



Early Childhood Policy Council

Agenda and Transcripts

Virtual Meeting

Thursday, November 20, 2025
9:00 a.m. – 12:00 p.m.

Physical Meeting

1000 G Street, Sacramento, CA 95814
WestEd, 5th floor, Capitol Room

Agenda

1. Welcome and Introduction

- Welcome
- Review of agenda
- Recognition of Council member transitions
- Report from Chairs of Advisory Committees

2. Update on Rate Reform

- Presentation
- Council discussion

3. California's Changing Child Care Landscape

- Presentation by the Public Policy Institute of California
- Council discussion

4. Looking Ahead to 2026

- Council meeting dates
- Subcommittee for Budget Letter
- Enacted legislation that impacts the Council

5. General Public Comment

- Members of the public are invited to provide verbal comment

Attendance

ECPC Council Members:

Andrea Fernandez Mendoza, Carola Oliva-Olson, Claire Ramsey, Donna Sneeringer, Janet Zamudio, Karla Pleitéz Howell, Kim Pattillo Brownson, Lissete Frausto, Lupe Jaime-Mileham, Mary Ann Hansen, Mary Ignatius, Mayra E. Alvarez, Natali Gaxiola, Robin Layton, Socorro Martin, Sonia Jaramillo, Stephen Propheter, Tonia McMillian.

Parent Advisory Committee Members:

Deborah Corley-Marzett, Lissete Frausto, Mary Ignatius, Patricia Lozano, Yenni Rivera.

Workforce Advisory Committee Members:

AnnLouise Bonnitto, Debra Ward, Tonia McMillian, Virginia Eigen, Zoila Carolina Toma.

Guests:

Public Policy Institute of California: Caroline Danielson

CDSS: Deborah Rawson, Jackie Barocio.

Hosts:

Claire Ramsey, Diana Yactayo, Jateri Willis, Karin Bloomer, Kim Sato, Ramee Serwanga, Eleonora Venti Webb (SP), Martha Schmitz (SP), Lulu Lun (CN), Wendy Feng (CN).

Meeting Transcript

1. Welcome and Introduction

- Meeting features

Karin Bloomer:

Hey, everyone and welcome to the Early Childhood Policy Council meeting. Before we begin, I'd like to review a few Zoom features with you. We'll enable these features after providing instruction. In a few moments, we'll be offering the closed captioning feature in Zoom. To access this feature, you'll need to locate the live transcript button at the bottom of your Zoom screen and then click show subtitle. This will allow you to view closed captions in English throughout the meeting. In a moment, we'll also offer language interpretation services. I'll now turn things over to our interpreters to describe how you can listen to this meeting in English, Spanish, or Mandarin.

Spanish Interpreter:

Good morning. To set up language translation, click the interpretation symbol in the meeting control and then click the language that you would like to hear. We have both Spanish and Mandarin interpretation available for this meeting. You can also click mute original audio to only hear the interpreted language.

[Spanish language 00:00:35].

Mandarin Interpreter:

[Mandarin 00:01:03].

Karin Bloomer:

We will now activate the interpretation feature. Please select your preferred language channel at this time. And a few more items of note. We'll be opening up the chat feature for five minutes at the end of each agenda item to invite written public comment. During the final comment period, we will also invite verbal public comment. We'll be asking those who give verbal testimony to limit their time to two minutes, in order to invite as many voices as possible to share. Also, the slides we'll be using today, will be posted on the ECPC webpage within the next week. And finally, council members, in order to adhere to the Bagley-Keene Open Meeting Law, you are required to keep your cameras on at all times during this meeting. If you're unable to use your camera due to technical difficulties, please let us know. And with that, I'll turn the meeting over to The Chair.

- [Welcome and Review of Meeting Agenda](#)

Claire Ramsey:

Thanks, Karen. And good morning. Welcome, everyone, to our fourth quarterly meeting of the Early Childhood Policy Council. It's our last meeting of the year. I'm Claire Ramsey. I am one of the Chief Deputy Directors at the California Department of Social Services. But I'm also pleased and humbled to announce that I've been appointed as chair of this council. So, this will be my first meeting officially as chair. And so, thank you. Excited to lead this council and all this good work. And thank you all council members for attending today.

As I think many of you know, we're in a time of transition. So, first I want to start by thanking every member who's here from our council, from our advisory committees, and all the stakeholders and members of the public who are here to provide public comment. For roll call for our council, our support team will take note of your attendance, so no need to put anything in chat or to announce yourself in order to be counted as here.

We're going to do a quick review of our agenda, and we as always have a very full agenda today. So, for our welcome segment today, we are going to take a little extra time, because we both want to thank our council members who are stepping off the council and welcome our new council members who were just appointed by the governor earlier this month. We also want to close out that first agenda item with a report out from the chairs of our workforce and parent advisory committees after their joint meeting in October.

After that, we'll move on to our second agenda item about rate reform. There, we'll give the council a briefing on the completion of the alternative methodology cost model and invite your input as it relates to the upcoming rate setting process. We will then take a break, and then after we come back from the break, we have a speaker with us from

Public Policy Institute of California to share their findings from a recent study on California's changing childcare landscape.

And then finally in our agenda, item four, we'll look ahead to 2026, which is somehow very close to being here. We do have the meeting dates for next year to share with you all, so you can plan ahead. And then we will also be asking for two volunteers to serve as the subcommittee that drives the development of our council letter on budget priorities in advance of our first meeting for 2026. And then finally, in that same segment, we'll highlight a couple pieces of legislation that will impact our council work. And then at the end, of course, we will leave sufficient time to make sure we can have general public comment and then we'll adjourn at noon. So, that's our overall agenda. And with that, let's go to our first item, where we'll really be talking about council member transitions.

- **Recognition of Council Member Transitions**

Claire Ramsey:

And so, as many of you may be sort of aware and realizing that this is the sixth year of this council, which started in 2019, and so much has obviously happened in those last six years, and so much good work has been done by this council. Really just want to take a moment and appreciate that dedication that everyone has had, that real commitment to children, families, and providers, and to our larger childcare infrastructure. And acknowledge that, because we are hitting the first six years, that means that we actually have term limits of six years and we have several council members whose terms are expiring. They either expired right before today's meeting or at the end of this meeting will be their last meeting. So, we're in a transition moment for several council members.

As you can see from our slides, I'm going to read off the names and thank each of these people. We're losing some really wonderful advocates, experts and colleagues from this council, but we know they'll still be so actively engaged in these efforts. And we're excited in a minute to introduce our new members. But I really want to thank Mayra Alvarez, Kim Pattillo Brownson, secretary Kim Johnson, Dr. Lupe Jaimileham, excuse me, Lupe, I always say it right, now I'm saying it wrong. Dr. Lupe Jaime-Mileham, Paula Merrigan, Carola Oliva Olson, Cheryl Polk, and Dean Tagawa, for their service to this council. You've been excellent council members and you will be missed. So, can we all give them a round of applause please.

And I know some of them will be staying with us through the whole meeting, so we appreciate that last meeting of service of 2025. And then as we head into our next year, we will have other founding members who will be turning out and we will make sure we acknowledge them at that time. So, there will be an additional list next year that we'll be thanking people as they transition off. But additionally, as I mentioned, as part of this transition, we want to welcome our newest members of the council and invite them to share a little bit about themselves. So, I'm going to start with Dr. Diana Ramos, who is

California Surgeon General. We're so pleased she's here in the room with us today and ask Dr. Ramos to please introduce yourself for the council.

Dr. Diana Ramos:

Good morning. I'm Dr. Diana Ramos. I'm the California Surgeon General. I'm an obstetrician gynecologist by training, public health leader for the past 20 years and have served at the local level at L.A. County Department of Public Health as the director for reproductive health, and at the state level as chronic disease prevention assistant deputy director. Adverse childhood experiences are one of the areas of focus in my office. And we have taken the focus not only in the childhood, but really focusing on the zero, zero to five, focusing on the opportunities that there are addressing ACEs in reproductive age parents, especially during pregnancy. So, so pleased to be part of this amazing team. Thank you so much for the opportunity.

Claire Ramsey:

Thank you so much, and we're really excited to have you join with all that expertise to the conversation. Next, I want to welcome Karla Pleitez Howell from First 5 Los Angeles, and I know Karla's online with us and welcome Karla and let me have you introduce yourself.

Karla Pleitéz Howell:

Good morning. Lovely to be in this space with you all. Karla Pleitez Howell, First 5 Los Angeles president and CEO. We're really focused on three core areas with First 5, basic needs, making sure that children have the best built environment around them and that they're thriving. Really thrilled to join you all today.

Claire Ramsey:

Thanks, Karla. Really happy to have you and nice to see you. I feel like it's been a while, but lovely to see you again. And next we have our newest council member representing the Department of Education, Stephen Prophet. And again, happy to have him in the room so he can introduce himself.

Stephen Prophet:

Wonderful, thank you. Well, thank you for, I just appreciate this opportunity here and I'll just share a little bit for anybody who doesn't know what we do in the division at CDE. We oversee a couple of the state's universal pre-kindergarten programs, transitional kindergarten. We are in our first year of full implementation, so yay, that's really excited about that. And then the California State Preschool Program, as well as a number of other grants to support inclusion and quality in early childhood. I thought I'd just maybe share a little bit about myself. I often talk about the work and not as much about who I am and kind of what brings me here. But I'm a lifelong Californian. I am a proud dad to two amazing daughters who have been in private preschool, who have been in family child care, who have been in transitional kindergarten. So, I'm blessed to have been a part of that experience growing up.

I operated a family child care home with my wife. Now, I get way too much credit when I say that. It was really my wife. I was on board on the business side, my wife was the

full-time educator. And I believe that, we're civil servants, we have a duty to do the best for Californians to learn and continue to do better. So, I'm just grateful to be here, grateful to work with a team of amazing professionals at CDE, and I'm just amazed to be here with you all. And yeah, doing great work for the Californians.

Claire Ramsey:

Thanks, Stephen, and happy to have you here too. And then, we also had Ristyn Woolley, who's our California Head Start collaboration office lead, and she works at the Department of Social Service. She's also been appointed. She's not here with us today and we look forward to introducing her at the first council meeting of 2026. And then, I'm just going to take a moment also to introduce myself as the new chair, since I know some of you know me, but probably many of you actually haven't worked with me much before.

So, as I mentioned, I'm one of the chief deputy directors at the Department of Social Services. And under that work, I, for this purposes, cover both the Child Care and Development Division, which is led by Lupe and the Community Care Licensing Division, which oversees many things, but including childcare licensing. I also cover adult programs and disability determination services at the department. I've been there for the last four years.

