EXPANDING ACCESS TO EARLY CHILDHOOD CARE AND EDUCATION SERVICES AMID COVID-19: FINDINGS AND RECOMMENDATIONS

This report was cultivated by Oklahoma's early childhood stakeholders and the OPSR Board in response to the coronavirus pandemic and its impact on access to early childhood care and education.

OKLAHOMA PARTNERSHIP FOR SCHOOL READINESS

Background

In response to the national pandemic emerging across the world in mid-March, Oklahoma's schools and many businesses closed. Many early childhood programs also closed or transitioned to virtual visits for parent education programs. Child care, however, was deemed necessary to care for children of essential workers. During these initial weeks, about one-third of child care businesses closed and those that remained open experienced, on average, a sixty-to-seventy percent reduction in enrollment. Child care programs that remained open also took on higher operating costs to adhere to new health and safety standards.

In May, stakeholders representing a wide range of early childhood care and education (ECCE) programs discussed concerns surrounding the re-opening of schools and ECCE programs in the fall. Stakeholders recognized the urgent need to identify how all ECCE programs can better ensure that children are cared for safely; to equip parents to make informed choices on selecting ECCE services; and to leverage financial supports and COVID-19 relief packages to maintain Oklahoma's ECCE infrastructure throughout the pandemic.

Between June and August, a working group of more than 40 early childhood stakeholders, comprised of representatives from Head Start/Early Head Start, child care, public schools, home visiting, early childhood mental health, tribes, special education and health, met weekly to identify urgent needs and propose viable solutions in response to the significant impact of COVID-19 on Oklahoma's ability to maintain safe, accessible and equitable ECCE services for young children.

The successful recovery of the state's economy and the stability of families depend upon access to child care. Oklahoma must undertake a combination of responsive program policies and funding, enhanced data collection, program coordination and innovative communication strategies to ensure this generation of young children remains healthy and safe and that we mitigate their exposure to toxic stress, neglect and social injustice.

In addition to the recommendations set forth below, this working group also encourages Governor Stitt and the Oklahoma legislature to consult with the Oklahoma Partnership for School Readiness Board in prioritizing both state and federal resources to ensure Oklahoma families have access to equitable early care and education, and working parents have options for their children to learn in safe environments.

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In order to maintain safe, accessible and equitable ECCE services for young children while also ensuring the economic recovery of our state during COVID, Oklahoma leaders must undertake a combination of responsive actions as detailed in these seven reccomendations.

Recommendations for Expanding ECCE Access

#1 Collect real time data on early childhood care and education program supply and demand.

#2 Coordinate and widely disseminate protocols and resources for all early care and education providers serving children, birth-to-five, to operate safely under COVID-19 group education and care guidelines.

#3 Stabilize the child care industry through the distribution of emergency relief grants and responsive subsidy policies and extend direct support to families who need access to ECCE.

#4 Utilize a cross-sector communications team to disseminate information for parents on health and safety, program options and availability, and costs to inform their choices when selecting group care and education options.

#5 Recruit and retain qualified ECCE providers.

#6 Support the expansion of partnerships between Head Start, child care and pre-K to serve 3- and 4-year-olds in response to the impact of COVID-19 on program accessibility.

#7 Leverage funding and partnership opportunities to enhance program quality for infants and toddlers throughout Oklahoma's ECCE system.

Recommendation #1: Collect real time data on early childhood care and education program supply and demand.

FINDINGS

- At the onset of the pandemic, it was difficult to obtain the status of available ECCE program slots. Data on program enrollment is cumbersome to collect and analyze, which makes it more challenging for policymakers to make informed funding decisions and for parents to search for care. To understand the status of ECCE supply and demand across the state and inform funding decisions, Oklahoma needs to regularly collect data on programs' operational status, capacity, empty and filled slots, and waiting lists.

- Oklahoma currently does not collect the above indicators for license-exempt care and private pay child care, and data collected by Oklahoma Human Services (OKDHS) doesn't capture demand. The Oklahoma Child Care Resource and Referral Association (OCCRRA) individually surveys licensed facilities and reports types of care needed only by families with whom they have had direct contact. Early Head Start/Head Start program data is reported separately by programs directly to the federal government. In addition, public school pre-K enrollment data is collected at a single point in time during the school year, and it does not reflect simultaneous enrollment in child care, Head Start or other ECCE programs.

