IMPROVING EARLY CHILDHOOD
DEVELOPMENT POLICIES AND PRACTICES

HEARING
BEFORE THE
SUBCOMMITTEE ON EARLY CHILDHOOD,
ELEMENTARY AND SECONDARY EDUCATION
COMMITTEE ON
EDUCATION AND LABOR
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IMPROVING EARLY CHILDHOOD
DEVELOPMENT POLICIES AND PRACTICES

Thursday, March 19, 2009
U.S. House of Representatives
Subcommittee on Early Childhood,
Elementary and Secondary Education
Committee on Education and Labor
Washington, DC

The subcommittee met, pursuant to call, at 10:02 a.m., in Room 2175, Rayburn House Office Building, Hon. Dale Kildee [chairman of the subcommittee] presiding.
Staff present: Tylease Alli, Hearing Clerk; Fran-Victoria Cox, Staff Attorney; Adrienne Dunbar, Education Policy Advisor; Curtis Ellis, Legislative Fellow, Education; Ruth Friedman, Senior Education Policy Advisor (Early Childhood); David Hartzler, Systems Administrator; Lloyd Horwich, Education Counsel and Policy Advisor, Subcommittee on Early Childhood, Elementary and Secondary Education; Fred Jones, Staff Assistant, Education; Jessica Kahanek, Press Assistant; Joe Novotny, Chief Clerk; Margaret Young, Staff Assistant, Education; Mark Zuckerman, Staff Director; Stephanie Arras, Minority Legislative Assistant; James Bergeron, Minority Deputy Director of Education and Human Services Policy; Robert Borden, Minority General Counsel; Cameron Courson, Minority Assistant Communications Director; Kirsten Duncan, Minority Professional Staff Member; Susan Ross, Minority Director of Education and Human Services Policy; and Linda Stevens, Minority Chief Clerk/Assistant to the General Counsel.
Chairman KILDEE [presiding]. A quorum being present, the hearing of the subcommittee will come to order. Pursuant to Committee Rule 7 (c), any member may submit an opening statement in writing, which will be made part of the permanent record.
I now recognize myself, followed by Ranking Member Castle, Governor Castle, for opening statements.
I am pleased to welcome my fellow subcommittee members, now some are second-termers here with us, appreciate very much your continued interest in this committee and your great work.
I want to welcome those as they appear. There is a whip meeting going on right now. Congress is under a little scrutiny from the
public right now, which they should be doing. And there is a whip meeting going on, so some will be arriving late.

Welcome to those who are new to the committee, and I welcome the public and our witnesses to this hearing, “Improving Early Childhood Development Policies and Practices.”

I was the one who, with the help of many in this room, wrote the first child care act, ABC Act, back in 1987. But it is appropriate that this is our first hearing this Congress, both because we are here to focus on the first years of a child’s life and because there is no issue more important than early childhood development. I say that with real experience, having raised three children and having seven grandchildren all living within about 20 minutes of Washington, D.C. So we are the babysitters of choice for seven grandchildren.

Last month, in his address to a joint session of Congress, President Obama set a goal of ensuring that every child has access to a complete, competitive education from birth forward. That is why Congress and President Obama worked together to increase funding by $2.3 billion for Head Start and Early Head Start and $2.1 billion for the Child Care and Development Block Grant in the American Recovery and Reinvestment Act and the recent 2009 appropriations bill, because those investments will preserve and create jobs and improve access and quality for the children who need those programs.

That is why I was so pleased to see that President Obama’s budget will commit significant new resources to early childhood, because the federal budget should reflect our values as a nation. And that is just what the president’s budget will do. Now, you can judge an individual by how that individual spends his or her money. And you can judge government by how that government spends the taxpayers’ money.

And that is why I look forward to this committee working with the president to help parents and other educators make the early years of children’s lives nurturing and enriching. Just about an hour and a half ago, I held Addison Kildee in my arms—she is 11 months old—and gave her a little kiss and came off to work. My son had dropped her off for daycare today at our house.

Because ensuring that children and their families have access to high-quality, comprehensive services that help the children develop cognitively, physically, socially and emotionally enables them to succeed in school and in life. Children who receive quality early childhood education and development services do better in reading and math and are more likely to graduate from high school, attend college and hold higher paying jobs. The support and security that these services provide infants, toddlers and young children help their brains develop in the early years and set the foundation—literally—for later development and learning.

Those early stimulations—sound, sight, touch—actually lay down, the physical circuitry of the brain. In 1965 when Head Start was enacted, those people were very prophetic. They didn’t really realize what we know now about the physical development of the brain. But they wrote a Head Start bill that really helped that so much. And now later on, we find out the importance of that stimulation for the actual laying down the circuitry of the brain.
We took some important steps last Congress. We authorized the Head Start Act to prioritize teaching quality and Early Head Start, among other things. I was proud to introduce that bipartisan reauthorization along with Chairman Miller and Governor Castle and Mr. Ehlers from Michigan and others. The committee also reported my colleague Ms. Hirono's PRE-K Act.

But as we will hear today, meeting the goal that we share with President Obama is about more than any one program, but about ensuring that wherever children are, there are high standards and the resources and accountability to ensure those standards are met. I am confident that today's hearing will provide us with valuable information about the needs of young children and their families and what we can do to help meet those needs. As a father and grandfather, I know that is the key to their success.

And now I yield to a very good friend of mine. We have been friends for many years—Governor Castle of Delaware.

Governor?

[The statement of Mr. Kildee follows:]

Prepared Statement of Hon. Dale E. Kildee, Chairman, Subcommittee on Early Childhood, Elementary and Secondary Education

It is appropriate that this is our first hearing this congress, both because we are here to focus on the first years of a child's life and because there is no issue more important than early childhood development.

Last month, in his address to a joint session of Congress, President Obama set a goal of ensuring that every child has access to a complete, competitive education from birth forward.

That is why Congress and President Obama worked together to increase funding by $2.3 billion for Head Start and Early Head Start, and $2.1 billion for the child care and development block grant in the American Recovery and Reinvestment Act and the recent 2009 appropriations bill.

Because those investments will preserve and create jobs and improve access and quality for the children who need those programs. That is why I was so pleased to see that President Obama's budget will commit significant new resources to early childhood.

Because the federal budget should reflect our values as a nation. And that is just what the President's budget will do.

And that is why I look forward to this committee working with the President to help parents and educators make the early years of children's lives nurturing and enriching. Because ensuring that children and their families have access to high-quality, comprehensive services that help the children develop cognitively, physically, socially and emotionally enables them to succeed in school and in life.

Children who receive quality early childhood education and development services do better in reading and math, and are more likely to graduate from high school attend college, and hold higher paying jobs. The support and security that these services provide infants, toddlers and young children help their brains develop in the early years and set the foundation—literally—for later development and learning.

These early stimulations—sound, sight, touch—actually lay down the physical circuitry of the brain. Wasted time diminishes that physical brain development.

We took some important steps last Congress.

We reauthorized the Head Start Act to prioritize teacher quality and Early Head Start, among other things. I was proud to have been the chief sponsor of that bipartisan reauthorization along with Chairman Miller, Mr. Castle, Mr. Ehlers, and others. The Committee also reported my colleague Ms. Hirono's PRE-K Act.

But as we will hear today, meeting the goal that we share with President Obama is about more than any one program, but about ensuring that wherever children are, there are high standards, and the resources and accountability to ensure those standards are met.

I am confident that today's hearing will provide us with valuable information about the needs of young children and their families and what we can do to help meet those needs.
As a father, grandfather, and former teacher, I know that is the key to their success and our success as a nation.

Mr. CASTLE. Well, thank you very much, Mr. Chairman. I didn't know that Chairman Kildee was a one-man Head Start program until today. Well, thank you for all the work you do in this area. You are obviously very experienced. And thank you for holding this important hearing.

I am also pleased to be here today examining early childhood education. Research increasingly points to the critical importance of quality early childhood education as the foundation for school success. Early childhood development is an issue the committee knows well, and one that is extremely important to me.

Since serving as the governor of Delaware, I have actively worked to ensure children 5 years of age and younger have access to high-quality early education. Through the Focus on the First 60 Months initiative in Delaware, we recognized that the most effective way to assure children can take advantage of existing K-12 education opportunities is to make certain they are ready to learn when they enter school. Delaware continues to work on early identification and treatment, which Dr. Lowery, who will be here shortly, will speak to in a few minutes, so that young children start life healthy, enter school ready to learn, and are able to grow into productive citizens.

In 2007, members on both sides of the aisle worked together to draft legislation which was ultimately signed into law, as Chairman Kildee has explained. That legislation reauthorized the Head Start program and built upon the strengths of the program in order to improve early childhood education opportunities for disadvantaged children. The reauthorization was a major stepping-stone in improving early childhood education, and this hearing today is also important as the Congress continues to focus on early childhood programs that promote the educational development of our nation's students.

Recently President Obama outlined his plan to create incentives for states to support comprehensive and coordinated, high-quality early childhood programs for children from birth to age five. I agree that Congress should look at ways through which we can support the work states are currently doing to guarantee our youngest children are provided the early learning opportunities they need to succeed in school and in life. To do this, Congress must work in a bipartisan manner to make certain parents remain in control of their child's early childhood care and education.

Congress must also ensure that states are given the flexibility they need to carry out successful early childhood programs while remaining mindful of taxpayer resources throughout the process, especially in these tough economic times. Additionally, I am hopeful that we can work together to coordinate, not duplicate, existing federal early childhood programs.

Today we will hear from witnesses who will provide us with expert background on improving early childhood education. I look forward to hearing their advice about effective and efficient early childhood reform and learning what they are doing to help our nation's youngest and often most at-risk children.
Thank you, Mr. Chairman, and I yield back.

[The statement of Mr. Castle follows:]

**Prepared Statement of Hon. Michael N. Castle, Senior Republican Member, Subcommittee on Early Childhood, Elementary and Secondary Education**

Good morning and thank you, Chairman Kildee, for holding this important hearing. I am pleased to be here today examining early childhood education. Research increasingly points to the critical importance of quality early childhood education as the foundation for school success. Early childhood development is an issue the Committee knows well, and one that is extremely important to me. Since serving as the Governor of Delaware, I have actively worked to ensure children five years of age and younger have access to high-quality early education. Through the Focus on the First Sixty Months initiative in Delaware, we recognized that the most effective way to assure children can take advantage of existing K-12 education opportunities is to make certain they are ready to learn when they enter school.

Delaware continues to work on early identification and treatment, which Dr. Lowery will speak to in a few minutes, so that young children start life healthy, enter school ready to learn and are able to grow into productive citizens.

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Recently, President Obama outlined his plan to create incentives for states to support comprehensive and coordinated high-quality early childhood programs for children from birth to age five. I agree that Congress should look at ways through which we can support the work states are currently doing to guarantee our youngest children are provided the early learning opportunities they need to succeed in school and in life.

To do this, Congress must work in a bipartisan manner to make certain parents remain in control of their child’s early childhood care and education. Congress must also ensure that states are given the flexibility they need to carry out successful early childhood programs while remaining mindful of taxpayer resources throughout the process—especially in these tough economic times. Additionally, I am hopeful that we can work together to coordinate, not duplicate, existing federal early childhood programs.

Today we will hear from witnesses who will provide us with expert background on improving early childhood education. I look forward to hearing their advice about effective and efficient early childhood reform, and learning what they are doing to help our nation’s youngest, and often most at-risk, children.

Thank you Mr. Chairman, I yield back.

Chairman KILDEE. Thank you, Governor.

Without objection, all members will have 7 calendar days to submit additional materials or questions for the hearing record.

I would like now to introduce the very distinguished panel of witnesses with us this morning.

Harriet Dichter is deputy secretary, Office of Child Development and Early Learning, Pennsylvania Departments of Public Welfare and Education. The Office of Child Development and Early Learning was created by Governor Rendell as part of a new initiative to link the Department of Public Welfare and the Department of Education to bolster early education and care for Pennsylvania children.

As the head of that office, Ms. Dichter leads state efforts to raise the priority levels for early learning, including programs such as Pre-K Counts, the full-day kindergarten initiative, state-based Head Start program, the Keystone STARS early learning program,
Nurse-Family Partnership, Child Care Works and Early Intervention.

What do you do in your spare time? [Laughter.]

We really welcome you here. You have a great reputation of knowledge and a great reputation of care for children.

Gina C. Adams is a senior fellow at the Urban Institute. Her focus is on policies and programs that affect the affordability, quality and supply of child care and early education, with particular focus on policies affecting lower income families. Her current research includes multi-state studies of child care providers, subsidy policies and factors that shape quality.

Prior to the Urban Institute, she was the assistant director of the child care and development division at the Children’s Defense Fund. I used to work with Marian Wright Edelman, that is many years ago, on that. And the person who became first lady and senator and now secretary of state, she was involved in that at that time too.

She began her career as a child care teacher for infants and toddlers and worked with low-income families.

Sue Russell is currently president of the Child Care Services Association, a nonprofit committed to promoting affordable, accessible, high-quality early care and education. CCSA works locally, statewide and nationally. Sue developed both the T.E.A.C.H. Early Childhood and Child Care WAGE$ Project, initiatives that have been successful in increasing the education, compensation and retention of early childhood educators. Sue currently serves on various statewide and national boards and committees and is president of the board of the National Association for the Education of Young Children.

I now yield to my friend, Governor Castle, to introduce Secretary Lowery.

Mr. CASTLE. Thank you, Mr. Chairman.

Dr. Lillian M. Lowery was appointed Delaware’s secretary of education by Governor Jack Markell in January of 2009. Prior to appointment as secretary of education, Dr. Lowery served as superintendent of the Christina School District in Wilmington, Delaware. The district serves nearly 20,000 students who reside in portions of the city of Wilmington and surrounding suburbs.

Before serving as superintendent in the Christina School District, Dr. Lowery was the assistant superintendent of Cluster VII for Fairfax County Public Schools in Fairfax, Virginia. She also served for 2 years as an area administrator for Fort Wayne Community Schools in Fort Wayne, Indiana. Dr. Lowery has taught middle and high school English in school districts in Fairfax and Alexandria, Virginia, and Gastonia, North Carolina. Secretary Lowery brings a lot of experience to the table, and I look forward to hearing your testimony this morning.

Dr. Lowery, welcome.

Chairman KILDEE. We welcome you all. Again, for those who have not testified before this subcommittee before, let me explain our lighting system and the 5-minute rule. Everyone, including members, is limited to 5 minutes of presentation or questioning.

The green light will be illuminated when you begin to speak. When you see the yellow light, it means you have 1 minute remain-
ing. When you see the red light, it means that your time has expired; you need to conclude your testimony.

But please be certain as you testify to turn on and speak into the microphone in front of you and turn it off when you are finished. Now, we don’t have a button up here for an ejection seat, so you may finish up your thought rather than cut off in the middle, so you have a little flexibility there.

We will now hear from our first witness.

**STATEMENT OF HARRIET DICHTER, DEPUTY SECRETARY, OFFICE OF CHILD DEVELOPMENT AND EARLY LEARNING**

Ms. Dichter. Thank you, good morning, everyone. I am Harriet Dichter. I am the deputy secretary for the Office of Child Development and Early Learning, which is part of both the Pennsylvania Departments of Education and Public Welfare. I am also co-chair of the Pennsylvania Early Learning Council.

I want to start by really thanking all of you for acknowledging the important role of early education and the educational and economic payoff from including our existing early childhood program in the American Recovery and Reinvestment Act, and also for taking time this week to focus on early childhood education.

As was mentioned, my office was created by Governor Ed Rendell to link the Department of Public Welfare and the Department of Education in order to raise the priority level for early learning and to really create an early learning system in Pennsylvania. Improving the national track record for investments and outcomes for our young children is essential. And based on our experiences in Pennsylvania, I have three points that I want to make while I am here today.

The first, of course, is that there is no silver bullet, not just one investment or one program that works. What matters regardless of the early childhood program is a common framework of high standards, accountability and very importantly sufficient investment to make a difference.

Secondly, the federal government has not been sufficiently proactive in this area and has left too much for the states to do, particularly in the area of financing. And third, proper public sector governance needs to be a focus in order to assure both good outcomes for children and the efficient use of our public dollars.

So first, let me start by saying that to meet our children’s and families’ needs, we need a continuum of quality services. We can and we should expect to make investments in programs with different names, such as child care, pre-kindergarten and Head Start, for example, and we should be expecting to invest in infants, toddlers and preschoolers in each and every year until they enter school.

In Pennsylvania, we take advantage of an existing array of early childhood providers to create our system and to respond to the very diverse needs of our young children and their families. Our programs in our state reach about 300,000 children and families through a network of school district providers, child care providers, Head Start providers, early intervention and home-visiting providers. But let me stress, although we have been busy working on
this agenda, we are still only reaching 40 percent of our population with services that we consider to be of adequate quality.

We insist in Pennsylvania that our programs do share certain commonalities. They have to meet high program and specific early learning standards. And I brought these just to show. We actually have published all of our standards, pre-k through second grade. We have parent materials for them to use, and we have classroom things to put up in rooms so people can take a look at those and see there is a way to do this in a sensitive way. Our early learning standards are linked to our third grade academic standards. They go beyond them because we have all of the child’s development covered.

We insist upon degreed and credentialed early childhood staff and benchmark compensation to go with that. Our curriculums and assessments have to align with our early learning standards. We have a big focus on partnerships for parents, program accountability, documentation of our children’s progress and both sufficient financial and very importantly helping-hand supports that endorse and demand excellence.

So here are some examples. We systematically and voluntarily are improving child care quality through Keystone STARS. This integrates research-based standards and ratings, improvement supports—and Sue is going to talk a little bit more about T.E.A.C.H. and WAGE$; we are a big investor in T.E.A.C.H., and we have a version of WAGE$ inside of Keystone STARS—and very importantly financial resources.

An independent evaluation of our Keystone STARS program shows that our program reversed a 10-year decline in Pennsylvania in child care quality. Nearly 80 percent of our centers voluntarily participate, and last year 25 percent of them moved up at least one STAR level. We are serving 170,000 children in this program, and increasingly our most vulnerable working families who participate in our Child Care Works subsidy program are increasingly selecting Keystone STARS providers. Each month, we see an uptick of maybe one or two percent more, so we are well over 40 percent of the families at this point.

Another example, through our PA Pre-K Counts program, we reach at-risk 3-and 4-year-olds, and we use our Keystone STARS 3 and 4 providers, school districts and Head Start to field this program. In our start-up year, which was 2007-2008, I am very proud to say that we both met all of our enrollment targets—we enrolled 12,000 children in less than 3 months in the first year—and 94 percent of those kids finished the school year with age-appropriate skills and behavior or emerging age-appropriate skills and behavior, something we consider to be a stunning first-year success rate.

For at-risk infants and toddlers, we have home visiting through Nurse-Family Partnership and the Parent-Child Home Literacy Program. We also include in our array children with delays and disabilities through Early Intervention, and there our focus is on inclusive practice. We have moved our preschoolers by 10 percent just in 1 year into more inclusive environments.