And then previous, I'm a lawyer by training and have worked in legal services for about 15 years before coming to the department. So, that is included work on a lot of older adult issues and healthcare issues and disability issues. But actually I started my career and worked for a number of years at Child Care Law Center, working on inclusion, working on infant and toddler issues, working on licensing and subsidy and all the different pieces that make up our wonderful childcare infrastructure. So, it has been kind of wonderful to feel like I'm returning home to this work and excited to be working with all of you.

And like Stephen, I've got two kids who went through a variety of different childcare types and excited to talk about the ways in which we can serve all the children of California with the work we do. So, thank you again, excited for everyone to be here and look forward to a great productive meeting and great counsel moving forward. So, with that, again, please get to know your new council members. We welcome them heartily to this work. With that, I'd just like to shift quickly over to making sure we have time to get reports from the chairs of our advisory committees.

Mary Ignatius:

Can I ask a quick question about-

Claire Ramsey:

Oh, sure. I'm sorry. Is that Mary?

Mary Ignatius:

Yeah.

Claire Ramsey:

Yes, please, Mary. Hi.

Mary Ignatius:

I feel like I'm coming around the corner of my term ending soon as well. And the parent subcommittee means a whole lot to me and I just want to make sure that the process... I guess I don't know what the process is for new appointees and I just wonder if that's something that could be shared so that I just want to make sure that the parents that are coming on the committee are consumers of the subsidized programs that we are talking about here. And so, if there's any way to share that there in writing or hopefully before I turn out, so that I can make sure I can help folks through navigate the process, because it's also not such a simple and easy process to get appointed at this point.

Claire Ramsey:

That makes sense. Mary, maybe I could just answer the sort of formal side of the question about the appointment side, but then I also hear you asking a question about onboarding and making sure people understand what role they're playing in the council, how to engage, kind of what ability they'll have to work on different items. In terms of the appointment processes is, governor's appointee process that everyone goes through. People basically, once they've been identified as potentially being one of the appointees, will submit an application to the governor's office and then the governor's office reviews and interviews the person. And it is fully within the governor's control, like who is chosen for the council. However, if you do have ideas for who might be good parent representatives or making sure to your point that they have the lived experience with the subsidy system or other childcare access points that you want to sort of elevate, that's always very helpful to know. And I don't know if Lupe, at any points, people have reached out to you with names and ideas.

Dr. Lupe Jaime-Mileham:

But we also encourage... Dr. Lupe Jaime-Mileham and Deputy Director of CDSS Child Care. So, we also encourage that if individuals are interested in an appointment through a governor appointee, to please submit your application directly to the website and we're happy to drop that in the chat during the meeting, so you have that too. In addition, you know that there is appointees from the state superintendent as well as the speaker, and each of them have their own process that individuals can directly apply for and specifically choose to be in the Early Childhood Policy Council.

Claire Ramsey:

Thank you. And both Karin and Lupe, thank you for reminding me about there's, yes, appointees through the legislative process as well. And then, in terms of onboarding, Karin, I don't know if you want to speak a little bit to just connection when new members join and kind of that part of it.

Karin Bloomer:

Yeah. Thank you, Claire. Yeah, Karin Bloomer, I'm support staff for the council. Yes, certainly once the appointing bodies notify us that a new member has been appointed to the council or to one of the advisory committees, I reach out to that individual and through email and a request for a video meeting, walk them through the statute, the expectations of the council, the advisory committees, and any other sort of background that's helpful to that individual. So, That's helpful.

Claire Ramsey:

Yeah. Mary, did that get to the heart of your question?

Mary Ignatius:

Yeah, and I think if there was just something in writing that showed the steps, I think I wrote something up a long time ago, I can dig in my notes, when we were sending it out. It's just, there's access to this process for some and more hand holding and support for others. And so, whatever we can do to make sure it's equitable process, I think is what I'm hoping for.

Claire Ramsey:

Appreciate that, Mary. Thank you. And actually, with that, I wanted to see if Mary, either you or Tonia or both of you want to provide an update on the subcommittee meetings, the workforce Advisory Committee and the Parent Advisory Committee meetings that happened on October 27th.

- [Report from Chairs of Advisory Committees](#)

Tonia McMillian:

Thank you. So, as you can hear, Mary's voice is a little shaky, she's not feeling so well. So, I'm going to do the entire report back for the Parent Advisory Committee and for the Workforce Committee. And just shout out to my girl, Karla Pleitez Howell, Hi. Anyway, so the Workforce Advisory Committee and Parent Advisory Committee met jointly on October 22nd. We addressed two agenda items. We received a briefing from the Center for Law and Social Policy on the federal government shutdown and discussed its impacts on children and families. And the committees provided feedback to CDSS on equity priorities and definitions as part of the effort to improve the state's Quality Rating Improvement System or QRIS. For the discussion about the federal government shutdown, we invited Rachel Wilensky, Senior Policy Analyst at the Center for Law and Social Policy to present. Rachel shared that, while the Child Care Development Block Grant, CCDBG would remain stable for the time being, there was risk of disruptions to programs such as Head Start, SNAP, WIC, and TANF.

Funding for these programs would increasingly affect family, children, and providers, especially those relying on multiple federal supports. Committee members emphasized the importance of receiving clear and prompt updates from state departments regarding expectations and changes affecting California families and early educators. Questions arose about using possible state-level stopgap measures such as self-funding, the use

of reserve funds and maintenance of effort reserves to potentially delay impacts on programs and services.

Committee members highlighted that early education programs are often subject to funding cuts in budget negotiations. There was concern about maintaining preparedness and advocating for the needs of educators and children, and committee members acknowledged the stress that families and providers were feeling due to the shutdown. There was a call to recognize and honor the commitment to supporting communities during these challenging times. The committees also provided feedback to CDSS on equity priorities and definitions as part of the effort to improve the QRIS, the Quality Rating Improvement System.

The overarching thing from committee members was that, it seemed premature to be addressing quality indicators and assessments, given that rate reform has not yet been fully implemented. Committee members asserted the priority of addressing the foundation elements of fair pay and adequate staffing first. Committee members also expressed the following, family child care providers are often excluded from early education systems and decision-making processes.

There was a call for better integration and recognition of these providers with adequate pathways to participate and contribute within the broader system. Systems should be designed to center the needs and priorities of families and children. There were calls for expanded wraparound connections and services for all types of providers, including those in family child care home or family, friend and neighbor settings. Equitable access to resources, training and services is seen as necessary to support providers and the children they serve, particularly those with special needs or experiencing challenges like homelessness.

There was concern about budget constraints and the need for intentional funding mechanisms that support all types of early childhood programs. Members suggested that funding should follow the child, regardless of the type of program selected, to ensure resources reach where they are most needed. The value of partnerships across different sectors, including public providers, family child care, and other social services, was highlighted as crucial for supporting children and families holistically. It was suggested that the culture within the system must shift to prioritize collaboration, members advocated for change and how programs interact and support each other moving from competition to partnership. And that concludes our readout and I will turn it back to the chair of the council.

Claire Ramsey:

Thank you, Tonia, so much for that great description of the conversation and the topics covered. And thank you to Mary, and I'm sorry you're not feeling well today. I hope you feel better soon. So, at this time, did anyone have questions, I'm sorry, for Tonia, about that update? Okay. Seeing none, I do want to turn it to Karin, because we're going to have one of our first written public comment periods.

Karin Bloomer:

Thank you. Yes, that concludes the welcome agenda item. So, we'll be opening up the chat feature for the next five minutes to members of the public, who'd like to provide written comment about that first agenda item. And while members of the public provide that comment, we'll move on to agenda item two, update on rate reform. And I believe we pass it to Jackie Barocio of CDSS.

Claire Ramsey:

That's right. And thanks Jackie.

2. Update on Rate Reform

- Presentation

Jackie Barocio:

Thanks, Karin. Thanks, Claire. Just waiting, okay, perfect. Hi everyone, my name is Jackie Barocio. I'm a branch chief within the Department of Social Services, and we'll be going over a few rate reform updates for the team. So, until recently, we've also had those dedicated quarterly meetings of the Rate and Quality Advisory Panel or RQAP, which was specifically created and designed to the state on the first alternative methodology process, which is one of the phases that's a part of this broader rate reform effort. So, I will explain in more detail later in the presentation, but with the first alternative methodology process being complete, the RQAP is no longer meeting, but we will continue to leverage these existing engagement spaces like ECPC to gather information, feedback, input around those future phases related to rate reforms, such as policies around the single rate structure. And given that the ECPC attendees may be new to this space or members of the public may not have attended those prior RQAP meetings, I will do a brief recap of the entire rate reform process in my presentation. So, if we go to the next slide, in terms of the agenda topics today, we'll do that rate reform update and brief overview. We'll also, we have Prenatal to Five, a contractor that we contracted with for the first alternative methodology. We'll present some of the comparisons of the alternative methodology, cost of care outputs to current rates under the state preschool program. We did a similar walkthrough of current rates relative to the child care rates and the cost of care in the last RQAP meeting. So, we want to do the same for the state preschool program here. We'll then engage in a listening session discussing key single rate structure policy topics that have been elevated in prior RQAP meetings and ECPC meetings. For purposes and just due to time constraints, we hope to get through non-traditional hours and enhanced inclusion today. And then other topics we hope to cover in later meeting spaces.

Next slide. So, just briefly, in terms of the phases for rate reform. We view them kind of in two phases. We have the first phase, which is the alternative methodology cost model, which I previously said has been completed. The purpose of the alternative methodology cost model is to assist the state in moving away from conducting a regional market rate survey and start moving towards a methodology that is reflective

and allows us to estimate the cost of care, how much does it cost to provide child care based off of the various health and safety requirements and other common practices we see in the field. We contracted, between the summer of 2023 and the summer of 2025, the state partnered with an organization called Prenatal to five fiscal strategies or P five, to conduct the first alternative methodology process. And that required estimating the cost to provide child care to again meet those program standards and requirements. And the Rate and Quality Advisory Panel or RQAP guided that process.

The alternative methodology process resulted in the development of a cost model and calculations of what it costs in the state of California to provide child care services relative to those program requirements. We completed the first alternative methodology in July 2025 as required by the federal deadline. And the cost model is required to be updated every three years, to reflect new policies and also the most up-to-date data. We are now entering phase two of the rate reform process, which is the single rate structure. And the single rate structure is the creation of a unified reimbursement rate structure.

