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Bringing It All Home

Problems and Possibilities Facing New York City's
Family Child Care

EXECUTIVE SUMMARY, FINDINGS AND RECOMMENDATIONS
FULL REPORT TO BE RELEASED LATE MAY 2016

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CENTER FOR NEW YORK CITY AFFAIRS AT THE NEW SCHOOL
KRISTIN MORSE, DIRECTOR

May 2016



The Center for New York City Affairs is dedicated to advancing innovative public policies that strengthen neighborhoods, support families and reduce urban poverty.

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This report is made possible thanks to the generous sponsorship and leadership of the Stella and Charles Guttman Foundation as well as to the generous support of the Child Care and Early Education Fund. CNYCA's reporting on children and families is additionally supported by the Child Welfare Fund and the Sirius Foundation.

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Bringing It All Home

Problems and Possibilities Facing New York City's Family Child Care

EXECUTIVE SUMMARY

Both nationwide and here in New York City, “home-based” family child care¹ is the most pervasive form of care for babies and toddlers from low-income families; it’s where these very young children most commonly spend their time when they’re not with their parents. Spanning everything from informal arrangements with grandparents to signed contracts with licensed providers who run school-like programs out of private homes, family child care is, simply put, a child care arrangement provided within a caregiver’s own home.

In New York City’s five boroughs, about 70 percent of children younger than 3 years old who receive income-eligible government-subsidized child care—or nearly 16,000 children—are in such home-based programs.² In some residential working-class neighborhoods outside of Manhattan, you can frequently spot several “regulated,” or licensed,³ child care providers on a single block. They often appear, from the outside, to be child care centers, with professionally printed signs on brownstones and clapboard houses displaying their names and phone numbers.

There’s good reason these programs appeal to parents on limited budgets juggling the demands of their often high-stress lives. They’re usually conveniently located, and for parents paying privately or with vouchers, they’re typically more affordable than child care centers and more flexible about their hours. Many parents prefer their small, often homey feel, and that they can choose a provider who shares their language, culture, and child-rearing beliefs, and with whom they might establish trusting bonds.

But nationwide, home providers are often isolated, have less formal education than center-based caregivers, and the quality of their programs has been found, on average, to be wanting.⁴ Despite how ubiquitous these home-based programs are, research and policy regarding quality improvement in early education often focus primarily on what’s known as “center-based care,” the group care that takes place in school-like settings. Only rarely is the topic of home-based family child care brought to the table. Partly as a result, scant evidence exists on what works to improve family child care’s quality. The vast majority of such efforts are based on what’s been found to work in centers; after some tweaking it has then been transferred to the home environments, with mixed results.

“You’re trying to take a curriculum that works in a classroom and put it in a home, and it kind of works but it kind of doesn’t,” says Lisa McCabe, director of Cornell Early Childhood Programs at Cornell University.

A NEW VISION FOR CHILD CARE

In 2012, when New York City launched EarlyLearnNYC, an ambitious overhaul of the nation’s largest (with a \$486 million annual budget) subsidized child care system, it also borrowed heavily from what’s known to work in center-based care to improve its contracted family child care programs. EarlyLearn “was an opportunity for us to be able to translate what we’ve been doing in the center-based programs to other children in the community as young as 2 months old,” explains MARC Academy and Family

In New York City, nearly 70 percent of children younger than 3 years old who receive government-subsidized child care are in home-based programs.

Center’s executive director Anna York in a promotional video that appeared on the website of the agency administering EarlyLearn, the City’s Administration for Children’s Services (ACS).

EarlyLearn aimed to place 3- and 4-year-olds in the City’s contracted child care centers, but relied on homier and less expensive licensed “home-based” family child care programs for infants and toddlers up to the age of 3. It simultaneously attempted to raise the quality of these programs, expecting contracted family providers to offer child care that is not merely custodial or loving, but also developmentally aligned to the needs of very young children.⁵

But three-plus years after its launch, a Center for New York City Affairs investigation found that EarlyLearn has floundered when it comes to improving the quality of its subsidized family child care programs. Its essential shortcoming is that EarlyLearn fails to articulate a clear vision of what such quality home-based care looks like for babies and toddlers, and how to support that quality. Instead, standards for care more appropriate to child care centers and older children are grafted onto family child care. Some of these new requirements, while noble in intent, are insufficiently tailored to the realities and limitations of who family care providers are and what they can do, nor do they recognize what they do well. Providers frequently experience them as simply more paperwork rather than real supports that enhance the qualities—small, warm, nurturing, home environments—that are unique strengths of this model of care.

“EarlyLearn for family child care is a new concept,” explains Charmaine Swearing, an EarlyLearn coordinator at Women’s Housing and Development Corporation (WHEDco) in the Bronx. “No one at ACS has a clear idea of what it should look like.”

“EarlyLearn is excellent for centers, but I don’t see it working in the homes,” says Isabel Quintana-Eddy, the family child care director at Hamilton-Madison House in Manhattan’s Chinatown area.

A SHARPER FOCUS ON QUALITY

Most practitioners and observers agree with EarlyLearn’s vision: That all children in contracted child care should get more than a safe space while their parents work. EarlyLearn aimed to take advantage of that finite time when a child’s brain develops most rapidly, catching delays early, and setting the stage for lifelong cognitive, social, emotional and physical gains.

