The fourth of a five-part series on child care as a public policy question, this CSG research brief highlights child care quality in the states, including initiatives to measure and improve quality, and the development of a skilled early childhood education workforce. The prior three briefs in this series explored demographics of families with small children, affordability and access. A few of the themes established in the prior briefs included:

- In most states, there are fewer child care slots available than there are children under age 5. The state-by-state average for child care slots to number of children under age 5 was around 51 percent.1
- The types of care available vary between states. In Minnesota, the majority of slots are in family care centers, where the provider delivers care out of his or her home; in many states, though, child care centers are the dominant setting.2
- On average, child care workers in 2014 made between $18,090 and $26,470 a year.3
- There are several options for making care more affordable and accessible for low-income families, such as state-administered subsidies, Head Start and Early Head Start programs, and state-run pre-kindergarten programs. Of the 42 states with state-run pre-K programs in 2015, only 18 decreased their funding, while the rest reported increased spending.4 Federally funded program capacity ranges from almost 20 percent of children under 5 in the District of Columbia to less than 6 percent in Maryland, Nevada and Utah, assuming no program overlap between Child Care Development Fund and Head Start programs.5
- The demand for these subsidized child care programs exceeds supply in some states. For the 21 states that manage statewide waiting lists for child care assistance, the average number of individuals on state waiting lists was 10,725. New Mexico and Colorado had the shortest lists, with 126 and 45 entries, respectively.6

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The Case for Quality

Numerous studies examine the impact of early childhood education on development, adding another dimension to the value of child care. More than just a safe place for kids to spend their day while guardians are at work or school, early childhood education may contribute to future success and wellbeing, especially for children growing up in low-income households. Some policymakers view early childhood education as an opportunity to develop the future workforce and create a more independent, self-sustaining and productive population, associating a strong return on investment in quality early childhood education.

Not all child care and early childhood education environments are created equal, however. With the fast rate of brain development early in life, experts emphasize the importance of high-quality education programs, care and staff. High-quality early childhood education programs have positive impacts on a variety of areas for children. The level of exposure to quality early childhood education experiences—in half-day or full-day programs, for example—is also an important feature.

According to Harvard’s Center on the Developing Child, researchers generally think of factors associated with these programs including:

1. Highly skilled teachers;
2. Small class sizes and high adult-to-child ratios;
3. Age-appropriate curricula and stimulating materials in a safe physical setting;
4. A language-rich environment;
5. Warm, responsive interactions between staff and children; and
6. High and consistent levels of child participation.

The 2014 re-authorization of the Child Care and Development Block Grant included provisions not only for health and safety, licensing, child-to-provider ratio, and emergency preparedness state policies, but also quality improvement initiatives. A portion of the CCDF grant must be used for quality improvement efforts, such as evaluation systems and professional development for child care providers.

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Source: Harrison Wein, National Institutes of Health
“Early Childhood Program Has Enduring Benefits.”
Licensing, Minimum Requirements

In order to operate a child care facility, the states have established minimum licensing requirements. States regulate the child-to-staff ratio, group size, required background checks, staff qualifications and ongoing training hours required for licensed child care services. Many of these policies are age and setting specific.

As children get older, the allowed maximum number of children per caregiver goes up. For infants up to 11 months of age, states’ regulations require a range in the maximum from three to six children per staff member. The National Association for the Education of Young Children, or NAEYC, accreditation criteria uses ratios for staff to infants up to 15 months of 1:3 and 1:4, depending on group size. For older children, the range increases in state policy—centers can have between four and 12 toddlers, or children between 11 and 35 months old, and between seven and 15 preschoolers per staff member. NAEYC accreditation cites between three and six toddlers per teacher, depending on age and group size, and between six and 10 preschoolers to a teacher. There is a more complex picture for state requirements for background checks of those working in child care settings. States check some combination of criminal history, the state sex offender registry, and the child abuse and neglect registry. In the four states that do not require criminal history records for child care center employees—Nebraska, Ohio, South Dakota and Wyoming—two states, Nebraska and Wyoming, do require these background checks for family child care homes and group child care homes. Fifteen states do not require sex offender registry checks for child care centers, and four do not require child abuse and neglect registry checks for employees in the child care center setting. There is inconsistency between background check requirements among settings; there are some states that do require certain checks in one setting but not the other. For instance, in Minnesota, a sex offender registry check is required for the child care center setting, but not licensed family child care homes.