This phase is still underway, given that some key policy questions about the design of the single rate structure and how the structure will be implemented, have yet to be answered. And the department is making progress and defining these single rate structure policies through a joint labor management committee, but then also feedback that we're gathering in these broader engagement spaces like the ECPC meeting today. The completion of the single rate structure phase is subject to the completion of many necessary implementation readiness activities, such as state and local automation changes, funding and any technical program guidance. And ultimately, once the single rate structure is finalized, that will ultimately replace our existing reimbursement rate structures like the regional market rate and the standard reimbursement rate. So, with that recap, I'll now move into just elevating a few common misunderstandings that have come up through the RQAP meeting space, that I just wanted to elevate here as well. Next slide.

So, the first common misunderstanding is that the completion of alternative methodology is the same as setting rates. We just wanted to clarify that the completion of alternative methodology actually is not the same as completing rate setting under the single rate structure. Today, reimbursements continue to be based off of the regional market rate and the standard reimbursement rate, which is statutory. COLA increased to the cost of care plus payments that were applied in fiscal year 25-26. And again, at a yet to be determined point of time in the future, the regional market rate and the standard reimbursement rate are expected to go away and be replaced with new rates based off of the single rate structure. And that single rate structure will be informed by the alternative methodology, cost of care estimates, and other policy priorities. Next slide.

Another common misunderstanding that we wanted to clarify is that the alternative methodology cost model outputs are the proposed rates under a single rate structure. Again, to clarify, that is not the case. The outputs from the alternative methodology are

not proposed rates. We also have, as we've presented some of the output findings and compared them to current rates, we've gotten the question, what does it mean if some of the alternative methodology cost outputs are lower than current rates? For this question, I'll pass it to Jeanna from P5 to just briefly explain what does that mean. So, I don't know if we have Jeanna on the line.

Jeanna Capito:

Hi everyone. Hi Jackie. Thanks. Jeanna Capito with Prenatal to Five Fiscal strategies. I'll just jump in quickly on this one. The alternative methodology cost model is going to give you outputs related to the cost of care. So, there are possible instances, and you're not the first state that has seen this, where it is possible that the cost model output could be the same or a little bit lower than your current reimbursement rate for a type of care. It is not common, certainly for certain ages of children like infant or toddler care and the care that has smaller ratios and group size. The instances where it occurred in your alternative methodology process is related to your cost model outputs for school-age care, there are some instances where the cost model outputs are a little bit lower than the regional market rate amounts available for school-age care. And that is actually something, that across other states we have worked with, in alternative methodology, if there's places where the payment rate is going to be close to or higher than the cost output, it has been in school-aged. There's a lot of reasons for that, that have to do sort of with the nature of school-age being sort of your largest group of children typically, and so the current rates are coming in close to or aligning with what the cost is, which often is not the case for much higher cost types of care, like care for infants or toddlers.

Jackie Barocio:

Thanks, Jeanna. And we also have received the question of, is the state proposing to decrease rates? Again, no. The 2025-26 Budget Act actually not only maintained current reimbursement rates, but as mentioned in a prior slide, we did see that cost of living increase for cost of care plus payments in the current system. Future rate setting is subject to the budget development process and for family child care providers, the collective bargaining process. Next slide.

Thanks. So, the last common misunderstanding we wanted to elevate here is that the alternative methodology is fixed and won't change. So, we just wanted to clarify that. Again, the alternative methodology is a point in time estimate of cost to provide child care based off of data collected from external sources, focus group feedback, provider surveys, and input from subject matter experts. We are required to update the cost model every three years, and that gives us the opportunity to reflect any new policies, but also more up-to-date data.

So, for example, in prior RQAP meetings, we flagged how the MIT living wage data was used to inform some of the estimates around salary assumptions in the cost model. As we were updating the alternative methodology, we would then also update the MIT living wage data points to reflect the more recent annual data that we would have at that time. And that could then impact and potentially change the regional groupings of

counties or also the salary values that are in the cost model itself. And the next alternative methodology cost model update will be in July 2027. Next slide.

So as I mentioned previously in the last rate and quality advisory panel meeting, we did present a comparison of the gaps between the child care rates under the Department of Social Services that were in effect on June 30th, 2025 relative to the alternative methodology cost of care output. And we saw wide variation in that comparison ranging from 28% to 120%.

So I will now pass it back to Jeanna to provide a similar walkthrough of the gaps between current state preschool rates that were in effect June 30th, 2025 relative to the alternative cost of care outputs.

Jeanna Capito:

Thanks, Jackie. We can go to the next slide. Thanks. So we're going to walk through the data that you see on the slide. We are focusing here on the estate preschool program full day and full day plus cost of care outputs. As Jackie mentioned, we have already reviewed through the rate and quality work group outputs for the CDSS administered programs. And so now we're going to talk about those outputs in comparison to rates for the state preschool programs.

So just a quick note about how the cost model works and thinks about the CSPP programs as well as the CDSS Title V programs for full day and full day plus, all of the same selection points are used in the cost model tool. You will notice if you were to compare the rates for a preschooler for Title V or the cost outputs and a preschool age child funded by CSPP that you'll notice that the output itself does differ across the two. And this has to do with the fact that in the cost model, a preschooler in a Title V setting is part of a program serving children from birth to five. So there are some differences in the number of total children in the scenario compared to a CSPP program. But all of the same choices around things like the number of family engagement, points of contact, discretionary benefits, salary points, all of those are the same across CSPP and the other Title V programs.

What you'll see on this slide is it shows you a comparison between the rates that were in effect as of June 30th, 2025, and the cost of care outputs for full day and full day plus, as I mentioned out of the alternative methodology process. So what you're not seeing as far as the comparison to rate is the FY increase to the cost of care plus payment amounts.

You see three different age groupings for CSPP, two-year-olds, three-year-olds, and then four-year-olds. Are twos are in blue, three-year-olds are the lighter blue, and then the sort of darkest blue or purple is the four-year-olds. And in the bar chart, what you're going to notice is that all of the rates, all of the cost outputs are under the payment rate, but the different kind of length of the bar in essence is telling you sort of which ones are the furthest away from the cost. The payment rate is furthest away from covering the cost so that you'll notice that three-year-olds, that middle bar are the closest to the rate,

is the closest to the cost of care from the cost model. Whereas for two-year-olds and four-year-olds, there's a much larger gap between the current payment rate and the cost of care output from the cost model. You'll also notice that these rates or these cost outputs and comparisons to rates are organized into regions.

There are five regions that are used as part of the alternative methodology and cost model process, and you'll notice that the two-year-old rates in Region 4, which is a second to the end of the slide, are actually have the biggest gap. Where in Region 1, the three-year-old has the smallest gap. So there's some difference based on the amount of rates across the different regions and there are differences in the cost outputs by region as well.

The next piece of information that you have on the slide, then, is the table at the bottom, which presents to you the idea of the current rates as a percentage of cost of care. So this again is the current payment rates for CSPP programming as a percentage of the cost of care from the cost model outputs. And so you see that current rates as a percent of costs are from a low of about 46% of costs for four-year-olds in Region 4. And then kind of the highest goes to that Region 1 where three-year-olds are, the current payment rate is at 93% of the cost of care.

The next slide is going to present the same information, but now we're going to be looking at part-day and just as a point of reference, part-day is defined as four hours a day and under, so still focusing on CSPP, but looking at part-day, part-day does utilize all of the same selections related to the Title V or the full or full-day plus under CSPP, except that there are only 10 paid days off instead of 20 paid days off. Acknowledging that the part-day program is not operating on a full year. And so the bar chart is laid out the same as the one that we just looked at for the full-day and full-day plus. What you're going to notice kind of looking up at the top as you're going to see in the terms of dollars, the three-year-old rates again are the closest, the outputs are the closest to the payment rates that are available for them while again, the two-year-old cost outputs and the four-year-old have larger gaps.

Again, the data table at the bottom then shows us this information and percentages. So again, you're going to notice that the percentage of the current rates as a function of the cost model output is going to be the lowest for the two-year-olds and the three-year-olds in Region 4 in this instance coming in at around 40%. And then the high for Region 1 in this instance is the three-year-olds, but 84% of the payment rate as the cost of care compared to the previous slide where it was 93% of the cost of care. All of this is available, this analysis is available as an appendix to the full cost estimation report that was published related to the alternative methodology, there is a standalone appendix for all of the CSPP analysis and there'll be a link for that in the chat and I'll turn it back to Jackie.

Jackie Barocio:

Thank you. I just wanted to clarify that that appendix, it's still going through remediation and things like that, so it'll be posted publicly soon and we'll make sure to share the link

out when it is. But we just wanted to provide the parallel information for our state preschool programs similar to what we did in the last RQAP for child care programs.

On the next slide, we'll now just be covering some of those next steps on the single rate structure. So as mentioned previously, there are key implementation questions that remain open to highlight a few. We know that the single rate structure will require some consideration and thought around time bases for the rates reconciliation of current reimbursement rate differences, given that we have not only potentially different approaches across programs, but then also we have two different reimbursement structures, the regional market rate and the standard reimbursement rate. So trying to reconcile those differences as we move to a unified structure. Also, consideration of what the child age group definitions will be consideration of the enhanced inclusion and non-traditional hours of care that would exist under a single rate structure, ensuring that equity evaluation of rates under the single rate structure once they are implemented and considering any local contractor administration and automation impacts. Next slide. We also want to ensure that we are discussing these topics in various engagement spaces that exist. So currently there is a joint labor management committee engagement space for represented family providers that is currently underway. We also will be gathering feedback through existing meeting spaces and, if needed, ad hoc discussions with contractors and center-based programs so we can ensure that we're engaging a broader audience as we discuss the single-rate structure, policy topics, and then of course engagement with the legislature through the budget process. Next slide. Great. So I will now be turning it to Deborah Rawson and from the Department of Social Services shortly to start the single-rate structure listening session on a couple of those key policy topics that we just introduced above. So if we go to the next slide, we had a similar listening session in the last RQAP meeting around age group definitions and this listening session will be structured in a similar fashion.

The purpose of the listening session is to have these conversations and hear from a broader audience such as childcare centers, agencies, and families. The format of the listening session is that we will describe how these topics are currently defined and approached under the existing regional market rate and standard reimbursement rate structures. We will then describe how they are approached under the alternative methodology, cost model flag, any policy considerations that have come up in prior meeting spaces such as prior RQAP meetings and prior ECPC sessions. And then open it up to the group to have that listening session on some guided questions to get a better understanding on what folks think about how these policy topics should be handled, considered, and approached under the single rate structure. So with that, I will pass it over to Deborah Rawson to lead us in the non-traditional hours discussion.