- Providers are inundated with surveys and questionnaires that do not capture the real time status of supply and demand for early care and education services amid rapidly changing circumstances brought about by the pandemic.

RECOMMENDED STRATEGIES

- Integrate data on enrollment and availability of slots in child care, Head Start/Early Head Start, public school pre-K, home visiting/parent support programs, and health and mental health services into a statewide Early Childhood Integrated Data System.[1]

  - Data collected should be able to be disaggregated by race/ethnicity, economic status, the geography of children who are enrolled and the type of program in which they are enrolled.

  - Data collected on children enrolled in ECCE programs should be revised as needed to standardize information on race/ethnicity, economic status and zip code/city/county of residence.

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1. See Regenstein, Elliot, Data Quality Campaign, Early Childhood Data Systems: Responding to COVID-19 and Building for the Future (June 2020), available at: https://dataqualitycampaign.org/resource/early-childhood-data-systems-covid-19/.

        o Data should reflect the supply of programs available in communities to meet the anticipated demand of families of young children.

        o Data should be monitored for COVID-19 related disparities such as decreased supply or higher rates of exposure in marginalized communities.

• Prioritize the implementation of a Master Person Index to create a unique identifier for children enrolled in child care subsidy, Head Start/Early Head Start, public school pre-K, home visiting/parent support, and health and mental health services.

• Establish a data governance structure to define the roles and responsibilities needed to ensure clear processes for collecting and reporting data as well as accountability for data quality and security.

• Gather supplemental data through parent surveys, waiting lists, child care resource and referral agencies, and OKDHS Child Care Services to determine the number of parents that require care for their children but are unable to access such services due to supply or safety concerns.

• Fund the development of coordinated enrollment processes at a community level informed by real-time collection of availability in licensed, licensed-exempt care and education, home-based parent education programs and virtual learning opportunities.[2]

Recommendation #2: Coordinate and widely disseminate protocols and resources for all early care and education providers serving children, birth-to-five, to operate safely under COVID-19 group education and care guidelines.

FINDINGS

• ECCE providers need reliable and centralized resources for the latest guidance on health and safety standards. Information streams are fractured and contradictory, and some providers report that the latest guidance is not easy to find. Resources available through the Oklahoma Association for the Education of Young Children need to be more widely distributed and accessible.

2. See, for example, a coordinated enrollment model from Louisiana: https://www.louisianabelieves.com/docs/default-source/early-childhood/coordinated-enrollment-success.pdf?sfvrsn=2.

- Providers need clarity on guidance that applies to the particular setting in which they are operating (i.e. child care programs versus programs operating in public school settings, which operate under different guidelines).

- ECCE providers need reliable protocols for confirmed positive cases in their programs, guidance on how to respond proactively, and timely support from the Oklahoma State Department of Health's contact tracing efforts.

- ECCE providers need resources to uniformly train their staff in the latest federal and state guidance to help increase staff confidence in programs' ability to safely operate.

- Programs need access to an adequate supply of personal protective equipment (PPE) and disinfecting supplies. Child care programs are reporting continued difficulties with procuring their own supplies, even when they do have the funds to purchase them.

RECOMMENDED STRATEGIES

- Designate and fund an entity, such as the Oklahoma State Department of Health's Warmline, to serve as a central resource and guide for up-to-date COVID-19 ECCE standards and guidance.

- Consistently leverage provider networks to help disseminate the latest COVID-19 information and resources based on the program and setting in which providers are operating.

- Support regional and community organizations to obtain and distribute safety and sanitation supplies to ECCE providers.

    o Expand funding for and promote the value of using OK Shared Servies available through OCCRRA to provide resources that meet the needs of licensed child care providers.

- Continue to provide grants through COVID-19 relief funds to programs serving families with young children to purchase PPE and cleaning supplies.

- Implement a targeted media strategy to connect license-exempt ECCE providers and foster parents/kinship caregivers with the latest health and safety guidance on caring for young children.

Recommendation #3: Stabilize the child care industry through the distribution of emergency relief grants and responsive subsidy policies and extend direct support to families who need access to ECCE.

