

Joint Task Force on Access to Quality Affordable Child Care

Report pursuant to House Bill 2346 (2019)

December 2020

TASK FORCE MEMBERS

15				
16	Legislative Branch Appointees (nonvoting)			
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18	36	enate		
19 20	1	Kathleon Toylor, State Sepater, Oregon Lagislature		
20	1. 2.	Kathleen Taylor, State Senator, Oregon Legislature Tim Knopp, State Senator, Oregon Legislature		
21	۷.	Thin Khopp, State Senator, Oregon Legislature		
22	На	Duse		
24				
25	1.	Cedric Hayden, State Representative, Oregon Legislature		
26	2.	Karin Power, State Representative, Oregon Legislature		
27				
28	Execu	utive Branch Appointees (voting)		
29				
30	1.	Regan Gray, Child Care Policy Advisor, Family Forward		
31	2.	Swati Adarkar, Cofounder, President and Chief Executive Officer, Children's		
32		Institute; replaced by Dana Hepper, Director of Policy and Advocacy, Children's		
33		Institute, effective by August 11, 2020 meeting		
34	3.	Jenny Lee, Deputy Director, Coalition of Communities of Color		
35	4.	Ron Herndon, Director, Albina Head Start		
36	5.	Elanna Yalow, Chief Academic Officer, KinderCare Education		
37	6.	Josie Emmrich, Owner and Child Care Provider, Loving Beginnings Certified		
38	7	Family Child Care		
39 40	7.	Natalie Jackson, Owner and Child Care Provider, Bear Bear Regulated Subsidy Child Care		
40	8.	Yolanda Morales, Parent, Refugee Welcome Center		
42	9.	Parent vacancy; Celese Williams effective by September 8, 2020 meeting		
43	10.	Brenda Comini, Director, Early Learning Hub of Central Oregon		
44	11.	Marie Simonds, Program Manager, Wild Rivers Coast Alliance		
45	12.	Miriam Calderon, Early Learning System Director, Oregon Early Learning		
46		Division		
47	13.	Dan Haun, Self Sufficiency Programs Director, Oregon Department of Human		
48		Services		
49				
50	TASK	Force Staff		
51				
	Amie	Fender-Sosa, CounselC. Ross, CounselSamantha Koopman, Assistanttive Policy and Research OfficeLegislative Policy and Research OfficeLegislative Policy and Research Office		
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54		egislative Policy and Research Office provides nonpartisan research, issue analysis, and staffing		
55 56	services for the Legislative Assembly. The Legislative Policy and Research Office does not provide legal advice. This document is current as of the date of publication; subsequent action by the legislative,			
50 57	executive, or judicial branches may impact accuracy.			
58				

59 60 62 63 66 66 66 70 71 72 73 74	Co-Chairs: Rep. Karin Power Sen. Kathleen Taylor Staff: Amie Fender-Sosa, Counsel C. Ross, Counsel Samantha Koopman, Sr. Committee Assistant	Members: Rep. Cedric Hayden Sen. Tim Knopp Miriam Calderon Brenda Comini Josie Emmrich Regan Gray Dan Haun Dana Hepper Ron Herndon Natalie Jackson Jenny Lee Yolanda Morales Marie Simonds Celese Williams
75 76 77 78 79 80	80 th LEGISLATIVE ASSEMBLY JOINT TASK FORCE ON ACCESS TO QUALITY AFFORDABL State Capitol 900 Court St. NE, Rm. 453 Salem OR 97301 503-986-1813	E CHILD CARE
81	Executive Summary	
82 83	[recommendations will be summarized here once finalized – two pa	ge limit]
84 85 86	The Joint Task Force on Access to Quality Affordable Child Care established by <u>House Bill 2346 (2019)</u> .	(the Task Force) was
87 88	The Task Force recommends the following to increase eligible fami subsidies, as required by House Bill 2346:	lies' use of child care
89	•	
90	•	
91	•	
92 02	The Teely Force also recommende the following to even a	acco to high quality
93 94 95	The Task Force also recommends the following, to expand ac subsidized child care for families that are not currently eligible for who cannot otherwise afford or access child care, as required by He	subsidized child care
96	•	
97	•	
98	•	
99		
100 101	The Task Force volunteers the following additional recommendat House Bill 2346:	ions, not required by
102	•	
103	•	
104	•	
105		

- 106 Members of the Legislative Assembly may obtain a copy of the report from the
- 107 Legislative Policy and Research Office's website: *[insert URL]*.
- 108
- 109
- 110
- 111
- 112 Representative Karin Power, Chair
- 113

Senator Kathleen Taylor, Chair



114 115	[insert internal hyperlinks]
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117	BACKGROUND
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- 126 BACKGROUND
- 127 128 **Creation**
- 129

The Joint Task Force on Access to Quality Affordable Child Care (the Task Force) was established pursuant to House Bill 2346, which was enacted during the 2019 regular legislative session. Given the large number of participants required by the measure, the appointments took some time to complete. Task Force formation was also delayed by the occurrence of the 2020 regular legislative session, and the ongoing worldwide pandemic outbreak of COVID-19.