Deborah Rawson:

Thank you, Jackie. Good morning everybody. My name is Deborah Rawson and I'm the administrator in the policy office in the Child Care and Development division with the Department of Social Services. As Jackie noted earlier, there are some key questions that still need to be answered to finalize the SRS and how it'll be operationalized. Today is an opportunity for a broader group of interest holders and in particular child care

centers to weigh in on three of those policy questions, how the state should reimburse for care provided during non-traditional hours or NTH, how the enhanced reimbursement rate for inclusion services should be operationalized and how the state may reimburse for care that occurs in something other than weekly increments. Next slide please.

So currently under the RMR, the regional market rate adjustment factors are applied when services are provided from 6:00 PM to 6:00 AM on any weekday or from Saturday, 6:00 AM to 6:00 AM on Monday. Reimbursement rates multiplied by one of the following adjustment factors, 1.25 when 50% or more of the certified need for child care occurs during this period or 1.125 when at least 10%, but less than 50% of the certified need for child care occurs during this period. In the SRR for child care provided more than 10.5 hours per day, an adjustment factor is applied of 1.18. Next slide please.

The cost model makes several assumptions in order to arrive at the cost of providing care during NTH. First, NTH is defined as 6:00 PM to 7:00 AM. Second, certain program requirements, standards and activities do not continue during evening and overnight care and are removed from cost calculations. And third, a 10% wage differential is assumed for staff in licensed settings who work during NTH. The resulting cost of care during NTH is generally, but not always, less than the cost of care during standard daytime hours. And finally, there is no difference in what it costs to provide care on the weekend than on a weekday. Next slide please.

So in prior RQAP meetings, we have received some feedback on non-traditional hours and we wanted to share that here. So although the cost model assumes that care provided on a weekend is the same cost to care provided on a weekday, it was shared with us that this may not be the case for many providers. Additionally, we heard feedback that the wage differential provided during these hours is not sufficient to cover the cost of providing care during this time due to the expenses that are taken out of the total reimbursement. We have also heard that NTH reimbursements should be higher than the base rate for all children. Next slide please.

So now we would like to hear from you. We have a few questions related to NTH. Question number one, what specific hours in a week would you define as non-traditional hours? Question number two, the current RMR and SRR reimbursement structure and alternative methodology cost model define NTH differently. The SRS is meant to have a uniform reimbursement approach. What are possible uniform ways NTH hours could be reimbursed? Question number three, from a contractor perspective, would defining NTH reimbursement roles in a particular way make it administratively easier or harder to track, report or reimburse? And the final question for this topic, are there any existing ambiguities about NTH that would be helpful to be clarified under the SRS? So we're going to open up the space now for as a listening session.

- Council Discussion

Claire Ramsey:

Thanks Deborah. And just asking for council members to raise their hands if possible or if needed to put questions in the chat and we'll be monitoring the chat for questions. And I'm sorry, I cut someone off who's about to talk. I apologize. Okay. And I see first hand out from Tonia.

Tonia McMillian:

So are we using this time to answer the questions, these questions specifically, or can I ask a question about what was previously shared?

Claire Ramsey:

Either, Tonya, and these questions again are just for consideration to help people think about what feedback they might have, but please ask whatever question you have.

Tonia McMillian:

Okay. So this is for Jackie. You said that in some cases the current school age rates are higher than the true cost of care, but I've heard that for some Bay Area counties there are some infant and toddler rates that are higher than the true cost of care. Can you confirm that?

Jackie Barocio:

I can turn it over to Jeanna to confirm if that was a finding, but Jeanna, I am not recalling in any case, did the alternative methodology find that an infant and toddler rate was higher than the cost of care? But please correct me if I'm wrong, Jeanna.

Jeanna Capito:

I would agree with that, Jackie. And Tonia, if you give me a second, I'll double check it to make sure that Jackie and I aren't speaking out of turn from our memory, but I do not recall an infant or toddler cost output that was lower than a reimbursement rate.

Tonia McMillian:

I'd appreciate that. Thank you.

Jeanna Capito:

I'll double check it right now while you guys continue on.

Tonia McMillian:

Thank you.

Jackie Barocio:

Yeah, maybe check Alameda County specifically.

Claire Ramsey:

Right? And just monitoring for the chat and for... Oh, and I see Andrea's hand up. Thank you.

Andrea Fernandez Mendoza:

Good morning everyone, and thank you for your presentation. That was a lot to think about and a lot to digest in such a quick amount of time. A couple of things that resonated with me on different aspects of this, including the questions for consideration, but the first would be when you do the ad hocs for center-based programs, family, friend and neighbor, veterans child care providers, we really need to be intentional about including people who are actually doing the work. A lot of times decisions are made about what happens to programs or family child care homes by people who are not doing the job or not doing running the business of these programs. And so decisions are made that have unintended consequences that can be an extreme detriment to each of these programs. So that would be my first recommendation.

Second, from a contractor perspective, looking at item number three, would defining the non-traditional hours reimbursement? Yes, if you make decisions about how the reimbursement works, I would highly suggest number one, getting the feedback of people who are actually doing the job, number one, but number two, make it as similar as possible to what exists now so that it is easier to just adjust our processes, adjust the way that these things are being tracked. So if you can make it as similar as possible to what is existing now, that would be very helpful rather than to reinvent the wheel unless you can find something that is absolutely fabulous to fix it, which again, it's a learning curve, people are going to have issues. So you're also going to need to remember that there's going to be a lot of professional development that's going to be needed when these things are rolled out because people are not going to be able to pivot without the information. So my 5 cents.

Claire Ramsey:

Thanks, I appreciate that feedback and looking to see if we have any other hands on any of these non-traditional hour concepts. Okay, let's see. Oh, I'm sorry. Dr. Ramos please.

Dr. Diana Ramos:

Yeah, no, I'm just looking up for the federal rates. There's already precedent set and they have, in terms of specifically looking at the hours, 3:00 PM to midnight is one set of rates at differential and then 11:00 PM to 8:00 AM is another set of differential and they are on the federal level, it's seven and a half percent differential from 3:00 PM to midnight and 11:00 PM to 8:00 AM, it's 10% differential. So there's precedence set already in terms of the rates and the hours. So just giving you reference.

Claire Ramsey:

Thank you very much. I do want to acknowledge Tonia had a comment, "9:00 to 5:00 jobs are..." I'm just going to read it or Tonia, do you want to read it? I can also read it. And then-

Tonia McMillian:

Yeah, I was just saying that 9:00 to 5:00 jobs are no longer the standard and so I just put what I consider outside of a typical eight hour work day before 8:00 after 5:00 PM Monday through Friday on any hours over the weekend. But those references that she just shared, the 3:00 to 11:00 at 7% and then 11:00 to whatever time she said at 10, I think that those percentages need to be addressed. I don't have a problem with the hours, but the percentages definitely.

Claire Ramsey:

Thanks Tonia. And I see Deborah's hand up next.

Deborah Corley-Marzett:

Thank you and good morning everyone. That was really an awful lot to lay out and so I'm going to do my best to make it as quick as possible. So first of all, Jackie, you mentioned that there's so much more work to be done and with the rate reform. So I ask why is the work group then ending? I also want to ask is, by having the work group, did the state really consider and it's going to be applying the suggestions of the work group because otherwise then why did we have the work group for so long? Because at times people didn't feel as if the state was really listening to what the work group was saying, let alone going to apply what the work group was saying.

And Jackie, you also mentioned to the public here that the state is working with the JLMC and as if there's going to be ongoing meetings, but the meetings are going to be ending November 30th of this year. So just a few more weeks to have that input from the JLMC. So I just didn't want the public to think that these meetings are going to continue past that date because they're not, they're scheduled to end.

The nights and weekends, the nights we already know that providers are being paid less, not enough money. We already know that providers are closing their doors. We already know providers that work nights and weekends such as myself, sacrifice so much. So as far as the reimbursement for nights and weekends, any hour and every hour that a provider works beyond 6:00 PM or in between 6:00 PM and 7:00 AM. every hour, those providers should be reimbursed additional, not based on 10%, not based on 50% of the time, but those hours, those are valuable hours for providers and they should be reimbursed for every single additional hour that they work. I think that's important.

There's a lot that was said here and so much more that I would love to have been able to address, but it's kind of hard for someone to be speaking and going so fast and at the same time you're trying to make notes and get this down right. I take this position where I sit in this chair is serious and it's important. I value what I do as I value my families that I serve and these children and to know that providers have been a part of the public in these meetings in rate reform meetings and it feels like there's going to be shoved down our throats. Providers cannot afford that. We work too hard to get here. We work too hard to make a point. We work too hard to support the state of California, the fourth largest economy in the world, but yet we get the low end of pay.

So as we end the rate reform work group, as the JLMC is getting ready to end and as the state appears to be implementing their own concerns or their own thoughts, believe me, don't ask me to be a part of the cake and don't use any of my ingredients, that cake will fail. So I just want to say, providers, the fight has to continue. Parents, we need you to stand with us and to the state, please do not hand us an empty plate. Thank you.

Claire Ramsey:

Thanks Deborah. Appreciate all that feedback and all the work you're doing for your families every day and all the providers on this call and listening and a stakeholder. So we thank you all for that work. Jackie, I don't know if you want to quickly touch on any of those. Just the question about other engagement opportunities as we move forward, as some of the established pathways are ending.

Jackie Barocio:

And I think the RQAP was really designed for that specific and targeted purpose of the alternative methodology cost model process. And while that is ending, we are trying to leverage these existing spaces for that next phase of the single rate structure policy conversations that will then inform a rate setting. So I hope folks are seeing that with these listening sessions. Those concerns that were brought up in the RQAP that seem to really be stemming from that rate setting policy, single rate structure perspective can be lifted and shifted into these spaces. And we're trying to bridge that as well in elevating what were those helpful single rate structure policy topics that perhaps didn't fit within the alternative methodology cost model, but now can exist and fit within this space to work and bringing them over into this space to try to set that foundation and starting point for these group conversations. So I really appreciate the comment about while one space is ending, we hope to maintain the continuity of the feedback in these existing and future spaces.

Claire Ramsey:

Thanks Jackie. And I see three hands up. So we'll first have Janet, then Zoila, then Robin, then I'm going to turn it back to Deborah for the next listening session opportunity. So Janet, excuse me. Janet, please.

WestEd Support Team:

Apologies. Claire, I'm so sorry to interrupt you. I think we're getting feedback in from another language channel.

Deborah Rawson:

We are.

WestEd Support Team:

So, interpreters. If we could just get a quick interpretation team if we can just make sure we're broadcasting into our correct language channels. I'm so sorry Claire to interrupt you.