We support Head Start by adding state dollars to enroll more children. And to our knowledge, we are the only state in the country to house all of these programs in one office.
Now, as I said, we cannot serve our children and families well using a silver-bullet approach that focuses on just one program, one age group or one financing stream. So key elements of our framework include high standards and expectations for program quality. These must be based on research and experience and focused on the best outcomes for our children.

The professional preparation and ongoing education of our teachers and administrators—it is not enough to tell our teachers and administrators to achieve high standards. We have to give them assistance to help them get there and to maintain their excellence.

Accountability for results is another focus. A practical way goes with that to help people in the broader community understand the results and why they matter for our entire society.

And of course financial supports—I cannot stress this enough—link very directly and clearly to the standards we articulate at sufficient levels to get the job done. So our framework reminds us the work is complex, but it can be broken down into a realistic and achievable strategy.

Second point I wanted to make is the importance of sufficient public investment. The established funding streams at the federal level—the Child Care and Development Block Grant, Head Start, IDEA Early Intervention for infants, toddlers and preschoolers—are not keeping pace with need. We are one of only eight states in the country to have consistently been improving our state investment in a full continuum of early childhood programs. We are making progress, but we have major gaps in our services.

We started 5 years ago. Only 20 percent of our kids had access to a decent, quality program. Today we are at 40 percent. This is possible because of our new state dollars. We have children at risk in every county, every city and every state in the U.S. New funding is needed to help close a staggering gap between those children, those at risk of school failure in particular, who are in our quality early learning programs and those who are not. We need to ensure a public funding base for early education, just as we work to ensure a public funding commitment to K-12.

What does that mean? I will try to get to the end here. We have to significantly deepen our investment in our established federal programs and funding streams, but we also need to commit to new federal funding that will push a unified approach across all the early childhood programs, insist that the states have meaningful, research-based standards and accountability based on nationally acceptable minimums. That will facilitate coherence in the programs and produce quality results, and I believe it can be done with sensitivity to state implementation needs.

The last point that I want to make has to do with the organization of the programs and the resources to have that happen. Our families really do not care, in my experience, what we call the programs. They just want to know when they are enrolling their child in a program that it is of good quality and it is responsive to their needs. And they do want to know, when we are using public dollars, that the dollars are efficient and well-leveraged.

As we mentioned, in Pennsylvania we solved this problem when we created my office. It has given us great access into both educational resources and health and human services. We have a sin-
gle staff to do the work, a consistent framework across the pro-
grams. We have to find a way for the federal government to do the
same.

In summary, there is not just one program that works. Children
need this continuum of early learning services. We need a commit-
ment to infants, toddlers and preschoolers alike. It is just fine to
have programs with different names, different hours of service. It
is objectionable, though, to have programs that don’t have the same
expectations for outcomes for children, the same standards for serv-
ing our children, the same expectations for performance and ac-
countability and sufficient financing.

Again, our parents expect that when a program opens its doors
to them, it will serve them and our children well. From these sim-
ple precepts, I think there are several lessons, then, that we can
take to inform the next phase of federal investment and policy.

Thank you.

[The statement of Ms. Dichter follows:]
Prepared Statement of Harriet Dichter, Deputy Secretary, Office of Child Development and Early Learning


Recently, Congress recognized the economic and educational payoff of early education and development and included existing early education in the American Recovery and Reinvestment Act: the Child Care and Development Block Grant, Head Start and Early Head Start, and Early Intervention for infants, toddlers in preschools. Thank you for dedicating hearings to early childhood development as you plan for the next phase of federal leadership and investment.

My office was created by Governor Rendell to link the Department of Public Welfare and the Department of Education in order to raise the priority level for early learning and to create an early learning system.

Improving the national track record for investments and outcomes for young children is essential. Based on our experiences in Pennsylvania, I have three points:

1) There is no one silver bullet, not just one investment or program that works. Whatever matters, regardless of the program, is a common framework of high standards, accountability and efficient investment to make a difference.

2) The federal government has not been sufficiently proactive in this area, leaving too much to the states to do, especially on financing.

3) Proper public–sector governance needs to be in place to assure good outcomes and efficient use of public dollars.

First, to meet children’s and family needs, we need a continuum of quality services. We can and should expect to make investments in programs with different names, such as child care, pre-kindergarten and Head Start for example, and we should expect to invest in infants, toddlers and preschoolers in each and every year until they enter school.

In Pennsylvania, we take advantage of the existing array of early childhood providers to create our system and to respond to the diverse needs of young children and families. Programs in our office are reaching 50,000 children and their families through a large network of school district, child care, Head Start, Early Intervention, and home visiting providers—but let me stress that we reach only 40% of our birth to five population.

We insist that our programs share certain commonalities: high program and specific early learning standards for each age group from birth to second grade that links to our 3rd grade standards; degree and credentialed early childhood staff; curriculum and assessments aligned with early learning standards; partnerships with parents; program accountability; documentation of children’s progress; and sufficient financial and “helping hand” supports that endorse and demand excellence.

Testimony of Harriet Dichter, Deputy Secretary, Pennsylvania Office of Child Development & Early Learning, March 19, 2009, U.S. House of Representatives
Some examples:

We systematically and voluntarily are improving child care quality through Keystone STARS, which integrates research-based standards and ratings, improvement supports, and financial resources. An independent evaluation shows that Keystone STARS reversed Pennsylvania’s ten-year decline in child care quality. Nearly 80 percent of our centers participate, and last year 25 percent of participating programs moved up at least one STAR level. We serve 170,000 children across the commonwealth, and have seen a trend of more of our families who participate in the Child Care Works subsidy program choosing Keystone STARS programs.

Through our PA Pre-K Counts program, we reach 11,800 at-risk three- and four-year-olds using our Keystone STARS, school districts, and Head Start providers. Among our start-up cohort (07-08) 94% of the children finished the school year with age-appropriate skills and behavior, or emerging age-appropriate skills and behavior, a stunning success rate.

For at-risk infants and toddlers, we have home visiting through the Nurse-Family Partnership and Parent Child Home Literacy programs.

We serve infants, toddlers and preschoolers with developmental delays and disabilities through Early Intervention, where we focus on and are getting more children enrolled in inclusive typical early childhood programs.

We support Head Start by adding state dollars to enroll more children.

We are the only state in the country to house all of these programs (plus others I did not name and shown in Appendix 1) in one office.

We cannot serve our families well using a silver bullet approach that focuses on one program, one age group, or one financing stream. Pennsylvania has developed a common framework that serves the diverse needs of families while building confidence from business and other community leaders. Our framework includes:

1) High standards and expectations for program quality, based on research and experience, and focused on the best outcomes for children;
2) Professional preparation and ongoing education of teachers and administrators to whom we delegate the responsibility of delivering these programs. It is not enough to tell people to achieve high standards, assistance is needed to achieve and maintain them;
3) Accountability for results—and a practical way to help those people the broader community understand these results and why they matter for our entire society;
4) Financial supports that are linked directly and clearly to the standards we articulate at sufficient levels to get the job done.

While the framework does remind us that the work is complex, it can be broken down and a realistic, achievable strategy.
Chart 1: How Pennsylvania Approaches Its Early Childhood Programs

My second point is the importance of shared, responsible, and sufficient public investment in these programs. The established and dedicated funding streams in areas such as the Child Care and Development Block Grant, Head Start, and IDEA Early Intervention for infants, toddlers, and preschoolers, are not keeping pace with the need. As one of only eight states to consistently improve state investment in a continuum of programs, Pennsylvania has made progress, but we still have gaps in services.

In 2003, less than 20% of Pennsylvania’s young children (0-5) could participate in a good quality program. Today, we are reaching about 40%. This is only possible only because of our investment of new state dollars so that our children are well prepared for school.

We have children at risk in every county, city and state in the United States. New funding is needed to help close the staggering gap between those children, particularly those at risk of school failure, who are in our quality early learning programs and those who are not. We need to assure a public funding base for early education, just as we work to assure a public funding commitment to K-12 education. First, we should enhance investment in the established federal programs and funding streams. Second, we should commit to new federal funding that will push a unified approach that insists that states have meaningful, research-based standards and accountability based on nationally acceptable minimums, and to facilitate coherence across the federal programs to produce quality results. It is possible to have a national baseline that does not interfere with the states’ implementation of programs.

This brings me to my third and final point—the organization of early education programs and resources needs to make sense. Our families do not care what we call the programs—whether it’s Keystone, STARS, Child Care Works, Head Start, PA Pre-K Counts or something else. Parents and taxpayers want to have confidence in the responsiveness and...
quality of early education services and that public investments are made efficiently and are well-leveraged.

Governor Rendell created my office in our Departments of Education and Public Welfare to efficiently unify and integrate the early childhood programs of both agencies. The office covers the waterfront—we encompass school and community-based programs for children from birth through full-day kindergarten. Working across two agencies allows us to take advantage of the assets of our human services and educational systems. At the same time, we have a single staff and a consistent framework that we use to systematically advance the work. The federal government must find new ways to do the same.

There is not just one program that works. Children need a continuum of early learning services, and a commitment to infants, toddlers and preschoolers alike. It is fine to have programs with different names, and different hours of service. What is objectionable is to have programs that do not have the same expectations for child outcomes, the same standards for serving children, the same expectations for performance and accountability, and sufficient financing. Parents expect that a program that opens its doors to them will serve them and their children well. From these simple precepts, there are several lessons to inform the next phase of federal investment and policy.
Appendix 1
PA Office of Child Development & Early Learning
Selected Programs

Child Care Certification- certification and inspection of over 9,000 regulated child care programs serving 350,000 children.

Child Care Works-ration assistance for 130,000 children (monthly average) of low-income working families.

Children’s Trust Fund initiatives to prevent child abuse as determined by the Trust Fund board, a mixed group of legislators and gubernatorial appointees, and staffed by OCDEL.

Community Engagement-local groups to work on community education on early childhood education and to focus on the transition between community early childhood education programs and school district k-12 programs.

Early Childhood Mental Health Initiative-early childhood mental health specialists who consult with Keystone STARS programs about program and child needs and interventions when behavioral issues with children arise.

Early Learning Network- To use technology to collect indicators of child outcomes so that the analyses of this information can be used to better manage state investments for early learning programs. Pennsylvania’s goal is to use the information to manage its finances more effectively by targeting resources to those programs and services that bring about good progress while considering individual circumstances and demographics that also may affect results. This information will also be available to local teachers and administrators and provide them with real-time data so that they may continuously improve their performance to better meet the needs of the children they serve. The objectives are:

1. To know if Pennsylvania’s early education programs are making a difference,
2. To understand how financial resource levels relate to child outcomes,
3. To meet state and federal reporting requirements related to child progress,
4. To compare programs serving similar types of children on ability to enhance child progress,
5. To tailor professional development and technical assistance to address most pressing early learning needs, and
6. To understand how program factors work together to impact children.

Full Day Kindergarten (through Accountability Block Grant) dedicated resources for school districts to implement research-based interventions that improve student performance, with nearly 25% of the money invested in Full Day Kindergarten now serving 65% of PA children and with OCDEL providing on-site observations and professional development for teachers and administrators.

Early Intervention Birth to Five- Infant/Toddler and Preschool Early Intervention (under IDEA) for nearly 74,000 children with developmental delays and disabilities.

Testimony of H. Dieter, Deputy Secretary, Pennsylvania Office of Child Development & Early Learning, March 14, 2000; U.S. House of Representatives.
Early Intervention Technical Assistance: professional development and technical assistance for sound implementation of Early Intervention services, including new communications certification.

Head Start State Supplemental Assistance Program: state resources to enroll over 4,000 more children in Head Start.

Keystone STARS: a quality rating and improvement system serving over 170,000 children enrolled in thousands of child care programs with a combination of standards, financial and professional supports, and third party monitoring on accountability.

Nurse Family Partnership: evidence-based nurse based home visiting model for very high risk first time mothers and their young children.

Parent Child Home Literacy Program: evidence-based play and literacy based home visiting program for at-risk young children with a focus on toddlers.

PA Early Learning Keys to Quality: regionalized approach to improved professional development of early education teachers, aides, and administrators, offering a career lattice with resources to obtain early childhood degrees and credentials, and technical assistance to support program quality improvement. Statewide, support for the T.E.A.C.H. educational scholarship programs, a voucher program for practitioners in Keystone STARS and PA Pre-K Counts earning college credits, an articulation project with the Pennsylvania State System of Higher Education to bring two and four year colleges together to assure program to program articulation and transfer in early childhood education; an oversight system for certifying instructors and technical assistance staff to deliver professional development; support for PA certification programs in early childhood, including director’s credential and school-age credential. Additional statewide and regional supports are also in place, all linked to the programs engaged in quality through STARS, EI, Pre-K Counts, etc.

PA Pre-K Counts: preschool program of 2.5 or 5 hours a day, 180 days a year, for at-risk 3 and 4-year-olds, with high standards, offered by a diverse array of school districts, Keystone STARS, Head Start, and licensed nursery school programs.

PA’s Promise for Children: public information resources to inform and educate parents, business leaders and others in the general community about early childhood education.

Public-Private Partnerships: These are partnerships with foundations and the research community and include Pennsylvania’s participation in the national BUILD initiative, a financial investment by foundations in the Early Learning Network, the Early Learning Investment Commission, community engagement, and continued development of the capacity of higher education to assist community-based teachers earn early childhood teacher certification by responding to their unique needs.
### Appendix 2
Children Served Over Time

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 02-03</th>
<th>FY 06-07</th>
<th>FY 09-10</th>
<th>Program</th>
<th>FY 02-03</th>
<th>FY 06-08</th>
<th>FY 09-10</th>
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<tbody>
<tr>
<td>Child Care Works</td>
<td></td>
<td></td>
<td></td>
<td>Child Care Works</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>31,993</td>
<td>32,628</td>
<td>36,766</td>
<td>Federal Head Start</td>
<td>33,686</td>
<td>35,211</td>
<td>36,311</td>
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<tr>
<td>Formula Telf</td>
<td>20,350</td>
<td>42,863</td>
<td>63,793</td>
<td>Head Start Supplemental Assistance Program</td>
<td>Did not exist</td>
<td>5,020</td>
<td>5,020</td>
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<tr>
<td>Low Income</td>
<td>45,928</td>
<td>62,614</td>
<td>64,914</td>
<td>Keystone STAR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL, monthly averages</td>
<td>99,847</td>
<td>152,266</td>
<td>156,227</td>
<td>Number of Providers in Keystone STAR</td>
<td>850</td>
<td>4,796</td>
<td>4,796</td>
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<tr>
<td>Early Intervention</td>
<td></td>
<td></td>
<td></td>
<td>Nurse-Family Partnership</td>
<td>3,092</td>
<td>4,227</td>
<td>4,398</td>
</tr>
<tr>
<td>Birth to 3 Program</td>
<td>31,927</td>
<td>32,972</td>
<td>35,044</td>
<td>Total</td>
<td>3,092</td>
<td>4,227</td>
<td>4,398</td>
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<tr>
<td>3 to 5 Program</td>
<td>33,785</td>
<td>44,975</td>
<td>46,063</td>
<td>School-Based Pre-K and I4</td>
<td>2,684</td>
<td>6,022</td>
<td>20,021</td>
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<tr>
<td>Full Day Kindergarten</td>
<td>42,010</td>
<td>77,905</td>
<td>77,085</td>
<td>PA Pre-K Counts</td>
<td>Did not exist</td>
<td>11,802</td>
<td>12,000</td>
</tr>
</tbody>
</table>

1 Fiscal year end Goal or Projection
2 Projection based on current FY Participating
Research consistently reports that all young children benefit from quality early learning opportunities, with children at risk of school failure showing the greatest benefit. Children affected by risk factors such as income, family status, or poor school system, which can affect their performance in school, benefit most from high quality early education. When they have access to quality early education before age five, children at risk of school failure can often make up for setbacks in their development, enabling them to enter kindergarten on par with their peers.

Children who are encouraged and supported through quality early childhood education demonstrate significant progress in acquiring early learning skills and may save schools money for special education and remediation costs. These children are more likely to graduate from high school, to attend college or quality job training programs, and be valuable members of the workforce. The benefits of quality early education to children and families translate into a more competitive workforce and greater tax base, while reducing public expenses in special education costs, public assistance, crime control and lost taxes.

Pennsylvania’s investments in quality early education will provide our communities with benefits for years to come, but it is important that these investments are strategically made to provide the greatest return possible for the commonwealth.

In order to support sound programmatic and investment decisions regarding the distribution of early education services, the Pennsylvania Office of Child Development and Early Learning (OCDEL) annually compiles the Program Reach and County Risk Report. This report provides county, as well as city, specific information on the level of risk for school failure for children (based on seven risk factors) and the availability, or reach, of most OCDEL programs to children in each county and in the 27 largest cities in Pennsylvania.

To enhance the risk and reach report, OCDEL is including city level data for the first time. Please note two caveats about the city data and how it was calculated in this first year of its inclusion in the Risk and Reach report. In the risk data, the percentage of children receiving aid through Temporary Assistance to Needy Families (TANF) could only be determined at the county level. This might reflect a modest understatement of risk in these communities. In some instances, the reach data may not have been available at the city level, and thus, the calculations for reach may be lower than actual reach at the city level.

OCDEL’s Program Reach and County Risk Assessment for fiscal year 2007-2008 shows that Pennsylvania continues to make progress serving at-risk children, but still experiences gaps in serving children who could benefit the most from a quality early education experience.
• Children are at risk of school failure throughout the commonwealth. Of the 67 counties, children in 46 (69%) counties are at moderate-high or high risk of school failure; of the 27 largest cities, children in 20 (74%) are at moderate-high or high risk of school failure.

• Less than four in 10 young children participate in a quality early education program. Thirty-eight percent of children under the age of five participate in state and/or federally funded quality early childhood programs in Pennsylvania. In the commonwealth’s 27 largest cities, 50% of children under the age five participate in state and/or federally funded quality early childhood programs. Quality programs are defined as: Nurse-Family Partnership, Parent-Child Home Program, Head Start, State and Federal Pennsylvania Pre-K Counts, Accountability Block Grants for Pre-K, School Based Pre-K, Early Intervention; and Keystone STARS.

• Approximately two in 10 young children participate in a high quality early education Program. Only 22% of children under age five participate in state and/or federally funded high quality early childhood programs in Pennsylvania. In the commonwealth’s 27 largest cities, 27% of children under the age five participate in state and/or federally funded high quality early childhood programs. High quality programs are defined as: Head Start State and Federal, Pennsylvania Pre-K Counts, Accountability Block Grants for Pre-K, School Based Pre-K, Early Intervention and Keystone STARS 3 & 4 only.

• Approximately half of Pennsylvania’s preschoolers participate in quality early education programs and one-third of preschoolers participate in high quality early education programs. Among preschool aged children, 50% of three and four year olds statewide are served in early childhood education settings and 67% of three and four year olds in Pennsylvania’s 27 largest cities are served in early childhood education settings. Only 35% of children ages three and four participate with a state and/or federally funded high quality early childhood program in Pennsylvania. High quality programs are defined as: Head Start State and Federal, Pennsylvania Pre-K Counts, Accountability Block Grants for Pre-K, School Based Pre-K, Early Intervention and Keystone STARS 3 & 4 only.