136

The Task Force convened its first meeting on April 29, 2020. Its members organized themselves, committed to an every-other-week regular meeting schedule, and immediately began the first of many discussions probing the relevancy of the originating legislation and its specific directives in light of the pandemic. The members met remotely only a total of 16 times over the course of eight months, never in person.

- 142
- 143 Mandate
- 144

House Bill 2346 directed the Task Force to make recommendations to the legislature byDecember 31, 2020, to achieve the following:

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- to increase eligible families' use of child care subsidies; and,
- to expand access to high-quality, subsidized child care for families that are not currently eligible for subsidized child care who cannot otherwise afford or access child care.

154 The measure further required specific consideration of the following items as the Task 155 Force developed its recommendations:

- Availability of high-quality child care providers that meet the needs of families,
 including culturally specific care and workable hours of operation.
- Copayments.
- Burdensome administrative practices and requirements.
- Reimbursement rates.
- Economic stability of families receiving child care subsidies.
- Access to professional development and quality supports.
- Access to child care that allows parents to work and provides positive development
 opportunities for children.
- 166 167
 - [links and roadmap here]
- 168

169 PROCESS

170

171 The Task Force agreed to allow for flexibility and deviation from the directives contained 172 in the originating legislation as appropriate to accommodate pandemic-related discussions, participant's spontaneous suggestions, and other ad hoc changes in 173 emphasis or direction. A loose and adaptable work plan was developed to that end; 174 175 COVID-19 updates were incorporated at the beginning of almost every meeting; and the Task Force sought feedback from both the Governor's office and Legislative branch 176 leadership regarding its utility, best use, and potential shift in focus. The Task Force also 177 178 extended the deadline for receipt of a report on child care supply/demand and barriers to 179 subsidies, from June 30th (as required by the originating legislation) to September 30th. A small library of reference materials accumulated [Appendix], and the Legislative Fiscal 180 181 Office was asked to survey materials relevant to economic recovery and economic 182 development, and to provide an economist's perspective on the connection between child care and Oregon's economic recovery. 183

184

185 ACTIVITY

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187 The Task Force moved through a wide variety of presentations and information, including: overviews of the general child care landscape in Oregon and other states, both 188 189 pre-pandemic and ongoing; receipt of a December 2019 report required by the originating legislation on existing child care subsidy programs;¹ the economics of child care; 190 191 Oregon's revenue forecasts; the merits of developing a problem statement, and / or 192 guiding principles, and / or short and long-term plans; proposed investments to meet 193 immediate child care needs; provider experiences and perspectives; parent perspectives; 194 the needs of vulnerable populations; equity considerations; governance models in other 195 states; subsidy administration in other states; regional collaborations within Oregon; receipt of September 2020 reports on the supply of and demand for child care and on the 196 197 barriers to accessing existing child care subsidies as required by the originating 198 legislation; and shared-services models for child care businesses. [insert links].

199

200 Some novel impediments arose as a function of meeting only by phone and video, not only with regard to Task Force connectedness and communications, but also with report 201 202 drafting. With only a handful of meeting dates remaining by late September, the Task 203 Force attempted to organize itself into small groups to expedite development of feedback 204 and suggestions for discussion and consideration by the larger group, as follows:

- 205
- 206
- 207 208

209

212

Governance – including regulatory schemes, oversight, controlling agency or agencies, administration

- 1. Brenda Comini
- 2. Dana Hepper
- 210 211 3. Regan Gray
 - 4. Marie Simonds

213 214	 5. Celese Williams 6. Miriam Calderon
215 216	Child Care Workers – including wages, career progression, training and
217	continuing education
218	
219	1. Jenny Lee
220	 Josie Emmrich Elanna Yalow
221 222	4. Yolanda Morales
223	5. Natalie Jackson
224	6. Miriam Calderon
225	
226	Funding / Cost – including subsidies, copays, funding sources / financing,
227	affordability
228	1. Brenda Comini
229 230	2. Dana Hepper
230	3. Regan Gray
232	4. Dan Huan
233	5. Elanna Yalow
234	6. Ron Herndon
235	
236 237	Child Care Providers – including start-up barriers, administrative barriers, reimbursement
237	Teimbulsement
239	1. Marie Simonds
240	2. Josie Emmrich
241	3. Natalie Jackson
242	4. Yolanda Morales
243	5. Celese Williams
244 245	6. Dan Huan
243 246	Small group activity was not uniform or equal across groups or across participants: some
247	groups organized multiple meetings while others did not; some participants attended
248	multiple meetings, while other participants did not. Written feedback provided by small
249	groups can be found at Appendix
250	
251 252	
232	

