



Child Care Development Fund Recommendations

A Supplement to the State Leadership and
Administrator Resource Guide



HOME GROWN

Child Care Development Fund Recommendations

The Home Grown Resource Guide seeks to highlight the value of home-based child care, the key challenges providers are facing today, and how states can take action to support home-based child care through the COVID-19 crisis and build sustainable plans for the future.

Visit homegrownchildcare.org for the complete guide and other resources.

Urgent Action Needed to Support Home-Based Child Care Using Federal Child Care Investments

More than 7 million children ages five and under have their early learning experiences in home-based child care (HBCC). Home-based child care is particularly important in the current COVID-19 health emergency. As center and school-based programs have closed in response to COVID-19, reliance on home-based childcare has increased, particularly for the essential workforce, who rely on care during nontraditional hours, like evenings, nights, and weekends.

The CARES Act directs an additional \$3.5 billion for Child Care and Development Fund (CCDF) to the states, without requiring additional state matching funds, and enhances flexibility even more.

This flexibility includes using funds to provide assistance to essential employees, regardless of their income, and it includes making funds available to providers to sustain or resume operations.

Home Grown encourages state leaders to act quickly to invest these new dollars in home-based child care and the families who count on home-based child care.

Additional federal dollars are also needed. Home Grown urges Congress to invest in child care.

The state of the states' emergency child care plans

Through this public health crisis, states have been engaged in a mix of approaches¹. Some governors ordered child care programs to be closed except for those enrolling the children of emergency or essential workers. Others encouraged child care providers to stay open but made changes to child care policies. Now, states are looking at strategies to re-open businesses and services, and must consider approaches to sustaining open child care programs and re-opening child care programs.

These circumstances mean a variety of scenarios are playing out. Home-based child care providers may have been ordered to close. They might have enrolled additional children to help essential personnel and now we are thinking about how to support their families who temporarily kept their children at home. Providers might be unsure of how they fit with the state's approach. They might have chosen to close because of concerns for personal health and

¹ Child Care Aware of America map, accessed 4/20/20. [https://www.childcareaware.org/resources/map/Rhode Island](https://www.childcareaware.org/resources/map/Rhode_Island) closed child care settings. Pennsylvania and New Jersey closed child care centers except for those enrolling essential workers, but family child care programs are not included in the closure order.

safety, and the safety and well-being of the children in their care. Many are concerned about their financial well-being and how to sustain their operations through this public health crisis and the recovery period.

CCDF Action Needed

We encourage states to issue explicit guidance for and direct CCDF investments to home-based child care as part of the state's COVID-19 child care strategy.

Home-based child care provides children an opportunity to be cared for in smaller groups and to be cared for by a provider who is responsible for fewer children than in a center setting. These small group sizes facilitate the strengths of relationships and interactions. These small group settings will be crucial during the pandemic and recovery. States can be intentional about plans and investments to ensure families can access the child care providers that meet their needs and preferences.

CCDF funds come with state choices on family eligibility, child care program participation and payment to child care programs, and the standards and procedures for **licensing, subsidy, and quality initiatives**.

Home Grown offers these recommendations for leveraging CCDF in the short-term for home-based child care providers and the families counting on them as we face this crisis together.

Licensing

We encourage states to consider how their policies and procedures can provide support to home-based child care to maintain health and safety. States make their own decisions about which home-based child care programs are licensed, and which are exempt from licensure, and states decide the specific content of regulations or standards. These decisions are still important during the crisis and recovery and rebuilding efforts. (Please read more about this in the Supporting Quality section below.)

Licensing policies

Home Grown recommends state leaders:

- Do not expand group size or relax ratio requirements to enroll more children in a single site.
- Assess current requirements for home-based child care ratio and group size for a need to reduce the group size to comply with reduced sizes of gatherings ordered or recommended during the COVID-19 crisis. In making a group size reduction, we urge states to consider:
 - CDC guidance for child care programs.²
 - State/local health department-recommended or required group size limits.
 - The home-based child care provider's own children (not all states include children related to the provider in the group size count but should now).
 - Demand for school-age children while schools are closed.
 - Compensation to ensure home-based child care providers can mitigate the financial impact of reduced enrollment. (Depending on state agency roles, this may involve collaboration with other departments or divisions.)