• Pennsylvania’s investment per child is $2,722 annually. Children are served in these state and federally funded early childhood programs at the rate of approximately $2,722 per child, an amount which is significantly less than the cost of providing a quality early education experience that produces positive outcomes for children, families and communities. In general, the national cost for a five hour day at 180 days a year for a pre-kindergarten program is $8,700 per child. This represents a gap in our public investment to achieve the most positive results for children.

• Reach by county is greater for Head Start and Keystone STARS. The Head Start State and Federal programs and Keystone STARS were the only direct impact programs for children under the age of five to reach children in all 67 counties.

Testimony of Harriet Dichter, Deputy Secretary, Pennsylvania Office of Child Development & Early Learning, March 14, 2006, U.S. House of Representatives
• Reach is greatest across the commonwealth for Keystone STARS. Of all the state investments, most children were reached through the Keystone STARS program, which averages service to 18% of children from birth to five years. An average of 3% of children under age five in Pennsylvania were served in STAR 3 and 4 programs. As of June 2008, there were 5,022 child care providers within the Keystone STARS system, covering all counties and reaching an estimated 140,000 children under age five.

The quality of a child’s early education affects their learning for life. By understanding the needs of our young children across the commonwealth and the reach of our early childhood programs, Pennsylvania can make smarter investments in a brighter future.
Appendix 4
Highlights

1. Excerpt from OCDEL Annual Report 07-08
2. Highlights of PA’s Framework: High Level Points of Progress Made Over Time and Work in Progress Now

1. 2007-08 Excerpt from OCDEL Annual Report:

In 2007-2008 OCDEL focused on creating more quality early learning opportunities for children, assuring strong implementation and coordination among programs, building accountability into the system, and beginning development of a system to document positive outcomes for children. Here are some highlights from the year:

Quality program design and implementation

• The Pennsylvania General Assembly approved Pennsylvania Pre-K Counts, a high quality pre-kindergarten program which served 10,945 children in 2007-2008.
• In partnership with the Pennsylvania State System of Higher Education, Pennsylvania granted three higher education institution team grants to develop program to program articulation agreements that will make it easier for students in early childhood education to transfer credits from two-year institutions to four-year institutions and earn higher degrees.
• For the first time in 16 years, Pennsylvania has revised its regulations for child care facilities which went into effect September 22, 2008.
• In order to make it possible for Keystone STARS programs to serve more children receiving Child Care Works, OCDEL began offering a “subsidy add-on” rate for child care programs participating in Keystone STARS. These programs receive an additional subsidy for each child they serve that is participating in Child Care Works. This add-on rate helps to cover the additional costs of providing higher quality early education.

RESULTS:
• 25% of Keystone STARS programs moved up at least one STAR level in 2007-2008.
• 50% more TANF children receiving Child Care Works subsidy are using regulated child care in 2007-2008 than in 2006-2007.
• 53% more teachers and directors were awarded T.E.A.C.H. scholarships than in 2006-2007.
• 20% more professional credentials (Director’s Credential, School-Age Credential) were awarded than in 2006-2007.

Accountability:
• The kickoff of the Pennsylvania’s Enterprise to Link Information for Children Across Networks (PELICAN) system began with the rollout of PELICAN Pennsylvania Pre-K Counts and PELICAN Provider Certification to track vital data regarding Pennsylvania Pre-K Counts programs and certified and registered child care.

Testimony of Harriet Dietz, Deputy Secretary, Pennsylvania Office of Child Development & Early Learning, March 14, 2009, U.S. House of Representatives
Pennsylvania implemented independent Environment Rating Scales (ERS) assessments in Pennsylvania Pre-K Counts classrooms and increased assessments for Keystone STARS, resulting in 82% more classroom assessments than in 2006-2007.

RESULTS:
• ERS scores increased among Keystone STARS programs. Average classroom scores in STAR 3 facilities increased from 5.01 in 2005-2006 to 5.06 in 2007-2008. Average classroom scores in STAR 4 facilities increased from 4.15 in 2005-2006 to 5.31 in 2007-2008.
• Over 7,000 parent surveys returned in 2007 showed that most families agreed that Early Intervention has empowered families to make the best choices for their children.

Documenting positive outcomes for children
• The first phase of Pennsylvania’s Early Learning Network began (ELN) with Pennsylvania Pre-K Counts grants submitting child outcomes twice during the year using the Work Sampling Online tool.

RESULTS:
• Ninety-four percent (94%) of Pennsylvania Pre-K Counts children finished the school year with age-appropriate skills and behavior or emerging age-appropriate skills and behavior – a stunning success rate.
• Child assessment data from infants, toddlers, and preschoolers who entered Early Intervention after July 1, 2007 and exited Early Intervention prior to June 30, 2008 shows that nearly every child (99%) made progress from entry to exit.
• By the end of the Early Childhood Mental Health (ECMH) pilot phase nearly 70% of children demonstrated that their original issues had resolved or had significantly decreased, or they had been referred to other support services.
• Children participating in Pre-K Counts Public-Private Partnership classrooms showed significant progress in acquiring early learning skills during their participation, particularly those who were at risk of school failure. In fact, the length of time the child was enrolled in the program was a good predictor of their progress.

Meeting the diverse needs of families:
• Publication of the 2007-2008 OCDEL Program Reach and County Risk Assessment included data on children served in more OCDEL programs and reach and risk information for Pennsylvania’s 27 largest cities.
• Kickoff of the Race Matters initiative began in Pennsylvania, resulting in more than 300 individuals oriented to the Race Matters framework and toolkit.

Leadership at all levels:
• Pennsylvania conducted a statewide public information campaign for Keystone STARS and Pennsylvania Pre-K Counts, resulting in nearly 30,000 web visitors and thousands of calls inquiring about the two programs in a six-week period.
• Community Engagement Groups reported that 894,728 children, parents and families throughout the commonwealth were involved in events such as recognition events, legislative meetings, Week of the Young Child events, or community fairs.

OCDEL launched the OCDEL Community Education listserv to provide OCDEL programs with tips and tools to reach out and spread the word about their programs in the community.

RESULTS:
• Between February 2007 and June 2008, subscribers to the Build listserv increased by 65%.

Vision for tomorrow
Pennsylvania has made great progress in developing an early education system that offers quality programs that can work seamlessly together and meet the diverse needs of families.

Pennsylvania’s new challenges include the continuous quality improvement of programs and professionals and providing greater access for families.

Pennsylvania’s efforts in 2008-2009 will focus on helping programs and professionals meet the higher quality expectations required in the next few years; facilitating greater collaboration between early education and the full education continuum and other child-serving organizations; continuing the establishment of common accountability and child outcomes reporting among all OCDEL programs; and maximizing resources.

2. Using the OCDEL Framework, a high level overview of progress to date and work in progress:

Planning Monitoring and Accountability

• Have:
  • Quantitative and qualitative measures to assess program quality and performance
  • Standards and support to help people and programs meet standards & expectations
  • Ranking of each community of risk to children and reach of OCDEL programs for all children
• Working on:
  • Creating the Early Learning Network
  • One reporting system for assessment of children in ALL of our programs
  • Comprehensive data system taking into account child’s background and public investment in the program

Standards & Assistance to Meet Them

• Have:
  • Early Learning standards birth - 2nd grade
  • Program quality standards
  • Early childhood professional standards
  • Early childhood career lattice

Testimony of Harriet Ditch, Deputy Secretary, Pennsylvania Office of Child Development & Early Learning, March 14, 2007, U.S. House of Representatives
Ms. RUSSELL. Good morning, Chairman Kildee, Ranking Member Castle and members of the subcommittee. Thank you for this opportunity.

We believe that improving the education, compensation and retention of the early childhood workforce is the key to producing positive health and educational outcomes for young children. In 1990, using data from the state’s first early childhood workforce
study, Child Care Services tested a scholarship model designed to address the low education, poor compensation and turnover of the workforce.

Now operating in 21 states, T.E.A.C.H. scholarships help pay tuition, books and travel costs, and support paid release time to allow teachers to balance the extra load of going to school. As teachers complete their required credit hours, they receive a raise or a bonus and must continue teaching in their program for another year.

In most T.E.A.C.H. states, teachers, directors and family child care providers working in child care, Head Start or pre-k settings are eligible for scholarships. T.E.A.C.H. scholarships always support formal coursework leading to credentials or degrees and require a funding partnership between individuals, their employers and the T.E.A.C.H program.

In fiscal year 2008, states participating in T.E.A.C.H. spent about $28.3 million; the largest source of these funds came from the Child Care and Development Block Grant. Last year, over 21,000 individuals across the country, working in over 10,000 different early childhood programs received T.E.A.C.H. Early Childhood scholarships. Ten percent worked in Head Start programs, and 62 percent taught 3 and 4-year-olds. About 46 percent were women of color, typically earning less than $10 an hour.

They attended almost 600 different colleges and universities. Together, these scholarship recipients completed about 130,000 credit hours. Their average earnings increased, and they left their classrooms at average rates of less than 8 percent annually. And this is in a field that routinely experiences 40 percent turnover a year.

While attending a community college, teachers’ basic language and math literacy skills improve, as well as their knowledge of cognitive, social, emotional and physical development. About two-thirds of participants were working on their associate degrees, doing this while working full-time and achieving a 3.25 mean grade point average.

In 1994, to address the systemic problems of low wages and high turnover, Child Care Services began the Child Care WAGE$ Project. Graduated supplements are paid directly to participants and tied to their level of education. Supplements are paid every 6 months with funding from Smart Start and CCDBG, as long as the individual remains in her classroom. Supplements range from $200 to $6,250 annually. Last year, we had almost 9,000 participants. Graduated supplements encourage continuing education. WAGE$ participants with 2-or 4-year degrees had a 14 percent turnover rate, identical to our K-12 teachers.

In many states with either T.E.A.C.H. or WAGE$ programs, there are waiting lists for participation; other states need funds to get these programs started. Investing in high-quality early care and education is essential for all of our children from birth to 5 if we want to stay competitive in a global economy. Disparate access to quality exists across age groups and for children within states and between states. States struggle to make the right choices, but resources are not adequate. With so many families unable to afford high quality child care and without the resources to help them,
state administrators continually choose between quality and quantity. More funding is needed to ensure a uniform level of quality for all young children. The reauthorization of CCDBG provides us with such an opportunity. And we believe that one area that must be targeted with increased investments is raising the education and compensation of the early childhood workforce.

Investments in increased educational opportunities tied to compensation and benefits provide early educators with a viable, sustainable career path in a field in which they will remain committed. T.E.A.C.H. scholarships and wage supplements help the early childhood workforce become better educated, compensated and consistent as it strives to meet the higher standards associated with pre-kindergarten, Head Start and quality rating systems. And direct investment in the workforce means that quality can be raised without burdening parents with additional costs.

Our work has taught us that the early childhood workforce wants to increase its knowledge and skills through our nation's higher education system. The key is accessibility—having the money, the time and the support to make it possible. However, it is both unrealistic and unfair to expect the workforce to go back to school while they are working full time without help and without the promise of better wages and benefits.

With sufficient investment in the workforce, we can improve education and retention. North Carolina's turnover rates are down, and the education of the workforce is up. And best of all, the overall quality of early care and education has dramatically improved. When teachers are living on poverty-level wages and barely able to support their families, then leaving the job they love becomes a matter of necessity.

Low education, poor compensation and high turnover are national workforce issues. It is time to address them with a national targeted investment.

Thank you.

[The statement of Ms. Russell follows:]

Prepared Statement of Susan Russell, President, Child Care Services Association

Chairman Kildee, Ranking Member Castle, and members of the Subcommittee. Thank you for this opportunity. I am President of Child Care Services Association, a private nonprofit agency located in North Carolina that has been working every day for the last 35 years to ensure access to high quality, affordable child care. We believe that improving the education, compensation and retention of the early childhood workforce is key to producing positive health and educational outcomes for young children.

In 1990, using data from the state's first early childhood workforce study, Child Care Services Association set out to test a scholarship model designed to address the low education, poor compensation and high turnover of the workforce. We began as a small pilot program with scholarships to help 21 teachers take community college courses leading to an associate degree in early childhood education. This successful pilot became T.E.A.C.H. Early Childhood(r), rapidly expanding in North Carolina and gradually to 20 other states.

T.E.A.C.H. scholarships help pay tuition, books and travel costs, and often require and support paid release time to allow teachers to balance the extra load of going to school. As teachers complete their required credit hours, they receive a bonus or raise, and they must then commit to continue teaching in the field for another year. In most T.E.A.C.H. states, teachers, directors and family child care providers working in child care, Head Start or pre-k settings are eligible for scholarships.
T.E.A.C.H. scholarships always support formal coursework leading to credentials or degrees and require a partnership between individuals, their employers and the T.E.A.C.H program, with each entity contributing to the cost. A scholarship counselor helps the individual maneuver the challenges of balancing school, work, family and scholarship responsibilities. In FY08 the 21 states participating in T.E.A.C.H. spent about $28.3 million; the largest source of these funds comes from the Child Care and Development Block Grant.

Last year over 21,000 individuals across the country, working in over 10,000 different early care and education programs, received support from T.E.A.C.H. Early Childhood(r) scholarships. Ten percent worked in Head Start programs and 62% taught three and four year olds. About 46% were women of color, typically earning less than $10 per hour. They attended almost 600 different colleges and universities. Together, these scholarship recipients completed almost 130,000 credit hours. Their average earnings in mid states increased between 7 and 10 percent and they left their classrooms at average rates of less than 8 percent annually. And this is in a field that routinely experiences 40% turnover a year. While attending a community college, teachers’ basic language and math literacy skills improve, as well as their knowledge of cognitive, social, emotional and physical development. About two-thirds of participants were working on their associate degrees, doing this while working full-time, and achieving a 3.25 mean grade point average.

In 1994, as our next step to address the systemic problems of low wages and high turnover, CCSA began the Child Care WAGE$ program. This effort provides graduated supplements paid directly to participants and tied to their level of education. Supplements are paid every six months with funding from Smart Start and CCDBG, as long as the individual remains in her early care and education program. Supplements range from $200 to $6,250 annually. Last year, we had 9,000 participants. Because supplement amounts increase with more education, WAGE$ participants continue their education. WAGE$ participants with two-or four-year degrees had a 14% turnover rate, which is identical to the rate of teachers in our K-12 system. Two other states have WAGE$ programs. In many states with either T.E.A.C.H. or WAGE$ programs, there are waiting lists for participation; other states need funds to get these programs started.

Investing in high quality early care and education is essential for all of our children from birth to five if we want to stay competitive in a global economy. Disparate access to quality exists across age groups, and for children within states and between states. States struggle to make the right choices, but resources are not adequate. With so many families unable to afford high quality child care and without the resources to help them, state administrators continually choose between quality and quantity. More funding is needed to ensure a uniform level of quality for all young children. The reauthorization of CCDBG provides us with such an opportunity. And we believe that one area that must be targeted with increased investments is raising the education and compensation of the early childhood workforce.

Children of college-educated mothers have significantly better vocabularies by the age of three and far better educational outcomes than children with mothers with a high school education or less. Because early childhood educators act in loco parentis, often with young children 10 hours a day, 5 days a week, it is critical that they are well educated, supported and culturally competent. Investments in increased educational opportunities tied to compensation and benefits provide early educators with a viable, sustainable career path in a field in which they will remain committed. T.E.A.C.H. scholarships and wage supplements help the early childhood workforce become better educated, compensated and consistent as it strives to meet the higher standards associated with pre-kindergarten, Head Start and Quality Rating Systems. And direct investment in the workforce means that quality can be raised without burdening parents with additional costs.

We have learned a lot in the last 19 years implementing these strategies in North Carolina and across the country. It is clear that the early childhood workforce wants to increase its knowledge and skills through our nation’s higher education system. The key is accessibility * * * having the money, the time and the support to make it possible. However, it is both unrealistic and unfair to expect the workforce to go back to school while they are working full time without help and without the promise of better wages and benefits.

We have learned that with sufficient investment in the workforce, you can improve education and retention. North Carolina’s turnover rates are down and the education of the workforce is up * * * and the overall quality of early care and education has dramatically improved. Money makes the difference. When teachers are living on poverty level wages and barely able to support their families, then leaving the job they love becomes a matter of necessity. Low education, poor compensation
Chairman Kildee. Thank you very much, Ms. Russell.

Ms. Adams?

STATEMENT OF GINA ADAMS, SENIOR FELLOW, URBAN INSTITUTE, CENTER ON LABOR, HUMAN SERVICES AND POPULATION

Ms. Adams. Mr. Chairman, members of the committee, I am Gina Adams, senior fellow at the Urban Institute, where I conduct research on child care and early education policies. Thank you very much for inviting me here today.

Let me start by setting some context. Child care and early education is a reality for about 12.4 million children in the United States today, about 60 percent of all children in this age group. Children can be found in a variety of settings—including Chairman Kildee's home. About 36 percent of all children are cared for in centers, about 15 percent by relatives, as we have heard, and about 11 percent by non-relatives in home-based settings. Children are at different settings at different points in their lives and can often be in more than one setting in any given day.

Parents' decisions about child care are based on a complex blend of preferences and constraints: what they want, what they can afford, what is available and what works for their child. Some families, including low-income families, working families and families with infants and toddlers or who have special needs, face far greater constraints in getting the choice that they want.

This context, I think, underscores two important lessons for policy. First, policy solutions need to focus on a variety of settings; and second, they need to address the multiple constraints that families face. We cannot just focus on quality without also paying attention to affordability and supply.

I would like to talk briefly about what children are getting in these settings. You already know that quality matters, but unfortunately the research has shown that the quality of much of the care in the United States is inadequate and that quality may be worse for low-income children and very young children, two groups that we care very much about.

This shouldn't be surprising. For most of our child care settings, we have a market-based system, where child care providers can only charge as much as parents can pay. And if providers were to invest in the key components that we know matter—well-trained, well-paid staff, low numbers of children per adult—the amount that they would need to charge would make the service completely unaffordable for many parents.

So providers have to provide services at prices that are lower than are needed for quality. And even at these lower levels of quality, families have to stretch to pay for care. For example, families below poverty who pay for care pay a remarkable quarter of their income for that care.

Looking at the policy response, we have clearly come a very long way. Policymakers such as yourselves understand the importance of investing in this area and have made significant steps, most re-
cently demonstrated through the stimulus package. We have invested more resources, though clearly not enough to serve all the eligible children in helping families access good quality care, mostly through Head Start and pre-kindergarten services. These efforts have helped, but more needs to be done.

But relying primarily on these initiatives to provide the good quality that children need is not enough. They primarily serve 3- and 4-year-olds, with the exception of the very small Early Head Start program, so it is now doubled—thank you—and because they most commonly are offered on a part-day, part-year basis. As a result, our most effective policy strategies to ensure that children are getting what they need in terms of quality are not reaching some of the most critical populations: infants and toddlers and children of working parents.