States also have different standards for preservice qualifications for various staff roles across settings. Of the 17 states that have no requirements for family child care home providers, 13 have requirements for teachers in child care centers—four of which require a high school diploma for child care center teachers. To be a child care center teacher, only 18 states have minimum certificates, degrees or educational program requirements that are above and beyond a high school diploma. Of the other 32 states and the District of Columbia, 10 states have no minimum requirements. The rest require some combination of on-the-job training, experience or a high school diploma. In 30 states, child care center directors are required to obtain some form of certificate, degree or take formal relevant coursework in order to receive licensing.

While there is not always consistency across settings, the majority of states have some sort of ongoing training requirement for teachers, directors and providers working out of homes. Most states have an absolute hourly training requirement for teachers and directors. In Minnesota and Connecticut, the number of hours required for teachers and directors at child care centers is a percentage of hours worked per year. In Connecticut, where the training requirement is 1 percent of annual hours worked, this would work out to be 20 hours a year for a teacher, assuming 40 hours per week with two weeks off. In Ohio, there is a cap—teachers have to complete 15 hours a year of continuing education training until they meet 45 total hours (effectively after three years).
Evaluating and Incentivizing Quality

There are 38 states that have Quality Rating Improvement Systems, or QRIS, in place to measure the quality of child care providers against a set of standards and incentivize improvement. There are many QRIS types across the United States. According to QRIS Compendium, popular indicators used include ratios, health and safety, curriculum, child assessment, environment, interactions, staff qualifications/training, program administration/leadership, accreditation, family engagement, cultural and linguistic diversity, community involvement, provision for children with special needs, and continuous quality improvement. Of these, only cultural and linguistic diversity and community involvement indicators were present in less than half of states’ QRIS standards. Participation in these programs may be voluntary or mandated by funding stream.

The vast majority of the state systems use an observational tool (or tools), the most popular of which are Environment Rating Scales, or ERS, and Classroom Assessment Scoring System, or CLASS, for center-based early childhood education. The former assessment tool uses seven criteria groups, focusing on the child’s surroundings, routine, activities and engagement with staff. The latter focuses on teacher-child interactions.

The QRIS rating systems have between three and six levels, with varying degrees of participation. Illinois, Massachusetts and North Carolina have the highest number of programs participating. Illinois leads by far, with more participants than the next two states combined. The rating is valid anywhere from one year to five years, depending on the state, with one exception—in Oklahoma, the rating does not expire.

Only two states—Rhode Island and Virginia—not have financial incentives tied to their quality rating systems at the state level. Some states only have financial incentives in the form of tiered child care reimbursement rates or other financial incentives for quality ratings, and many states have both types of incentives. Incentives can also come in the form of professional development scholarships, technical assistance, and reimbursing accreditation or reducing licensing fees. In Maryland, staff can receive monetary bonuses for achievement in the Credential Program, which rewards professional development and formal educational attainment; QRIS participants also can take advantage of vendor discounts through the Maryland Excellence Counts in Early Learning and School-Age Care Program, and receive reimbursement for accreditation, curriculum, training and professional development.

Of the states with QRIS programs, only four states—Kentucky, Massachusetts, Nevada and North Dakota—reported QRIS systems that did not have public awareness campaigns targeting the public or parents as of 2015 to spread the word about their QRIS rating systems. However, of these four states, all but Massachusetts still had QRIS information available on a searchable provider database that parents can access online. The vast majority of QRIS programs used several means through which to publicize their rating systems, such as websites, media advertising or community events.
Workforce Quality and Professional Development

There have been calls to action from several sectors in regards to the quality of the child care workforce.\(^{35}\) While the Institute of Medicine recommends early childhood educators obtain a bachelor’s degree, the U.S. Department of Education highlights the challenges to increasing the number of providers with higher degrees.\(^{36}\) As of 2012, “a majority (53 percent) of center-based and almost a third (30 percent) of home-based teachers and caregivers reported having college degrees (associate degree or higher)” nationwide.\(^{37}\) While having an associate’s or bachelor’s degree increases wages for early childhood educators, that wage still lags behind that of peers in other fields. For example, an early childhood educator with a bachelor’s degree could expect to make a little more than half of what the average wages are for individuals with bachelor’s degrees across the board.\(^{38}\)

