program Standards includes activities such as accreditation grants, technical assistance and support, tiered reimbursement or bonuses.

Early Learning Guidelines includes activities that involve development, distribution or evaluation of child outcomes for infants and toddlers.

Professional Development includes activities such as conferences/lectures, training, scholarships/stipends, development/distribution of training resources, infant/toddler specialists, credentials/certificates, mentoring, and compensation/benefits for caregivers.

Child Care Resource & Referral includes activities administered through CCR&R such as consumer education, infant/toddler specialists, planning, training/technical assistance and resources for training that strengthen the ability of CCR&R to address the needs of infants, toddlers, their families, and their caregivers.

Child Care Settings & Activities includes activities that support family child care, informal providers and campus-based child care, and efforts that are targeted to special populations such as teen parents, homeless children, or children in foster care. Activities under this element also include efforts to implement curriculum and to establish model programs or centers of excellence.

Facilities includes activities such as enhancement/expansion grants, higher reimbursement rates or bonuses based on the presence of infants and toddlers, lending libraries, start-up grants and technical assistance provided to programs.

Parent & Family Involvement includes activities such as home visiting, development/distribution of parent resources such as parent tool boxes or consumer education materials, parent training, and warm lines.

The element of **Caregivers** is usually addressed through activities under professional development.

³The Initiative recognizes that many States and Territories are implementing activities that address the health and safety of infants and toddlers, such as public health nurse consultation, efforts related to preventing Sudden Infant Death Syndrome, and other prevention/intervention programs, although Health & Safety is not represented on the system graphic. Also, although collaboration is not represented visually, the model recognizes that collaboration is an essential element of a well-functioning system.

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Child Care Bureau



Keys to High Quality Child Care for Babies and Toddlers



CCDF Quality Infant/Toddler Earmark

The Child Care and Development Fund (CCDF) earmarks funds for quality activities targeted to infants and toddlers. This fact sheet presents a national picture of how States and Territories are using infant/toddler earmark funds from information submitted in FY2004-2005 State and Territory CCDF Plans. The information is organized using the ecological model of early care and education systems developed by the National Infant & Toddler Child Care Initiative. The model identifies and describes key elements of an early care and education system that supports quality care for babies and toddlers¹. This model is used to map State and Territory early care and education activities, identify system strengths and needs, and inform the planning of future efforts.

Key Elements Supported with CCDF Quality Infant/Toddler Earmark Funds²

- **Professional Development:** Over 90% of States and Territories reported using the earmark to support professional development, most often through training, scholarships/stipends, and infant/toddler specialists. Training efforts were sometimes linked to a credential or certificate, and scholarships/stipends were provided to obtain training or as a reward for completion of training.
- **Facilities:** Over 50% of States and Territories reported using the earmark to support facilities. These efforts most often involved enhancement/expansion grants, technical assistance, and higher reimbursement rates based solely on the presence of infants and toddlers.
- **Child Care Resource & Referral:** About 30% of States and Territories reported using the earmark to help child care resource and referral programs in efforts to serve infants, toddlers, their families and their caregivers, mostly by supporting training and technical assistance activities.
- **Child Care Settings and Activities:** About 25% of States and Territories reported using the earmark to support child care settings and activities. There was no prevailing support for any one type of caregiver or parent population, but several states reported support specific to kith and kin providers, family child care, and teen parents. Programs were most often supported through efforts related to equipping and maintaining them as model programs.
- **Parent and Family Involvement:** About 20% of States and Territories reported using the earmark to support parent and family involvement, most commonly through parent training and resources.
- **Program Standards:** About 17% of States and Territories reported using the earmark to support program standards, most often through tiered reimbursement based on the programs meeting requirements beyond those mandated by licensing and regulations. About an equal number of States reported activities related to helping providers and programs in meeting these requirements through technical assistance or accreditation grants.
- **Early Learning Guidelines:** Although only 2 States mention the development of early learning guidelines for infants and toddlers as an activity supported by earmark funds, over 40% of States and Territories already have them or are at some stage in the process of developing them.



¹ The characteristics of each key element are described in more detail in another document developed by the Initiative titled "Early Care and Education Systems That Support Quality Care for Babies and Toddlers: Key Elements". Examples of activities for each element are included on the back page of this document.
² The inside of this document describes selected State and Territory activities for each element. The intention of the inside of this document is to share real examples of activities under each element; it is not intended to be a comprehensive report of State and Territory infant/toddler earmark activities.



Public Knowledge & Engagement: 2 States

- **Washington** provides public awareness and education about brain development as part of the **BrainNet** initiative, which produces publications and provides presentations through groups of trainers ("Brain Squads") in local communities.
- **Alaska** plans to educate and engage business and community partners to support working parents, particularly families with infants and toddlers.

Financing

No States or Territories reported using the earmark for activities related to financing.