FINDINGS

- The cost to attend child care has increased since the pandemic. Emergency relief grants have not benefitted families who privately pay for child care resulting in a either a much greater financial burden for many families or a higher number of caregivers leaving the workforce as they cannot find or afford care. This shift is detrimental to the long-term economic stability of our state and the education of young children.

- The child care industry has always been financially fragile as most parents are unable to afford the full cost of care, especially for infants and toddlers. During the pandemic, many child care providers, including family child care homes, are operating at a loss and are unsure how much longer they will be able to stay open without direct financial assistance.

- Many child care providers are struggling to afford basic operating expenses, including food in some instances.

- Provider networks report a need for consistent lines of communication with policymakers and state leaders to better understand how their programs will be impacted by policy and funding decisions, so they are able to respond and adjust business decisions and operations.

  o For example, when OKDHS subsidy enhancements are phased-out, providers will need clear and timely communication of phase-out plans to adjust budgets accordingly.

- Child care providers operating in under-resourced areas or communities of color need priority access to stabilization grants to mitigate COVID-19's disproportionate impacts.

- Many providers in public schools, Head Start, and child care programs are older, women of color, have lower incomes and have underlying health conditions. These programs need financial support to ensure the health and safety of their workforce.

RECOMMENDED STRATEGIES

- Distribute emergency relief funds to all child care centers and homes through stabilization grants.

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- o Continue grants based on support of high-quality programs when additional relief funds become available.

- o Prioritize additional need-based grants independent of star rating, including programs operating in communities with limited child care options; programs offering flexible and non-traditional hours, infant-toddler care, and/or linguistic diversity; and programs in low-income communities.

- Create a child care relief fund to pay for the cost of substitutes and time off for child care staff exposed to COVID-19 who must quarantine the necessary 14 days.

- o To contain community spread as a result of ECCE programs operating, ECCE providers need priority access to rapid COVID-19 testing for staff, children and families, with a commitment to make testing available at no cost if the provider, child or family does not have health insurance.

- o During the pandemic, child care programs need continued subsidy enhancements to support wage stability, including the ability to supplement wages with hazard pay.

- Continue to support flexible options, such as KithCare, to meet the needs of essential workers throughout the duration of the pandemic.

- Pay for full-time, contracted slots for infants and toddlers under age three receiving child care subsidy to stabilize access to licensed child care providers during the pandemic.

- Maintain an outlet dedicated to direct communications between OKDHS and ECCE providers about policy and funding decisions that will impact ECCE programs.

Recommendation #4: Utilize a cross-sector communications team to disseminate information for parents on health and safety, program options and availability, and costs to inform their choices when selecting group care and education options.

FINDINGS

- Parents lack access to uniform information from sources they trust, including from their children's ECCE programs, about current COVID-19 protocols

- Agencies and organizations serving families recognize the need to work together to produce consistent messaging that parents can rely on when making choices for the education and care of their children.

- Families of color have been disproportionately impacted by COVID-19. These impacts necessitate focused efforts to better reach and listen to the needs and concerns of families and communities of color.

RECOMMENDED STRATEGIES

- Ensure cross-sector communications experts are supported and connected for the duration of the pandemic in order to align messages to families with young children; consider the communication needs of families across diverse settings; and coordinate efficient routes of communication through direct provider networks. The team should include representation from ECCE programs at the state and community level.

    o Formalize an interagency communications action plan that ensures all ECCE-related COVID-19 guidance incorporates reference links to guidance from other agencies.

    o Communications personnel and agency experts work together to align safety standards and guidance as much as is practicable across ECCE settings.

    o Consider disseminating messages through routes such as ECCE provider listservs and listservs for core services that interface with families, such as SoonerCare.

    o Regularly communicate with families with lived experiences to gain insights to guide equitable policy efforts, e.g., the demand for care, how parents choose among child care options, how their preferences are changing, and what they need to feel comfortable when taking their children to ECCE programs.

    o Maximize family choice by increasing access to programs that serve diverse populations of children and offer supports that help reduce the segregation of programs (primarily by race, language, ability and class), which reflect segregated housing patterns and fuel persistent discrimination and inequities.