This goal reflected fast-growing knowledge of the importance of high-quality early education, which research has linked to a myriad of benefits—everything from helping mothers remain stably employed, to bridging the classroom achievement gap, to improving the life prospects of babies born into poverty.⁶

It also acknowledged the significant limitations of family child care, the quality of which has long left a lot to be desired, particularly for minority and low-income children. In one massive dataset published by the National Center for Education Statistics,⁷ 90 percent of home-based daycare arrangements rated as poor or mediocre. For children living in poverty, only four percent of home-based daycare arrangements rated as high-quality.

With EarlyLearn, the City would raise the bar for its family child care programs. It asked its home providers, like preschool teachers in full-staffed child care centers, to begin using a standardized curriculum and write lesson plans and child observations, among other new requirements. The City continued to contract with “network” organizations to recruit, monitor and support family child care programs, as well as to help the providers meet these new quality standards.

With more than 1,700 home-based programs across the five boroughs looking after more than 7,300⁸ children enrolled through EarlyLearn, as well as hundreds of more children whose families pay for these program privately or with vouchers, EarlyLearn is one of the country’s largest experiments in raising the quality of home-based child care. (In addition, some 24,000 children, most older than 3 years old, are in EarlyLearn child care centers. See chart, page 5.)

“You’re trying to take a curriculum that works in a classroom and put it in a home, and it kind of works but it kind of doesn’t.”

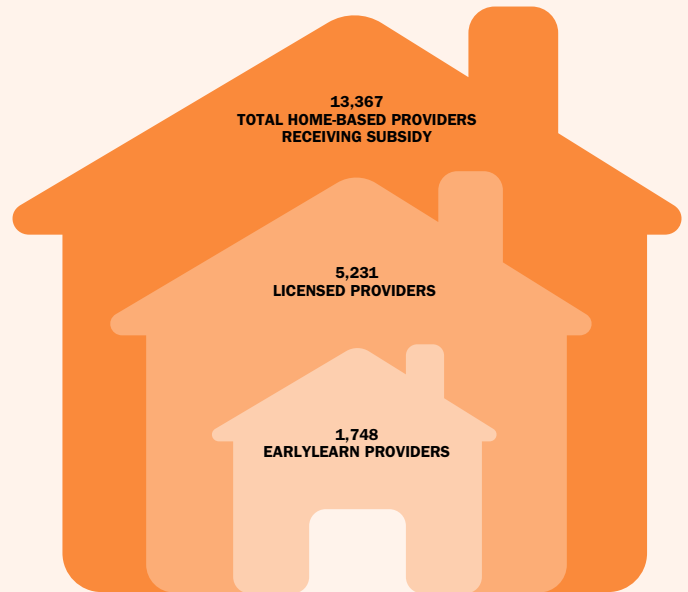
SUBSIDIZED FAMILY CHILD CARE SYSTEM IN NYC

New York City's contracted, EarlyLearn family child care programs make up about one-third of the city's total number of licensed (also called regulated or registered) providers, and about 13 percent of the City's total family child care programs providing subsidized care, which includes informal (also called unregulated, informal or family, friend and neighbor) providers.

EarlyLearn providers receive six professional development days a year and at least six annual site visits from the staff of network organizations they affiliate with, as well as additional monitoring visits each year to insure compliance with the State's Child and Adult Care Food program, which reimburses them for meals served to children. This is typically far more support and services than given other home-based providers in New York City.

Many of the City's other active 3,483 licensed home providers receive periodic training largely focused on considerations of health and safety, with little attention to early childhood development issues.

Many of the New York City's informal, or unregulated, providers receive no training, though like the licensed providers they can participate in the State's Child and Adult Care Food program.



SOURCE: ACS March 2016.

CNYCA'S INVESTIGATION

The Center for New York City Affairs set out to assess what has worked, and what hasn't, in improving family child care. With the recent federal reauthorization of the Child Care and Development Block Grant Act, which calls for increased oversight and training for subsidized family child care providers, among other things, we hoped that the lessons learned from EarlyLearn could inform the broader world of family child care.

From September 2015 to March 2016, we interviewed family child care providers, dozens of staff at 14 of the 31 network organizations, researchers, advocates and others. We also collected extensive data from ACS and shadowed network organization staff, attending training sessions for providers and joining them for what are known as provider "home visits."

We found pockets of important work throughout the city, and we saw the pride that providers feel as they begin to view themselves as educators. For some, EarlyLearn truly has deepened their understanding of early childhood development, including the value of identifying and addressing developmental delays early. Many also say they appreciate the camaraderie at EarlyLearn trainings and that these, coupled with visits from network staff to their homes, have instilled new energy in their programs and added to their repertoire of activities to do with children.

A REFORM THAT MISSED ITS MARK

But we also found many problems, including a misfit between what EarlyLearn providers can do and many of the reform's requirements. EarlyLearn's paperwork requirements, in particular, are described universally as unwieldy and intensely time-consuming. These requirements frequently cut into the time providers spend with children.

