

113TH CONGRESS
2D SESSION

H. R. 4680

To amend the Child Care and Development Block Grant Act of 1990 to
improve the quality of infant and toddler care.

IN THE HOUSE OF REPRESENTATIVES

MAY 20, 2014

Ms. CLARK of Massachusetts (for herself, Ms. MOORE, Ms. DELAURO, Mr. VAN HOLLEN, Mr. MCGOVERN, Ms. SPEIER, Mr. TIERNEY, Mrs. DAVIS of California, Mr. LANGEVIN, Ms. MENG, Mrs. MCCARTHY of New York, and Mr. SCHIFF) introduced the following bill; which was referred to the Committee on Education and the Workforce

A BILL

To amend the Child Care and Development Block Grant Act of 1990 to improve the quality of infant and toddler care.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Infant and Toddler
5 Care Improvement Act”.

6 **SEC. 2. FINDINGS AND PURPOSES.**

7 (a) FINDINGS.—Congress finds the following:

1 (1) The brain undergoes its most dramatic de-
2 velopment during a child’s first 3 years of life, with
3 700 new neurological connections being formed every
4 second based on early experience. During this time,
5 the brain’s foundational capacities for thinking, lan-
6 guage, emotion, and self-regulation are formed.

7 (2) Economic deprivation can also affect the de-
8 velopment of the brain and impair all aspects of de-
9 velopment. Children in families below the poverty
10 line are at risk for prolonged “toxic” stress, which
11 can change the shape of the brain’s structure. Twen-
12 ty-five percent of children younger than 3 years of
13 age live in families with incomes below the poverty
14 level.

15 (3) Child care is second only to the family set-
16 ting as the place in which early development takes
17 place for many infants and toddlers. Sixty-one per-
18 cent of mothers with children younger than 3 years
19 of age are in the labor force and over 6,000,000
20 children younger than 3 years of age are cared for
21 by someone other than their parents for some part
22 or all of the day. Therefore, the relationship between
23 the child and the child care provider often plays a
24 significant role in child development.

1 (4) Research shows that high-quality child care
2 can mitigate some of the effects of adverse experi-
3 ences caused by poverty and that low-income chil-
4 dren can benefit particularly well from high-quality
5 child care. Yet, at-risk children younger than 3 years
6 of age often receive low-quality child care that can
7 lead to poor developmental outcomes.

8 (5) High-quality child care has been shown to
9 promote positive cognitive, language, and social and
10 emotional development, and contribute to academic
11 success. High-quality child care can also help im-
12 prove a child’s communication skills, cognitive skills,
13 behavioral skills, math and language assessment
14 scores, and verbal intelligence.

15 (6) Providing training and technical assistance
16 to family child care providers who are infant and
17 toddler care providers, through family child care net-
18 works, has been shown to improve the quality of
19 caregivers.

20 (7) Twenty-seven States use infant and toddler
21 specialist networks as the structure for providing
22 training and technical assistance, using research-
23 based training and techniques such as mentoring
24 and on-site coaching, to all types of providers of
25 child care for infants or toddlers.

1 (8) Preparation for early childhood educators
2 often does not include training specific to infants
3 and toddlers. Only 21 States have infant and toddler
4 credential requirements that define the particular
5 knowledge and skills needed to work with children
6 younger than 3 years of age.

7 (9) Infants and toddlers have unique needs that
8 differ from those of older children in areas such as
9 health and safety, interaction with teachers and
10 caregivers, and learning, yet not all States recognize
11 those differences in licensing regulations or in their
12 Quality Rating and Improvement Systems. Just 20
13 States have infant and toddler quality indicators in
14 their Quality Rating and Improvement Systems and
15 only 3 States have separate categories of child care
16 regulations related to infants and toddlers.

17 (b) PURPOSE.—The purpose of this Act is to improve
18 the overall quality of child care programs serving infants
19 or toddlers.

20 **SEC. 3. HIGH-QUALITY INFANT AND TODDLER CARE PRO-**
21 **GRAM.**

22 The Child Care and Development Block Grant Act
23 of 1990 is amended by inserting after section 658G (42
24 U.S.C. 9858e) the following:

1 **“SEC. 658H. HIGH-QUALITY INFANT AND TODDLER CARE**
2 **PROGRAM.**

3 “(a) DEFINITIONS.—In this section:

4 “(1) ELIGIBLE INFANT OR TODDLER CARE PRO-
5 VIDER.—The term ‘eligible infant or toddler care
6 provider’ means an eligible child care provider, con-
7 sistent with section 658P, who provides care to an
8 infant or toddler.

9 “(2) INFANT OR TODDLER.—The term ‘infant
10 or toddler’ means an individual under 3 years of
11 age.

12 “(3) INFANT OR TODDLER WITH A DEVELOP-
13 MENTAL DELAY OR DISABILITY.—

14 “(A) IN GENERAL.—The term ‘infant or
15 toddler with a developmental delay or disability’
16 has the meaning given the term ‘infant or tod-
17 dler with a disability’ in section 632 of the Indi-
18 viduals with Disabilities Education Act (20
19 U.S.C. 1432).