Recommendation #5: Recruit and retain qualified ECCE providers.

FINDINGS

- Provider retention is necessary for programs to stay open. Many ECCE staff across the state are afraid to return to work or have been working in programs subject to closure in the event of a positive COVID-19 test result.

- While many ECCE professionals remained employed over the summer, despite program closures or reduced program capacity, providers report looming concerns about future problems with employee retention amid ongoing industry instability.

- In Oklahoma's early response to COVID-19, child care providers were deemed essential workers, but low pay and lack of public recognition for their contributions to the economy left many feeling under-valued and expendable. Oklahoma must address hazard pay and compensation parity with fellow ECCE professionals for child care providers if Oklahoma hopes to retain and recruit quality providers amid unstable times.

- Provider retention is improved when mental health services are available to support all ECCE providers as essential workers on the front lines of the pandemic.

- Many child care providers have not received business practices trainings and financial literacy supports to help them maintain and grow a stable business. These trainings are now especially important given the compounded financial hardships on the industry caused by COVID-19.

RECOMMENDED STRATEGIES

- Establish comparable compensation and benefits across settings for early childhood educators with comparable qualifications, experience and responsibilities. Creating compensation policies that include educators working with infants and toddlers is a fundamental matter of equity. Many in the child care workforce are women of color who have been disproportionately impacted by the pandemic and may need additional supports.

- Explore family child care networks as a vehicle to recruit and retain providers.

- Ensure adequate funding for and widespread access to trainings that strengthen business practices and skills.

• Invest in professional development and career pathways to maintain the existing ECCE workforce and commit to building a more diverse workforce after the pandemic.

  o Make professional learning models affordable (free and open source where possible) and flexible for working providers.

  o Provide sufficient funding for and promote ECCE providers' expanded access to early childhood mental health consultation, which will support providers in stressful times, and improve responsiveness to and reduce stigma associated with children with mental health challenges and challenging behaviors.

  o Provide sufficient funding for and promote teachers' and administrators' use of trauma-informed care and healing-centered approaches that support resilience and help mitigate the effects of toxic stress and adverse childhood experiences, which affect children of all social groups but disproportionately affect children of marginalized groups.

  o Expand access to classroom coaches to assist teachers in implementing what they have learned in training.

  o Make expanded training available to all sectors of the ECCE workforce, including Family, Friend and Neighbor Caregivers.

  o Devise proactive strategies to recruit and support leaders who reflect the communities they serve.[3]

  o Expose professionals on leadership tracks to coursework such as Leadership Academies at the Center for Early Childhood Professional Development and experiences that foster an understanding of family engagement and culturally responsive practice.

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3. See NAEYC, Increasing Qualifications, Centering Equity: Experiences and Advice from Early Childhood Educators of Color, available at: https://www.naeyc.org/sites/default/files/globally-shared/downloads/PDFs/our-work/public-policy-advocacy/increasing_qualifications_centering_equity.pdf. See also CLASP, Support a Diverse and Culturally Competent Workforce, available at: https://www.clasp.org/babiesinchildcare/recommendations/nurturing-and-responsive-providers/support-a-diverse-and-culturally-competent-workforce.

Recommendation #6: Support the expansion of partnerships between Head Start, child care and pre-K to serve 3- and 4-year-olds in response to the impact of COVID-19 on program accessibility.

FINDINGS

- There is no centralized decision-making process or coordination at the state or community level to address ECCE program access. As programs reopen this fall, strategies to support early learning are determined by each program's administrative structure. Pre-K programs are impacted by procedures set forth by district leadership and guided by recommendations from the Oklahoma State Board of Education. Head Start programs receive guidance from the federal government on resuming in-person early learning programs.

- When these programs are not open for in-person learning, many parents must rely on licensed or license-exempt care arrangements. Access to child care varies and locating an available slot is cumbersome.

- Coordinated planning between pre-K, Head Start and licensed child care is necessary to ensure that parents have the knowledge to make informed choices for the education and care of their children and to make alternative plans in the event of a closure of their child(ren)'s programs.

- Programs have expressed a need to coordinate and align safety protocols to ensure programs across sectors are operating under best practice guidelines and to create consistency for families who have young children attending different programs (or who may need to switch from one program to another due to program closures).