Looking at the data compiled by the U.S. Department of Education, there is little financial incentive for early childhood educators to obtain additional formal education or for those with advanced degrees to enter the early childhood education workforce. The highest median annual wage for child care workers can be found in New York, at $25,450; if a kindergarten teacher in that state earned the median annual wage for their profession, they would make 236 percent of a child care worker’s wages.\(^{39}\) The lowest median annual wage for child care workers can be found in Mississippi, at $18,140.\(^{40}\)

There is greater parity between the annual median wage of preschool teachers, who may work in private or public school settings and centers, and child care workers in a given state; Colorado is the most equitable — its preschool teachers make 114 percent of the wages its child care workers earn.\(^{41}\) Disparity in wages among preschool teachers and child care workers is greatest in Louisiana, where preschool teachers earn 218 percent of the wages that child care workers earn.\(^{42}\) Teachers for Head Start, the federally funded preschool program, are at wage parity — within $1,000 annually — with preschool teachers in general in nine states; they make more than preschool teachers in 20 states, and make less in 22 states.\(^{43}\)

All states, however, provide some sort of financial assistance for professional development activities.\(^{44}\) As of 2013, Pennsylvania was the only state that did not offer scholarships for education; the state did offer reimbursement for training and education, though.\(^{45}\) All but three states — Louisiana, Maine and Virginia — offered some training or education for free or through a reimbursement system.

States tackle the question of child care quality in a variety of ways, through licensing requirements, incentives, quality ranking systems and professional development opportunities. Workforce development may be one of the greatest challenges to fostering an early childhood education system of consistent high quality across the country; as this brief has highlighted, policymakers have taken note of the wage gap for early childhood educators compared to their peers in other settings. Making child care affordable for working families while also attracting and retaining a highly skilled and educated workforce is a challenge for stakeholders.

The first three briefs in this series have examined the demographics of families with young children in the United States today, the financial costs of child care and the availability of options. This brief has explored the elements of quality early childhood education and why it matters, how state policy sets guardrails for the safe operation of child care facilities, and how states foster quality improvement. The subsequent (and last) brief in this series will bring all of these observations together — what does it mean for families, policymakers and communities? How are states tackling the challenges families face with child care?
RESOURCES


3 Ibid.


5 Calculated by author from publicly available data from U.S. Census ACS 2014 Estimates, National Head Start Association State Fact Sheets, and Office of Child Care CCDF Statistics; assumes no program overlap. All data from 2014.


10 Center on the Developing Child (2007). Early Childhood Program Effectiveness (InBrief). Retrieved from www.developingchild.harvard.edu. “Most of those returns, which can range from $4 to $9 per dollar invested, benefit the community through reduced crime, welfare, and educational remediation, as well as increased tax revenues on higher incomes for the participants of early childhood programs when they reach adulthood.”


14 U.S. Department of Health & Human Services, Administration for Children & Families Office of Child Care. Early Childhood Training & Technical Assistance System. Data Explorer & State Profiles. Accessed July 6, 2016. All licensing requirements are reported from the ECTTA system’s data set from the last year available (2013 and 2014), which predates the CCDF authorization. States may have made updates to these licensing requirements subsequently. https://childcareta.acf.hhs.gov/data.


17 Ibid. Group size and age play a role in the recommendation.


19 Ibid.

20 Ibid.

21 Ibid.

22 Ibid.

23 Ibid.

24 Ibid.


26 Ibid.

27 Ibid.

28 Ibid.


31 Ibid.

32 Ibid.

33 Ibid.

34 Ibid.

35 Ibid.

36 Ibid.


37 Ibid. Pg 3.

38 Ibid. Pg 4.

39 Ibid. Pg 16. Author’s own analysis.

40 Ibid.

41 Ibid. Author’s own analysis.

42 Ibid. Author’s own analysis.

43 Ibid. Author’s own analysis.


45 Ibid.

Sarah Smith, CSG Graduate Fellow, ssmith@csg.org