Claire Ramsey:

No, no, thank you. We'll give it a second to get that resolved so everyone can hear properly.

WestEd Support Team:

Perfect, thank you. Okay, I think we're good to go.

Janet Zamudio:

Okay.

Claire Ramsey:

Great. Thank you. Janet, please

Janet Zamudio:

Thank you. And thank you for the presentation and I really appreciate especially the time taken to walk through the bar charts and the percentages to really understand what was being shown to us. I really understood it. Initially when that was put up, it was a lot, but once you walked through it was super helpful. One question I had is, and I think it might be that just calling out the elephant in the room here, who are we talking about when we say non-traditional hours? Primarily what type of care setting are we talking about? And I think that's super important to point out and it's primarily going to be our family child care providers here that we're talking about. And so in response to these specific questions, I did want to say in 8:00 to 5:00 is like the traditional hour of care. I do agree with the comments that have been placed in chat and with Deborah's comments who came before me as well.

There's so much extra prep work that has to go into preparing for opening, closing at night in terms of family, child care providers work in addition to the important care that they provide to children throughout the course of when children are present. I'm not a contractor myself to respond to some of these other questions. However, I am struggling a bit, especially with these presentations where we're being asked to provide responses to questions. I want to be thoughtful, I want to be prepared for these meetings and I want to be able to give thoughtful responses to the questions we're being asked. I think in the future, having these questions ahead of time might be helpful for us to help us prepare because I'm not quite sure we're seeing them. So some way of just helping us prepare and coming into these meetings too, to be able to respond to these questions would be helpful.

So here's my question. Can we get time to give you written response to these questions? Can we really talk about how we can respond to these questions in a thoughtful way so that I can provide some written feedback as I'd like to do that? And then Mary dropped a link in chat. I know she's not feeling too well, there's other hands raised, so I just want to raise attention to the California budget and policy center analysis on what this proposal might do with regard to the true cost of care. So thank you.

Claire Ramsey:

Thanks Janet. And we'll take that question back about getting questions in advance and also about alternative ways to submit additional feedback after this meeting for anyone who's on the call, both council members, but also for anyone from the public as well, Zoila, please.

Zoila Carolina Toma:

Thank you. Good morning everyone. What specific hours in a week will define non-traditional hours? For me, it's everything that goes over 40 hours. My staff gets paid over time. That differential comes only after 52.5 hours. I have to make up the rest. It is not fair for us as educators, as providers, to be put in that part of our pocket and us as the owners or founders of our programs not getting paid enough because we have to cover the rest. We have labor laws that we have to follow and every year they keep adding more. And I want to give all that to my workers, but that means that I have to put out of pocket because now I have to offer 401k. I'm glad that my staff have access to that now, but who's paying for that? No one, it's like have to come out of my pocket. So everything that is, and on top of that, you have to understand that evening and graveyards shifts are paid differently out there.

It's not just a percentage and the way that it's done, many providers are also have hard time to do the math. It's not easy. And when your brain is already not working, when you're so tired, overwhelmed, just to do those, some of them is like, you know what, just I can do this. We have teach them over and over again how to claim that, but when we do the math for them, some of their mistakes, not even that or that R&Rs can figure it out because they keep making mistakes after mistakes. We need to find a formula, a system that works. It is not working, it is not working. So let's figure it out because it's very unfortunate that we are here, very passionate what we do, but it's out of the cost of our time and effort and we're getting old and we have no benefits that will support us because whatever we are getting that we have fought for and we have made some progress, it's still not going to support when we retire. We're going to continue working until we're very old and sick. Thank you.

Claire Ramsey:

Thanks, Zoila. And I did just want to flag that we will be taking, there are substantive comments about time and input from the comments that we'll be collecting. And in addition to people responding with agreement to comments that are being made verbally. So just want to say we'll be collecting all that as well. Robin, please.

Robin Layton:

Hi. I don't feel I need to address the non-traditional hours. I think my fellow council members did a great job with that. So thank you. I just want to address for the over 400 members of the public that are listening today who may not have been at the last rate panel meeting, the last one, and then the frustration today.

So the frustration then at our last meeting was that it was our last meeting and the project wasn't completed. And what I'm hearing today, so we never got to the true cost, which was what we expected when we were a work group, and then when we became a

panel. And so we never got to the true cost. And what I'm hearing today is, again, that we're done, but we're not done. We're going to have more conversations to get to a phase two, which is the structure. Still not what the rate is.

So what the public needs to know and what our council members do know, and I know that the members of the administration are listening to this. We're done with conversations. We're done with studies. We just need the true cost. So now we're not done. We're not going to have a rate by June 30th. So what's going to happen on July 1st? Are we just going to continue the one time only cost plus? Are we going to continue to hold harmless? We need to until the state can finally get to a new rate that is equal to or higher than the true cost.

It's very simple. Zoila just said it. If you work more than 40 hours, I have to pay you time and a half. If you're a salaried employee, I have to pay you two times the minimum wage. It's simple. Why are we making it so complicated? We know what the rate is. P5 probably has the rate, but for some reason... And it's not up to the administration or this body to say, "Okay, that's the rate. Now go ahead and pay it." We need people to just know what the rate is and then the legislature can decide if that's their priority, they can fund it. They can figure out how to fund it.

So I believe that we are done with conversations. It's really, really unfortunate. And just to remind everybody, this time next year, we're going to know who a new governor is. So this process is going to start all over again. So I guess what our goal now is, and this will come out of whoever's going to help us with the budget letter, we just need to put in the letter what the rate should be, continue to hold harmless, continue those one-time only monies, whatever it takes to keep us serving California so that Californians can go to work. That's what we do. The providers are the ones that are allowing Californians to go to work. Thank you for letting me get on my soapbox.

Claire Ramsey:

Thank you, Robin. We always appreciate your feedback, and all the council members' feedback. Donna, let us have your comment, and then I'll turn it back to Deborah.

Donna Sneeringer:

So thank you. And I apologize for being a little late to the meeting, but I did want to weigh in on a couple of things. As a program administrator who makes payments for over 60,000 kids every month, there are a huge number of families that use non-traditional hours of care. It is the hardest type of care to find, and it is the most complex for providers to provide. And I think we have to place a value on it that allows families to be able to purchase care in these non-traditional hours because if it's not financially feasible for providers, as Zoila said, they have to meet all the complex requirements that the state has in place for employment, and we have to take all of that into account.

The other thing is just also to underscore something Zoila said, this has gotten so complex. It is so complicated. And we have been doing a lot of work looking at just the dollars we have to process to put out the door. And in addition to, we make a payment,

then we make a cost of care payment, and then we have all these other add-ons that happen. And how anyone can ever understand what they're getting paid per child, I have no idea. And I apologize to the providers. I think agencies like mine are doing the best we can to try to explain it and to get them out quickly and get the work done, but this has gotten out of hand. I mean, it has just gotten completely unreasonable.

And then I just want to underscore Robin, as someone who's been on both of the rate and quality advisory groups, we didn't finish our job, and much of what the state submitted to ACF were not things we had agreed to. I have significant concerns about the policies that are in the document, including the inclusion of four-year-olds in TK as school-aged children. The regions are very odd and we are not comfortable. And I think we were pretty outspoken at the rate and quality meeting, and I just want to make sure that the folks who are participating in this group know that the group that has done that work for two years did not leave that process happy. And we are eager to be continuing the conversation, but also know you're going into a budget year that's going to be really tough, and there aren't dollars to implement what you're talking about. So that's the other thing.

And then my last is a question that, if you can't answer it today, that's fine. But my understanding is that we have to do a new cost study because the federal government requires these to be done every so often. And I think we're coming up on when the cost study that was done is going to be too old to use. I think it would be helpful for the public and for this group to understand the parameters of that. So I don't know when that would be appropriate, but really think that people need to understand that timeline as well.

Claire Ramsey:

Thanks, Donna. Appreciate the feedback. I want to acknowledge we're at 10:18. We are going to go with the segment until about 10:27. I know Mary has her hand up. I'd like to let Deborah just highlight the next section for consideration. And then Mary, you will be first, and you're welcome to obviously talk about anything that's come before, including the non-traditional hours. So let me turn it to Deborah to quickly go to the next segment.

- [Presentation Continued](#)

Deborah Rawson:

Thank you, Claire. So the next segment is about enhanced inclusion under the single rate structure. Next slide, please. So currently, contractors that use the RMR may only apply exceptional needs or severely disabled adjustment factors when there is an active IFSP or IEP, and documentation that additional services and/or accommodations for the child are being provided, and such services and/or accommodations result in an ongoing financial impact to the provider.

Providers that participate in a family child care home education network, or a FCCHEN, through CCTR or CMIG programs receive the adjustment factor if there is an active IEP or IFSP in the child's file, an assigned statement of need for special attention in the child

care setting by a legally qualified professional. As the adjustment factor for infants and toddlers is higher than the one for exceptional needs, providers may only claim one adjustment factor. CDSS does not see this as a commonly applied adjustment factor. And for CSPP, under the single standard reimbursement rate, the adjustment factor is applied if there is an active IEP on file. Next slide, please.

Claire Ramsey:

Oh, could you just, I'm sorry, could you just give what the acronym IFSP-

Deborah Rawson:

Sure, sure. So an IFSP is an individual family service plan, and an IEP is an individual education plan. Next slide, please. Oh, already there. This slide describes how inclusion services are treated in the cost model. For licensed providers, the base output covers costs associated with building the general capacity to serve children with inclusion needs. This might include, for example, the cost of training staff to work with children with disabilities or developmental delays. Additionally, the enhanced inclusion cost output can be claimed to provide inclusion services to a specific child based on that child's eligibility. Next slide, please.

So similar to NTH, we have a set of questions that we'd like to ask for feedback. Question number one, what are your initial thoughts about enhanced inclusion being included in the single rate structure? What are the opportunities and challenges of including enhanced inclusion in the single rate structure? And are there any unintended consequences that may impact the field negatively? Who should be eligible for the enhanced inclusion rate, and what documentation should be considered to demonstrate that eligibility for the enhanced inclusion? What challenges do families... eligibility for these supportive services? And what can help mitigate the challenges so the field, children, and families receive the support, necessary care and services that they need? And finally, from a contractor's perspective, what enhanced inclusion rate policy would be better or easier to administer and automate? Again, we have about five minutes left of this segment, and we hope to use that to continue to hear your feedback.