Moreover, we heard examples of missed opportunities. ACS requires the networks to give family child care providers professional development days and make home visits intended to improve the quality of care. However, ACS provides little guidance about what these supports should look like. In practice, they too often merely focus on trying to get providers up to speed with EarlyLearn reporting requirements.

In short, our findings were mixed. Children and programs have experienced gains in some areas, setbacks in others. Our key findings include:

- Most networks interviewed for this report estimated that about half of their home-based programs are where they want them to be in terms of their quality, as well as meeting EarlyLearn’s reporting requirements. That adds up to hundreds of providers who, more than three years into the reform, are still not up-to-speed.
- EarlyLearn puts unrealistically heavy instructional and reporting compliance burdens on family child care providers who often have limited formal education and, in this ethnically diverse and heavily immigrant city, may struggle with proficiency in either English or Spanish. Regardless of these factors, providers are, for example, typically required to employ an early childhood education curriculum written in English, and a computer program, Teaching Strategies Gold, that

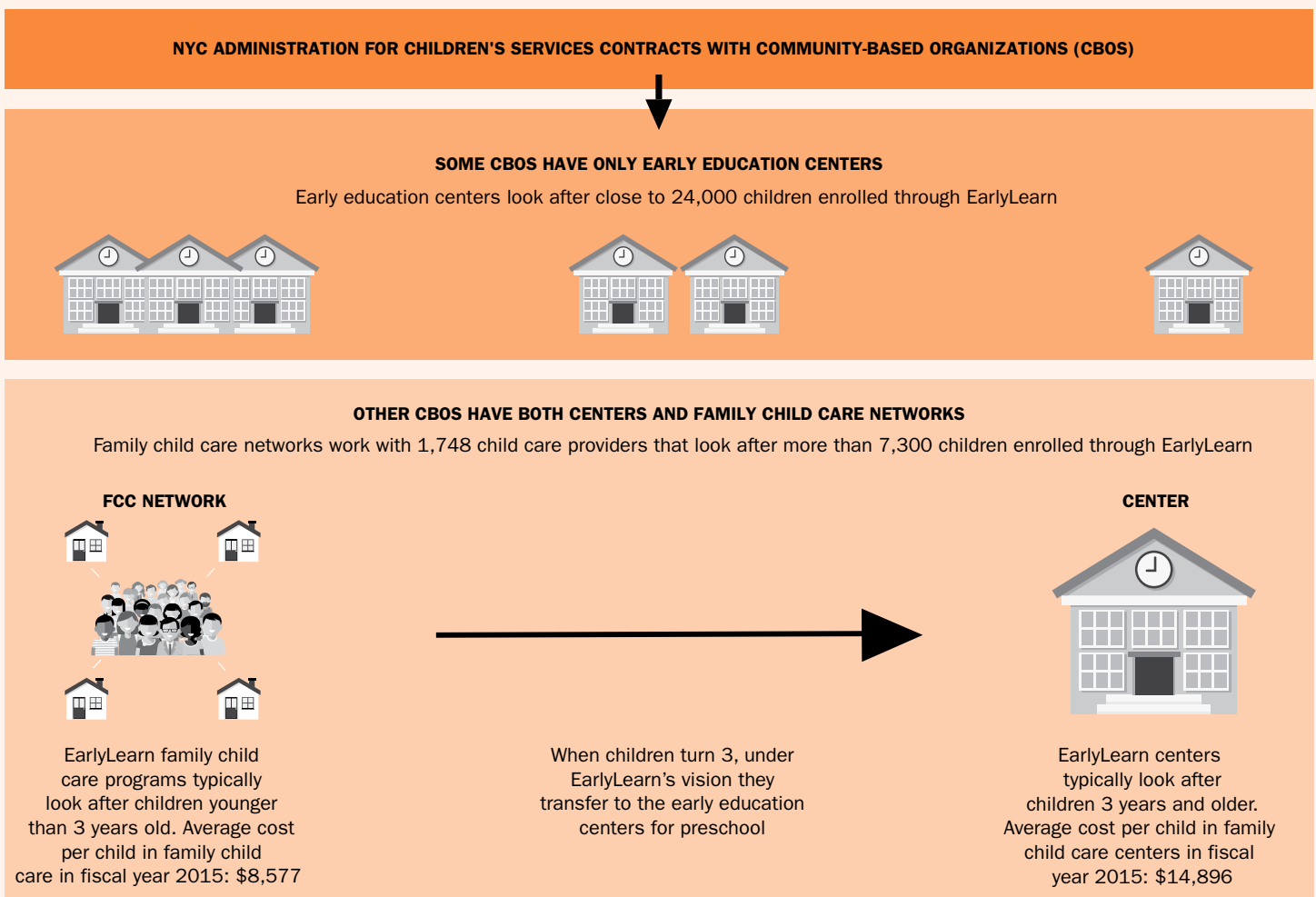
SUBSIDIZED CHILD CARE IN NYC

TYPES OF SUBSIDY	WHO IS ELIGIBLE	HOW IT WORKS	CHILD CARE OPTIONS
VOUCHERS	Families receiving public assistance (as mandated by federal law) as well as a small number of low-income families who do not qualify for public benefits	Legally, parents may use their vouchers to pay for any child care arrangement they choose.	<p>Child care centers that accept vouchers (including EarlyLearn centers as well as some private and preschool programs)</p> <p>Licensed family child care programs, including EarlyLearn programs</p> <p>Informal—but unlicensed—family child care (also called friends, family and neighbor care)</p>
EARLY LEARN	<p>Low-income working families</p> <p>Families must earn no more than 275 percent of the poverty line and either:</p> <ol style="list-style-type: none"> 1. work 20 or more hours per week; 2. have a child receiving protective or preventive child welfare services; 3. attend an approved school or training program 	ACS contracts with community-based organizations to directly fund a network of providers that have child care and early education programs. Many have center based care as well as family child care networks, which recruit providers to care for small groups of children in a provider’s own home. Families can enroll children in EarlyLearn programs.	<p>EarlyLearn center-based programs (these blend three types of programs: child care, Head Start, and universal Pre-Kindergarten)</p> <p>EarlyLearn family child care programs, including group family child care programs, where a provider has hired an assistant</p>
UNIVERSAL PRE-K	All 4-year-olds	The Department of Education funds these programs. Parents can apply through the DOE.	UPK programs in public schools or in community-based organizations

expects them to make detailed observations and analysis of each infant and toddler’s educational needs and progress.

- ACS acknowledges that because providers don’t have the capacity to use the Teaching Strategies Gold tool as designed, the data collected is not very reliable or useful. Yet it is the main criteria the City uses to measure child outcomes.
- One result of the intense documentation requirements under EarlyLearn appears to be a high attrition of some providers not linguistically comfortable with the requirements. A CNYCA analysis of ACS data found, for example, that some 30 percent of the family child care providers with Chinese surnames left their service networks soon after the introduction of EarlyLearn. Today there are 40 percent fewer city contracted home-based providers with Chinese surnames than there were before EarlyLearn.¹⁰
- Some family child care providers have responded to EarlyLearn by overdoing overtly “educational” pursuits in their homes—leading to such developmentally inappropriate activities as, for example, trying to teach an 18-month-old to identify numbers. That sort of thing undermines the unpressured, homelike environment that makes family child care well-suited for very young children.

EARLYLEARN SYSTEM