253	
254	
255	key, roughly
256	
257	green = staff notations
258	
259	orange = small group on child care businesses
260	
261	mustard = small group on funding
262	
263	purple = small group on governance
264	
265	blue = small group on child care workers
266	
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268	0 -11-2
269	GOALS
270 271	Oregon's child care system should provide equitable access to developmentally
272	appropriate, culturally relevant and inclusive child care for children and families across
273	race, ethnicity, language, geography, disability, and income levels.
274	
275	Oregon's child care assistance programs should be affordable, accessible (culturally
276	relevant, inclusive, offering the types of care needed/wanted when needed and in the
277	preferred child care setting), easy to navigate (for enrollment and coordination for those
278 279	using multiple programs), and should support child development.
279	Oregon's child care system should be universal, equitable, and truly work for all
281	families.
282	
283	FINDINGS
284	
285	The System
286 287	Oregon's child care system is failing. It is chronically underfunded. Quality care is not uniformly
288	available or affordable. Oregon's children, parents, providers, and communities – particularly
289	those that are already marginalized or disadvantaged – as well as Oregon's employers,
290	economy and education system are all adversely impacted.
291	Quotom gono oquoo dioporitioo bu roco/othoisitu longuego, geographu, diophilitu and
292	System gaps cause disparities by race/ethnicity, language, geography, disability, and
293 294	income, and these disparities compound (i.e., barriers are greater if you are Native American and live in remote, rural Oregon). (OSU Child Care Studies. ²)

Achieving system goals are necessary for Oregon's children, parents, child care providers, and the economy.

297

Public financing for child care is required to enable the achievement of the goals stated

above; to ensure quality, affordability, and availability statewide. (Landmark

300 Transforming the Financing of Early Care and Education report from the National

301 Academies of Sciences, Engineering and Medicine.)

302

303 Immediate preparation in the form of centralized governance is necessary in advance of 304 public investment to ensure the most efficient and effective administration, in order to

- 305 maximize the benefit.
- 306

307 Bifurcated governance is confusing and inefficient. The state's largest child care

308 program, Employment-Related Day Care (ERDC), and Inclusive Partners are both

administered by the Department of Human services (DHS), while the Early Learning

- 310 Division (ELD) (within the Department of Education) regulates child care, implements
- 311 strategies to increase the supply of quality care, and administers PreSchool Promise,
- 312 Oregon PreK Head Start, and Baby Promise programs. This is confusing to parents and
- 313 providers, especially those enrolled in multiple child care programs, and makes it 314 impossible to enact a coordinated child care purchasing/spending and policy strategy
- 315 that builds up the financial stability of the sector and increases equitable supply and
- 316 affordability of child care for families. Inclusive Partners³, funded by Child Care and
- 317 Development Block Grants (CCDBGs) and often embedded in child care resource and
- 318 referral entities (CCR&Rs or 211) (also in ELD), assists child care providers serving
- children experiencing high needs. Co-housing all child care programs together would
- 320 create better communication with providers and parents. In addition, ELD is in the
 321 Department of Education (ODE), not in a stand-alone agency. This poses challenges as
- 322 ELD is reliant upon ODE for administrative and other functions such as human
- 323 resources, engagement in the Governor's budget and policy development process,

information technology development, etc., services that are essential for ELD to achieve

- 325 its mission.
- 326

327 Necessary data about the real-time supply of and need for child care is not current, not 328 useful, and its collection and maintenance is cumbersome and inefficient. Information 329 about the supply of child care is collected manually through CCR&Rs and self-reported 330 by child care providers through emails or over the phone. This results in labor-intensive 331 data collection to maintain a list of current available openings and monitor equitable 332 supply across the state. When assisting families looking for child care, 211 gathers information from them and provides general referrals but no navigation assistance, and 333 334 they are limited in their capacity to serve multiple languages and geographically diverse 335 requests. Overall, the information they gather from parents is limited and does not include demographics. In addition, there is a network of unlicensed or unregulated 336 providers with no reporting mechanisms that are not captured, so Oregon has no idea 337 338 how many children receive care in informal settings. On the demand side, Oregon has 339 no verifiable way to collect data on the number of parents needing/looking for care and

³

no way to measure the demand by provider type or characteristics of child care settings.

341 Oregon currently uses American Community Survey (ACS) and census data to *guess*

the level of demand. Without a better data system, it is difficult to help parents find child

care providers with openings or make strategic investments to increase supply in areas

of need. There is also a need for better enrollment/eligibility systems and payment

systems for child care assistance programs. Current systems (legacy, DPU⁴ and ONE⁵)
 still limit ERDC program administration from implementing best policies for providers

- 347 and parents.
- 348

349 Children

350

A child's early years are critical to their physical, cognitive and socio-emotional

development. Yet, affordable quality child care (that does not exceed seven percent of a

353 household's income) does not exist for most families unless/until substantial public

investment begins (when school starts for children at age 5). Access is also starkly

355 inequitable: Black and Latinx communities, parents of children with disabilities,

356 low-income families, and those living in rural areas have even greater difficulty obtaining

357 care for their young ones. Child development is not supported across all child care

358 settings. The supply of child care across the state for all ages and types of care needed

359 is not sufficient. *Quality* child care is what makes a difference in the trajectory of child

360 development and effectively supports parent work, college, and other essential

activities. A lack of funding now for a system envisioned for the future does not excuse
 failures to make needed improvements to child care in Oregon. Failing to support early

childhood development at the *front* end deprives children of equal opportunity, *at minimum*, and at worst: deprives them of their own future, their own potential, while

365 substantially increasing societal costs on the *back* end.