- Children in foster care, children with disabilities, English language learners, and children with unstable housing or in other vulnerable situations are experiencing compounded hardships amid the pandemic. Oklahoma needs stronger operating partnerships between ECCE providers to help these families more easily navigate and access the right ECCE options.

RECOMMENDED STRATEGIES

- At the community level, convene school district, child care, Head Start, family and local business leaders to identify community solutions to coordinate enrollment; establish community-wide processes to ensure safe in-person early learning; and create a contingency plan for parents who will need care in the event of program closures.

o This work could be led by public schools, child care resource and referral agencies, HOPE centers, Community Action Agencies, United Way organizations, Chambers of Commerce or other local organization leaders.

o Ensure that families who rely on public assistance, are essential workers and have non-traditional work hours as well as communities of color are included in planning efforts.

• At the state level, leverage emergency relief funds to create financial incentives to expand and enhance operating partnerships between Head Start, child care and pre-K programs to ensure continuity of care and early learning supports are available for 3- and 4-year-olds through the pandemic.

o Publish state guidance for ECCE programs serving 3- and 4-year-olds on creating formal operating partnerships, layering funds and implementing high quality ECCE programs.

Recommendation #7: Leverage funding and partnership opportunities to enhance program quality for infants and toddlers throughout Oklahoma's ECCE system.

FINDINGS

• Resources available through publicly funded infant toddler ECCE programs such as the public/private Oklahoma Early Childhood Program (OECP) and federal Early Head Start-Child Care Partnership (EHS-CCP) grants provide financial supports to child care programs that operate under their guidelines. OECP and EHS-CCP programs are available to a small percentage of the infant toddler population, and programs have been able to remain open due to this additional funding.

• Emerging models like those offered by OECP and EHS-CCP provide a best-practice framework for innovative layered funding to enhance quality and ensure greater stability for infant toddler programs.

• Expanded partnerships modeled after those like OECP and EHS-CCP would help existing providers access trainings and diverse financial streams to support high quality programs. Continuing to expand high quality programs during unstable times is critical for existing providers to be able to meet the diverse needs of young children and their families across the state.

• Overall reduced enrollment and higher operating costs have placed the availability of infant-toddler care at risk. The cost of providing infant-toddler care exceeds the reimbursement rates for most providers, particularly those who accept child care subsidy. These costs are normally offset during the summer months by enrolling school-aged children. Costs of providing infant-toddler care during the pandemic have increased due to the need for personal protective equipment and sanitization of equipment as well as the inherent nature of irregular attendance of this population.

RECOMMENDED STRATEGIES

• Dedicate emergency relief funds to offer enhanced financial supports to infant and toddler ECCE providers serving low income families.

• Pay for full-time, contracted slots for infants and toddlers receiving child care subsidy to stabilize access to licensed child care providers during the pandemic.

• Improve equity by waiving the parent copay for all children in EHS-CCP supported infant toddler centers beyond those in grant-funded slots.

• Create a "mentor network" between existing OECP supported programs and infant-toddler child care programs to increase provider competencies.

• Promote statewide opportunities for infant-toddler providers to participate in OECP' Program for Infant Toddler (PITC) training and provide stipends for providers who accept child care subsidy to attend such training.

About Oklahoma Partnership for School Readiness

In 2003, House Bill 1094 created the Oklahoma Partnership for School Readiness (OPSR) and added Oklahoma to a growing list of states that recognized more action is required to successfully support families and children from birth to preschool — thus improving school readiness. This organization is made up of OPSR staff, the OPSR Board and the OPSR Foundation. In particular, the OPSR Board serves as Oklahoma's Early Childhood State Advisory Council, ensuring state policies are based on research, feedback from families and providers, and cross-sector collaborations and input.

Together, through both public and private partnerships, we work to help children arrive at school with the knowledge, skills and physical and emotional health to succeed. Today, our mission is to lead Oklahoma in coordinating an early childhood system that strengthens families and ensures all children are ready for school. For more information, visit https://www.okschoolreadiness.org.

Acknowledgments

OKLAHOMA PARTNERSHIP FOR SCHOOL READINESS

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