SOURCE: ACS, Preliminary Mayor’s Management Report 2016.

REINVENTING THE SYSTEM: THE VISION OF EARLYLEARN

EarlyLearn attempts to improve quality throughout the city's child care system. By imposing more rigorous program requirements, it aims to leverage low-income parents' need for daytime care as an opportunity to provide their kids with rich learning experiences that can have lifelong benefits. Many of its standards come straight from the Head Start model and are intended to provide programming that responds to children's individual and developmental needs. Under EarlyLearn, child care centers and family child care homes are held to newly uniform standards:

- All programs, including in-home family child care programs, must use a scientifically tested curriculum.
- All programs must formally screen children for developmental and mental health impairments within 45 days of beginning care.
- All programs must conduct formal assessments to track children's developmental and educational progress.
- Teaching staff at center-based programs must receive 12 days per year of professional development services. Staff in family child care networks receive 6 days per year.
- All programs must provide support services to children's families.
- All programs must run for eight to 10 hours per day and 12 months per year.
- All family child care programs, which serve the majority of EarlyLearn's babies and toddlers, are connected to center-based programs where children can move when they turn 3.

- EarlyLearn constrains network organization staff. Staff devote large chunks of their time to giving providers remediation on completing forms and reports instead of guiding them in improving care—for example, offering new ideas about activities to do with children. At the same time, some report feeling marginalized within their own organizations, often without access to the consultants and other resources that the child care centers in their networks have.

- Networks say their contracts with ACS don't cover the costs of administering home-based care. Many networks pass some costs to providers in the form of administrative fees that vary widely from network to network and, thus, lead to different net rates of pay among EarlyLearn family child care providers. ACS, which issues contracts to the network's organizations, does not track or regulate these fees. In addition, many networks find they must subsidize the costs of delivering services with other grants or organizational resources. Some network providers are stepping away from this work, saying it is underfunded.

- Under EarlyLearn, family providers feel they are being asked to do more work but, in many cases, are bringing home less pay per hour than before the reform. They must work longer hours to complete paperwork and must also pay for liability insurance and, if they have an assistant, worker's compensation under EarlyLearn—expenses that increase the overhead for what are already typically very low-income operations.

- In tandem with such rising expenses, EarlyLearn's expectation that family providers exclusively look after very young children also puts a squeeze on provider income. Infants require more intensive care than older children, and State regulation consequently reduces the

number of children a person can care for. Modestly higher payment rates for infants do not offset the resulting reduction in number of kids and total earnings.

- Group family child care programs—where a provider hires an assistant to help and, as a result, takes in more children—appear to have an easier time operating under EarlyLearn's new requirements. Between January 2015 and 2016, the number of children enrolled in family child care settings with a single provider declined by 14 percent, according to CNYCA's analysis of data provided by ACS. Meanwhile, the number of children enrolled in EarlyLearn group family child care rose by 9 percent.
- This comports with an overall trend in subsidized family child care toward group care. Today more than 80 percent of the children in the city's contracted EarlyLearn family child care program are in group-based family child care, according to data from ACS. For children enrolled in child care programs using vouchers, the proportion is more than 90 percent. This prevalence of group care has important implications for how the City and State should use their resources and support the subsidized family child care programs.