Federal, State & Local Policy: 1 State

- **Oklahoma** uses the earmark to support (in conjunction with various other entities) the **Better Baby Care Campaign** to improve and provide visibility to policies that govern the quality of infant-toddler care, parent education, family support, and family-friendly practices in the workplace.

Licensing & Regulations: 1 Territory

- The **Virgin Islands** use earmark funds to support monitoring of all licensed and registered centers, in conjunction with the Office of Licensing and Regulatory Services.

Professional Development: 48 States and 3 Territories

- Utah and Wisconsin provide training that is tied to an infant/toddler endorsement or credential. **Utah's Infant Toddler Endorsement** requires 40 hours of specialized training that is provided through the CCR&R system. Caregivers interested in **Wisconsin's Infant/Toddler Credential** complete 12 credits of coursework, which includes a Capstone Experience during which students compile a portfolio that is reviewed before the credential is granted.
- Training provided for infant/toddler caregivers in the Territories have varying foci. In **American Samoa**, training focuses on the development of age-appropriate activities. **Guam** provides training that helps caregivers develop knowledge and skills to include children with special needs. Workshops and conferences in the **Virgin Islands** address specific child and health and safety issues.
- In **West Virginia**, providers who complete the **One Step at a Time** training receive a bonus of \$400 for their participation. Similarly, **Iowa** caregivers that attend the full 40 hours of **PITC** training receive a bonus of \$200. **Montana** caregivers who participated in the **Infant Toddler Demonstration Project** and completed their Infant/Toddler Certification received wage stipends based on the number of infants and toddlers in their direct care.
- Scholarships and stipends are also granted to help providers obtain training that leads to an infant/toddler CDA or credential (e.g. **New York, Texas** and **Rhode Island**). In 3 States, **Wisconsin, Minnesota** and **North Carolina**, this was accomplished by dedicating earmark funds to the state's **T.E.A.C.H.** program.
- **Oklahoma** reports distribution of a video on developmental stages for infants and toddlers with age-appropriate activities that is distributed to caregivers by licensing staff. The video also informs providers about health and safety issues (i.e., immunizations and SIDS). **South Carolina** also provides an extensive list of appropriate materials and equipment and has developed a **Plan a Room Guide for Infants and Toddlers**.
- **Oregon** reports using the earmark to support infant and toddler providers who participate in the **Statewide Mentoring Program** administered by Portland State University.

CCR&R: 18 States

- In **Kentucky**, the earmark supports **Infant/Toddler Specialists** employed by CCR&R agencies. Earmark funds also provide CCR&Rs with the option of purchasing first aid or CPR training for registered or certified providers and the option of developing or purchasing consumer education materials for parents.
- **New York** is working to establish 7 regional **Infant Toddler Technical Assistance Centers**. This initiative will be implemented by the state-funded CCR&R agencies to provide technical assistance, resources and training to providers who serve or are planning to serve infants and toddlers.
- **Minnesota's** CCR&R Network will convene to plan for system-wide improvements in infant and toddler care through development of a comprehensive work plan that will serve as a roadmap for state policy on infants and toddlers.

Facilities: 31 States and 2 Territories

- Six states (**Illinois, Louisiana, Missouri, Nebraska, New Mexico, and Vermont**) reported using the earmark to support a higher reimbursement rate for the presence of infants and toddlers. **Illinois' Infant and Toddler Incentive Program** pays up to a 10 percent add-on to centers that serve a high number of subsidized children two years old or younger (homes and group homes are not eligible for this program).
- Several States link monies granted for enhancement or expansion with training. In **Maine**, caregivers receive equipment stipends of \$500-\$1,500 (depending on how many new spaces they plan to add, from 1 to 3) upon completion of a weeklong **Infant Toddler Summer Institute**. **New Hampshire** caregivers who complete the Wheelock graduate seminar "*Caring for Infants and Toddlers*" and agree to increase their capacity by 4 babies are eligible for \$4,000 equipment grants to improve their environment after the course. Grants administered by the **Minnesota** CCR&Rs to increase the capacity of infant/toddler care require participation in the **Infant/Toddler Intensive Training Project**.

Planning, Research & Evaluation: 7 States

- The **Georgia Outcome and Indicator Framework for Birth to Three-Year-Olds** provides benchmark indicators to evaluate programs for children up to 4 years in the areas of: developmental outcomes for young children; child and family well being; quality of and access to services, and systems capacity.
- **Oklahoma** is conducting research with 41 infant/toddler teachers in Tulsa to determine the impact of *Creative Curriculum for Infants and Toddlers* and mentors. The I/T Earmark also supports various organizations in their data collection and reporting of information about supply and demand for infant and toddler care.
- The **Infant and Toddler Services Summit** in **Massachusetts** has collected data to assess current services for children birth to three and their families with the goal of developing a comprehensive plan for the future of these services. The Summit is focusing on workforce development and mental health services for infants and toddlers through two workgroups.