366

367 Child Care Businesses

368

The supply of providers in all communities across the state, providing the care that
 those communities need, is not sufficient.⁶

371

372 Oregon's system of child care is decentralized. Governance is bifurcated, inefficient,

373 and confusing for parents and providers. There are significant barriers for providers to 374 start-up or sustain operations – it is a month-to-month struggle with no operating capital

to spare, no ability to be flexible in support of children and parents, and no cushion to
 weather setbacks or difficulty of any kind.

377
378 Child care governance and funding is split across multiple agencies with different
379 missions and priorities.⁷

380

⁵ integrated eligibility project, https://www.oregon.gov/DHS/ABOUTDHS/DHSBUDGET/2015201

⁴ data processing unit

- 381 Child care businesses do not have financial stability, or business models that work, or 382 tuition rates that cover the actual / true cost of care.
- 383

385

- 384 Child care businesses operate on razor thin margins. (Pratt, Study C.)
- Current payment practices (in Direct Pay Unit⁸) create financial challenges for providers.
 (Pratt, Study C.)
- 388

Providers set tuition rates based on what parents can afford, not what the true cost of
 providing care is. Uncollected parent copays are a financial burden on providers. (Pratt,
 Study C.)

392

There is misalignment between licensure requirements and the cost of providing quality
 child care with Oregon's per-child funding/financing approach. Essentially, child care
 businesses often cannot balance their budgets.

396

397 Layers of state and local regulations are inconsistent and enforced by various

- 398 authorities. Not having one clearinghouse for child care businesses and licensing
- 399 regulation creates barriers for providers to start or maintain viable businesses. Child
- 400 care businesses must navigate numerous regulatory bodies to start a new child care
- 401 setting. Local and state governments add additional requirements that hinder
- 402 businesses from opening (bus fees, zoning, Fire Marshall, special use permits). This 403 creates an unnavigable mess and disincentivizes supply-building. In addition, some
- 403 creates an unnavigable mess and disincentivizes supply-building. In addition, some
 404 licensing or regulatory standards in the Office of Child Care⁹ are difficult for smaller
- 405 communities to comply with and be financially sustainable, especially since they have a
 406 smaller employee pool to draw from. Providers report exemptions are inconsistently
- 407 applied, and background checks are inconsistent across child care settings.
- 408

409 Oregon currently provides inconsistent support for child care providers to foster child
 410 development.

411 developmen

412 Child Care Workers

413

Overview: The adults caring for and educating young children in child care settings are 414 415 the single most important factor in the quality of that setting. Yet, state and federal funding have historically been insufficient to guarantee that those adults – henceforth 416 referred to as the child care workforce - receive adequate **compensation**, working 417 conditions that allow economic, physical, and socioemotional well-being to be met, and 418 career pathways that facilitate access to education, training, and supports necessary to 419 420 increase knowledge, skills, and degrees or credentials. Addressing these issues, along with **recruitment and retention**, will be key to ensuring Oregon's children and families 421 have access to a child care system that meets their needs. 422 423

424 425 426 427 428 429	Compensation: Child care workers are paid poverty wages, yet, they perform an incredibly valuable job and an essential service for children, parents, and society. (Pratt, Study C.) The majority of the child care workforce makes minimum wage; very few child care workers have robust benefits; families cannot afford to pay the higher tuition needed to increase wages or benefits and current subsidy (ERDC) rates are not targeted toward supporting robust pay or benefits.
430 431 432 433	Working conditions and supports: Child care jobs need to be good jobs, including predictable hours, sick leave, and ensuring there are additional supports for child care workers in addressing the needs of children and families.
434 435 436 437 438 439 440	Career pathways: Current career pathways are not supported with community-based training; they are unrealistic with little to no support for formal education attainment; higher education programs are not accessible for the current workforce; no articulated ways of advancing in one's career; Family, Friend, and Neighbor care providers have little access to professional development.
441 442 443	Recruitment and Retention: One-quarter of the workforce turns over annually, meaning that 25% of the workforce needs onboarding and new training annually; many programs cannot find staff that meet licensing requirements to hire.
444 445	Parents
446 447	There is no easy way for parents to find openings or for providers to report openings.
448 449 450	Eleven percent of families who are federally eligible for subsidized care actually get support, and even families who are above eligibility need help.
451 452 453	Oregon relies more heavily on parent tuition and less on public financing than other states. (Pratt, Study B.)
454 455 456	Average length of utilization of the current subsidy program has been 4 months.
456 457 458 459 460	Seventy percent of child care financing comes from parents. The high cost of child care is prohibitive for many parents. Even parents who receive a subsidy have unaffordable co-pays in Oregon. (Pratt, Study C.)
461 462 463 464	In recent years, Oregon has ended the biennium with a surplus in the Employment Related Day Care program even while most Oregon families cannot afford child care. The surplus is due to under-enrollment in the program caused by requirements that create barriers for parent and provider participation.
465 466 467 468 469	Parents can suffer lost wages, damaged or delayed career paths, and inhibited earning potential over time, affecting potential financial security and stability at retirement, as a result of unavailable, deficient, or unstable child care, that disproportionately impacts those who are already marginalized or disadvantaged, the worst.