20 “(B) PLURAL FORM.—The term ‘infants
21 and toddlers with developmental delays or dis-
22 abilities’ means more than 1 infant or toddler
23 with a developmental delay or disability.

24 “(4) LIMITED ENGLISH PROFICIENT.—The
25 term ‘limited English proficient’ has the meaning

1 given the term in section 637 of the Head Start Act
2 (42 U.S.C. 9832).

3 “(5) LOW-INCOME COMMUNITY.—The term
4 ‘low-income community’ shall be defined by the Sec-
5 retary.

6 “(6) LOW-INCOME FAMILY.—The term ‘low-in-
7 come family’ means a family with a family income
8 described in section 658P(4)(B).

9 “(b) GRANTS.—

10 “(1) IN GENERAL.—The Secretary shall make
11 grants to eligible States, from allotments described
12 in paragraph (2), to enable the States to improve
13 the quality of care for infants and toddlers.

14 “(2) ALLOTMENTS.—

15 “(A) AMOUNTS RESERVED.—

16 “(i) TERRITORIES AND POSSES-
17 SIONS.—The Secretary shall reserve an
18 amount not to exceed 0.5 percent of the
19 amount appropriated under this section for
20 each fiscal year for payments to Guam,
21 American Samoa, the United States Virgin
22 Islands, and the Commonwealth of the
23 Northern Mariana Islands, to be allotted in
24 accordance with their respective needs.

1 “(ii) INDIAN TRIBES.—The Secretary
2 shall reserve not less than 1 percent, and
3 not more than 2 percent, of the amount
4 appropriated under this section for each
5 fiscal year for payments to Indian tribes
6 and tribal organizations with applications
7 approved under section 658O(c).

8 “(B) ALLOTMENTS TO STATES.—After
9 making reservations under subparagraph (A),
10 the Secretary shall use the remainder of the
11 amount appropriated under this section for a
12 fiscal year to allot to each State an amount
13 that bears the same relationship to that remain-
14 der as the amount allotted to the State under
15 section 658O for that fiscal year bears to the
16 amount allotted to all States under section
17 658O for that fiscal year.

18 “(C) STATE.—In this paragraph, the term
19 ‘State’ does not include Guam, American
20 Samoa, the United States Virgin Islands, or the
21 Commonwealth of the Northern Mariana Is-
22 lands.

23 “(c) AMENDMENT TO STATE PLANS.—A State that
24 receives a grant under this section shall include in the
25 State’s plan under section 658E, a description of how the

1 State will use funds provided under this section to improve
2 the quality of infant and toddler care.

3 “(d) USE OF FUNDS.—

4 “(1) IN GENERAL.—A State that receives a
5 grant under this section shall use the funds made
6 available through the grant to carry out 1 or more
7 of the activities described in paragraphs (2) through
8 (7).

9 “(2) INCREASING HIGH-QUALITY INFANT AND
10 TODDLER CARE.—

11 “(A) IN GENERAL.—A State may use the
12 funds described in paragraph (1) to make
13 grants to eligible entities to be resources for eli-
14 gible infant and toddler care providers, to im-
15 prove the quality of early care and development
16 services provided to infants and toddlers in the
17 community from low-income families and to
18 help such providers serving low-income families
19 improve their capacity to offer high-quality care
20 to such families.

21 “(B) ELIGIBLE ENTITY.—To be eligible to
22 receive a grant under this paragraph, an entity
23 shall be an eligible child care provider that—

24 “(i) serves infants and toddlers from
25 low-income families; and

1 “(ii)(I) is ranked at the top level of
2 the State’s Quality Rating and Improve-
3 ment System or similar rating system or
4 accredited by a national accrediting body
5 recognized, before the date of enactment of
6 the Infant and Toddler Care Improvement
7 Act, for high-quality program standards
8 that are valid and reliable; or

9 “(II) is an Early Head Start agency
10 under section 645A of the Head Start Act
11 (42 U.S.C. 9840a) that is in full compli-
12 ance with the performance standards appli-
13 cable to such an agency under the Head
14 Start Act (42 U.S.C. 9831 et seq.).

15 “(C) PRIORITY.—In making grants under
16 this paragraph, a State—

17 “(i) shall give priority to entities that
18 will serve significant populations of low-in-
19 come families; and

20 “(ii) may give priority to entities
21 that—

22 “(I) are located in low-income
23 communities;

“(II) will serve communities with significant populations of families with limited English proficiency; or

“(III) will increase the ability of caregivers to provide appropriate services and coordinate activities with State and local systems providing services under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.) for children with developmental delays or disabilities, including such children in the child welfare system of the State.

“(3) STAFFED FAMILY CHILD CARE NETWORKS OR SYSTEMS.—

“(A) IN GENERAL.—A State may use the funds described in paragraph (1) to make grants to organizations with expertise in providing child care and related technical assistance, to establish new staffed family child care networks (new as of the date of amendment of the State plan under subsection (c)) or to operate existing staffed family child care networks or systems that offer, to family child care providers who are eligible infant and toddler care

1 providers, technical assistance, training, admin-
2 istrative support, or direct services including
3 monitoring visits to providers.