Interestingly, these populations are served by the Child Care and Development Block Grant. Much of the focus of the block grant is to help families afford care so that they can work. But unfortunately, both the funding level and the design of the program make it much more challenging to focus equally on ensuring the quality of the care that families use.

Instead, in many states, the block grant is primarily used to help families access those very settings that I described a few minutes ago as being inadequate, and the quality is limited by what parents can pay. In addition, the funding levels of the block grant mean that state administrators are constrained, in even their ability to meet the program’s primary goals and meet helping parents work. Only a fraction of the eligible children are served, and administrators face very difficult tradeoffs and constraints, limiting services, lowering provider payments or making families pay more. The good news is that we do have states, such as you just heard from Pennsylvania, that have managed to fight these constraints to make remarkable progress in using the block grant as part of an overarching strategy to support quality care for a broad range of children.

However, as you also heard, they are very seriously limited in what they can do by the funding constraints and by the design of the program. These realities of the block grant challenge its ability to support quality for the families it serves and to coordinate with other systems to build a comprehensive approach for families.

In closing, I commend you for focusing on these issues and for thinking about how to address the quality gaps in our early childhood policies and specifically those affecting our youngest children and the children of working parents. In this process, it is critical to focus on investments and strategies overall in our system, but also to make sure to focus on those that will allow the block grant to be a strong partner in this effort.

The block grant already serves millions of the low-income children that we care about. State administrators need the resources to ensure that wherever they are, these children and their providers have access to the support that they need to build quality and to support their development.

Thank you very much.

[The statement of Ms. Adams follows:]
Prepared Statement of Gina Adams, Senior Fellow, Urban Institute

Mr. Chairman and members of the Subcommittee, I am Gina Adams, senior fellow at the Urban Institute, where I conduct research on low-income children and the early childhood/child care systems and programs that serve them. Thank you for inviting me to testify about the challenging realities facing families as they try to make sure that their children get a strong start in life.

I was asked to talk about where children are being cared for, the challenges their families face, and the key policy issues that should be considered to address these problems.

Where are our children being cared for?

Today, whether by choice or necessity, child care and early education settings are a reality for millions of American families with young children. Many working families must find someone to care for their children while the parents work, and seek a safe nurturing and learning environment for that purpose. And many families, regardless of their work status, seek out early care and education programs as their children approach the kindergarten years because they want to help prepare them for school. As a consequence, according to the National Center for Education Statistics, today we find 12.4 million children younger than 6—or 60 percent of all children—are regularly in the care of someone other than their parents.1

These children can be found in a range of different early care and education settings. For example, 36 percent of all children younger than age 6 are regularly in center-based care, 15 percent are primarily being cared for by relatives, and 11 percent are being cared for by nonrelatives in home-based settings. However, this picture is somewhat oversimplified, as it provides a static picture of the main arrangement that children use. In reality, families can end up frequently changing the care arrangements they use for any child over the child’s early childhood years—and such changes can be more common and frequent for low-income families and families in the welfare system (Adams, Tout, and Zaslow 2007). Furthermore, children can be in more than one arrangement at a time. Census Bureau data from 2005 estimate that 17 percent of children have multiple child care arrangements (U.S. Census Bureau 2007).

The care arrangements that families make for their children are the result of several interacting factors, including what the family wants, what they can afford, what kinds of settings are available (either in their family or in their community), and what fits their work schedules, child’s needs, transportation, and so forth. Child care decisions are an extraordinarily complex blend of preferences and constraints, each of which plays out differently for each family depending on their unique circumstances. And while many parents face significant constraints in being able to get what they want, certain families face even more—constraints—for example, if they are low-income, have a child with special needs, live in a rural or inner-city area where the supply of programs can be low, have a very young child, or work a non-standard work schedule.

While this seems complicated, it can be boiled down to a few key points:
- Children experience a variety of early care and education arrangements, all of which can affect their development. As a result, policy efforts cannot afford to focus on one setting and none can be ignored.
- We also have to pay attention to the range of factors that constrain families from making the best choices they can for their children. For example, to ensure that families have access to good quality care, we must not only work to make care affordable, but also focus on enhancing the supply of good quality care.
- Finally, the complexity of the situation means that there are not simple solutions to how best to support parents, so we must avoid thinking that there is a single program or approach that is the solution to the problem. Instead, it is important to continue to work comprehensively to accomplish shared goals for all families.

Are children getting what they need in early care and education settings?

In recent decades, those interested in the well-being and development of children have increasingly focused on the quality of early care and education. Their interest is due to the growing and well-established body of research showing that the quality of the early care and education experiences matters for children’s development, that it can support higher achievement and good outcomes, and that it may be of even greater importance for children who are at most risk of poor developmental outcomes (Adams et al. 2007).

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However, the research also makes it clear, unfortunately, that generally the quality of care that children receive in our country is not adequate. A recent synthesis of the research in this area conducted by the Urban Institute and Child Trends pulls together the leading research in this area and describes the quality of the two major types of care that exist—first, "market-based" child care, which includes all of the child care programs and settings that have developed in response to parent demand (including most child care centers and family child care homes) and that are based on parents ability to pay; and second, "program-based" early care and education settings, which include settings that were developed and funded by public programs such as Head Start and state prekindergarten (Adams et al. 2007). The latter settings are generally mostly (or totally) paid for by public funds, do not rely on parent fees, and are usually designed to provide a particular quality of care.

Today, I am going to focus only on the studies examining the quality of "market-based" settings. For these settings, existing research suggests that "much of the care in the United States falls below a rating of 'good' on widely used observational measures. Further, different studies suggest that about 10-20 percent of market-based child care settings have low overall ratings of quality, and may be potentially harmful to children's development" (Adams et al. 2007, pg vii). Research also suggests that overall, children from lower-income families and children ages birth to three may be particularly likely to be in market-based child care settings that do not meet their developmental needs.

The fundamental cause of this finding is important to understand. Basically, a primary challenge we face is that the amount that "market-based" child care programs charge for their services is primarily dependent upon what families can pay. However, many of the key components needed for a program to provide good quality are not cheap to provide—for example, paying salaries sufficient to attract and keep well-trained teachers, having small numbers of children per adult so they can get the attention and focus they need, and good materials and facilities. As a result, the cost of high quality care can be completely unaffordable for many parents, and the cost of even the inadequate quality that currently exists requires parents to stretch themselves to pay it. Data from the Census Bureau (2007), for example, show that families below poverty who are paying for care pay a remarkable 27 percent of their income for care, and those between 100 and 200 percent of poverty pay 16 percent of their income on child care.

The consequence of this situation is that generally providers must provide services at prices lower than are needed to provide high quality care—a problem even more severe in lower-income communities where families have fewer resources to pay for care. While some providers manage to provide quality services because they either serve higher-income families or can access other resources from public or private sources, there are many providers who are struggling to provide the best care they can but who simply cannot provide high quality because they cannot charge the prices they need to do get the revenue needed to produce the quality children need. The bottom line is that the child care market simply does not work in a way that produces enough good quality care for children.

What is the status of our policy framework to address these problems?

In recent decades, policymakers have become increasingly aware of these issues, and of the importance of investing in early childhood and child care, and have made significant steps forward in this area. The most recent evidence can be seen in the American Recovery and Reinvestment Act (ARRA) of 2009, in which Congress invested significant additional resources into both the Child Care and Development Block Grant (CCDBG) and Head Start in an important commitment to children. But unfortunately there is still more work to do.

One challenge is that despite the increasing policy interest and awareness of the importance of investing in good quality early education services, most of the efforts to invest seriously in helping families access good quality care have focused primarily on Head Start and prekindergarten services as the delivery mechanisms. The good news is that these efforts have indeed produced good programs for children, particularly when provided the funding and incentives needed to support quality. However, while it is important to keep investing in, and expanding these initiatives—as they only serve a fraction of the eligible families—it is also important to realize that our focus on primarily supporting quality through these programs has inadvertently created a somewhat patchy system of quality, with some major gaps. Specifically:

• Both of these initiatives primarily serve three- and four-year olds, with the exception of the very small Early Head Start program. This means that our youngest and most vulnerable children have few resources focused on ensuring that they get good quality care. This is despite the strong research base showing the critical im-
portance of the earliest years in establishing a foundation for future learning, as well as the previously mentioned research of the significant gaps in quality for this age group. The expansion of Early Head Start (EHS) in the stimulus package is an important step. However, EHS currently serves 3 percent of the eligible children, so has a way to go before it will be able to address the gaps identified here.

- Both Head Start and prekindergarten initiatives most commonly are offered on a part-day, part-year basis, and thus are less accessible to working families. Given the large proportion of low-income parents who are working or need to work, and whose children are at risk of facing additional challenges in school, this gap means that our investments in early education programs are potentially missing significant proportion of the children we most need to reach. Consider, for example, the children of families that are on the Temporary Assistance for Needy Families (TANF) program and trying to meet the work participation requirements. These are exactly the children who we would most want to get these kinds of intensive quality services, yet the part-day, part-year nature of the services make them less likely to be able to use them.

- Finally, both of these programs are primarily provided in selected group center-based settings, meaning that while these settings or classrooms are likely to provide better care, these programs cannot directly support quality for the rest of the settings that care for children.

On the other hand, the Child Care and Development Block Grant (CCDBG) is the major federal program that reaches each of these groups—specifically, it serves children from birth through age 12, supports low-income working families, and is used in a wide range of the early care and education settings used by families. The growing awareness of policymakers of the importance of helping working families to afford care has led the program to grow since its inception, and most recently to get additional resources in the stimulus package. The CCDBG has been quite effective at helping millions of families across the country afford child care so that they can work.

Yet this program also has major challenges in terms of helping families get what they really need for their children, specifically:

- The CCDBG is primarily designed to help families afford child care settings that they can find in their communities—which are, in turn, those exact settings that were described above as being less than "good" due to market forces. While the CCDBG does have some funds designed to address quality, the bulk of the program resources are not designed to improve quality, and the CCDBG is not funded sufficiently to provide the level of resources and quality supports needed to bring local child care programs up to the level of what children need (Adams and Rohacek 2002). This is corroborated by the research, which suggests that the child care that families access with the voucher-based subsidy system under the CCDBG is no better than, and in some cases is worse than, child care settings overall (Adams et al. 2007).

- Furthermore, the funding levels of the CCDBG have limited its effectiveness even as a work support, which is the primary goal that it is supposed to achieve. For example:
  - While the estimates vary, the CCDBG only serves a fraction of the eligible families, and there are eligible families that need assistance but are not able to obtain it.
  - While public funding always is constrained and forces tradeoffs, the funding levels of the CCDBG have required states to restrict eligibility in a number of ways, including for families looking for work, or in education and training. This is particularly unfortunate given the importance of these efforts in helping families find work and the particular importance of these efforts in the current economy.
  - Research by the Urban Institute has shown how subsidy policies and practices can inadvertently create barriers to families to be able to initially get subsidies, and to keep them once they get them. In particular, the inadequate resources have helped pressure states to maintain very tight controls on eligibility, with the result that the system does not always help parents stay attached to the workforce as they experience the dynamic work and life situations common for low-income workers (Adams, Snyder, and Sandfort 2002). This is of particular concern as families face the enormous challenges of the current economic downturn.

A number of states are working to address these issues. One example is Pennsylvania, under the leadership of Harriet Dichter and her team, which has made impressive strides forward; and other states have taken important steps to address some of these problems (Adams, Snyder, and Banghart 2007). But the bottom line is still that with the overarching problem of inadequate resources, states are seriously constrained in how much they can do. Discussions with state administrators often focus on the extremely painful Solomon-like tradeoffs they must make in de-
ciding whether to make families pay more, pay providers even less, or serve fewer families. These are not abstract policy choices and tradeoffs—instead, they seriously undercut the ability of the program to achieve its goals, and create serious problems for families and providers.

And of course, these systems do not operate in isolation from each other. While many individuals are working hard to put them together to provide the best package of services to families, the inadequacies of one can limit the other. For example, the Urban Institute is conducting a study in Chicago, looking at the extent to which families face barriers accessing the Illinois Preschool for All (PFA) initiative. The initiative is a good one, and is one that addresses many of the issues that policymakers care about, and the state is committed to making it available to all families. The core funding for the program is for 2.5 hours a day, so the state has worked to make sure that working families can access prekindergarten services by making sure that community-based child care programs receive PFA funds and offer PFA services. Yet because working families still have to pay for the rest of the child care day, they are only able to access the program if they are also able to get CCDBG-funded subsidies—as these subsidies are what allow them to enroll their child in the child care program that includes a PFA component. As a result, anything that may create a barrier for a working family to access subsidies also makes it hard for them to access PFA.

So what do we do?

There are many issues that need our attention, a number of which have been highlighted by the other panelists testifying in recent days. I'd like to focus on three that seem particularly critical for sustained federal attention. Specifically,

- Our policies must focus across the age spectrum from birth to age 5, as children's needs for good care that supports their full development does not start at age three or four, and in fact, there is a serious gap in what children can get in their earlier years which is likely to have serious repercussions for their development and success;

- One of the major gaps in our current approach is that we need to develop, sustain, and invest in efforts that focusing on supporting the ability of working families to access high quality services; and

- It is critical to identify mechanisms to strengthen the quality of the range of settings that serve families.

One important way to make progress in these areas is to strengthen the child care subsidy system as funded by the CCDBG. This program is the only federal effort that focuses on the wider age spectrum, focuses on serving working families, and touches a wide spectrum of early care and education settings. By focusing my comments on the CCDBG, I am by no means trying to suggest that the other early care and education areas do not also need attention and investments, or that we do not need to focus significant efforts on helping these systems coordinate more effectively. Instead, my focus on the CCDBG is because too often the policy debate about how to best ensure school readiness does not focus sufficiently on how to do so for the millions of young children who are in market-based settings supported by the CCDBG every day.

Strengthening and reforming the CCDBG to allow the program to focus more on supporting the ability of low-income families to access good quality care would require a significant and sustained investment of new resources into the program, as well as the development of policies that more directly make supporting quality through every aspect of the program a priority. Rather than focusing solely on work, it is essential that we integrate a focus on child development and school readiness into the core funding of the program, and to identify ways that CCDBG can focus equally on improving the affordability, access, and quality of the early childhood settings that low-income working families need.

In conclusion, I commend the Committee and Subcommittee on their continued efforts on behalf of the children of the United States. It is critically important that we build upon the significant progress of the last decades, and take the steps necessary to ensure that our public funds are spent to help families ensure that their children are safe, nurtured, and learning—in particular, our youngest and most vulnerable children for whom these investments are the most effective. We cannot afford to delay. Every day, there are children missing out on developmental opportunities that mean that they start school further behind, and with less of the foundation blocks they need to have in place if they are to become the productive involved citizens that we need.
REFERENCES


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Chairman Kildee. Thank you very much, Ms. Adams.
Dr. Lowery?

STATEMENT OF LILLIAN LOWERY, SECRETARY, DELAWARE DEPARTMENT OF EDUCATION

Ms. Lowery. Thank you. Mr. Chairman, Congressman Castle and members of the committee, thank you—did not push my button.

Thank you, good morning. Mr. Chairman, Congressman Castle, members of the committee, thank you for this opportunity to share Delaware’s early childhood plan. I am Lillian Lowery, secretary of education for the State of Delaware.

Delaware recognizes that what children experience from birth to age 5 has a direct impact on their future success in school and in life. As we have learned more about the importance of brain development during the early years, there has been a renewed commitment to work together in public-private partnerships to increase the number of children entering school prepared to succeed. Through strong leadership, federal, state, corporate and private resources have been blended to develop a combination of universal and targeted programs which provide support from birth through kindergarten.

For example, the parents of every baby born in Delaware receive the Growing Together portfolio—and I, too, have copies for you—a collection of valuable information ranging from a 5-year calendar customized with Delaware contacts to a read-aloud book to start early literacy. For first-time parents, there is a targeted service with a home visit by a nurse soon after the baby comes. The nurse links at-risk families to additional supports such as Parents as Teachers program, a monthly home visit from birth to age 3 by certified parent educators.
The state-funded Early Childhood Assistance Program adds to the capacity of the federally funded Head Start to guarantee a quality preschool program for every 4-year-old in poverty. Through similar state and federal support, children with disabilities from birth to 5 receive preschool special education specifically crafted to help prepare them for success in school. Both of these targeted programs, for children in poverty and those with disabilities, have been evaluated through a longitudinal study.

Begun in 1997 as the children entered kindergarten, the study compared children in poverty who had participated in the Early Childhood Assistance/Head Start program to a like sample of economically disadvantaged students who had not participated in the program, and children with disabilities who were identified during early childhood and received early intervention services to children who were not identified as special education students until after entering public school. In this longitudinal study, three points of measurement—third, fifth and eighth grade assessments—were analyzed for students' academic outcomes.

As measured over time at all three grade levels, the students who had received early intervention services demonstrated markedly better outcomes than students who had not received those interventions. From the most recent analysis at eighth grade, the following results are examples of success rates: 73 percent of the students in poverty who participated in Early Childhood Assistance/Head Start program performed at or above standard in reading compared to 51 percent who had not participated in the program; 43 percent of students who received preschool education for special ed students performed at or above the standard in reading compared to 31 percent who had not received such services.

State dollars have been leveraged to gain corporate and private funds to carefully develop, pilot and implement the Delaware Stars for Early Success rating program, which establishes quality standards for early childhood program providers connecting them with technical assistance, training and limited financial support as programs engage in quality improvement efforts.

Full-day kindergarten is another important component of Delaware's expanded efforts to ensure academic preparedness and success for all children. State funding for full-day kindergarten has increased each year with almost all public elementary schools offering this to families and communities.

On another front, like many states, as I just heard Pennsylvania state, Delaware has worked hard to cooperate across state agencies on behalf of young children. The three primary departments which have responsibility for a variety of early childhood services—Education, Health and Social Services, and Services to Children, Youth and Their Families—established one central Office of Early Childhood and then the Delaware Early Childhood Council.

The council is responsible for providing oversight of the development and implementation of Early Success: Delaware’s Early Childhood Plan. Early—excuse me—Early Success is a comprehensive plan to ensure that across the state young children and their families have access to quality early learning programs and services.
Supporting the goals of Early Success, Early Learning Foundations program guides have been developed for early childhood in alignment with the K-12 kindergarten expectations. Likewise, the social and emotional development program for young children, Partners in Excellence, has been connected with the K-12 Positive Behavior Support program. The Department of Education provides the formal review and certification of early childhood providers’ staff qualifications and is currently working on a Web-based modification of an online database for teacher certification that will include the early childhood workforce.

Finally, the Department of Education has developed a framework for professional development that outlines the expectations and intensity of training opportunities for early childhood. The framework helps practitioners in making informed choices for their professional development experiences.