- A key strength of EarlyLearn is that it enlists network organizations to work with the City's hundreds of family child care programs. A number of studies have found that such affiliations are associated with higher-quality care. However, EarlyLearn provides few guidelines for how networks should be structured and how they should achieve quality. The result is wide variations in staffing, training, supervision and other areas.
- In interviews, support staff at network organizations consistently identified "home visits" from a trusted coach as holding great potential for improving program quality. New research on family child care echoes this finding. However, EarlyLearn provides very little guidance on who should provide home visits, how many each staff person should be responsible for, what the goals of a home visit are, or how they should be carried out. As a result, the quality and types of support that EarlyLearn family providers receive vary from network to network and even staff member to staff member.

Emerging research on home-based child care offers new ideas about how to effectively support providers and the children they care for, as well as for a sharper vision of what quality can look like in these programs that is distinct from the more school-like environment of child care centers. In the next section, we draw from this research to outline a series of recommendations that could build on EarlyLearn's strength and help resolve some of the challenges our reporting has identified. *

A key strength of EarlyLearn is that it enlists network organizations to work with the City's hundreds of family child care programs.

THE PREVALENCE OF HOME-BASED CARE IN NYC'S SUBSIDIZED CHILD CARE SYSTEM

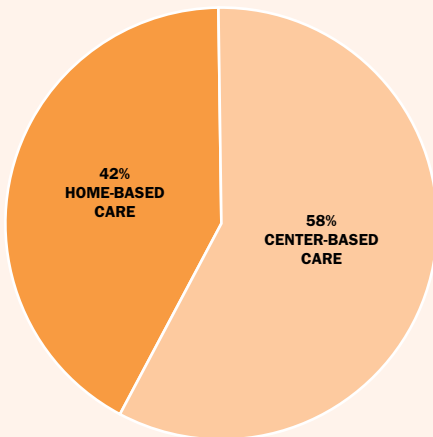
Home-based child care is the most common form of care for infants and toddlers receiving subsidized child care. For the nearly 67,000 children under 5 receiving subsidized child care in New York City (including both child care through the City's contracted EarlyLearn program as well as that paid for with vouchers) in June 2015, about 42 percent were in some form of home-based child care. But for children under 3, 69 percent were in home-based child care.

In the City's contracted child care system, EarlyLearnNYC, the rates of very young children in home-based care are especially high. Of the 6,710 children under 3 enrolled in EarlyLearn in June 2015, 71 percent were enrolled in family child care settings, and 86 percent of the 1,376 children younger than 18 months were enrolled in family child care.

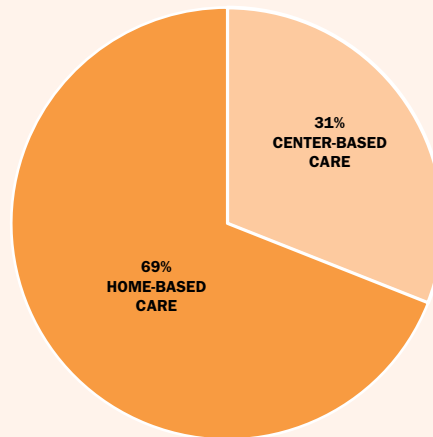
This high prevalence of infants in home-based settings is partly due to parent choice. For babies, some parents prefer the intimate, homey settings that family child care can provide to the more institutional feel of many child care centers. But logistics are also at play: the City has always had a dearth of child care for babies and toddlers, and there is especially little capacity for very young children in child care centers. Providing center-based child care for infants is costly, requiring programs to have dedicated rooms equipped with fire sprinklers and a relatively low staff-to-child ratio. Partly as a result, EarlyLearn aims to place babies and toddlers in home-based settings, and older children in centers.

ENROLLMENT IN NYC'S SUBSIDIZED CHILD CARE SYSTEM (BOTH EARLYLEARN AND VOUCHER)

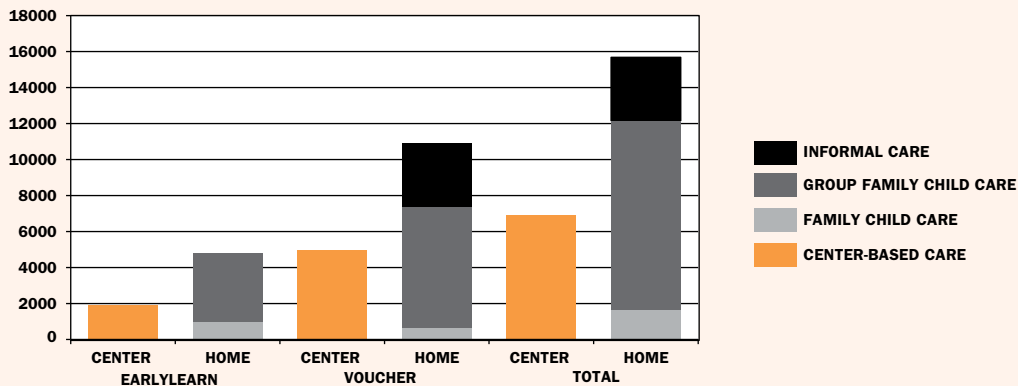
ALL 66,674 CHILDREN
YOUNGER THAN 5 YEARS OLD



ALL 22,611 CHILDREN
YOUNGER THAN 3 YEARS OLD



ENROLLMENT OF THE 22,611 INFANTS AND TODDLERS RECEIVING SUBSIDIZED CARE



A GROWING PREFERENCE FOR LICENSED PROGRAMS

Parents with very young children who would prefer child care centers but cannot find such a spot often opt for licensed group family child care programs, say staff members of Center for Children’s Initiatives (CCI), an advocacy organization that, among other things, fields calls from parents seeking child care. Increasingly, New York City families seeking subsidized child care choose these more regulated and structured programs over informal arrangements with family, friends and neighbors.