470

471 Employers and the Economy

472 473 Child care work allows all other work to happen. Child care is a *linchpin* – it is necessary 474 - for economic recovery and economic growth. Oregon employers and Oregon's 475 economy suffer from lost productivity and job disruption that results from unavailable, 476 deficient, or unstable child care. Failing to adequately support early childhood 477 development at the *front* end, operates as a long-term drag on the economy, from the weight of substantially increased societal costs on the back end. Lack of affordable, 478 479 accessible, quality child care has a ripple effect on the whole economy. 480

- 481 **COVID-19**.
- 482483 The current worldwide Coronavirus pandemic has exacerbated the child care crisis.
- 484 Without access to a sufficient supply of safe, affordable, quality child care, Oregonians
- will not be able to return to work; economic recovery will stall, worsen, or fail; and the
- 486 future, the potential, of more and more children, will be deprived or damaged.
- 487

488 **Recommendations**

489

In this section, the Task Force has organized its top ten recommendations in order of
 priority from highest to lowest, followed by additional or more detailed recommendations
 broken-out by subject area.

493

494 **Top Ten Recommendations, from Highest to Lowest Priority**

495

496 [solicit members to create this section, to rank the recommendations they deem most
 497 important, per in-meeting discussion on November 3rd; or, organize each section below
 498 in order of priority; or both?]

- 499
- 500 <u>General</u>
- 501 502 Provide equitable access to developmentally appropriate, culturally relevant, and
- 503 inclusive child care for children and families across race, ethnicity, language,
- 504 geography, disability, and income (like Raise Up Oregon¹⁰) in order to support:
- 505 506
- Child development (tomorrow's workforce), and
- Oregon's economy (today's workforce).
- 507 508
- 509 Prioritize the neediest, the most critical, the most vulnerable children and families first. 510
- 511 Conduct a thorough review of regulations from the perspective of a self-supporting 512 preschool to identify where there is room for relaxation or slack, particularly around hiring 513 mothers in small communities, and the unworkability of age cutoffs. Consider relaxing or

¹⁰

514 gradually relaxing regulations based on size. Consider allowing classrooms to combine.515 Consider a statewide pool of substitutes.

516

517 Have local, centralized, child care regulation experts available to connect parents and 518 providers, navigate licensing and other regulatory matters, and facilitate relationships.

519

520 Eliminate or significantly reduce delays in the receipt of subsidies. Eliminate or 521 significantly reduce all administrative waiting periods – for subsidy payments, for 522 paperwork – delays and waiting periods are financially detrimental.

- 523
- 524 Make child care available at all other times for all other ages not just K-12 age, during 525 school hours, during academic years: off hours, before and after school hours, summer 526 months.
- 527

528 Make "211" appear at the top of any results generated by any internet search engine 529 when individuals search for "child care."

530

Implement a "no wrong door" policy so that, to the extent possible, every time a parent
interacts with a public entity – such as health care providers, schools, state agencies
like the Department of Transportation or the Department of Human Services – there is a

link to "211" or a question on an intake form that connects the parent with child care
 information.

535 i 536

537 Use existing public buildings to provide child care for the most vulnerable families,538 especially on weekends and after hours.

- 539
- 540 Require school districts to be more proactive on behalf of 5-12 year olds.
- 541

542 Child Care Businesses

543

Align reimbursement rates with the actual cost of care and pay upfront. Use an
alternative method to determine Employment-Related Day Care (ERDC) rates that shift
to a cost estimation that determines a rate based on the actual delivery of care rather
than based on current market rates.

548

549 Eliminate or reduce parent copays. Permanently waive parent copays or revise how
 550 parent copays are determined with a specific focus to reduce the high copays in rural
 551 Oregon.

552

Use contracted slots. Explore the expansion of contracted slots, such as those
 administered through Preschool Promise and Baby Promise¹¹. The contracted slot
 payment could follow the child to whatever location is selected by families that are part
 of the network.