The department recently awarded a multi-year grant to the University of Delaware for a new Institute for Excellence in Early Childhood to develop and offer the state-recommended training in the framework. The institute will develop, in collaboration with other educational organizations, a variety of state-recommended professional development opportunities to meet the identified needs of all sectors of the early childhood field.

Thank you for this opportunity.

[The statement of Ms. Lowery follows:]

Prepared Statement of Lillian Lowery, Secretary, Delaware Department of Education

Delaware recognizes that what children experience from birth to age five has a direct impact on their future success in school and life. As we have learned more about the importance of brain development during the early years, there has been a renewed commitment to work together in public/private partnerships to increase the number of young children entering school prepared to succeed. Through strong leadership, federal, state, corporate and private resources have been blended to develop a combination of universal and targeted programs and supports from birth through kindergarten. For example, the parents of every baby born in Delaware receive the Growing Together portfolio, a collection of valuable information ranging from a five year calendar customized with Delaware contacts to a Read Aloud book to start early literacy. For first time parents, there is a targeted service with a home visit by a nurse soon after the baby comes home. The nurse links at-risk families to additional supports such as the Parents as Teachers program, a monthly home visit from birth to age three by certified parent educators.

The state-funded Early Childhood Assistance Program (ECAP) adds to the capacity of federally-funded Head Start to guarantee a quality preschool program for every four year old in poverty. Through similar state/federal support, children with disabilities from birth to five receive preschool special education (PSE) specifically crafted to help prepare them for success in school. Both of these targeted programs, for children in poverty and those with disabilities have been evaluated through a longitudinal evaluation. Begun in 1997 as the children entered kindergarten, the study compared children in poverty who had participated in the ECAP/HS program with a like sample of poor children who had not participated and children with disabilities who were identified during early childhood and received early intervention services with children identified as special education students after entering the public school system. In this longitudinal study, three points of measurement (3rd, 5th and 8th grades) were analyzed for students’ academic outcomes. As measured over time at all three grade levels, the students who had received early intervention services (ECAP/HS or PSE interventions) have shown markedly better outcomes than students who did not receive those interventions. Students in the intervention groups significantly outperformed students who did not receive intervention. From the most recent analysis at 8th grade, the following results are examples of the success rates:
• 73% of the students in poverty who participated in ECAP/HS performed at or above the standard in reading compared to 51% who had not participated in ECAP/HS

• 43% of the students who received preschool special education performed at or above the standard in reading compared to 31% who had not received such services

To improve the quality of early care and education for all young children, state dollars have been leveraged to gain corporate and private funds to carefully develop, pilot and implement the Delaware Stars for Early Success rating program. Delaware Stars has established quality standards for early childhood program providers connecting them with technical assistance, training and limited financial support as programs engage in quality improvement efforts. Delaware Stars for Early Success is a five level system, with “5” being the highest rating. The licensing rules issued by the Office of Child Care Licensing serve as the Standards for Star Level 1. With each higher Star Level, a program is required to meet increasingly higher quality Standards in the following categories:

• Qualifications and Professional Development
• Learning Environment and Curriculum
• Family and Community Partnerships
• Management and Administration

Subsidized child care reimbursement rates have improved, and the goal is to tie those rates to Delaware Stars quality ratings as additional resources become available. In 2005, the Legislature increased its focus on early learning by creating the Kids Caucus, a bipartisan group of legislators focused solely on young children and their growth, development and learning. During the last legislative session, the Kids Caucus successfully championed legislation to increase outreach for the Children’s Health Insurance Program to students receiving free or reduced price meals in their schools.

Full-day kindergarten is another important component in Delaware’s expanded efforts to ensure academic preparedness and success for all children. State funding for full-day kindergarten has increased each year with almost all public elementary schools offering this to families in their communities.

On another front, like many states, Delaware has worked hard to cooperate across state agencies on behalf of young children. The three primary Departments which have responsibility for a variety of early childhood services (Education; Health and Social Services; and Services to Children, Youth and their Families) established one central Office of Early Childhood within the Dept. of Education which is staffed by personnel funded through the three Departments and charged with interagency collaboration and efficiencies. Also, in October 2001, the Governor established the Delaware Early Care and Education Council. The Council is responsible for providing oversight of the development and implementation of Early Success: Delaware’s Early Childhood Plan. The membership of the Council comes from the early care and education community, businesses and private citizens.

Early Success is a comprehensive plan to ensure that across the state young children and their families have access to quality early learning programs and services. The five goals of Early Success are as follows:

1. Ready Children: By the year 2015, all of Delaware’s young children will have available the supports they require to ensure that they are physically, socially and emotionally healthy. Early learning opportunities will be available to every child at home and in programs that are developmentally appropriate and individualized. It is important to ensure that every child’s development is progressing. Child assessment for early identification of developmental challenges or disabling conditions is essential. Early intervention is critical for remediation of developmental delays and readiness for school.

2. Ready Families: By the year 2015, families of young children in Delaware will have the support and education needed to support their children’s healthy growth, development, learning and readiness for school. Families are significant partners in creating a culturally competent comprehensive and integrated early learning system. Families are the primary influence on their children. All other components of the early learning system must support the families of young children to be successful.

3. Ready Early Care and Education Programs: By the year 2015, all of Delaware’s families will have access to early care and education programs that will offer families a safe learning environment that will ensure positive outcomes for children. Early care and education programs will be staffed by professionals educated and skilled in supporting the growth, development, and learning of young children. Programs will be regulated to ensure basic safeguards for children, both physical and developmental.
4. Ready Communities: By the year 2015, Delaware citizenry will understand the importance of the children’s growth, development and learning during the first five years and be willing to support and invest in creating an early childhood system. The early childhood system will be a durable, normalized component of the state budget, corporate investments, and community giving. Public will, governance and finance together create a community that is willing and prepared to support the early childhood system. Communities will work together to design and build localized solutions to support their young children and families.

5. Ready Schools: By the year 2015, the schools and the early learning community will forge meaningful, productive relationships that support children and their families.

Supporting the goals of Early Success, Early Learning Foundations program guides have been developed for early childhood in alignment with the K-12 kindergarten expectations. Likewise, the social and emotional development program for young children, Partners in Excellence (PIE), has been connected with the K-12 Positive Behavior Support (PBS) program. Just as the K-12 system works to prepare children for college and the workforce, the early learning system works to prepare children for their school years. Connecting the systems and successfully facilitating the transition for children and their families between the two systems is important to the success of both early learning and K-12.

The current report of Delaware’s Early Childhood Council highlights recent collaborative efforts to achieve the goals of Early Success. They are provided here to emphasize the importance of strategic public and community partnerships and to illustrate the broad scope of work of the Council and the Office of Early Childhood.

I. Ready Children

Emotional Wellness Committee:
- Began work in August, 2008
- Included representation from multi-agencies and multi-disciplines
- Mission Statement: To develop a systemic framework to support the emotional wellbeing of young children and their families
- Focused on specific tasks including: mapping resources, identifying gaps in resources and services, establishing standards for practice and identifying priority areas needed for the systematic promotion of emotional wellness in the state

United Way of Delaware Success By 6(TM):
- Partnered with the Department of Education to give leadership to Emotional Wellness Committee
- Continued commitment to improving the quality of early care and education by financially supporting Delaware Stars and serving as a member of the public/private management team—specific responsibilities related to leading the coordination of private resource development, serving as fiscal agent for private funds, and providing leadership on building public will
- Partnered with Nemours Health & Prevention Services to conduct a parenting needs assessment
- Partnered with Family Support Coordinating Council for that Council to begin functioning as the advisory body for Success By 6(TM)’s work related to supporting families

Early Childhood Comprehensive System Grant:
- Focused on developing, implementing and sustaining comprehensive early childhood programs through collaborative partnerships and systems building initiatives
- Funded the KIDS COUNT in Delaware Indicators for Early Success issue brief
- Provided funding to host a series of educational trainings on topics promoting the importance of the medical home, family-centered primary care and newborn hearing screenings

Nemours Health and Prevention Services:
- Collaborated with the Delaware Child and Adult Care Food program to set higher nutrition standards for foods qualifying for reimbursement
- Implemented a Child Care Learning Collaborative to test out a new approach to training, focused on helping centers make policy and practice changes to promote healthy eating and physical activity
- Supported a statewide quality rating system, Delaware Stars for Early Success.
- Initiated a pilot study for improved screening for developmental delays in primary care pediatrics—Assuring Better Child Health & Development (ABCD) project

II. Ready Families

Family Support Coordinating Council:
- Supported the submission of a federal grant Supporting Evidence-Based Home Visitation Programs to Prevent Child Abuse
• Adopted a model that describes the future path of the council; the goal of this model is to establish the resources and supports needed to nurture strong families in Delaware
• Sponsored the Parent Practitioner Partnership Summit held on May 14, 2008 which addressed partnerships between parents and practitioners in healthcare, education and human services to improve child outcomes

III. Ready Early Care and Education Programs

T.E.A.C.H. Early Childhood(r):
• Provided scholarships to 136 individuals
• Worked in conjunction with other initiatives (i.e. Delaware Stars) to increase the quality of early childhood programs through increased education for early childhood professionals.

Delaware First: Early Childhood Professional Development System
• Developed a Framework for Professional Development that outlines the expectations and intensity of training opportunities for the early childhood workforce.
• Awarded a grant to the University of Delaware for the creation of the Delaware Institute for Excellence in Early Childhood
• Provided the formal review and certification of early childhood staff qualifications.

Delaware Stars for Early Success:
• Completed the second year of “testing” the Delaware Stars system
• Enrolled in 69 child care programs including all three counties; small and large centers; family child care and large family child care homes; before and after school programs; programs that serve infants and toddlers, children with special needs, and children whose primary language is other than English; Head Start and ECAP programs; and NAEYC accredited programs
• 46 of the enrolled programs are serving children and families of low-income.
• Served more than 5,000 children and their families in Delaware Stars programs

Relative Care Training Program:
• 600 Relative Caregivers have received training information
• 178 Relative Caregivers have attended training
• 42 Relative Caregivers have completed all 45 hours
• Provided training and technical assistance in three sites that have been designed on a framework of program wide change consistent with the PBS system used in schools
• Supported a training of trainers on the Parent Modules
• Developed and piloted an approach that provides continuity to the systems that care for and educate young children in Delaware

Partners in Excellence (PIE) Project:

IV. Ready Communities

Social Venture Partners Delaware:
• Gave more than $2.5 million toward the improvement of early childhood education in the state of Delaware since its inception
• Partnered with A.I. duPont Hospital for Children; this five-year partnership places psychology residents in early care centers to provide year round behavioral health management for at-risk children and families
• Invested in a curriculum development specialist to train teachers and administrators in inner-city child care centers how to properly prepare their children for kindergarten

Coalition for Early Learning:
• Members testified at the Department of Health and Social Services budget and Joint Finance Committee hearings
• Planned successful Annual Early Childhood Advocacy Day
• Worked with the Kids Caucus to codify Delaware Stars for Early Success into law
• Worked with Kids Caucus to gain support for Purchase of Care reimbursement rate increases, rates indexed to bi-annual market rate study and rates tiered according to star ratings

Delaware Children’s Campaign: The Delaware Children’s Campaign (DCC) is a nonpartisan nonprofit organization that offers a different approach to child advocacy. What makes DCC different from other efforts is its use of public opinion data to identify issues relating to children that are of concern to Delawaeans. Our polling along with the input of or platform committee helped us determine the DCC’s agenda:
• Reduce the infant mortality/morbidity rate
• Increase assistance for youth aging-out of foster care
• Ensure quality early education is available to all children DCC is dedicated to improving access to quality early care and education by building public awareness and grassroots support. Campaign staff works to educate and engage citizens, media and policy makers regarding the societal cost savings of quality/consistent delivery of early education programming. Wilmington Early Care and Education Council (WECEC);
  • Engaged members and community volunteers—“Friends of the Council”
  • Represented early care and education programs throughout the City of Wilmington and community based organizations
  • Assisted with planning and executing special events
  • Met at the new City of Wilmington Parks and Recreation building
  • Worked with the City webmaster www.wecec.org to the City of Wilmington web site
Sussex Early Childhood Council (SECC)  
  • Spent time developing its mission and purpose—The Mission of SECC is to foster collaboration among families, communities, providers, and schools for children’s early success in Sussex County  
  • Represented child care providers, human service agency representatives, parents, home visitors, school district representatives, and others interested in young children and families in Sussex County

V. Ready Schools
  Delaware After-School Alliance (DEASA)
  • Public-private partnership that endorses the goal of all school age children being academically, socially, culturally and physically healthy
  • Worked on building bridges that link schools, communities, and families through policy development and partnership engagement with other agencies
  • Involved itself in many key efforts over the last year that address the common moral, social and educational concerns of Delaware’s citizenry, not the least of which were the Governor’s Dropout Prevention Summit and the Governor’s Expanded Learning Opportunities Summit

I’d like to close my remarks by sharing two of Delaware’s most recent efforts to increase quality in our early learning system. In a new responsibility shifted to the Office of Early Childhood, the Department of Education (DOE) provides the formal review and certification of early childhood providers’ staff qualifications. Early childhood practitioners make application for review of qualifications and in 2008, DOE staff reviewed more than 3,000 applications on the education and experience of individuals using the specifications of the child care licensing (Delacare) rules. The Department is currently working on a web-based modification, which will be ready by fall 2009, of the online database for teacher certification that will include the early childhood workforce.

And finally, DOE has worked on the development of a Framework for Professional Development that outlines the expectations and intensity of training opportunities for early childhood. The Framework helps practitioners in making informed choices for their professional development experiences. The Department recently awarded a multi-year grant to the University of Delaware for a new Institute for Excellence in Early Childhood to develop and offer the state recommended training in the Framework. The Institute will develop, in collaboration with other education organizations, a variety of state recommended professional development opportunities to meet the identified needs of all sectors of the early childhood field. The Institute will provide quality assurance to the consumer by closely monitoring the delivery and making sure that the content of training is research based and aligned with state standards for the field.

Chairman KILDEE. Thank you very much for your testimony.
Thank you all for your testimony.
The rules of the committee adopted January 21st, 2009, give the chair the discretion on how to recognize members for questioning. It is my intention as chair of this subcommittee to recognize those members present at the beginning of the hearing in order of their seniority on this subcommittee. Members arriving after the hearing began will be recognized in order of appearance.

I now recognize myself for 5 minutes.
Ms. Adams, how important is stability in addition to quality to children in early care and education? In other words, what is the impact to children of having changing arrangements?

I ask that because back in 1987, we had hearings on ABC. We found, not just occasionally—we found some mothers or parents, within a week's time might have three, four or five different arrangements for child care and sometimes on Tuesday weren't sure what the arrangement would be on Wednesday. How important is that stability?

Ms. Adams. It is a very good question. Stability is a critically important issue for children, having continuity of care. I mean, the way children develop a sense of trust of the world and know how to develop relationships is to have stable relationships.

One of the important issues is that there are two different kinds of stability. For example, if you are always with your grandparents every afternoon and you are always in the Head Start program in the morning, that is still stability. What is instability is when you don’t know from day to day which caregiver—you develop a relationship with one, then suddenly you leave the next day. Those are the things that we worry a lot about, where it is broken relationships, broken trust, and where children don't get the foundation that they need.

One of the important issues is that when you look at many of the quality programs like Head Start and pre-k, they are focused on providing a child services for a year or 2 or 3 years. That is stability; that is continuity. That allows the teachers to—if they don't have turnover—to develop relationships with the children.

Part of the problem that we have in the child care world, for example on the block grant, is that the arrangements that are available to families fluctuate depending on their work situation; their subsidies may change if they change their job hours. There are a lot of ways that we don't, I think, think enough about stability within the block grant and support families having a stable caregiving situation.

Chairman Kildee. What role and how important is a center-based type of child care situation for the socialization of especially the young, the very young child?

Ms. Adams. The recent research suggests that center-based care can be very important for children, depending on the quality, which is a big if, for the years right before they enter school. Part of the challenge that we face is that much of our workforce can't use center-based care necessarily because they may be working evenings, weekends, changing work hours. But there is some evidence that access to a good quality group setting for at least some period of time before children enter school can be an important socialization tool.

Chairman Kildee. Thank you very much.

Ms. Russell, can you describe in more detail how an early childhood program would come to participate in T.E.A.C.H. or WAGE?, who the partners might be and where the funding comes from?

Ms. Russell. Early childhood programs can participate in states where we have T.E.A.C.H. or WAGE$, usually through an application process. So individuals will apply and they will say, “I want
to go back to school.” They will apply. If there is funding, they will be eligible and they can go to school.

Those teachers can work in a variety of settings. They can be a family child care provider, they can be a teacher in a classroom in a for-profit center, a not-for-profit, a faith-based center. They can be working in Head Start or they can be working in a pre-k program. It really doesn’t matter the setting, what matters is, is there funding to support them.

So funding for T.E.A.C.H. comes from a variety of sources. About 61 percent comes from the block grant, and then the rest of the funding is cobbled together using state resources. And Harriet was talking a little bit about that. In North Carolina, we use state resources as well, coupled with block grant funding or even local funding. So it comes from a variety of places.

The key is that there isn’t enough of it. We have lots of states who would like to do T.E.A.C.H. scholarships, but they don’t have the funds. And we have lots of folks within states where there are T.E.A.C.H. and WAGE$ programs who can’t access it because of the lack of resources.

Chairman KILDEE. If there is a definition of adequate, at least adequate child care, what percentage of children in this country would be receiving that type of adequate childcare? [Laughter.]

Anyone want to venture out into that? You know, we know at the time we passed ABC that the percentage wasn’t very high and the situation was quite dire. I am just wondering how far we have moved since 1987.

Ms. ADAMS. I don’t think anybody can answer that question except for the number is far too low. I mean, the data that we have that are representative of multiple states are from back in the early 1990s so it doesn’t do a good measure of looking at it now.

But part of the problem, as I mentioned, is that one of our big investments, the block grant, which is a fabulous program in many ways, is not designed to change the quality of care. It is designed to help families access what is there. The quality set aside has got them wonderful things; T.E.A.C.H. and many of these initiatives came out of that. But that is 4 percent of the program. It is not going to be changing the entire marketplace with millions of children.

So it has made significant changes in pockets, but it has not been enough to, I think, do a sustained change of the whole marketplace. That make sense?

Chairman KILDEE. Thank you, thank you very much.

My time has expired.

Governor?

Mr. CASTLE. Thank you, Mr. Chairman.

And, Ms. Adams, let me ask you a question. I believe in what we are doing here, but I worry about it sometimes in terms of some of the programs, et cetera. Are there studies or research showing how children who have been involved in early education developmental programs, the kind of programs we are talking about here today, do later in their education outcomes?

And the reason I ask that is I remember when we did Head Start there were some witnesses who testified that there were no positive results when you got out to third, fourth, fifth grade, et cetera. And
they were concerned that the programs either didn’t have enough of an educational component or weren’t working well enough. And I don’t know if there is any research that would either contradict that or confirm that that you know about.