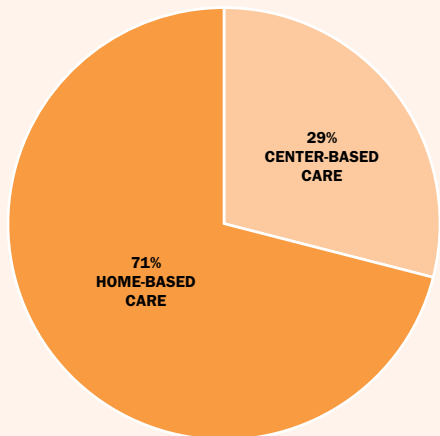
THE RISE OF GROUP FAMILY CHILD CARE

CCI has identified licensed group family child care programs—where a provider hires at least one other assistant typically to be able to care for more children at a time—as one of the fastest-growing pockets of capacity for young children. When the City first conceived EarlyLearn, it wanted no more than half of all children in its home-based programs to be in group family child care. But today, over 80 percent of children in home-based EarlyLearn settings are in group family child care, according to data provided by ACS.

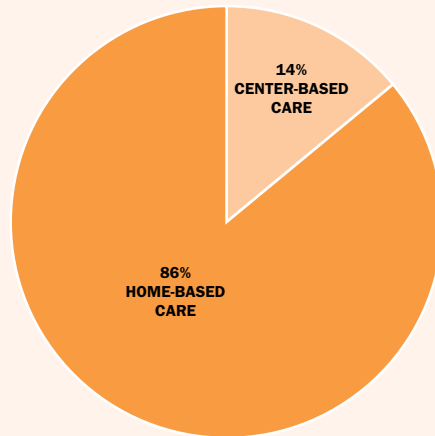
The lone family child care provider is becoming less common in all of the City’s subsidized child care arrangements. Between fiscal years 2013 and 2015, the number of licensed single family child care providers looking after children with child care subsidies decreased by more than 26 percent, according to an analysis of OCFS data.

ENROLLMENT IN NYC’S CONTRACTED EARLYLEARN SYSTEM

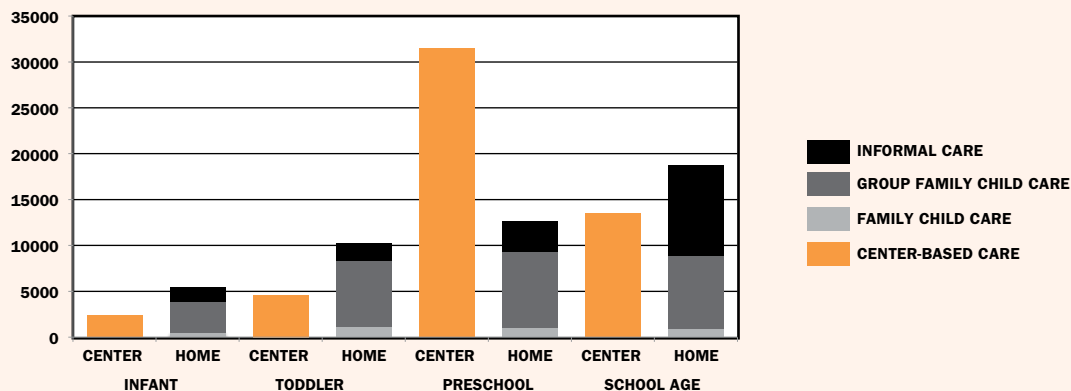
ALL 6,710 CHILDREN YOUNGER THAN 3 YEARS OLD ENROLLED IN EARLYLEARN



ALL 1,376 CHILDREN YOUNGER THAN 18 MONTHS ENROLLED IN EARLYLEARN



ENROLLMENT OF THE 98,893 CHILDREN IN NYC’S SUBSIDIZED CHILD CARE SYSTEM BY AGE AND SETTING



SOURCE: ACS enrollment data for June 2015 provided to the Children’s Defense Fund; ACS enrollment data for January 2016 provided to CNYCA; OCFS “Child Care Facts & Figures” 2013 and 2015.
DEFINITIONS: Infants—a child up to 18 months; toddler—18 months up to 36 months; Preschool—36 months and up to the school year (September) of when a child turns 5; School age—between 5 and 12 years

Recommendations From the Field

The City's Administration for Children's Services hopes to forge a new path for family child care. ACS has the opportunity to do so in its coming round of contracting. Its goal, as explained by Lorelei Vargas, Deputy Commissioner of Early Care and Education, is laudable: "To ensure that every child who is in any of our child care programs is safe, and being cared for by a nurturing adult and being supported to develop healthy executive functioning skills." For that to happen, the City needs to be very clear on its aspirations for the network organizations that support the programs, and to provide the funding as well as access to technical assistance and support for networks to meet those goals.