- **Council Discussion**

Claire Ramsey:

Thanks so much, Deborah. And I just want to acknowledge that is a lot of questions, and we are going to be providing the email address that anyone can use to submit feedback on these questions or on their thoughts on these topics to the Department of Social Services for further consideration. And Jackie has just put that in the chat. Mary, I did want to check to see if you wanted... I see your hand came down. Oh, no, no, your hand's still up. Please, Mary, you go first.

Mary Ignatius:

I'll defer to Natalie and Andrea right now, and if there's time, I'd like to finish.

Claire Ramsey:

Great. I'll come back to you if there's time. Natali, please.

Natali Gaxiola:

Hi, everyone. This particular topic is something that I know that for all of us in the early childhood field is a very important topic with the idea of inclusion, and what that actually really looks like. But because we're usually the first people who support children outside of the home, we also find that there's a lot of unidentified needs. So I'm wondering if that was considered. Because I see that it's identifying if they have an IEP or IFSP, but in the process of receiving that, or in the process of going through attaining that, has there been consideration in regards to the support needed?

So in regards to the single rate structure, I'm wondering if these spaces, and I'm talking about either home care, or I work for a state preschool, are supporting kids with very high needs, even if they're not identified yet. So I'm wondering if that's been something that's been considered. And then the second part to that was, in regards to providing professional development for people servicing these children, there is such a wide range in regards to needs at this time. So I wonder if thought has been given to what that training looks like and what are the possibilities and yet the limitations still with that. So I know that's a lot of questions, but those are my questions and/or concerns in regards to this.

Claire Ramsey:

Thanks, Natali. I'm going to move on to Andrea to make sure we can get her comments in as well. And if we have a chance, we'll see if we can answer any of those questions.

Andrea Fernandez Mendoza:

Good morning again, and thank you. This is a lot of information. I appreciate that we're going to have the opportunity to send written comments to the email address. One, several things really quickly. Our initial thoughts, the enhanced inclusion is necessary. The fact is children today have more needs than they've ever had in the past 32 years that I've been doing this. There is not enough professional development targeted to family child care homes, classrooms, family, friend, and neighbor to meet the needs of the children that we serve every day, more needs than I'd have ever imagined in my entire career.

One of the other issues that we've had is we identify, we get them assessed. That in itself is a long process because unifieds are severely behind and have a hard time keeping up with all of the different needs that we're trying to get met. Then when they do finally have an IEP, they are usually taken to the unifieds. And so we lose that child in our program.

One of the other things is that one of the issues that providers are having in order to even be eligible for what is included right now is that it has to be an IEP or an IFSP for most programs. One of the things that really needs to be looked at and considered is families need a choice when they're getting services for their child and what works for their child. And so we have families that have services through their doctor, their

provider, their medical insurance, and those are not allocated as qualifying for this. So we really need to take a hard look at providing access to all families with what they're comfortable with and how their child needs are met. So again, we have a lot of work to do around this. There's a lot of challenges that the providers, including centers, families, family child care homes, that are needed because of these issues.

And so one of the unintended consequences possibly could make this worse without really looking at the system and how we can best support the children and their families in getting services. And the support that the staff need because our staff are not trained very well. Yes, we provide it for our staff, but I know across the board it is hard to access and it is hard to make sure that staff understand the individual needs of each of these children. All children are different. They come with different needs. Their IEPs all have different goals and activities that need to support that. And so training those staff and the providers to meet those needs is nuanced, and there's not enough right now. I appreciate the time.

Claire Ramsey:

Thank you, Andrea. Yenni.

Yenni Rivera:

Thank you. I'm very passionate about this subject, so I'll try to get all my thoughts together. But kind of piggyback what a lot of my colleagues are saying, my peers are saying. First of all, there's a lot of time and work that is not being, I think, considered. For example, not only the training, but what you need to invest. For example, some of the children need one-on-one time, need the extra support, need extra material, different kind of material.

There's a lot of extras and extras that are attached to when you want to provide wraparound services, when you want to be equitable, when you want to provide sensitivity to children who are not just have learning disabilities, but also need that mental support, which does affect learning. We know this because as adults, when we get in depression, when we have things go to trauma, we shut down. And so you imagine the two, three-year-olds, how they react. I mean, it took me, to piggyback what was said, it took me fighting for my child since he was two years old, because I recognized the symptoms, but it took me two and a half years to finally get him the support, the 504 file.

But in the meantime, my provider didn't fall behind. My provider was not going to wait till the documents were approved, till the documents came through, till the appointments and evaluations came through. No. My provider and the caregiver made sure that my child was not left behind, made sure that my child got the support that they needed. And there's a lot of children like that who have anxiety disorder, who have PTSD, who have selective mutism, which does affect your learning. Things like homelessness, surviving homelessness, surviving DV, surviving violence, surviving low income, surviving separation of families. All these things affect and are connecting to learning.

This is why I'm upset and I think it's ridiculous that 504 files are not considered part of this plan. Why? Because 504 files are for children who the state and the federal hasn't approved yet that their disability is approved. Well, I'm sorry, but a child who is not able to learn because they shut down, they freeze, they don't know what to do. There's too much input going on at one moment because of the mental health disability going through does affect their learning should be considered. Not just IEP, not just ISP, but 504 files, which is what I had to fight. Ridiculous. But that one took me four and a half years to finally get through, get it approved. And he had to repeat kinder.

So if our own districts and federally cannot even adjust, I mean, if we don't adjust since the beginning at one, two, three years old when we're recognizing these problems, again, we're going to have children, and I love what Tonya said is systemic, and we're keeping children who are already affected and families who are already affected. Redlining. Again, redlining. That's all it is, redlining. And so we need to consider that. We need to consider that providers and caregivers do give that attention and that need way before documents get approved, way before evaluations. With insurance, it has taken me a month and a half to get him his new therapy. A disclosure, right? And I disclose and I use myself as an example because I do afford insurance. But imagine those who don't.

I remember when I was in Medi-Cal, it used to take me three to four months to be able to get appointments. It took me six months for LAUSD, and mind you, I'm in a big county, but for LAUSD to finally give me that date, that appointment for my child to be evaluated. That's how slow it is. Plus you're waiting for documentations. Where do you take them? And by the time you hand them over to your provider, then your provider has to hand it over to the agency, the agent... You see what I mean? It goes from hand to hand to hand.

If there was a way to submit documents a little more quicker, that will help us well because it gets delayed. Meantime, caregivers are given the care that our children need. So there's a lot of... Also, last thing, what is considered limitation? That's another thing. Families see it. They might go through the whole hurdle, whole year, and then they get denied. "Oh, this is not... Yeah, sorry, your caregiver is giving the extra support. Yeah, sorry, you don't qualify." I'm sorry, what? Any mental capacity should be considered qualification because it's giving that extra support to those children.

Claire Ramsey:

Thanks, Yenni. Appreciate all the points you raised, and lifting up your own experiences with this process and where it was not working well for your family. Thank you to everyone for that really robust and thoughtful feedback on these items. Jackie, did you want to say anything to close out?

Jackie Barocio:

Yeah, I just wanted to circle back to a couple of questions that came up. I'm going to put in the chat the link to our cost estimation model report that describes in detail the child care rate gap analysis. And I think, Jeanna, we did look back at that report and

confirmed that those regional outputs in all cases for infants and toddlers, those regional outputs were always lower. Or were always higher. Sorry, the bar charts are confusing me. The cost outputs were always higher than current reimbursement rates in those regional categories. So I will drop it, the link in the chat. Jeanna, let me know if I captured that correctly. Okay, thank you. I see a head nod.

And then I just also wanted to really appreciate, again, as we're structuring these conversations, we both present how these topics are currently dealt with in the regional market rate and standard reimbursement rate, and then highlight how they were defined in the cost model that again is based off of program requirements. And what we've heard is, across the board, those may not be sufficient or accurately capture what folks want to see in a unified, uniform standard, a single rate structure.

So we hope through these conversations we can identify what are the current gaps. And while a program rule may say one thing, like in terms of a child that's enrolled in TK may technically be deemed as only needing school age ratios, I think what we heard in the prior RKP meeting space was, but from a single rate structure, do we need to deviate from that age definition and take a different approach? So I just wanted to highlight how these conversations can highlight those necessary areas where folks feel like we need to deviate either from current systems or how a program requirement is technically structured.

Claire Ramsey:

Thank you, Jackie. And Deborah, I do see your hand up. We really do need to close the segment, so I want to encourage you to put any additional comment related to this in the chat. And again, we will capture all the chat. We are going to take a 10-minute break now, so we will return at 10:45, and have our presentation from Caroline Danielson. And we're looking forward to that. So be back in 10 minutes and thank you all for the robust conversation.

BREAK

Claire Ramsey:

Everyone, thank you again for that very engaging last session. Now we're going to turn to a guest speaker we have to discuss California's changing child care landscape. We're really pleased to welcome Caroline Danielson, who was the lead author of the study, and is here to share some of the results today on the recent study called California's Changing Child Care Landscape, published by the Public Policy Institute of California. And with that, I'll welcome Caroline and turn it over to her for her presentation. Thank you again for being here.

3. California's Changing Child Care Landscape

- Presentation

Caroline Danielson:

Thank you. Thank you so much for the opportunity. So my name is Caroline Danielson. I'm a senior researcher at the Public Policy Institute of California, and I'd like to acknowledge my co-authors on this work, who are Laura Hill, Brett Guinan, Patty Malagon, Joe Hayes, and Anna Allison.

So my plan for today is to present some background on this research, but also to engage in a couple of sessions of discussion to get some feedback and input. This is an ongoing project, and you all are experts in this area, and I really appreciate the opportunity. Looking forward to getting your thoughts.

So to start, next slide, please, some background first, next slide, about PPIC, my organization. We are a nonprofit, nonpartisan public policy think tank with a focus on California with a mission of improving policymaking through independent objective research. And we've been around since 1994. This grant, next slide please, is funded through the US Department of Health and Human Services. It's a four-year grant, and we are about halfway through. The grantee collaborative that we meet with monthly includes other states, the District of Columbia and the Tribal Child Care Association of California are all grantees.

We are all considering questions around payment policies in the Child Care Development Fund Program and its relationship to child care access in our various jurisdictions, but we consider it from different angles. At PPIC, we have a lead agency partner, which is the California Department of Social Services, and we also have a contractor, Mission Analytics. I do want to say though that the positions and the findings and the opinions in the paper and the report and all of our work are solely the positions of the authors, and do not reflect at all on any positions of the Federal Department of Health and Human Services or the State Department of Social Services.