¹¹

558 Provide an automated, centralized web portal to access the ERDC system: for 559 eligibility determinations, provider information, and payments, that enables communication between providers, parents and program staff. Access to child care 560 561 should be centralized for families to find and receive assistance and for providers to 562 receive payments from the state, all through one access point. Explore piloting 563 automated to provider-based child care management systems (CCMS) so that ERDC 564 billing can be electronically processed and tracked to increase efficiencies and simplify 565 the process for families and child care programs. Also, automated systems will align referral availability of child care slots. This is possible by enabling open academic 566 567 performance indexes (APIs) with software vendors (such as Wonderschool¹²) or 568 creation of a secure, web-based database. 569 570 **Embed supports for providers**: including funding, for startup costs and business planning services - this needs to be shown as a profitable business in order to 571 572 incentivize providers; co-learning opportunities; supports for providers that care for kids 573 with special needs; embedding trauma practices and supports for families. 574 575 Reduce and eliminate barriers for child care businesses. Coordinate program administration for providers in multiple programs. Make state and local regulations 576 577 consistent to reduce barriers (timeliness, costs, streamline regulations to start up a business, and a regular review of child care licensing requirements and exemptions). 578 579 Reduce barriers for opening and maintaining child care businesses, while protecting 580 children's health, safety, and development. 581 582 **Relax licensing requirements.** Consider a regulatory review of licensing requirements 583 with a focus on expanding access and ease of burden for providers to initiate a 584 childcare business. 585 586 Streamline background checks. An exploration of solutions is needed so that background checks are conducted in a timely process and are transferable across all 587 education-related settings. This would not only enable a shared substitute pool but 588 589 would also save time and money for all involved. 590 591 Allow short-term substitutes. Consider allowing short-term substitutes that would 592 enable a substitute to work without meeting the teacher requirements (modeled after the 593 South Coast Education Service District that provides this approach for K-12 substitutes¹³). 594 595 596 Allow / credit on-the-job training. Embrace job-embedded professional development to enable training to occur on-site, under supervision, while working towards the teacher 597 requirements. This builds on a state-of-the-art approach embraced by leaders in the 598

- 599 field of early childhood education, such as the Ounce of Prevention¹⁴, the University of
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600 601 602	Chicago ¹⁵ , EarlyEdU at the University of Washington ¹⁶ , the Lastinger Center for Learning at the University of Florida ¹⁷ , and others.			
602 603 604 605 606 607 608 609 610 612	Convene an agency-led work group . Require the establishment of an agency-led work group with diverse stakeholders to review and streamline current child care business licensing and regulation to reduce barriers and improve supports. The workgroup should include parents who access child care (subsidy), child care providers who utilize child care subsidy, organizations that advocate for child care subsidy with the state legislature and Congress, and individuals/organizations with expertise in business, land use, local government regulations that impact child care providers, and how other states have approached child care business regulation. A national expert or consultant could assist with facilitation. The goals of the workgroup should include:			
613	Review licensing requirements for various child care settings and communities			
614	around the state;			
615 616	 Suggest statutory changes to create a single clearinghouse for child care businesses to start-up that reduces local regulations and multiple state agency 			
617	approvals that are barriers to standing-up new businesses;			
618	 Align background checks across programs that care for children; and, 			
619	Review quality improvement measures for child care providers.			
620				
621	Child Care Workers			
622				
623	Pay fair wages that reflect the value of the essential service provided. Pay child			
624 625	care workers fair wages and support their professional development. Better wages for			
625 626	the early childhood education workforce will elevate their importance and compensate them for their vital work. Higher wages result in better retention and better service			
627	delivery.			
628				
629	• Strategic financing for the field needs to require or target increasing wages.			
630	• ERDC/ child care subsidy payments based on the cost of providing care,			
631	not market rates, and including a robust wage/benefit structure;			
632	• Utilizing contracting/grants for child care that include wage requirements,			
633	 Expanding salary scales into all child care programs funded with public 			
634	dollars			
635	• In the short term, the use of contracts should be expanded to reach a living wage			
636	standards			
637	• Explore shared services models to increase ability to offer benefits to employees			
638	(e.g., insurance/retirement pools)			
639	Ensure financing covers paid time off for professional learning			