Ms. ADAMS. Well, I think it is important to distinguish different kinds of research. There is certainly the research showing kind of the high-quality, intensive intervention programs like Abecedarian and Perry Preschool. Those kinds of investments have shown very long-term impact. They are usually funded and focused at a level that is beyond what our public resources have been able to sustain so far.

There is also some suggestion—I think the National Head Start Impact Study has shown some impact over time, but we don’t have it for very many years. I think they are about—next week, I think—to release the latest findings, which I believe go to third grade. I should know the answer because Urban Institute is part of that study, but I actually don’t.

So I think that there is long-term impact. Part of the question is dosage—how much children are getting and for how long. Often Head Start can be a part-day, part-year program for 1 year.

Harriet began her comments saying there was no silver bullet. If you are talking about children in extreme poverty, that is not going to be enough, which I think the investments in Early Head Start are so promising.

I think we do know that when it is done right, it can have an impact. How you do that to scale is part of the job that many of you have been working on the last several years.

Does that answer your question, sir?

Mr. CASTLE. Well, I am not sure there is any easy answer, but it is a very good effort. That answer your question?

Let me sort of ask a question, of any of you, that concerns me, and that is the family and parental involvement. We talk about these programs, whatever, and generally they are out of the home; not everybody can go to Dale Kildee’s Head Start program.

So there is a lot of time when children are going to be at home, and obviously the family involvement with that child is vitally important. And I worry about that a great deal.

I mean, a child may do well in some sort of a preschool or a development Head Start-type program, whatever that may be, and they go home and they run into other kinds of problems. Can you tell me what you are doing in your areas or what you know about in terms of that parental, family involvement to engage the parents and to help?

I mean, statistics have shown us constantly that parents who are motivated and well-educated generally will have children who are motivated and will become well-educated and vice versa. And that should be a concern to all of us—whatever help you can give me along those lines.

Ms. LOWERY. Congressman, I will begin—and you probably know as well as I, in Delaware the Early Success program has five components, and two components involve parental engagement and parental training, along with Parents as Teachers, but there is a component of training that is privately funded through such organizations in Delaware as Social Venture Partners and led by the Early
Childhood Council, that any child who is participating in early childhood programs in the state of Delaware also have a parent who is asked to engage in the teaching and learning aspect, not only of the academic-aligned expectations but of the social and emotional expectations around behaviors as well.

Mr. CASTLE. Thank you.

Ms. DICHTER. Let me add to that, and you raise a really critical point. I think we all know it is the adults together who influence the outcomes for the children. And so schematically and from a value perspective, it becomes very important for the early childhood programs to have excellent partnerships with parents.

We actually built that into our standards. It doesn't strictly fit the definition of what a standard would be, but we said, “This is too critical to leave this out; we have got to get everyone talking to one another and working well together.” So we have a big stress on that.

We actually are fielding now statewide for 100 percent of our programs a unified parent satisfaction survey to make sure we are collecting enough of the feedback and getting that back out to the programs. We prepare materials for programs to use with parents—as I mentioned, this is a calendar that is month-by-month what you can do with your kids at home—and provide things.

And I want to say anecdotally when we started just the pre-k program—we hear this from our Keystone STARS parents as well—our parents come now and say, “I am getting as much out of these programs as my children are.” They are thrilled at what they see is happening for their kids, but because we have tried to put so much emphasis on a partnership between the programs and the parents, parents are really saying, “This is a great asset for me.”

I think you raise a very important point. It is very doable, though. You know, there does not—I try to think of it in this way. We are doing a tremendous favor to K-12 education if we can do the birth to 5-year right in terms of those relationships with parents and get everyone understanding it truly is a partnership for the kids.

Mr. CASTLE. Okay, thank you.

Ms. ADAMS. Could I add just one comment to that? I completely agree with both of these issues.

The one other thing I think that we do need to start paying attention to as a country is the labor demands on families. Low-wage workers—it is very hard to participate in your child’s program if you have the kinds of job demands and you don’t have any flexibility to take time off.

I just personally have noticed in changing schools recently how there are suddenly no parent volunteers, and it is a much more low-income set of families in my school. It is very hard to do that.

I think we need to be thinking about how do we support parenthood in the low-wage workforce on the labor side. I don’t have the right answer there, but thinking about work policies and workforce issues is very important.

Mr. CASTLE. Let me thank you all very much for your testimony and for what you do.
And I agree with you, Ms. Adams. I think we ought to start with Congress on a less work program so we can have more time at home. But somehow I don’t think that is going to get done. There is a lot to be done around here.

I yield back.

Chairman KILDEE. Thank you, thank you, Governor.

For the information of the members, Dr. Lowery has to leave us at 11:30 for a Board of Education meeting, so please bear that in mind.

It is my pleasure now to call upon the gentleman from Iowa who had a great victory on the floor of the House yesterday, Mr. Loebsack.

Mr. LOEBSACK. Thank you, Mr. Chair. And thanks for putting this hearing together. This is really a critically important issue. I am a mere sophomore here in Congress, but I had the pleasure in 2007 of participating in the reauthorization of Head Start and it was a real pleasure and honor to be a part of that. And I am really happy that we have obviously at the federal level put even more funding into that through the stimulus package, if you will, the Recovery Act. So I am really happy about those developments in recent years.

I like this discussion about the role of parents, and I appreciate Mr. Castle bringing that up. I visited numerous Head Start programs in my district, the second district in Iowa, and I have always been impressed by the number of parents who have volunteered their time and in some cases it has actually been wonderful for those parents because they have gone on to become community leaders, in no small measure because of their involvement in Head Start with their children on a volunteer basis.

And yesterday, we passed the GIVE Act, and that really is in no small measure intended to increase the number of volunteers in America for a lot of projects. In the case of Iowa most recently, it—near and dear to my heart, relating to the flood, the floods that we had in June and the recovery and rebuilding process.

But, Ms. Adams, you mentioned the reduction in the number of volunteer hours, I guess, on the part of parents. Can you elaborate on that or any others on the panel elaborate on that a little bit—and again tying I suppose to the economy, but the whole issue of volunteerism on the part of parents?

Ms. ADAMS. My comment was completely an anecdotal one from my daughter’s school, so I can’t give you the national numbers. But I think one of the things that worries me a lot is that as—I don’t think we know from the current economy what is going on exactly in terms of hours that parents have.

But you know as parents are working harder, trying to keep jobs harder, looking for work harder, that the kind of discretionary time that they need to be able to really focus on going to their child’s school and spending time as they need to is going to be challenged, even if they are unemployed. That would allow some, but a lot of those families are really looking very hard for work on a regular basis during school hours. So they can’t do it after school because their children are home, and they are not going to be able to afford child care during those hours.
So I don’t have any data for you, but I think just kind of a commonsense—my own personal parent experience shows me that I can’t imagine it is increasing a lot right now.

Mr. LOEBSACK. Would anyone else on the panel like to respond to that?

Ms. LOWERY [continuing]. We recognize the challenges that parents have, especially in this economy, and what we have tried to do in Delaware is rejuvenate Delaware Mentoring Council. And we know the connection between the parent and the child is very important, but we are also looking for community people who are retired from various professions who will also come in and act as surrogate parents with the students and build that relationship with them through mentoring.

Mr. LOEBSACK. I think that is really important, too, obviously, right.

Any of the others? Okay.

Ms. RUSSELL. I guess I would like to talk a little bit about the issue of parents in the context of our current economy. Because as Gina said earlier, we see parents struggling to try to support their families with rising unemployment. And as families become unemployed, their child care placements become at risk, their ability to afford child care, their ability to use it, their ability to even be eligible for support for the child care.

And this is at a time when families are under the greatest amount of stress, so the children, young children, experience that stress too. And one of the things I worry a lot about right now is what this is doing to our children.

Our state policies often are very rigid about providing assistance. You have to be working; you have 1 month to get a job. And so children are being pulled in and out of early childhood settings, which is terrible for children. And so right now states are scrambling with what to do about that, but without changes in policy that give some more flexibility so that children aren’t hurt in this process or hurt anymore in this process as families struggle during the current economy, I think, is critical.

Ms. DICHTER. Let me just add to that because I want to talk just for a minute about how we look at eligibility for our subsidy Child Care Works program. We have a great deal of the concerns that people mentioned around providing our kids with stable settings and also understanding that the core base of when we are providing subsidy has to do with parents working and having stressed income.

But we have created provisions that have—parents, for example, lose their jobs; they have several months to be able to maintain their children in the program while they are searching for a job. They need their early childhood program while they are job hunting.

We rewrote our regulations in order to allow that to happen, but I think part of what we are trying to stress here is this is state-by-state decision-making now for this sort of thing as to what the value set is and how you implement that to really support the families.

When we have created our additional state programs where we have been able to really put sufficient money on the table to get
the level of quality we know will really benefit the children, we ar-
anged our eligibility policy for child care subsidy so that the child
who was going to be enrolled for a part of the day in a program
where we were paying the right amount for the kid and we knew
we were doing well by the child would be able to maintain their
child care subsidy even if there was a disruption in the parent’s
employment because of the outcome that we were seeking for the
child.

So those were, again, all decisions we had to make at the state
level. We did have to work with our General Assembly on many of
them because they went into our eligibility rules, but we were suc-
cessful in getting agreement on that kind of thing. So I think that
we, as we look towards just the child care piece and additional
roles for the federal government here, we probably need to elevate
up some of our expectations and understanding of the interaction
of our expectations for outcomes for children, what it takes to sup-
port them well and also then what it takes in terms of our value
set on which parents—and how it is we are helping our parents to
be successful as well.

The last point I want to mention here because many people have
found this counterintuitive. Yes, we are in a terrible time with the
economy. We have never had as much demand as we have in our
state for subsidized child care, okay. We have never had the level
of demand. Our waiting lists are out the roof, okay. They are unbel-
lievable to get into the program, and we have no cash left to be
able to put more into the program at this point in time.

So what we have is more parents, understanding there are peo-
ple working; they need the resources and the assistance. So I just
offer that so people don’t get themselves confused that we are in
a period where there is less need. There actually looks from us to
be a much greater degree of need and demand and understanding
here.

Mr. LOEBSACK. Thanks to all of you, what a great panel. I really
appreciate your being here.

Thank you, Mr. Chair.

Chairman KILDEE. We probably will have three votes about 25
after the hour, so we will try to move along.

And, Mr. Polis, the gentleman from Colorado?

Mr. POLIS. Thank you kindly, Mr. Chairman.

The success of any effort to develop a high-quality early child-
hood development system depends on a qualified workforce. Well-
educated child care workers and preschool teachers promote lan-
guage and early literacy skills, social and emotional development
and prepare children for kindergarten and their school careers.
However, as our testimonies indicated, training and certification
requirements for pre-k teachers vary widely from state to state,
and compensation levels are discouragingly low and fail to attract
those who would seek these occupations with preparation.

According to the American Federation of Teachers, the mean an-
nual salary for child care workers is $18,120 and for preschool
teachers is under $25,000, compared to $45,000 for kindergarten
teachers. A 2005 Yale study showed that seven out of 10 teachers
in state-funded pre-k programs earn salaries in the low-income cat-
egory; one in six works a second job to make ends meet.
In terms of preparation and credentials, 27 percent of preschool teachers don’t have a bachelor’s degree, and 36 states don’t require any specialized training for child care providers. As a result, only 55 percent of family child care providers and 57 percent of center assistants have at least some college education.

Ms. Russell, you spoke about the T.E.A.C.H. Early Childhood scholarships and the Child Care WAGE$ program. The T.E.A.C.H. scholarship has been very successful in Colorado and since 1997 has helped 1,172 child care professionals in our state reach their educational goals.

My question is how can these unique and effective programs be replicated nationally. And what other efforts are other states taking to ensure high-quality early childhood education workforce exists? And what federal policies can be effective in helping states develop a core of highly qualified and adequately compensated early education teachers?

Ms. Russell. Wow, that is a lot. The first question was how can they be replicated. Well, I think states have chosen to replicate T.E.A.C.H. cobbling together various dollars. Usually it isn’t that states don’t want to address education and compensation issues. I think that the real issue is a matter of funding. When states have to choose between various kinds of needs, sometimes the workforce does not get the kind of funding that it needs.

You said what other initiatives are going on in other states. Well, we know that T.E.A.C.H. is probably the broadest and most uniformly used scholarship strategy. Child Care WAGE$ is one of a variety of wage supplement strategies that states are using. Pennsylvania has a different example. We have states like Illinois and Wisconsin and Minnesota and California doing various kinds of wage supplements.

I think a lot of states recognize that, if you supplement the wages of the workforce directly as opposed to putting it on the backs of parents, you are able to drive quality without raising the cost. And I think that is the key to both T.E.A.C.H. and WAGE$ is you are doing it sort of as a back door way to raise quality.

And then I think the last question was so what do we need at the federal level. Well, I would argue that what we need is more money, and that the money needs to be targeted to the workforce, and that there needs to be an expectation along with those dollars of higher standards, higher standards for the workforce themselves.

You know, I think—what we have learned in North Carolina is that the workforce—and really across the nation—the workforce wants to achieve more, to go to school to learn more, to be better at it, but they need help. And I think, with resources and with standards associated with that and some level of accountability, we can achieve it.

Mr. Polis. Is there anybody else on the panel that would like to address that?

Ms. Dichter. Yes, I would like to add just a couple of points. We are very extensive investors in T.E.A.C.H.; we love this program. But we also had to invent other strategies to help people earn their degrees and credentials and to be paid appropriately. So we also
have a program where we reimburse people who take classes for college credit.

We had to very deliberately decide to stop spending public dollars on continuing education workshops that did not help people get degrees and credentials. And we had to basically say there is going to be a minimum of that in our system because we need to help people be successful; this is how we measure it in our society. So we had to do those sorts of things as well.

We have had to push with higher education on program-to-program articulation because we have adults in the workforce trying to get early childhood degrees and credentials. They may not be at only one institution of higher learning. We have a problem—not just in Pennsylvania—around the country of the 2-and 4-year schools, how it is people transfer credits back and forth. So we have had to be working on things like that; there is a lot of range.

In terms of the compensation strategies, there is a compensation component in T.E.A.C.H. We built a compensation component directly into Keystone STARS. We have merit awards where we encourage people to add on to compensation. We created a career lattice to begin to show people how they would create that range.

And very importantly, when we were able to start our newest initiative, which was our pre-k program, which uses child care, uses Head Start, uses school, we were able to set the compensation per child at a level high enough to pay our teachers the right amount for those B.A.’s in early childhood education and certification. And we benchmarked the salaries to show people how to do that.

We work with our practitioners on how they blend the funding streams. Okay, we create automated spreadsheets to show them how to do that so that people can know how to get from here to there. Again, even in this one area, you can’t just do one thing. There is a set of things you have to do in the system as a whole to be able to help people move themselves forward.

At the federal level, I think we have—Gina said this already—there is a lot more that could be done in the reauthorization of the Child Care Block Grant in terms of the standards, the quality rating and improvement systems, the stress on credentials basically and how resources have to be delivered. And as I said, I really think we need a new funding stream that unifies this across the variety of the early education initiatives.

Ms. Adams. Can I add one thing? This goes back to my earlier comment about the importance of the block grant. I think it is very important to remember that the block grant is what is supporting many providers on a daily basis. The block grant rates are based on market prices, which are based on what families can pay, which is based on low wages.

So I think we have to start talking about how we disentangle, how we allow rates the flexibility to pay what quality costs as opposed to simply what parents can pay. If we don’t, we can do all these strategies, honestly, but the biggest funding source supporting providers on a daily basis is not going to allow them to sustain it in the long term.

Chairman Kildee. Thank you.
The gentleman from Texas, Mr. Hinojosa?
Mr. Hinojosa. Thank you, Mr. Chairman. I think that this hearing is very helpful.

I want to ask my first question to Secretary Lowery from Delaware. In your testimony, you mention ready families as one of the early success goals and state that families were significant partners in creating a culturally competent, comprehensive and integrated early learning system. How are you putting into practice the concept of cultural competence?

Ms. Lowery. A lot of our students who are impacted by some of the Early Success program are our urban students, our more urban students. We work very closely with the United Way. We also, you will see in the literature, have a program called Success by 6. And through the United Way working with the Early Childhood Council, there is a lot of outreach to the Metropolitan Wilmington Urban League, through the Latin American Community Center, to engage parents in their communities where they are most comfortable. And our trainers are going in to them to take that training to them and meet their unique needs.

Mr. Hinojosa. If I may interrupt you, because time is very short. You mention the Latin American families, and I have 80 percent Latinos in my congressional district. I ask you the question: What are you doing for the families of English language learners?

Ms. Lowery. Great, we have, I mentioned earlier, a private concern called Social Venture Partners, and that is a group from the Business Roundtable in Delaware headed by a person, Mr. Paul Harrell, who has invested a lot of money and set up an early childhood center in the Latin American Community Center and worked very closely with the director of that center to do outreach.

We also have Representative Miro, because those are mostly for the students who live within the Wilmington community. We have a lot of Latinos who also live in our suburban areas, and Representative Miro is working in concert with them to make sure that those services that we are giving to our inner-city students will reach those students in the suburban areas as well.

Mr. Hinojosa. I thank you.

To Gina Adams from the Urban Institute, Hispanic families often rely on informal care, especially friends or relatives, for their child care. How can we support these informal providers so that they can provide a rich learning environment that supports literacy and social and cognitive development?

Ms. Adams. It is a critically important question. I would say two things. One is that there are a number of strategies that have been experimented with in the block grant using the quality set-aside.

States have been learning a lot about how to reach out to the community. What they have discovered is that you need to have a blend of what we might think of as parenting support because some of these providers more function as parents or family members, as well as our more traditional child care efforts. It has to be often done through trusted intermediaries. There are language issues, obviously, so you want to make sure that the materials are in the appropriate languages. But part of it is to not necessarily assume that people see themselves as professionals but see themselves as family members.
But I do want to say that one of the challenges for the Latino community in particular is that there is a presumption that because Latino families use relatives that is always what they want. Some families do, but some families very much want to have an early educational experience. And part of the challenge that we face is to make sure that the early child education programs, the child care centers, the Head Starts, the pre-k's are actually meeting the needs of the families, that they have people who speak their language, so that when the family is leaving their child off, they are not leaving the child with somebody who they have no idea what is happening and they cannot communicate with their caregiver.

So I think we need two focuses—one on informal care providers but also make sure that it is a choice.

Mr. Hinojosa. You are making some very good points. And one of the things that I have learned in our Latino community is that if we could provide them a little training on how to read to young children, ages 2, 3, 4, that it oftentimes results in that early reading plus writing, being successful then in their elementary schools and thus being able to stay in school and go on to high school to graduate and maybe go to college.

So I hope that you all will integrate somehow the programs that we sponsor here in Congress. A good example of that would be the RIF program, which is Reading Is Fundamental, because the Congress pays for 75 percent of the cost of those books for children of all ages. And we are trying to focus on those 1-, 2-, 3-, 4-year-olds, so that we can get them interested in reading and loving books because that then will result in success in schools.