² CDC Guidance for child care programs that remain open, accessed 4/9/2020

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>

- Refer to Caring for Our Children³ and Family Child Care Accreditation⁴ standards to ensure that any emergency regulations are feasible in a home setting and address:
 - Ratio and group size.
 - Supervision.
 - Positive discipline.
 - Opportunities for quiet play and active play suitable to the developmental levels and abilities of each child.
 - General safety of and additional cleaning⁵ of the home environment.
 - Health and safety practices – handwashing, food preparation and food service, current in first aid and CPR, etc.
 - Sleep practices.
 - A prohibition on transportation, field trips, and park visits, depending on state and local health safety guidance.
 - Emergency preparation.
 - Health screening.⁶

Licensing department practices and procedures

We recommend that states review their regular practices and procedures in light of stay-at-home orders and social distancing practices and consider how to support providers and take into account the priorities and capacity of state staff and partners. Practices and procedures to review include licensing inspections and also paperwork, fees, and compliance supports regularly needed and offered. We advise states to consider:

- Conducting virtual approaches to inspection, including a desk review and a phone call, or a video conference licensing visit if tools and internet access are reliable.
- Offering virtual approaches to continue support from state staff and contracted partners (child care resource and referral, for instance) around licensing compliance.
- Waiving licensing renewal fees during this period and adjusting fees afterward as programs return to ordinary operations and face financial hardship.
- Preparing to support closed providers to re-open promptly when the COVID-19 crisis is over. This may include coordination with other agencies making funds available to home-based child care through subsidy or other grants and opportunities during the closure period and after.
- Minimizing paperwork required of providers and state staff/contracted partners.
- Ensuring that procedures and expectations are clear, accessible, and materials are available in languages in addition to English. Bilingual staff are crucial as well.

Background Checks

We recommend that states provide relief for fees for background checks, which includes a check of every adult living at the home. We advise states to ensure efficient procedures for collecting and processing background checks to return approvals or questions quickly.

³ CFOC <https://nrkids.org/CFOC>

⁴ NAFCC <https://www.nafcc.org/file/631a54df-ba2e-4ddf-a3cf-bfd217fc4b36>

⁵ As recommended by CDC or required by local/state health department

⁶ As recommended by CDC or required by local/state health department

Child Care Assistance

We recommend states immediately use the additional flexibility and CARES Act funding to compensate for the risk and effort of operating during the public health crisis, address the low-wage status of home-based child care providers, and support them whether they are open or closed. CARES Act flexibility also extends to providers not currently in the CCDF program, so this is a crucial opportunity to invest in providers who do not enroll subsidized families currently. The majority of child care settings do not currently enroll families who pay with subsidy because of its limited reach: only 1 in 6 eligible children receives a subsidy across the country.

Policies

We recommend that states:

- Increase subsidy payment rates to home-based child care providers (based on quality cost models) and supplement with flexible grants to support crisis-related increased costs such as wages, the purchase of food, and extra supplies.
- Provide grants to non-CCDF home-based child care programs to support wages, the purchase of food and extra supplies, and to compensate for the risk and effort of operating during the public health crisis, whether they are open or closed.
- Pay home-based child care providers based on enrollment, not attendance, for the duration of the public health crisis⁷, whether they are open or closed.
- Cover parents' child care subsidy co-payments for those who request it due to impacts from COVID-19⁸.
- Expand family eligibility for a subsidy to ensure that essential workers can access the home-based child care of their choice and to promote economic rebuilding.

Practices and procedures

We advise states to:

- Extend recertification timelines for at least three months so that subsidy child care service will not be interrupted for parents.
- Expedite processes for families and home-based providers. States should eliminate or reduce paperwork, phone calls, or other administrative burdens on families, providers, and state staff and contracted partners. This includes daily counts of absent days.
- Ensure payment practices to providers are fair and accountable: timely and accurate payment, presumptive eligibility so that families can enroll immediately, and providers can be paid while paperwork is processed, and timely communication.
- Provide support needed for license-exempt home-based child care during the COVID-19 crisis and open access to supports, funding, guidance and technical assistance to license-exempt home-based care, whether or not they participate in CCDF.
- Pilot a contract model as a complement to the voucher approach, to rapidly and efficiently enroll families in subsidy and invest in the home-based providers in the area.