- 16
- 17

¹⁵

640	Make child care jobs good, stable jobs.		
641 642		Address intermittent scheduling fix neument policies in subsidy (enrollment ve	
642 643	•	Address intermittent scheduling – fix payment policies in subsidy (enrollment vs attendance) so that staff can be guaranteed hours/wages/benefits	
644	•	Create a substitute pool – support paid leave, paid professional learning (pre-	
645		service and in-service)	
646	•	Establish a cadre of mental health consultation so child care providers can draw	
647		upon experts to support children and families who need support and referrals	
648		regarding mental and behavioral health issues	
649 650	<u>Creat</u>	e career pathways.	
651	•	Redesign career pathways in partnership with child care workforce and ensure	
652		Oregon Registry Online adapts to new career pathways	
653	•	Work with higher education institutions to create programs that honor and count	
654		the experience of the current workforce, respect BIPOC child care workers and	
655		address bias and racism in higher education programs	
656	•	Create robust scholarships for new workers and those returning to school and	
657		ensure institutions provide access to programs that contain the supports that	
658		meet the physical, socioemotional, learning, and other practical needs of	
659		students (e.g., offer child care, funding for transportation)	
660	•	Use technology to increase access to training/degree/credential programs	
661	•	Support the digital literacy, access to equipment for child care workers	
662	•	Increase the number, quality, and affordability of community-based trainings	
663	•	Ensure that Family, Friend, and Neighbor care providers have access to relevant	
664		professional development for their context	
665	Increa	ase retention and recruitment efforts.	
666 667	•	Implement the above recommendations in compensation, working conditions,	
668	•	and career pathways in order to make the field a better place to work	
669	•	Include workers in a design of a campaign about respect for the profession and	
670		the opportunities available (funding is available in ELD current professional	
671		learning funding through SSA)	
672	•	Create pathways earlier in the education pipeline to attract new, diverse	
673		educators to the field	
674			
675	<u>Fundi</u>	ing / Costs	
676 677	Equa	te child care with education and treat it accordingly. Acknowledge and	
678		ace that child care is as essential and foundational for children, families, and	
679		y as K-12 education is, and build a publicly-financed, universal child care system	
680		stent with that understanding that more closely mirrors what exists in K-12	
681	educa	tion.	

682				
683	Update statutory language to more clearly articulate the above acknowledgment, the			
684 685	goals of the child care system, and goals for financing it, including:			
686	Affordability and accessibility for families			
687	 Sustainability for child care providers 			
688	Culturally relevant, inclusive, and developmentally appropriate care for children			
689	 Expanding eligibility for child care assistance to children: 			
690	• up to an income level where parents can afford child care independently;			
691	 regardless of immigration status; 			
692	 with developmental and intellectual disabilities; and 			
693	 for any reason that their parent/caregiver is unable to care for them 			
694	(i.e., work, school, health or disability, care for an ill family member,			
695	respite care, etc.).			
696	• Ensuring children are eligible for child care assistance for a minimum of one full			
697	year to ensure continuity of care for children, parents/caregivers, and providers.			
698	 Increasing the rates paid to child care providers to reflect the true cost of 			
699 700	providing developmentally appropriate, culturally relevant, and inclusive child			
700 701	care, regardless of location (i.e., statewide rates and not a separate rate for rural areas.) (Pratt, Study C).			
701	 Appropriately differentiating rates to consider differential costs and shortage 			
702	areas, such as:			
703	o infant-toddler care;			
705	 care for children with disabilities and delays; 			
706	 culturally and linguistically specific care; and 			
707	 evening, weekend, overnight care. 			
708	• Ensure that parent copays are not a barrier to receiving child care assistance and			
709	that they are below 7% of family income. (Pratt, Study C.)			
710	 Increase the utilization of contracts with child care providers as a strategy to 			
711	stabilize child care providers, especially in key shortage areas (i.e. rural, infant-			
712	toddler care, culturally specific care), and increase wages and benefits for			
713	providers. (Pratt, Study C)			
714 715	Secure adequate funding in the first instance, but ideally, significantly increase public			
715	funding.			
717	runding.			
718	Spend existing funding well / more effectively in the immediate future by creating a			
719	quality child care assistance program that works well, even while, at the outset, it may			
720	serve only a small fraction of eligible families.			
721				
722	Protect current state investment in ERDC in the 2021-23 budget. Federal Child Care			
723	and Development Block Grant funds (CCDBG funds) require Oregon to meet a			
724 725	Maintenance of Effort (MOE) requirement, and a small General Fund cut to ERDC			
725 726	would bar the state from receiving supplemental CCDBG dollars in a federal recovery package. The federal government prohibits using CCDBG funds to backfill General			
120				

727 728 729	Fund cuts to ERDC. Oregon must maintain state funding to ensure it can take advantage of increased federal investments.			
730 731 732	Support the federal Child Care for Working Families Act ¹⁸ for a state-federal financing partnership, rather than relying solely on state General Fund dollars.			
733	Support improved administration of child care subsidy, including:			
734	 Aligning subsidy payments with tuition payments (i.e., pay providers at the 			
735	beginning of the month, based on enrollment not attendance.) (Pratt, Study C.)			
736	•	Adequately financing state infrastructure needed to support continuous quality		
737		improvement across provider types and regions, including agency infrastructure,		
738		CCR&Rs, and Early Learning Hubs.		
739	•	Financing a state strategy to support shared services approaches as a critical		
740		support for smaller providers to become more financially sturdy. (See		
741		Wisconsin's RFP for shared services.)		
742				
743	Ident	ify state and federal opportunities to increase public investment in child care		
744	to en	sure that:		
745	•	Child care is accessible to infants-toddlers, preschool age, school age, and older		
746		children significantly impacted by disability.		
747	•	Solutions to increased child care access take into account the diverse and		
748		unique qualities of each community, including race/ethnicity, language,		
749		geography, income, work and other care needs, and single parenting. (Pratt,		
750		Study B.)		
751	•	Publicly financed child care is safe, healthy, and has support for quality in place.		
752	•	Families not currently eligible for child care subsidy can afford care (including		
753		further review of child care tax credits, expansion of direct subsidy, employer		
754 755		incentives, and other possible approaches). [There were differences of opinion		
755 756		on the topic of child care financing approaches beyond subsidy in small group discussion because tax credits, even when refundable, only pay out once a year		
750 757		and therefore can be ineffective in supporting families and child care providers		
758		from balancing their budgets month to month.]		
759		nom balanoing their budgets month to month.j		
757	0.000			