My last question—and I am out of time.

Thank you, Mr. Chairman.
Chairman Kildee. Thank you very much, Mr. Hinojosa.
Gentlelady from Hawaii, Ms. Hirono?
Ms. Hirono. Thank you, Mr. Chairman.
Since I have been here in Congress—this is my second term—this committee as well as the full committee has really focused on the importance of quality early education, so I think that we really are—you know, the evidence is in and we understand what we need to do.

And two things that come out in all these hearings that we have been having, for me, is that the states are at all different levels of support for quality early education, and clearly Pennsylvania, North Carolina, Georgia, other states are much farther along than some other states and that we need to support a diversity of the kinds of early childhood programs, quality early education programs, that work. One size fits all is not what we need to be doing. So I think those are common kinds of testimony from all of you, for which I am really glad.

And I ask every panel that comes before us in talking about quality early education to take a look at the PRE-K Act that the full committee marked up last in last Congress and we passed out of the committee. That bill has been reintroduced, and I would certainly welcome your comments and input on that because it is a grant program that is meant to be very flexible to support states’
efforts toward quality early education wherever that state’s efforts may be.

I wanted to ask you, Ms. Dichter, that in your point to—you said that the federal government hasn’t been sufficiently proactive—and be still leaving too much for the states to do, in spite of the fact we have made substantial increases to Head Start, substantial increases to CCDBG funds. So can you elaborate a little bit more about—briefly, you know, how it is that you think the federal government could be much more proactive in this area?

Ms. Dichter. Sure, I think I can make this concrete and easy. I will just give an example of one program that we have talked about today. I mentioned we have Child Care Works subsidy. Every state has some kind of subsidy program in child care. It is up high in everyone’s mind because of the economy.

I would need an additional $80 million a year in Pennsylvania to clear the waiting list. Under stimulus, the amount that we will be getting is $30 million a year for 2 years, of which, as you know, we will have mandatory and very appropriate set-asides to continue to work on infant-toddler services and quality overall.

But I think that is a very concrete example. That is only the families who step forward. We do have pretty non-bureaucratic processes; you probably got the sense I am not for big bureaucracy in terms of how we run our programs. We do verify people’s eligibility, but these are families still knowing we have waiting lists who came and said they needed help from us, okay.

So I hope that helps you to see we need more financial resources. We don’t have enough money in the system to get the job done well. And I think that we could benefit from having some greater combination of incentives and standards, basically, that comes with our federal funding in these areas and that we would do well by our families and children to take that kind of step. I personally believe people in the states and in local communities are ready for that. We have had very good experience in our state as we have organized the system and stepped up the standards and the accountability along with the investment.

Ms. Hirono. From your testimony, it seems clear to me that Pennsylvania has gone a long way toward a very comprehensive approach to the continuum of services to young children.

I have a question for Dr. Lowery. You said that you are partnering with the private corporations and private entities to really leverage state dollars. I think that is a very important aspect of what we need to do because clearly the resources do not meet the demands. So how successful have you been in reaching out to what I call the non-usual suspects? The usual suspects in this area are the educators and all of that.

But for example, the national association of lieutenant governors recently passed a resolution saying that they support quality early education. And a group of retired generals have said for the military that it is really important, nothing could be more important than putting resources into quality early education to enhance our military capacity. So these are what I call, you know, really broadening the support and understanding of the importance of quality early education. So I just wanted you to, you know, talk a little bit
about your success and getting money from corporations and other groups.

Ms. LOWERY [continuing]. Sorry. Our early education council is an eclectic group of educators, business leaders and community activists. So a lot of the work that we have done around early childhood has really been led by citizens' groups, including our business community.

We are in the process of having a new survey done around the quality of care, as we have all been talking about today—what kinds of standards we have in place and how we really do, with integrity, engage parents in the teaching and learning piece as the children prepare for K-12 education. That will be led by the lieutenant governor. That is something that is just about to begin.

As I came on as secretary of education, one of the first hires that I made was a person from the business community who is there to be a liaison between private and public partnership. And he is the person who founded the Social Venture Partners, which focuses on early childhood education. It is one of the platforms that our new governor, as every governor, including Congressman Castle, has always had as of—one of their major concerns is early childhood.

Because maybe the state size of Delaware, we can get early access to many people very easily. And I can say with confidence and would be glad for anyone to come and sit and speak with any of us that our business community is actively engaged in supporting early childhood and in many instances may be the forerunners of making sure that that happens.

Ms. HIRONO. Would any of the other—oh, I am out of time.

Thank you very much.

Chairman KILDEE [continuing]. The gentlelady from California, Ms. Woolsey?

Ms. WOOLSEY. Thank you, Mr. Chairman, and thank you, wonderful panel of witnesses.

You know, I shouldn’t come to these hearings because it takes me back 40 years to a nightmare that I try to get behind me when I was poor and on aid for dependent children with 1-, 3-, and 5-year-old children, forced to go to work because their dad self-destructed and wouldn’t get help. And that was the hell-year of our life, that first year, 13 different child care situations in 12 months, where actually I would tell the child care workers that came to my home, if they had any questions, ask my 5-year-old son because he knew more about all this than—can you imagine the pressure on that little kid?

So a lot has changed since then, and I know that. Their children, all five of my grandchildren, are in really good—they are all professionals, husbands and wives. Their five children altogether out of the three families are in really wonderful child care or preschool situations and have been, but they can afford it. I was poor. Hardly anybody had really good child care options 40 years ago, but folks with the funds and the resources have it now.

So my question is about the rest of the poor folks in this country that are left at our whim virtually. So what I wanted to know—if we need more federal funding, which we do, what controls, what federal standards do you think could be applied to federal funding for our community block grants, et cetera, because, you know, there
is not going to be a lot of extra federal funds unless we tie it to something that is measurable.

So between you, do you have any suggestions in that regard, starting with you, Secretary?

Ms. DICHTER. In the context of, say, the Child Care and Development Block Grant, and I guess in terms of other potential new federal funding, we do need to be clear about what it is our early learning standards are, what our expectations are for the delivery of the services to the children. I think that is fair to do that, and again from my own state experience, I think you can balance the issues around the states with a national framework for being able to do this.

We can go on.

Ms. WOOLSEY. I think we have to keep moving down because you saw——

Ms. Russell, I mean, I would like you to tell me what those standards are, if you could, if you have some measurements that you would add to put in there so that——

Ms. RUSSELL. Okay.

Ms. WOOLSEY [continuing]. That would be fair and measurable.

Ms. RUSSELL. Okay, well, one of the things that we have found successful in North Carolina is the quality rating system, and we have embedded it in our licensure so that we have standards that 50 percent of the quality rating is based on the education of the teacher and 50 percent is based on program quality. So helping states—one standard that could be found in the block grant is helping states to develop quality rating systems so that consumers know what they are buying and providers know how to improve their quality.

I think the second thing, and for me probably the first thing, is to have some targeted dollars that require states to invest in the workforce, because the workforce is the key to getting the quality—

Ms. WOOLSEY. Ms. Adams?

Ms. ADAMS. I would add just to make sure that we talk about basic health and safety—sorry, we don't even have an assurance of basic health and safety in this country, so I would say that any federal standard should at least require that anybody who gets public funds taking care of at least one unrelated child should have basic inspections, should meet basic health and safety standards.

Ms. WOOLSEY. Because I think you are leading to the fact that a licensed child care center may not have ever been inspected for safety.

Ms. ADAMS. Yes.

Ms. WOOLSEY. But they still have a license.

Ms. ADAMS. Yes.

Ms. LOWERY. We do have a framework, the Stars program in Delaware, with a five-level rating system, where every child care provider, even if it is a child care provider keeping six children in his or her home has a rating level. And I do believe that I agree with everyone else. People need to see returns on their investments, so we have to have metrics to make sure that they are getting that.

Ms. WOOLSEY. Okay, thank you very much.
I will yield, Mr. Chairman, thank you.

Chairman Kildee. Thank you very much.

Mrs. Davis, from California?

Mrs. Davis. Thank you, Mr. Chairman. Thank you, all of you, for being here and the work that you have done.

I want to focus for a moment on the military families and the programs that we have, not necessarily just on our bases but some of the standards even that the military has in this regard. What is really interesting right now is that the key issue that military families are bringing is for child care and for preschool education for their students—for their children.

Because despite the fact that we have some great programs out there, many of them either fall through the cracks or are not eligible within their state. California at one time didn’t make them eligible. It is a little bit easier now, but still finding places is hard.

And I wonder if you could—we know how important it is for those children because of instability, deployments. I mean, it is really a critical, critical need. Can you give us some concrete ideas about what we might do to support those programs more? But also is there a great deal to learn as well from their programs, from their standards? How can we apply some of the tools, if you will, that they have used as we look at federal programs and what we can do to be more supportive? I don’t know how familiar you are with those programs.

Ms. Adams. I guess I would just say very briefly, I think, from what I know—I am not an expert on the military system—it seems to be a designed system. It is not just based on the market; it is not just based—it has all the things that we have talked about. It has standards, it has accountability, it has expectations and it has resources. And I think there is a lot that we can learn.

But I do want to say I think that we know those answers. The question is can we let the country decide that that is what all children need.

Mrs. Davis. All right, thank you. I appreciate that.

One of the areas that I think particularly, Secretary Dichter, in your—in the background material—and I am sorry I wasn’t here when you spoke earlier. Family-visiting programs are something that are applauded in many areas and began quite a number of years ago. There are a lot of different models out there, and I am wondering whether—we always have to make choices. And I was impressed that it sounded like about 40 to 50 percent of the children in Pennsylvania, perhaps in some areas of Pennsylvania particularly, are reached by that program.

Should we be putting a lot more resources into those programs? Or is there enough of a controversy surrounding them to a certain extent, in terms of family intervention issues and other concerns that perhaps—political concerns that people have—that it is not worth focusing on that? Or in the real world, in terms of what is actually having an impact on children and their families, is that a better place to put one’s resources?

Ms. Dichter. We believe in the continuum of early childhood programs, which means we need programs that do visit with families at home and programs that are in classrooms and other group
settings. And we want to make sure that our families have all of these options available to them.

We are very big on evidence-based programming. We are investing public dollars, so we want to invest it as effectively as possible. So we would say there is a need for a continuum.

The one cautionary note that we see with our home-visiting programs is that they may not meet all of the work needs of the families. And so, again, as we build our continuum, we try to be very sensitive around making sure that we are paying attention to all of these dynamics in the family—and Gina talked a lot about this—especially with our most stressed, lower-income families, all right. They need a significant number of supports, in terms of how we build the early child care programming.

So I would say yes to evidence-based work, okay, and no to, again, only a home-visiting approach. A home-visiting approach amongst other approaches, very appropriate, and we encourage home visiting for our classroom-based programs. That is a requirement, as you may know, in Head Start, but it is also something that we think is very valuable, and teachers and parents both like that when that occurs as well.

Mrs. Davis. I guess do we have enough added value from that? I understand, in terms of the continuum, we want to have it all. But that coupled with other kinds of programs, does it add so much value that it really is something that we need to take a much deeper look at?

Ms. Dichter. Let me just say, then, the two programs we use—the Parent-Child Home Literacy Program and the Nurse-Family Partnership—both have very good documentation of effectiveness for results for children and results in fact for parents, but we are very careful and cautious about how we field those programs.

Chairman Kildee. The chair wishes he could take more time to thank the panel. You have been really helpful, various aspects. All of you in your own involvement in this area bring an expertise here and a concern, which is very, very important. So I wish I could take more time to thank you, but we have votes on the floor.

And as previously ordered, members will have 7 calendar days to submit additional materials for the hearing record. And any member who wishes to submit follow-up questions in writing to the witnesses should coordinate with majority staff within the requisite time.

And without objection, this hearing is adjourned, thank you.

[The statement of Mr. Payne follows:]

Prepared Statement of Hon. Donald M. Payne, a Representative in Congress From the State of New Jersey

Let me thank Chairman Kildee for holding this important hearing on improving early childhood development policies and practices.

An extensive body of research now clearly demonstrates the importance of promoting early language and literacy skills in preparing children for later success in reading and in school. Yet today, large numbers of children still do not receive the support and assistance they need to develop these essential skills and begin kindergarten ready to learn.

To close this gap, the federal government has traditionally provided funding under Title I, Part B of the No Child Left Behind Act (NCLB) for a variety of literacy programs and strategies that reach children and parents, and the professionals that interact with them.
However, there has emerged over the last decade a powerful and effective new approach to promoting early language and literacy development, and school readiness—pediatricians and other healthcare providers guiding and encouraging parents to read aloud to their children right from the early years of life, sending them home from each doctor visit with a prescription to read aloud together. I have reintroduced H.R. 1526, the Prescribe a Book Act, to authorize a five-year $85 million federal pediatric early literacy grant program based on the long-standing, successful Reach Out and Read (ROR) program, which has trained more than 47,000 healthcare providers in literacy promotion, and operates in more than 4,100 clinics and hospitals nationwide. This grant program would train doctors and nurses to provide low-income parents with age-appropriate reading tips and advice about the importance of reading aloud to their children as well as give these parents a children’s book at every wellness visit.

[Questions for the record and their responses follow:]

U.S. CONGRESS, [VIA FACSIMILE],

Ms. GINA ADAMS, Senior Fellow,
Center on Labor, Human Services and Population, the Urban Institute, Washington, DC.


Representative Donald Payne (D-NJ), member of the Early Childhood, Elementary and Secondary Education Subcommittee has asked that you respond in writing to the following question:

1. Would you support pediatric and early literacy programs like the Prescribe a Book Act, a grant program which would train doctors and nurses to provide low-income parents with age-appropriate reading tips and advice about the importance of reading aloud to their children as well as give these parents a children’s book at every wellness visit?

Please send an electronic version of your written response to the questions to the Committee staff by close of business on Thursday, April 2, 2009—the date on which the hearing record will close. If you have any questions, please do not hesitate to contact us.

Sincerely,

GEORGE MILLER, Chairman.

Responses to Questions for the Record From Ms. Adams

Thank you again for giving me the opportunity to testify before the Early Childhood, Elementary and Secondary Education Subcommittee. Below are my thoughts in response to the follow-up questions. Please feel free to contact me if there is more information that you need.

1) What do you estimate it would cost to provide high quality early care and education for nine hours per day, five days per week, for 52 weeks, for (1) infants, (2) toddlers, and (3) three and four year-olds?

This is an important question, but unfortunately one that is not one that I have analyzed at this point, or have the data easily available to do so. However, I will suggest that one of the most essential issues in getting information on this question is to clarify what form of “high quality” you are interested in, for what outcomes, and for what children. For example, “high quality” which not only addresses the cognitive needs of children but also takes a more comprehensive look at their needs will cost more than programs take a more limited approach—but may magnify and broaden the impact of the initiative depending on your goals and the particular families and children you are interested in serving. It is also critically important to specify key parameters of quality that you want to be the basis of such estimates—such as group sizes and ratios, teacher education, training and experience; salary levels and benefits; standards and accountability; and so forth.

2) How much do you think it would cost to provide high quality child care to one child for 9 hours a day, 5 days a week, 52 weeks a year?

See above.
3) In addition to increasing funding, what changes would you suggest to the Child Care and Development Block Grant (CCDBG) to improve quality and access?

There are many changes I would recommend to the program, some of which I suggested at the hearing. Below I highlight two issues that sometimes get less attention in the policy debate.

a) Encouraging states to base payment rates on what providers need to provide quality care and are providing, rather than their local market prices. As I mentioned in the hearing, market prices are artificially low due to the inability of parents to pay, so cannot sustain quality. Obviously these higher rates should only be paid to providers who provide quality care, but nonetheless, I believe that we should start to decouple the payment levels from market prices for those providers who provide good quality. We also need to support providers who are working to get their programs up to meet higher standards by providing up front start-up funds.

One of the challenges with this issue is the fact that providers vary in the extent to which they serve families with vouchers. The above approach works most effectively for providers whose enrollment is majority voucher—it is much more difficult to use voucher reimbursements to leverage quality for providers who only have a fraction of the children on vouchers. It would be useful to encourage states to identify creative ways to help support quality among these providers as well, including broader use of contracts and other opportunities to provide foundational supports to providers to pay for ongoing costs to maintain quality settings that are not supported by the market. [For more information on these issues, and some policy suggestions, see our article More than A Work Support? Issues around integrating child development goals into the child care subsidy system, by Adams and Rohacek, which can be found at http://www.urban.org/publications/1000449.html.]

b) One of the links between quality and access is making sure that the eligibility rules do not inadvertently force parents off subsidies and create discontinuity in care for children. In particular, we have done extensive research on helping states design subsidy systems that are more supportive and cognizant of the needs of families and children, and have identified a number of important policy strategies that states can implement in this area. [See Designing Subsidy Systems to Meet the Needs of Families: An Overview of Policy Research Findings, by Adams, Snyder, and Banghart, at http://www.urban.org/publications/411611.html.] While this report lays out many specifics, one of the most important steps the federal level can take would be to increase funding so that states are not forced to make draconian choices between different needy families, and to send a clear message to states that the subsidy system should support families through changes to help them stabilize their care arrangements, and should not be cut off in situations where families are trying to get back on their feet or keep their families stable through other changes. This means states need to be encouraged to make changes in a number of areas, including: redetermination periods, interim reporting requirements, whether and when vouchers are terminated or adjusted in response to minor or temporary changes in family status, income eligibility determination policies, and support for critical work supports such as job search, training, and education. Specific examples of policies that some states are already putting into place in these areas are described in the report referenced above.

4) If the federal government sets a floor or baseline for the minimum level of child care quality that states will need to meet, what should be the minimum requirements of this system?

Again, this is an important question that is not specifically my area of expertise. However, I will offer a few thoughts that might be helpful. First, any guidelines about a floor or baseline must continue to be considered within the larger context of a system which has too few resources in it to develop and sustain good quality care. So any effort to strengthen basic standards must be accompanied by funding to support programs to come into compliance, as well as by systemic reforms that identify ways to ensure that programs have access to the ongoing resources necessary to meet these standards. The baseline will simply not work as long as we have a system that primarily relies upon the inadequate resources of private-pay families to determine what resources providers can use to care for children.

Second, in addition to funding to help programs achieve and sustain quality, it might be useful to recognize that the effectiveness of any licensing or quality protection system relies on three interdependent issues. The three components needed to set a floor or baseline of quality need to address:

a) which programs are required to meet standards or are, alternatively, exempt from having to meet such standards;

b) what standards they are required to meet; and
c) whether and how the standards are enforced for those required to meet them—which not only includes inspections, but also subsequent enforcement and follow-through for programs out of compliance.

I often describe these as the three legs of a three-legged stool, as this metaphor makes it clear that all three are necessary for an effective system. Consequently, I would suggest that any strong system must involve improvements in all of these areas—specifically, must cover most or all programs or care settings; must include standards that at a minimum protect children from harm and hopefully help move programs towards quality through an understanding of the components that impact the full range of children’s development; and finally, must include enforcement provisions that include inspections and follow-through if programs are not in compliance. When these steps are coupled with an overall approach that helps programs achieve and sustain quality, significant progress could be made.