Before we get into the substance of the presentation, I wanted to mention that we have some key data sources we used in this report. So we use census population data to gauge the size of the child zero to five population. Our focus is on that young child population in this work. And also on the community care licensing division data to understand the licensed child care provider landscape better. And we also include TK enrollments from the California Department of Education.

We did some data collection as well. We conducted a survey in the summer of 2024 where we surveyed local R&R, or resource and referral agencies, alternative payment provider agencies, and local planning councils. Our contractor also collected data in the form of focus groups. We had five focus groups with providers and five with parents who have experience with the child care subsidy system. That's how they were selected to be included in the focus groups.

Oh, just to back up, in the survey, we had 102 responses across those that we invited to participate in the survey, and that reflected a 53% response rate, and we had responses from 54 of the 58 counties. In terms of the focus groups, as I mentioned, we conducted five for providers and five for families. They were conducted in Humboldt, Imperial,

Kern, Los Angeles, and San Mateo counties, and those were also conducted in the summer of 2024. Next slide, please.

So more on the current study, California's Changing Child Care Landscape. And I should mention that all of our work at PPIC is publicly available on our website. So if you'd like to learn more about this work, please do this at our website, www.ppic.org, and you can find the full report there and technical appendices. Next slide.

So the motivation for this work was coming out of the pandemic and new state investments in early care and education, and the development of the alternative methodology. The landscape of early care and education has shifted in ways that have to do with cost pressures, family experiences, population changes, and in state policy changes. So what are these notable changes and how are families and providers experiencing them? So we're using these secondary data sources I mentioned to address these questions. And we do look back about a decade, but we also focus as much as possible on the recent time period. Much of our data collection is from 2024. Next slide.

So just to set the backdrop, something that is, I'm sure, well known to this group, that from the family perspective, child care is important for many families to support children's development and future success, but also to support parents' employment. Just looking at regional market rates, the RMR survey, and we know that this is a historical method that the state has used and does not reflect the cost of care methodology that is in process.

But just looking at that and looking at median costs and comparing that to median family incomes from the census, we see that already care is expensive, ranging from 6 to 28% of typical family incomes across the state. Care tends to be more expensive in higher income areas. However, families spend a higher percentage of their incomes on child care in low-income counties, even though care may cost less. So for example, in a low-income county, infant care averages about 26% in our work, we find, 20% of family income at the median, but it's 19% in a high-income county.

Perhaps because of this expense and the importance to families, PPIC's statewide survey finds that three-quarters of Californians support more public funding for child care to help parents work. This is higher than the share that support publicly funded free tuition at the state's two and four-year colleges. That share is about 66%. And this is from a survey conducted by my organization of adults in California, a sample of adults in California last year. Next slide, please.

So just looking at the bird's eye view of the funding landscape in California, and showing across the past 10 or so years from 2015-16 to the 2024-25 budget, and in blue showing state funds, in dark blue and light blue, and in orange showing federal funds. All of these numbers are adjusted for inflation, so they are comparable over time taking out the role of inflation. What we see is we see an increase from about 10 years ago of a little over \$4 billion in early child care and education investments by the state and

federal governments, up to about a little under 12 billion in the most recent, not the current budget, but the previous year's budget.

Large increases happened during the pandemic, and a lot of that was initially driven by federal investments that have lapsed. However, the state has put in funds to keep that level of funding over that we saw in 2022-23, at roughly the same level. And Proposition 98 General Fund is largely TK, and we do see that dark blue section of the bars increasing. However, we also see other state funds increasing as well, and even at a higher rate than TK spending. Next slide, please.

So turning to our survey, a majority of respondents to our survey say that subsidized care has become more affordable. 54% say it has become more affordable, 11% say it is about the same, and 35% say it has declined. And the question we asked was, in your opinion, has the affordability of subsidized child care for children zero to five changed in recent years? However, if we look, drill deeper and ask about ages of children, next slide please, we see that there's some substantial variation. So the affordability of child care has increased response was only 31% for infants, and then went up to already almost 80% for preschool-aged children. And toddlers were in between. So perhaps reflecting the state's investments in preschool, and in TK, the respondents indicated that the increases in affordability were most prevalent for older children, preschool aged. Next slide.

In our focus groups, Family Fee reductions we're often cited, and here's a quote from a parent in San Mateo County. "When they stopped co-payments during COVID-19, it made a big difference. I could save that money for other things we needed." So here, when parents are talking about co-payments, they are meaning Family Fees. And we also heard that, from our survey, that one of the important reasons for why care has become more affordable was the Family Fee Waivers during the pandemic. So Family Fees is an important piece of this puzzle, we believe, in terms of increasing our affordability. Next slide.

However, turning to another aspect of the picture of the provider landscape, of staff turnover, we found that about almost half of the agency surveyed perceived that there had been increased turnover during the period. So the question was, "In your opinion, has the supply of subsidized child care"... I'm sorry, that's the wrong question. "Has turnover increased among your staff?" And we found that opinion was fairly evenly divided, but there was definitely the most common response, 47% believed that turnover had increased. And those who reported an increase in turnover most commonly cited staff wages, working conditions as benefits, as well as general economic considerations, so competing other jobs as drivers. Next slide, please.

Okay. Turning to the bird's-eye view of the provider picture and the child population. So the green line at the top is the population of children, up to age five in California from census data from the American Community Survey in specific. And the bars below show center capacity in orange, family home capacity, both large and small family home, in dark blue, and then light blue is TK enrollments. And what we see is that the overall

picture is one of increasing capacity, and a large part of that increase is due to TK expansion over the recent years.

A big change also from this bird's eye view is the declining population of young children that leads to a narrowing of the gap between the overall number of children and childcare capacity. We're not measuring the true extent of unmet need here, we're just measuring the gap between license capacity and children because we're able to measure in this study parental choices or the, due to data limitations, family friend and neighbor care.

Okay. Turning a little bit more specifically to licensed care in centers and family homes, and showing again over the past 10 years. In orange, we have centers, and in blue, we have family homes, both large and small. And we're showing the change in the number of each type. I'm sorry. And change in provider capacity, not the number of homes or centers, but the change in child capacity.

What we see, just looking back over a decade, is that before the pandemic there was a pattern in most years of increasing capacity in centers and declining capacity in family homes. Then during the, in 2020, we saw a decline in both types of providers, but the decline was larger for family homes. We see that continuing in 2021, and then we start to see it reverse for family homes in 2022. And in '23 and 24, we're actually seeing increases in family home capacity and small changes in center-based capacity.

So from the perspective of openings and closings, thanks, this picture here is just showing the number of providers that opened or closed by each year. So we're seeing a lot of less turnover in centers. It's very low, under 1,000 providers per year or under 500 across the state. In the family home side of the picture, in the blue, the solid line is showing openings, and the dotted line is showing closing. So you see back before the pandemic, this higher number of closings, and that's leading to the lower capacity in family homes in five years prior to the pandemic is starting to even out around 2020. And then what we start to see is that family homes are not closing, a slight uptick in closings, but what we're seeing is a bigger increase in openings. And so that's what's driving is we're getting new providers into the licensing picture.

I will say that what this means for family homes in terms of the numbers and the fact that the lines are higher is that there's just higher turnover, that these are dynamic businesses opening and closing at quite a much higher rate than what you see for centers.

Okay, next slide. So perceptions of the investments vary. And so turning back to our data collection. Next slide, please. When we asked our survey respondents, "In your opinion, has the supply of subsidized child care versus children zero to five changed recently," over half, 55%, said that it had decreased recently. So this is in the summer of 2024, felt that the supply of subsidized providers had decreased recently, and only 30% thought it had increased, and 15% thought it had remained about the same.

So turning to the next slide. Here, I'd like to pause and invite some input and discussion from the room and the Zoom, of course. Our research found in the licensing data that we see recently some increased child care spaces and particularly in the family home piece of the equation. However, we see in our data collection that there's a perception that supply of providers is declining.

So it would be so informative for our work going forward to understand from your experience what aspects of the picture resonate, and if you could also, what are the implications for policy of your responses to this picture of turnover and of change in supply among licensed providers.

- **Council Discussion**

Karin Bloomer:

And Caroline, I'm happy to look for raised hands in the room and-

Caroline Danielson:

Thank you.

Karin Bloomer:

... virtually.

Claire Ramsey:

And I did just want to flag, there was a request for the link to the report, and it has been put in the chat.

Caroline Danielson:

Oh, thank you. Thank you so much. Thank you for that question, Andrea.

Karin Bloomer:

I'm so sorry, Caroline. Do you see Andrea's hand up? And there are also some questions in the chat. Members should feel free to ask them verbally as well or we can look through them.

Claire Ramsey:

Andrea, please go ahead.

Andrea Fernandez Mendoza:

Okay, thank you. So just looking at your discussion prompts, one of the... And I'm speaking from personal experience as a contractor who has center-based programs, and what we've been doing, the trend has been to either open or relicense centers. And one of the things that resonated with me in the picture of the graph of the opening and closing was the difficulty it is to open a center or relicense a center. There are many hurdles that have to be overcome. And even with someone who has been doing this for many, many years, still face challenges in the system itself.

So that worries me for the providers that are trying to do this and for the center-based contractors that are trying to do this, if they're facing some of the challenges that I face, and I'm very verbal and very open to challenging the norm and advocating for myself and my program, but I worry about... And I think that's why you won't see as much center development space for licensed centers is very hard to come by.

And the effort, the funding, and the hard work it takes to get it up and running is very time-consuming. One project that I had worked on took over a year to get it relicensed. I've been in talks to get another one opened, and it's already been almost two years. So these are issues that the field is facing, so you're not going to see as much growth in centers or child care center spaces.

But going back to the Family Child Care homes, it worries me that they're facing some of these things with licensing and getting their centers, their homes licensed as well. I hope that's not the case, but speaking from the center side of the world, that's something that I've faced. And so I think in really looking at how the system is working and maybe some policy changes or policy advocacy around training, there really needs to be some changes because I think those factors are affecting both small Family Child Care homes, large ones, and centers.

Karin Bloomer:

Thanks, Andrea. Caroline, see four more hands already. Deborah Corley Marzett is next.

Deborah Corley-Marzett:

Thank you for that. First I want to ask the question, in the definition of Family Child Care, does it include both licensed as well as exempt providers?

Caroline Danielson:

Only licensed are reflected in the charts that I showed you.

Deborah Corley-Marzett:

Okay, so exempt providers are not included in this at all?

Caroline Danielson:

Are not included in that chart. That's correct.

Deborah Corley-Marzett:

Okay. And I also, I see your chart that you provided for licensing data that shows growth in the number of new family home providers.

Caroline Danielson:

That's what we see.