⁷ As of 4/8.2020, 15 states and DC are paying based on enrollment

<https://earlysuccess.org/sites/default/files/Changes%20to%20Child%20Care%20Payments20200407.03.pdf>

⁸ As of 4/8/2020, 9 states are covering parent co-payment

<https://earlysuccess.org/sites/default/files/Changes%20to%20Child%20Care%20Payments20200407.03.pdf>

- Ensure that any emergency regulations, processes and materials are accessible, easy to use and translated into many languages.

Supporting Quality

Predictors of quality in home-based child care include licensing, professional support, training, financial resources, and provider experience⁹. Participation in staffed family child care networks can promote quality and ensure access to quality supports.

Home-based child care providers rely on a patchwork of opportunities to inform and improve their practice and to comply with requirements of initiatives in which they may participate, though more states and local initiatives are working to meet the needs of home-based providers.

Home-based child care provides children an opportunity to be cared for in smaller groups and to be cared for by a provider who is responsible for fewer children than in a center setting. These small group sizes facilitate the strengths of relationships and interactions.

Continuity of care is important to infants and toddlers, preschoolers, and older children as well. There is evidence that consistent and reliable caregiving supports early neurological development¹⁰. In home-based child care, the relationship and interactions are between and among the same provider and children each week and year after year.

The small group settings that are possible in home-based child care also offer consistent routine and reliable relationships that may be even more crucial now as we seek to reduce community spread of COVID-19 while still providing child care for working families and meeting the need for children to be safe and developmentally on track. Consistent access to their trusted child care provider may be crucial to mitigating the stress of this public health crisis and the economic and other stressors on families.

We encourage states to consider the following actions:

SUMMARIES OF THE CARES ACT

Office of Child Care, ACF: [Summary of Child Care Provisions of Coronavirus Aid, Relief, and Economic Security Act or “CARES Act”](#)

Office of Child Care, ACF: [Information about COVID-19 for CCDF Lead Agencies: Relevant Flexibilities in CCDF Law](#)

First Five Years Fund: [Overview of Child Care Relief Included in the CARES Act](#)

Bipartisan Policy Center: [CCDBG Funds in the CARES Act](#)

⁹ Raikes, H., Torquati, J., Jung, E., Peterson, C., Atwater, J., Scott, J., and Messner, L. (2013). Family child care in four Midwestern states: Multiple measures of quality and relations to outcomes by licensed status and subsidy participation. *Early Childhood Research Quarterly*, 28(4), 879–892; Forry, N., Iruka, I., Tout, K., Torquati, J., Susman-Stillman, A., Bryant, D., and Daneri, M.P. (2013). Predictors of quality and child outcomes in family child care settings. *Early Childhood Research Quarterly*, 28(4), 893–904.

¹⁰ Center on the Developing Child. (2012). Executive function: Skills for life and learning (In Brief) <http://developingchild.harvard.edu/resources/inbrief-executive-function/>

- Review regular practices and procedures for a Quality Rating and Improvement System (QRIS) in light of stay-at-home orders and social distancing practices to assess whether certain practices remain appropriate given current public health needs. States should clearly communicate with QRIS staff as well as home-based providers about how these practices should be handled for the duration of the pandemic. Implement virtual supports to take the place of in-person technical assistance, coaching or mentoring that is regularly needed and offered. States and contracted partners (child care resources and referral, for instance) should continue to offer support to home-based child care.
- If QRIS or other quality initiatives involve grants to providers, states should continue to provide grants to providers during the crisis, even if the program is closed. This investment is crucial to providers' well-being and will contribute to their ability to stay open or re-open.
- States and partners offer a variety of supports to home-based child care even outside of the QRIS. We recommend that states quickly move these supports to virtual formats, considering the accessibility challenges and limited technology that home-based child care providers might face.
- Training should not be conducted in-person. Some training may lend itself to online formats, but not all home-based providers will have access online. We recommend that states make data-informed decisions to meet the training needs and accessibility challenges of home-based providers, and we encourage states to defer any deadlines for clock hours and paperwork.
- Coaches, mentors, trainers and partners have crucial relationships with individual home-based child care providers. In addition, they rely on peer networks to support quality improvement practices. We encourage states to reinforce and maintain these networks and relationships.
- Address the technological needs of home-based providers to access virtual support (internet access, hardware devices, etc.).
- Use flexible grant programs to provide additional materials, books and toys to home-based programs. Enhanced sanitation procedures will require more frequent removal and cleaning.