5) How would you suggest we encourage states to go above and beyond any kind of federal quality baseline or floor?

Several states are experimenting with the use of Quality Rating and Information Systems (QRIS), which create a continuum of quality and provide supports to individual teachers, centers and family child care providers to meet the increased standards. In some cases, they also provide higher reimbursements for providers meeting the increased standards. QRIS also provides information to parents and helps them understand the quality of the provider they have chosen. Consequently, you might consider using incentives and challenge grants to states to encourage the development and implementation of these systems.

However, to be successful, QRIS need substantial resources to provide grants to providers to receive additional education and training, supports to centers and family child care homes to improve the quality of their environment through new materials, and increased reimbursements to offset the cost of meeting higher quality standards and compensating qualified providers in order to improve retention. [Note, however, the previously mentioned challenge of relying solely on this approach for improving quality among those providers who do not have a majority of their enrollment being paid for by the voucher system.] There are also additional costs associated with monitoring and assessing the quality of programs to ensure they are meeting the higher standards. Therefore, any effort to expand the use of QRIS should include additional resources to meet these additional costs.

6) Would you support pediatric and early literacy programs like the Prescribe a Book Act, a grant program which would train doctors and nurses to provide low-income parents with age-appropriate reading tips and advice about the importance of reading aloud to their children at every wellness visit?

I believe that literacy programs are extremely important, however I am not an expert on this particular approach and do not feel qualified to offer an opinion on this issue.
Responses to Questions for the Record From Ms. Dichter

This memo addresses a number of questions in follow up to the March 19, 2009 hearing. If I can be of further assistance, please let me know. I am glad to drill down to a more concrete or specific level if you do not find this memo specific enough. There is more that we can do to improve the early educational experiences of the nation’s youngest children—to do so takes more financial resources than are currently invested as well as a more focused, disciplined approach to quality, demanding that all of us accept this as a core value and organizing premise for public investment.

Representative Titus as well as Representative Woolsey asked similar questions about the role of standards in federal funding and how to maintain/attain quality. My responses to those questions follow:

CCDF: For the existing funding stream that states are already controlling and represents a location in which many parents enroll their children, the Child Care and Development Block Grant, I would recommend that we set a baseline floor for quality and receipt of these dollars. This funding stream, as I indicated in the hearing, is also significantly underfunded and lacks a baseline of public funding such as what we have for K-12 public education. Keeping this in mind, we must find a way to advance a focus on meeting the learning/developmental needs of the children and in creating an approach that is quality improving.

That investment would require the states to develop and implement an account-able, strong Quality Rating Improvement System, using the element we have designed in Pennsylvania for Keystone STARS, which (in short) 1) set standards progressively and 2) provides supports in the form of financial resources as well as professional development and technical assistance. In our experience in Pennsylvania, we have elevated expectations but also provided meaningful supports and an approach to assist the providers in doing a better job in serving children and in making it attractive to the providers to do so.

The federal government can require a core set of minimum standards, the provision of supports to build capacity in the form of professional development and technical assistance as well as money, without interfering with the exercise of state creativity and autonomy. In other words, if the federal government puts a framework into place, states such as ours would benefit and would have opportunities to continue to push our work to new levels and states that are not yet there would be able to draw upon the framework while still exercising options at the state level.

On the accountability side, as you know, I mentioned that in Pennsylvania we have worked to gain acceptance of the concept of accountability in early childhood education and I believe our providers are proud of the strides that they are making. Within Keystone STARS, we use the Environmental Rating Scales developed at the University of North Carolina as part of our accountability model for the purpose of our overall classroom monitoring, and we demand certain scores associated with the upper STAR levels. This tool is helpful to everyone as it also provides appropriate and useful feedback so that programs can help to improve.

The focus on improvement is a crucial aspect of accountability. At the level of the child's progress, we have a responsibility to inform parents about how their children are doing and it is also helpful for our teachers and administrators in order to gauge their own needs for professional development and support. Starting with Early Intervention, where there is a federal mandate for child outcome or progress reporting, and then adding in our new state-funded pre-k program (delivered by STARS child care, Head Start, schools and nursery schools), we now have child-level outcome reports using a developmentally appropriate assessment of children (generally 3 times a year) that helps chart their progress. This information is fed back to parents, to teachers, to administrators, and as we keep building our system, to those offering higher education, professional development and technical assistance so that they know how to better target their efforts with teachers and administrators. We also use this information in aggregate to demonstrate program impact. We are building out this system to include children in our other quality early learning pro-grams and the information at the child level is firmly grounded in our knowledge of the child's background, the level of public investment, and the standards of the program so that we are more accurately understand or predict the level of progress a child should be making in the program relative to these circumstances.

I can provide more information to you but I hope that this satisfies you that there is a way to have high standards and expectations within the context of federal fund- ing without compromising state leadership or creativity in problem solving and without compromising the best interests of children.

So, within a Keystone Stars type system you would need to have:
• Minimum Standards for the so-called structural areas such as class size; teacher-child ratios; curriculum linked to standards, which in turn should be early learning standards built to align with the state’s k, 1st, 2nd and 3rd grade standards (noting of course that the early learning standards will likely include areas not found in the early education standards, which tend to be exclusively cognitive in their basis); and other critical areas such as partnerships with parents and management and administrative practices. I recommend you take a look at what we did for Keystone STARS as well as our new pre-k program PA Pre-K counts to get a specific feel for this and to show you the other enumerated categories that are needed. The list is not overly long as we are running publicly administered programs and as with most government, we want to be prudent and efficient.

• Professional Development and Degree Support, including the creation of a Career Lattice.

• Capacity building supports through professional development, site-based technical assistance, Environmental Rating Scales use, including training of site-staff on self-implementation, interpretation and quality improvement planning from the ERS, etc.;

• Appropriate child assessment that is looked at against the standards set and the context for the child and the money invested in the program;

• Financial rewards for programs as they move up STAR levels. This includes money for the program as a whole as well as resources for teachers and administrators who gain valuable early education degrees and credentials and stay on the job.

In our system programs “earn more” if they are inclusive (enrolling children within infant toddler or preschool Early Intervention or those participating in our subsidized child care program.) These earnings come either in the form of increased grants when certain thresholds are reached on inclusion or add-on payments in subsidized child care.

In short, the focus is a positive one, to assist programs to get better and to experience positive results, including monetarily, when they do this. It is not just about ratings but also about resources, including financial resources, and a system of supports. This would create a baseline for the investment of federal dollars in our most vulnerable children and in my experience, the community as a whole does better when provided with targets, benchmarks and supports to help achieve them.

To accompany this I would also recommend a rethinking about the rate-setting strategies in child care and the role of the federal funding to help accomplish this. The current model is deficit based insofar as it assumes that the rates paid will be less than the private market would pay. This is fundamentally unfair when you consider the severity of the need of the vulnerable at-risk children served through these programs. Elevating the standards and aligning costs with more appropriate benchmarked salaries would provide us with better benefits for children and society as a whole.

A New Funding Stream: In addition to embedding a quality approach that recognizes our need to start with the most vulnerable children first, and to connect quality with the use of what we now call subsidized child care, I am a proponent of a new federal funding stream that would apply these same principles to help states unify across these disparate categorical funding streams that are controlled by the federal government (Head Start), state government (child care) and local schools (Title I, for example, and usually state general fund contribution to local districts). A unifying new funding stream would be standards based, as I mentioned above, and would establish unifying high standards for programs to meet to receive operating dollars, whether for infant, toddler or preschool age children. This is the approach we used in our state for the new PA Pre-K counts program, which set and funded an appropriate standard, create a supportive system to keep providers focused and disciplined in their service quality, and effectively erased the difference between the child care, school district, and Head Start provider by insisting that they all meet and deliver on the same standards, subject to the same monitoring and oversight. This new stream would need to combined dollars to enroll more children at the appropriate standard of quality (with oversight so that this is not just a theoretical standard) and to assure that providers who can meet the standards can all participate.

Data systems to inform improvement and to help with accountability must be included. We simply cannot do our work without these and they require real resources to develop and maintain with appropriate integrity and feedback for the program administrators at the local level and for the state’s planning and oversight role. I can provide more information on the specifics of what we are doing in Pennsylvania, which we believe is innovative insofar as it works across all of our programs, incorporates management planning and financial tools that we must have to do a good job with public funds, tracks elements of structural quality (teacher qualifications,
etc.) and then also provides a way for us to look at children with appropriate protections and confidentiality intact. As we focus on how our children are doing, we are interested in quality improvement, i.e. the focus I mentioned on not just the teacher qualifications but the ongoing professional development and technical assistance supports, the supports to teachers to conduct assessments, and independently verified child assessment as well as input from kindergarten teachers and overall a way to help us look at where all children stand as they enter and participate in kindergarten.

Representative Woolsey also asked about encouraging states to go beyond a federal quality baseline. Were we to get to the type of programming I am thinking about both in child care and with a new funding stream, I think we would see significant results for our children throughout the United States. Additional incentives could come to those who exceed the federal standards by way of more money, although I would urge that there be predictability with that so that states could be efficient and effective in the use of additional resources.

Representative Hirono and Woolsey also asked about specific costs for the provision of services. Let me start by focusing on the core cost component, which is the price we pay for the staff of a program. Personnel costs will constitute about 70% of the total cost, so this question focuses on staff qualification and compensation issues. As I stated at the hearing, we have focused on the development of a B.A. early education qualified workforce, also demanding teacher certification for our program with the highest standards for 3 and 4 year old children. We benchmark the salaries by researching comparable salary structures and then evaluating this against the length of the year and length of day issues. This is the approach that I believe we should endorse system wide and while I did not do the precise calculations you requested, if you did not receive these from the other witnesses, my staff and I would be glad to do them for you. We have quite a bit of experience with this type of model building and benchmarking, so please do let me know if you want the specific estimated cost elements and our working assumptions for your use. We can do this for a 9 hour day, 5 days a week, 52 weeks/year for infants, toddlers and preschoolers, making assumptions using the quality programs we have put into place in our home state of Pennsylvania.

Representative Payne also asked about programs run by nurses and doctors to provide low-income parents with reading tips and advice about reading aloud at well child visits. As I am sure Representative Payne knows, there is some evidence of effectiveness of these efforts and I certainly believe that we should be looking for positive ways to use the authority of the health care community to help children with their language and literacy development. But I would be cautious about how such an initiative would address the major gaps and problems we are now seeing for our young learners, and would caution that this type of approach would need to be part of a deeper, broader approach that would also meaningfully address the core accessibility, quality and accountability of the early learning settings (as discussed above) for the population most at-risk. In addition, for interventions for the health care community, it would be important to look other aspects of the health care practice, such as assuring that primary care visits include use of screening tools such as Ages and Stages that can be used in multiple settings is critical, and that the health care community develop a more profound and robust understanding of early childhood education so that better counseling can be provided to parents and better connections can be built.

U.S. CONGRESS,
[VIA FACSIMILE],

Ms. Lillian M. Lowery, Secretary,
Delaware Department of Education, Dover, DE.

Dear Secretary Lowery: Thank you for testifying at the March 19, 2009 hearing of the Subcommittee on Early Childhood, Elementary and Secondary Education on “Improving Early Childhood Development Policies and Practices.”

Representative Donald Payne (D-NJ), member of the Early Childhood, Elementary and Secondary Education Subcommittee has asked that you respond in writing to the following question:

1. Would you support pediatric and early literacy programs like the Prescribe a Book Act, a grant program which would train doctors and nurses to provide low-income parents with age-appropriate reading tips and advice about the importance of reading aloud to their children as well as give these parents a children’s book at every wellness visit?
Responses to Questions for the Record From Ms. Lowery

Question from Representative Mazie Hirono (D-HI)

1. What do you estimate it would cost to provide high quality early care and education for nine hours per day, five days per week, for 52 weeks, for (1) infants, (2) toddlers, and (3) three and four year-olds?

The fees charged to families for child care vary greatly even in a state as small as Delaware. To answer your question, we queried child care programs that are rated at the highest level in our quality rating and improvement program, Delaware Stars for Early Success. These programs are also accredited by the National Association for the Education of Young Children, the profession’s premier accrediting organization. For full day (average nine hours), full week and full year, our programs charge private paying parents on average:

- Infants: $12,792 annually
- Toddlers: $11,625 annually
- Three year olds: $9,768 annually
- Four year olds: $9,684 annually

Economist Steven Barnett of National Institute for Early Education Research (NIEER) estimates that the cost of full day, full year high quality preschool for three and four year olds would be $12,910. The actual cost of child care and fees charged to parents are not the same. The fees charged by Delaware’s programs fees are close to that estimate.

Questions from Representative Lynn C. Woolsey (D-CA)

1. How much do you think it would cost to provide high quality child care to one child for 9 hours a day, 5 days a week, 52 weeks a year?

The Delaware average fee for high quality full day, full year child care for one child is $10,967 for children infant through four years of age. The fee charged to families is often not the actual cost of the care.

2. In addition to increasing funding, what changes would you suggest to the Child Care and Development Block Grant (CCDBG) to improve quality and access?

CCDBG should provide the opportunity for states to develop and implement a single, comprehensive early childhood plan incorporating all federally funded early childhood programs. Incorporating state funded programs should be encouraged. The federal programs to include should be: CCDBG, Early Childhood Comprehensive Systems Grant (Maternal Child Health), Title I, Special Education Parts B and C, and Head Start. The Early Learning Advisory Councils required in the 2008 Head Start reauthorization provide a starting point for this work. Delaware is working on developing a comprehensive early childhood system to serve all children birth to five years as well as their families. We are challenged by the varied mandates associated with federal funding. We are committed to an early childhood system that is seamless.

Developing America’s Potential: An Agenda for High-Quality Child Care, the conceptual framework by a collaborative lead by the National Women’s Law Center puts forth the elements of an early childhood system. The essential elements are:

- Child care licensing standards that include health, safety, and child development to support children’s healthy growth and development and apply to all programs serving young children
- A quality rating and improvement system that supports families in selecting quality child care programs and that supports child care programs to improve and sustain quality
- A professional development system that ensures a work force that is educated and skilled in meeting the needs of young children

3. If the federal government sets a floor or baseline for the minimum level of child care quality that states will need to meet, what should be the minimum requirements of this system?

Delaware’s minimum level of child care quality is set by our state child care licensing regulations. Effective licensing systems are based upon clear, measurable
and research-based regulations that are fairly enforced. Regulations should include content to protect children from physical and developmental harm. According to the National Association for Regulatory Administration (NARA), regulations vary greatly in the content of what is regulated and the scope of coverage. According to NARA, at minimum state licensing regulations must cover:

- Qualifications of Staff including:
  - State and federal criminal background clearances
  - Child and sexual abuse registry clearances
  - Education level of all staff
  - Specific knowledge in child development and early learning
  - On-going professional development
  - Staff to children ratios and classroom group size
  - Supervision of children
  - Learning activities, equipment, and materials to support children’s early learning aligned with state early learning standards (ELG’s) for infants, toddlers, and preschoolers, designed for inclusion of children with special needs
  - Behavior guidance and discipline
  - Parent communication
- Health and Safety—guided by Caring for Our Children: Child Care National Standards by American Academy of Pediatrics and American Public Health Association; including
  - Fire safety
  - Environmental health
  - Reducing the spread of illness
  - Managing illness and injury prevention
  - Health requirements for children and staff
  - Nutrition
  - Transportation safety
  - Emergency preparedness
  - Safe inside and outside play space and equipment

4. How would you suggest we encourage states to go above and beyond any kind of federal quality baseline or floor?

Delaware’s baseline of quality is its child care licensing regulations, which are among the strongest in the country. In 2002, we assessed the quality of our early care and education system (child care, preschool, Head Start, state pre-k, and family child care) using the Environment Rating Scales, a benchmark higher than our licensing standards. This baseline quality study has allowed us to be strategic and focused in our efforts to improve early care and education in our state. Encouraging states to evaluate the quality of their system to develop an improvement plan would support systematic improvement.

An incentive program for states to exceed the federal baseline would be helpful. We have designed and implemented a quality rating and improvement system for child care programs. Our professional development system for early childhood practitioners includes all individuals working in the early care and education field and is aligned with the K12 professional development system. However, the scope of these initiatives is limited due to a lack of resources. We need assistance to implement retention and recruitment mechanisms to build and maintain a workforce able to support children’s early learning. Opportunities need to be created in the federal child care subsidy program to encourage states to ensure that the child care purchased for these low income children is high quality.

Question from Representative Donald Payne (D-NJ)

1. Would you support pediatric and early literacy programs like Prescribe a Book Act, a grant program which would train doctors and nurses to provide low-income parents with age-appropriate reading tips and advice about the importance of reading aloud to their children as well as give these parents a children’s book at every wellness visit?

The Prescribe a Book Act would allow doctors to use their influential position with parents of young children to encourage early literacy experiences. All efforts to educate parents about the importance of reading and talking with their children should be supported. Young children who are raised in language rich homes come to school with better vocabularies and will become better readers.

In Delaware we have been working to encourage pediatricians to perform comprehensive screenings consistent with the policies of the American Academy of Pediatrics (AAP) at 9, 18, and 30 months as recommended by the AAP. Children cannot learn if problems remain undiagnosed and untreated. Screening tools, such as the
PEDS or Ages and Stages, allow pediatricians to individualize consultations with families targeted to specific concerns identified by the screening process.

U.S. CONGRESS, [VIA FACSIMILE],

Ms. SUE RUSSELL, President,
Child Care Services Association, Chapel Hill, NC.


Representative Mazie Hirono (D-HI), member of the Early Childhood, Elementary and Secondary Education Subcommittee and member of the Higher Education, Lifelong Learning and Competitiveness Subcommittee, has asked that you respond in writing to the following question:

1. What do you estimate it would cost to provide high quality early care and education for nine hours per day, five days per week, for 52 weeks, for (1) infants, (2) toddlers, and (3) three and four year-olds?

Representative Lynn C. Woolsey (D-CA), member of the Early Childhood, Elementary and Secondary Education Subcommittee and member of the Workforce Protections Subcommittee, has asked that you respond in writing to the following questions:

1. How much do you think it would cost to provide high quality child care to one child for 9 hours a day, 5 days a week, 52 weeks a year?
2. In addition to increasing funding, what changes would you suggest to the Child Care and Development Block Grant (CCDBG) to improve quality and access?
3. If the federal government sets a floor or baseline for the minimum level of child care quality that states will need to meet, what should be the minimum requirements of this system?
4. How would you suggest we encourage states to go above and beyond any kind of federal quality baseline or floor?

Please send an electronic version of your written response to the questions to the Committee staff by close of business on Thursday, April 2, 2009—the date on which the hearing record will close. If you have any questions, please do not hesitate to contact us.

Sincerely,

GEORGE MILLER, Chairman.

[Whereupon, at 11:37 a.m., the subcommittee was adjourned.]