760 **Governance** 761

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768 769

Consolidate / centralize administration of child care programs. ERDC and Inclusive
 Partners should be moved to a newly reconfigured Child Care and Early Learning
 Agency to house and coordinate all child care functions in state government. Housing
 all child care functions in one agency allows the state to:

• Coordinate current state and federal funding and make targeted and equitable investments to better serve those children least likely to afford or find the care they need;

¹⁸ https://www.congress.gov/bill/116th-congress/house-bill/1364/text

770 771	Braid programs together for families rather than families navigating multiple programs in different agencies; and		
772	 programs in different agencies; and Reduce provider efforts to receive state payments from multiple agencies. 		
773			
774 775 776 777 778 779	Oregon, through Employment Related Day Care (ERDC), is the largest single purchaser of child care, which affects the financial sustainability of child care providers, subsidy recipient families and the child care market as a whole. In order for the program and a new agency to succeed, relevant statutes and rules will need to be updated to ensure that:		
780 781	 Assistance is available for children when care is needed regardless of the parent activity; 		
782	 Family copays are lowered (they are now the second highest in the nation) 		
783 784	 Payment processes are revised to increase provider participation in the subsidy program; 		
785	One year of continuous eligibility is provided; and		
786	All income-eligible children are served regardless of documentation status or		
787	changes in parent's work schedules.		
788			
789	Consolidate governance in advance to be ready for potential federal and state		
790	investment, in order to derive the greatest benefit for Oregon children and families.		
791 792	Bring the financing for childcare into one agency to allow for a more cohesive spending and regulation strategy to improve child care supply overall and braid funding streams		
792 793	together to utilize multiple funding streams to serve one child comprehensively. One		
794	administrative agency could:		
795			
796	Ensure financing policies and practices are the most strategic and effective to		
797	increase supply, stabilize child care, attend to the diverse needs of parents, and		
798	support child development; Streamline collection and tracking of data and		
799	information needed to respond to supply and demand;		
800	Clarify administration of multiple programs (i.e., Preschool Promise, Baby		
801	Promise, Oregon PreKindergarten/Head Start, etc. ¹⁹);		
802	 Identify the cost of care that meets needs and allows easier blending of funding 		
803	streams;		
804	Streamline support for local infrastructure to support child care quality and		
805	access, including Child Care Resource & Referrals ²⁰ and Early Learning Hubs; ²¹ and		
806 807			
807	 Improve implementation of existing funds as follows: Update payment policies for providers to ensure payments are timely, 		
809	 Align regulations and requirements across funding streams to enable 		
810	blending and braiding of early care and education funding,		
811	 Update reimbursement rates to reflect the actual cost of care, 		

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812 813	0	Increase utilization of child care contracts to stabilize and increase child
813 814		care supply, Provide for true continuous eligibility for a minimum of 12 months,
814 815	0	Further the development of a professional learning system for early care
816	0	and education, and
817		
818	0	Develop child care business support, such as shared services approaches
818 819		that increase technology and automation and increase child care stability.
820	Modernize	and centralize the collection and maintenance of information. A new
821		and the capacity for data collection and analysis is needed. One content
822		nt software system housed within the state's child care agency to collect
823		d versus supply; to help families find care and allow providers to report
824		th ease. Better data collection will enable more accurate information to be
825		families, providers, program administrators, and decision makers. Start with
826		eded for the new Child Care Assistance program (currently ERDC), with
827	better enroll	ment and payment functions than the current system, and ensure data
828	collection is	built in pieces needed to equitably serve children, families and providers.
829	ELD should	collect input from stakeholders on the needs from a new system or a more
830	formal overs	sight group. The new data system needs to address eligibility/enrollment,
831	provider pay	ment, quality improvement tracking and data collection on supply/demand
832	and equitab	le access to care.
833		
834	CONCLUSIC	
835		
836		eas of strong agreement including: necessity of quality, accessible child
837		nomy now and in the future; need for increased investment; consolidating
838	governance	; streamlining/modernizing information collection and exchange; et al.]
839		
840		
841	DECEDENC	E MATERIALS
	NEFERENC	
842		
843		