Program Standards: 10 States

- **Massachusetts** instituted tiered reimbursement linked to specific quality standards emphasizing literacy. For infants and toddlers the standards included having age-appropriate books, reading and repeating nursery rhymes to individual infants and toddlers daily, and submission of a daily curriculum that included daily literacy activities. Participating programs must use the **ITERS** for annual assessment and development/implementation of improvement plans.
- Two States report using the earmark to support infant and toddler caregivers' participation in broader programs that offer technical assistance to support meeting standards beyond those required by licensing. In **New Mexico**, **AIM HIGH** assists providers with program improvement and encourages them to work toward accreditation. **Pennsylvania's Keystone Stars** program provides services to help providers meet performance standards associated with one of the four star levels in the State's rating system.

Early Learning Guidelines: 2 States

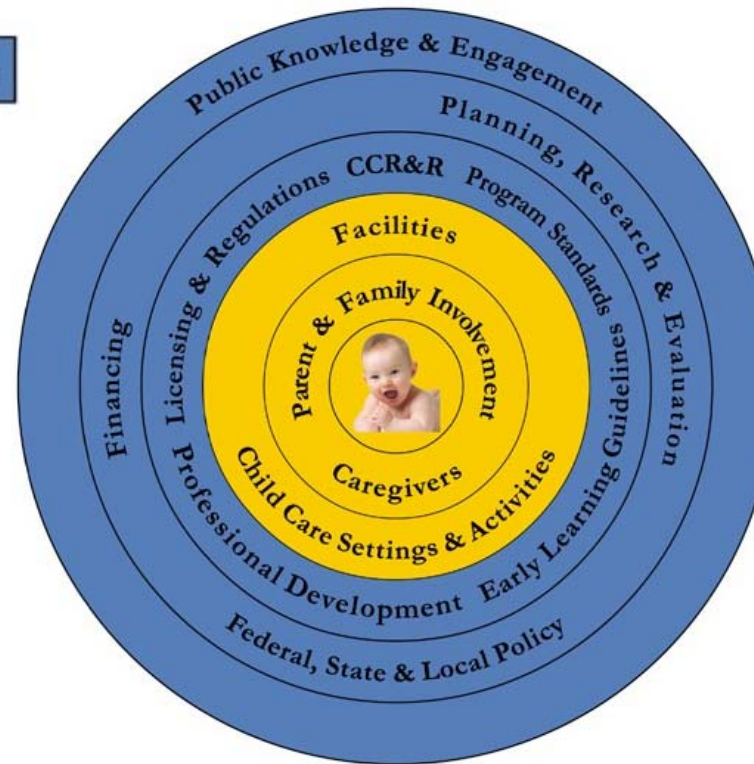
- The **Arkansas Framework for Infant and Toddler Care**, includes strategies and activities to guide caregivers, as well as parents who decide to stay at home with their infants and toddlers. An accompanying brochure (*Picture This*) illustrates the framework's six developmental strands through vignettes.

Parent & Family Involvement: 9 States and 2 Territories

- **Nevada** sponsored the development of an **infant checklist** as a resource to help parents identify quality infant care.
- Two States used earmark funds to support development and distribution of parent tool boxes. In conjunction with other agencies, **Virginia** supported distribution of a **New Parent Tool Kit** as part of the Governor's Education for a Lifetime Initiative. In **South Dakota**, a Parent/Infant Welcome Box is sent to every newborn infant as part of the Governor's **Bright Start** initiative and parents of children birth to three are offered a 6-week Responsive Parent Training course.

Infrastructure

Direct Services



Child Care Settings & Activities: 15 States

- In **New Jersey**, staff at CCR&R agencies support caregivers in approved homes (settings that meet child care safety requirements, but are not state registered), by providing on-site training and technical assistance, safety equipment, and books. The majority of the children cared for in these settings are infants and toddlers. **Michigan** also supports informal infant and toddler caregivers by giving them priority for public and mental health consultation, and through the **Early Head Start Expansion/Informal Care Providers Demonstration Project**.
- Two states reported support for family child care. **California** uses the earmark to support the development of new family child care associations through grants and training, and to fund the **Child Care Initiative Project**, which recruits and trains family child care providers. **Home Recruitment Contracts** (in place in all 15 **Arizona** counties) provide recruitment, evaluation, training, technical assistance and one time assistance with costs associated in meeting certification requirements (e.g., fingerprinting, fire extinguishers, smoke alarms, immunizations, etc.) to individuals interested in becoming certified family child care providers.
- Several states report support to model programs that exemplify quality to others in the state. **Tennessee** has 16 sites practicing PITC that will be maintained as model sites and that have received substantial monies for equipment and resources. The lead agency in **South Carolina** reports participation in the public-private partnership that created the **University of South Carolina/Gateway Academy Child Development and Research Center**. The interior of this center of excellence was designed by a national consultant in infant/toddler environments, and it will be open to providers seeking strategies on creating appropriate environments for infants and toddlers.