Emerging evidence suggests that quality improvement in home-based programs stems from strong, reciprocal relationships between providers and network support staff.¹² In particular, "home visits" by network support staff to family child care programs provide immense potential for customizing instruction and support to a diverse group of providers.

An emphasis on relationship-based support services has two important implications for New York City's EarlyLearn program:

- First, instead of borrowing primarily from what's known to work in center-based care to inform home-based programs, the City should look for promising practices in the home-visiting field, where the crux of the work stems from carefully forged, supportive relationships with caregivers.
- Second, instead of layering more requirements on the city's hundreds of EarlyLearn family child care providers, quality improvement efforts could be more carefully targeted to network support staff, including framing their roles as both coach and monitor with clear expectations and ample resources.

The following recommendations—put forth by an advisory board of experts and stakeholders in family child care—draw from these ideas to provide concrete suggestions for improving quality.

ENHANCE THE FINANCIAL VIABILITY, STRENGTH AND TRANSPARENCY OF EARLYLEARN NETWORKS

RECOMMENDATION 1: The City should raise the rate paid to providers caring for babies and toddlers. The City's decision to reserve family child care primarily for the youngest children makes sense. But high-quality care for infants and toddlers cannot be done cheaply in any setting. It hinges on nurturing and responsive interactions with a consistent caregiver, which requires low child-to-caregiver ratios, low turnover among providers and their assistants and ample time and resources for caregivers to focus on children. All of these things cost money. Yet because infants require lower provider-to-child ratios, as specified by State guidelines, providers who specialize in infants actually make less overall income. Raising the rate for programs that focus on the city's youngest children would help to offset this financial penalty.

RECOMMENDATION 2: Funding for networks needs to be commensurate with expectations. Network organizations say that because of insufficient funding from ACS they must supplement their budgets with private fundraising, or skimp on staffing and other resources, or charge providers administrative fees, or a combination of all of these things. To provide the support that babies and toddlers in family child care need, ACS should calculate the average expense per provider for networks and create a new administrative fee based on these findings.

RECOMMENDATION 3: Track the fees that different networks charge providers and make this information available to providers and the public. These fees significantly impact a provider's take-home pay. ACS needs to understand the range of fees and consider regulating them.

DEVELOP A SET OF BEST PRACTICE STANDARDS FOR EARLYLEARN NETWORKS

RECOMMENDATION 4: Provide networks with benchmarks that guide service delivery, and that provide a clear vision of the family child care networks' many roles, especially involving quality improvement. One of EarlyLearn's key strengths is that it enlists network organizations to work with the city's hundreds of family child care programs. However, ACS provides little guidance around how networks should achieve quality. This leads to wide variation in network operations and other areas. ACS needs to articulate the roles of the networks and establish clear goals for what high-quality networks should do.

STRENGTHEN AND INVEST RESOURCES INTO RELATIONSHIP-BASED AND RESPONSIVE SUPPORT SERVICES ACROSS EARLYLEARN NETWORKS

RECOMMENDATION 5: Provide more guidance to networks around home visits, including what they should look like and qualifications of site visitors. Emerging research from the Herr Research Center for Children and Social Policy at Chicago's Erikson Institute suggests that a key to improving program quality in family child care is relationship-based support services. "Home visits"—or visits that network support staff pay to the family child care programs—offer an important opportunity to nurture this kind of support.

ACS currently requires networks to conduct six home visits in each family child care program a year, but provides little guidance around these visits, including what their purpose should be. Too often they focus primarily on issues of compliance and monitoring, and miss the opportunity to address program quality. ACS should establish standards concerning home visits that focus on program quality, including that a large part of such visits should focus on the providers' own needs and their work with children. Visits that "facilitate provider-child interactions" have been shown in home-visiting studies to be linked to positive outcomes. Good visits also help facilitate provider-family or parent relationships as well.

RECOMMENDATION 6: Formal trainings for providers should be done at the network organizations whenever possible (as opposed to at ACS or another outside organization). This gives providers further opportunity to build the types of relationships with network support staff that can lead to improved program quality.

RECOMMENDATION 7: Track relevant demographics of the EarlyLearn family child care providers, including languages spoken and highest education level attained. This information can help inform what types of supports and trainings are appropriate and likely to be effective.

RECOMMENDATION 8: Create networks that specialize in working with non-English and non-Spanish speakers. Networks have limited resources and face difficulties when supporting these providers. The City should consider consolidating networks that serve a significant non-English- or non-Spanish-speaking immigrant community. Trainings, home visits and paperwork should be done in the language that the providers are most comfortable with.

DEVELOP AND INVEST IN TRAINING AND PREPARATION OF NETWORK STAFF TO WORK WITH FAMILY CHILD CARE PROVIDERS

RECOMMENDATION 9: Networks should hire staff whose education or training includes work specific to infant and toddler caregiving. For network staff to help providers improve the quality of their programs, they must themselves understand how to effectively support the development of very young children, including how to facilitate strong, nurturing bonds between young children and the caregivers and families.