4 “(B) PRIORITY.—In making grants under
5 this paragraph, a State—

6 “(i) shall give priority to organizations
7 described in paragraph (2)(C)(i); and

8 “(ii) may give priority to organiza-
9 tions that have 1 or more of the 3 charac-
10 teristics described in paragraph (2)(C)(ii).

11 “(4) STATEWIDE NETWORK OF INFANT AND
12 TODDLER SPECIALISTS.—

13 “(A) IN GENERAL.—A State may use the
14 funds described in paragraph (1) to support, or
15 to make a grant to an organization with exper-
16 tise in providing child care technical assistance
17 to support, a statewide network of specialists
18 who are eligible infant and toddler care pro-
19 viders, that shall—

20 “(i) provide individual or group train-
21 ing and intensive consultation services to
22 eligible infant and toddler care providers,
23 including relative caregivers, on strategies
24 to improve the quality of care for infants
25 and toddlers; and

1 “(ii) assist eligible infant and toddler
2 care providers in coordinating activities
3 with other offices responsible for child
4 care, including Early Head Start programs
5 and Head Start programs carried out
6 under the Head Start Act (42 U.S.C. 9831
7 et seq.).

8 “(B) PRIORITY.—In delivering services or
9 making grants under this paragraph, a State—

10 “(i) shall give priority to networks
11 that deliver support to providers described
12 in paragraph (2)(C)(i); and

13 “(ii) may give priority to networks
14 that deliver support to providers that have
15 1 or more of the 3 characteristics de-
16 scribed in paragraph (2)(C)(ii).

17 “(5) STATE WORKFORCE QUALITY INITIA-
18 TIVES.—

19 “(A) IN GENERAL.—A State may use the
20 funds described in paragraph (1) to support ini-
21 tiatives to improve the quality of the workforce
22 of eligible infant and toddler care providers,
23 such as—

24 “(i) providing relevant training, pro-
25 fessional development, or mentoring to eli-

1 gible infant and toddler care providers, in-
2 cluding linking the training, development,
3 or mentoring to career pathways for eligi-
4 ble infant and toddler care providers;

5 “(ii) providing scholarships or other
6 financial support to eligible infant and tod-
7 dler care providers to advance their edu-
8 cation and training;

9 “(iii) coordinating activities with the
10 State’s higher education system to expand
11 the availability and quality of coursework
12 for infant and toddler care providers, in-
13 cluding developing career pathways for eli-
14 gible infant and toddler care providers; or

15 “(iv) improving the State
16 credentialing of eligible infant and toddler
17 care providers.

18 “(6) SYSTEMS QUALITY.—A State may use the
19 funds described in paragraph (1) to—

20 “(A) develop infant and toddler compo-
21 nents for the State’s Quality Rating and Im-
22 provement System or similar rating system,
23 child care licensing regulations, or voluntary
24 early learning guidelines;

1 “(B) improve the ability of parents to ob-
2 tain information about high-quality infant and
3 toddler care; or

4 “(C) assist eligible infant and toddler care
5 providers seeking to improve the quality of their
6 infant and toddler care by increasing their
7 ranking on the State’s Quality Rating and Im-
8 provement System or similar rating system,
9 meeting performance standards applicable to an
10 Early Head Start agency under the Head Start
11 Act (42 U.S.C. 9831 et seq.), or becoming ac-
12 credited by a national accrediting body de-
13 scribed in paragraph (2)(B)(ii).

14 “(7) OTHER HIGH-QUALITY INITIATIVES.—A
15 State may use the funds described in paragraph (1)
16 to carry out other activities determined by the State
17 to improve the quality of infant and toddler care
18 provided in the State and for which there is evidence
19 that the activities will lead to improved infant and
20 toddler safety, infant and toddler development, or in-
21 fant and toddler well-being.

22 “(e) REPORTING.—A State that receives a grant
23 under subsection (b) shall submit in the State’s annual
24 reports required under section 658K(a)(2), information on
25 how the State is using the funding provided under sub-

1 section (b) to improve the quality of infant and toddler
2 care and the effect such funding is having on the quality
3 of infant and toddler care in the State.

4 “(f) AUTHORIZATION OF APPROPRIATIONS.—There
5 are authorized to be appropriated to carry out this section
6 such sums as may be necessary for fiscal year 2014 and
7 each subsequent fiscal year.”.

8 **SEC. 4. CONFORMING AMENDMENTS.**

9 (a) AUTHORIZATION.—Section 658B of the Child
10 Care and Development Block Grant Act of 1990 (42
11 U.S.C. 9858) is amended by inserting “(other than section
12 658H)” after “subchapter”.

13 (b) ALLOTMENT.—Section 658O(a)(1) of such Act
14 (42 U.S.C. 9858m(a)(1)) is amended by striking “this
15 subchapter” and inserting “section 658B”.

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