RECOMMENDATION 10: In line with findings of the Erikson Institute and other researchers, ACS should arrange training for support staff around how to offer culturally competent relationship-based support to home-based providers, including:

- The importance of focusing a large part of home visits on providers and the children;
- How to create open communication and trust with providers;
- How to provide culturally competent support for providers from a broad range of cultures and backgrounds; and
- How to differentiate supports for providers with different abilities and knowledge sets.

The City might consider working with proven programs like the Parent Child Home Program (PCHP) and All Our Kin to develop trainings for EarlyLearn support staff.

PCHP is an evidence-based home-visiting program for parents of young children that also works in family child care programs. All its home visitors are carefully trained to be culturally sensitive.

All Our Kin, a nonprofit organization in Connecticut, provides intensive strength-based coaching and consultation to family child care providers. Its providers have been shown to be of significantly higher quality than those that are not part of its network.

Networks should also consider choosing a curricula to guide network staff in their visits to provider homes. The Parents as Teachers program, for instance, has been used with promising results in several family child care studies.

RECOMMENDATION 11: Network staff as well as ACS staff that support the networks should receive professional development specific to family child care. Quality in family child care can look very different from quality in child care centers. To provide useful support to the home-based programs as well as to understand how to assess quality in these programs, it is important that the organizations and staff supporting the family child care programs value family child care and recognize quality in all its iterations.

RECOMMENDATION 12: Identify the various supports available to networks. Network directors say that training their family child care support staff as well as providers is expensive, that they have minimal resources to do it and that they receive little guidance on what that training should look like.

There are, however, many potential training resources throughout the city that could provide free or low-cost trainings to network staff and providers. These include the New York Center for Child Development, the United Federation of Teachers and the city's five "child care resource and referral" organizations that receive State funding that can be used for training and technical assistance to networks and providers. The City should identify such organizations and make this information available.

IDENTIFY COST-EFFECTIVE AND PROVIDER-FRIENDLY TOOLS FOR MEASUREMENT OF PROGRAM QUALITY AND CHILD OUTCOMES

RECOMMENDATION 13: Simplify paperwork for both providers and network staff.

Under EarlyLearn, caretakers looking after infants and toddlers in family child care programs, like teachers at child care centers, must follow a curriculum, create lesson plans, and frequently assess and document children's skills and development, among other requirements. Networks staff and providers alike say that the accompanying paperwork requirements take too much time away from direct work with the children and providers. ACS should streamline and reduce paperwork requirements.

RECOMMENDATION 14: Replace Teaching Strategies Gold with a more effective, simpler tool to assess child outcomes. Our reporting suggests that this computerized tool for assessing children, which is tied to the standardized Creative Curriculum that most home-based providers are required to use, is time-consuming, costly to the City and ill-suited for the vast majority of home providers. Networks devote significant resources to training providers how to use Teaching Strategies Gold. ACS acknowledges that because providers don't have the capacity to use the tool as designed, the data collected is not very reliable or useful. Yet they also say this is their main method for measuring child outcomes.

There are other tools to assess children's progress that are simply based on provider or teacher reports. These include the Work Sampling System, The Ounce Scale, the Hawaii Early Learning Profiles (HELP), and the Focused Profiles, all of which are reported to be fairly easy to complete.

Alternatively, an assessment tool that looks at adult-child interactions—something key to high-quality care for infants and toddlers—might be more appropriate for family child care. CLASS, PICCOLO, the Quality of Caregiver-Child Interactions for Infants and Toddlers (QCCIT), and the Child Care Assessment Tool for Relatives (CCAT-R) are potential assessment tools to consider.

ACS should also consider tracking other criteria to measure program quality and child outcomes, including children's attendance in particular programs, or how long children stay with individual providers. ✨

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ENDNOTES

1. In this report, the term "home-based child care" and "family child care" are used interchangeably.
2. Calculated from June 2015 enrollment data provided by ACS to the Children's Defense Fund.
3. Typically the term "licensed" refers to group family child care programs and "registered" to programs with one provider; this report uses the term "licensed" to refer to both.
4. See "Quality in Family Child Care" in references.
5. Hurley, K. & Kramer, A. (2014). *Big Dreams for New York City's Youngest Children: The Future of Early Care and Education*, Center for New York City Affairs.
6. See "Benefits of High Quality Child Care" in references.
7. National center for education statistics: Digest of education statistics. http://nces.ed.gov/programs/digest/d10/tables/dt10_055.asp.
8. ACS January 2016 data.
9. This report uses the term "home visits" in family child care to refer to network staff visits to family child care programs. In the broader family child care field these are sometimes referred to as "program visits" or "visits to provider homes."
10. To calculate this number, we counted the number of Chinese surnames in data provided by ACS of EarlyLearn providers in 2012, 2014, and 2016. First we calculated the number of unique providers with Chinese surnames who left EarlyLearn between 2012 and 2014 (30%). Then we calculated the overall drop in providers with Chinese surnames from 2012 and 2016 (40%).
11. See "Quality Improvement Efforts in Family Child Care" in references.

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