Deborah Corley-Marzett:

Right. But at the same time, we know that providers are closing their doors, those providers that have been here for X amount of years who have been going through all those struggles. And I would say a part of that growth would no doubt, of course, would be brand new providers that not as quite aware of the issues and the struggles that we go through and those who are falling off has called it a day and said they can no longer remain open. And that's probably why you're seeing an uptick for those providers who are coming in new to the game. So I would be interested to follow those people and see exactly what happens in the next few years. That's my comment on this one. Thank you.

Karin Bloomer:

Thank you, Miss Deborah. Zoila Toma, your hand is next.

Zoila Carolina Toma:

Thank you. I'm going to follow up a little bit on Deborah. I also feel like since we've been also providing trainings to FFNs and actual licensed providers about how to run their business through the, our CCPU Training Fund, that means also that some of these providers are might not be completely new. They might be just non-licensed, becoming licensed. So that will be something good to learn to see that they're truly new, brand new to the field, and they're going to try the industry. But I also feel that it's providers that have been here just not licensed, turn into licensed.

And yes, what Andrea mentioned, unfortunately it is it very difficult to navigate licensing. I moved three years ago during the pandemic, and the process every time is different, and the rules from Title XXII are the same, but there are very many gray areas. And even when they come to visit, one analyst will tell you one thing and another one will tell you something else.

And I've been also working with educators to get their own license, and I've been being there through the process helping them how navigate sometime because of the language barrier. And I'm like, I have never, ever faced certain things, and I'm like, that's new. Because it's interpretation, but to whose interpretation? Our as educator or to the analyst's interpretation? So that's also something that we need to work really hard, and I've been pushing it, but seems like it's so much to do that it's so hard to get to all these issues that we need to fix. Title XXII is not working, so we need to just get to all this. Thank you.

Karin Bloomer:

Thanks, Zoila. Two more hands, and there's a couple of questions in the chat, and I know Caroline has some more data to share and some more input to gather, so we'll turn to Lissete Frausto next.

Lissete Frausto:

Thank you. Good morning, everyone. As always, I'm here speaking as a parent and for many other parents as well. Like you mentioned, child care is expensive, and it's not affordable for many families, especially during these times. Families are struggling to survive, so they need child care to be able to continue providing for their families.

And there are programs that help families access no-cost or low-cost care, but there are also programs that help cover some of the child care costs. But then, again, families have what's called the co-pay or the Family Fees, and many times these co-pays are about \$300 a month. So if a family has multiple children, that's a couple hundred dollars. So basically families are working to survive and to be able to pay for child care. So like I've always said, all children and families deserve to have that access, especially high-quality child care and early childhood education, and more especially, we also need to secure the infant and toddler care.

We're having a lot of four-year-olds that are now going into TK and we need to make sure that we support programs to expand the infant and toddler care and by lowering the barriers and to continue with the release of the 200K child care slots that were promised 2021. We still have a lot of families that are waiting to receive care to be able to, again, provide for their family and then to support the economy. But we need to make sure that we prioritize our families and our children, and our providers as well. Like I mentioned earlier in the chat, I have found amazing child care providers, and each day they go above and beyond. I actually just had a talk with my own provider yesterday about the fees for our families and she mentioned that they had to raise their fees, but they have not raised it even more because they know that families are already struggling to pay those co-pays or to pay those Family Fees. And I live in the Central Valley, so I have noticed a difference of different counties and accessing the programs and what programs get paid. So there is a huge need to be able to support families, our ECE workforce, and also our Family Child Care providers as well. Thank you.

Karin Bloomer:

Thanks, Lizette. Okay, we'll take Donna Sneeringer's hand, and then we'll go through a couple of quick questions in the comments and move on to the next slide, Caroline.

Donna Sneeringer:

Thank you so much for all the work on this report. I did want to just raise that there are a lot of external factors that impact the childcare supply and the availability of care. One that I wanted to lift up is that childcare providers are running businesses, small businesses in California, and they're facing a lot of the increased costs and complexity around hiring and employment, as well as just cost of insurance, cost of security, all the different things that go into this. And they create additional pressures on our, particularly our center-based providers, but also family childcare. And I think we often look at childcare in a vacuum of just looking at childcare and not understanding that they are having to exist in the business ecosystem of the state. So I wanted to raise that.

Also, the workforce demands post-pandemic, we haven't settled out yet. And I know that we had a lot of folks who went to remote work. We had a lot of essential workers who were always in person, often low income families, but there is still this shaking out of hybrid work, in-office work, work in service industries in 24/7 economy, and it's very fluid and that really does drive many families to using both Family Child Care and Family, Friend, and Neighbor care because of the flexibility to adapt to their work needs.

So I think that this can't be a point in time study because I don't know that we have a new normal. I don't know that there will be a new normal. I think it is an evolving process. And I just want to flag that we've done quite a bit of work looking at childcare deserts in California, and then doing an overlay of Family, Friend, and Neighbor on top of them because it does change the picture when you add that informal care piece and you can see where it does mitigate some of the childcare desert issues and not. So we'll definitely reach out to you and share what information we have, but I just wanted to flag those few things.

Karin Bloomer:

Appreciate that. Thank you, Donna.

Okay, Caroline, I'll try to do this very quickly. A couple of rapid fire questions. From Mary Ignatius, "The Family Fees were permanently eliminated starting October 1st, 2023, thanks to members of Parent Voices, CCPU, and support from advocacy partners. Is that reflected in your report?"

Caroline Danielson:

So we asked about changes in recent years, pandemic and post-pandemic, in our survey, and what the respondents were mainly referring to was actually the waiver during the pandemic of Family Fees and the new Family Fee policy was I think a little bit less on their minds, but I should have clarified the policies at the outset.

Karin Bloomer:

Thanks, Caroline.

Mary Ignatius:

Yeah, I looked at the link of your report, and there's a footnote that you can then get to that says they were eliminated and capped at 1%.

Karin Bloomer:

Thanks, Mary. And from Andrea Fernandez Mendoza, two questions. "Could the uptick in family childcare homes opening be due to the infrastructure grant?"

Caroline Danielson:

That's a good point. I don't know the answer to that off the top of my head, but I think that's a factor to take into consideration. Thank you for that.

Karin Bloomer:

And then secondly, "What was the time period the survey participants were asked to reflect on or consider?"

Caroline Danielson:

We didn't put a specific timeframe on it, we wanted to know in your recent experience, so I would say it would be 2021 to 2024.

Karin Bloomer:

All right, Caroline, I'm going to move to the next slide. I know you have more to cover.

- [Presentation Continued](#)

Caroline Danielson:

Actually, why don't you skip the next slide because that's really the previous topic. We got lots of good input, so thank you, everyone, for that. Those comments are really helpful. I took notes.

So turning to TK for a few slides. We, in our survey, did ask about TK expansion. We asked several questions including, "Are children leaving to attend TK?" "Are children enrolling in both TK and childcare?" And, "Are you seeing effects of TK on the ability of providers to stop childcare programs?" And in all cases, we saw that the sum, or a lot responses were well above half, at least 80% said some were a lot. And particularly for children leaving for TK, we saw half saying that a lot of children who are age-eligible leaving to attend TK. So it is a big factor in our survey respondents' minds, this new policy and full rollout of TK. Next slide, please.

So not surprisingly, or as in tandem, they reported placing fewer four-year-olds, more three-year-olds, more toddlers, and more infants. And we note in our report that the shift in composition, and I think we're the only ones that may present difficulties for providers. For example, staffing ratios are different for different ages of children. Also, licensing requirements, training, experience for caring for younger children. Thinking about, as one member mentioned, that these are small businesses where figuring out how to run the business is a major factor in being able to keep your doors open. So these were all challenges that we heard in our data collection and that could be presented for providers. Next slide, please.

Looking at our focus groups, providers also saw substantial changes when we asked them. From San Mateo, "TK is really crushing us. Families are moving their olds to TK, and it's taking a lot of our preschool enrollment." In Humboldt, "We might need to take on more infants and toddlers because so many kids are going to TK now, but it's harder work and more expensive to offer infant care."

We also heard support for the idea that TK is helping families. In some cases, it can provide more educational access to families who wouldn't otherwise be able to afford it. That's good for the community. So we also heard some voices for support, but also just underscoring challenges.

On the parental side, talking in focus groups again, we heard some concerns about large class sizes, limited supervision, drop-off policies if young children needed to navigate school grounds independently. We heard some concerns about hours, if they were working and TK couldn't cover the hours they needed. So while in some, while TK is expanding rapidly compared to other sources of care, parents are not always familiar with TK as an option and it's not always preferred.

It certainly makes care more affordable for families, presuming they can get all the before and after school hours they need. And providers in our focus groups were feeling negative impacts of TK on their businesses. And this was echoed by our survey respondents. So we think that, of course, going forward, the state needs to be thinking about how the mixed state's mixed delivery system of care can work for children, families, and providers.

Our discussion prompt here is that we found some pretty multifaceted responses to TK, but really top of mind I would say. And so wanted to open it up for, again, some more input and discussion on your experience and which aspects of the picture that we found resonate with you. And again, your policy guidance, your input on policy guidance regarding supporting an adequate supply of care for infants and toddlers in California.

Claire Ramsey:

Thanks. And I just want to acknowledge we're at 11:21. We're going to keep this item on until 11:30, if that works for you?

Caroline Danielson:

Yeah, absolutely.

Claire Ramsey:

And then we will shift. That will be meaning, our public comment will be a little shorter today at 20 minutes. So thank you. And I'll turn it over to Karen for hands.

- [Council Discussion](#)

Karin Bloomer:

Thanks. For Caroline, our first hand is Zoila.

Zoila Carolina Toma:

We're talking about TK, which is usually ages four to five, right?

Caroline Danielson:

It is.

Zoila Carolina Toma:

But that's not the reality right now. It's we have the preschoolers, and that's three to five. In Los Angeles, we are enrolling mommies to be. So it is not just the TK affecting child care in general, centers, family home-based providers, it's everything. The schools are losing children because they're now homeschooling, leaving the state. There are a lot of factors, but now all the children, doesn't matter the age, are going to public school. So we cannot just focus on TK, we have to focus on every child because this is our reality right now. Thank you.

Karin Bloomer:

Thanks, Zoila. Janet, I see your hand next.

Janet Zamudio:

For the sake of time and to allow for other council members to speak up, I'll be really brief. But just in general want to say TK is having a huge impact on our child care system, period. That's just it. But two things, and specifically on Slide 21, the one that had the 21, I wanted to talk about licensing for a moment because some programs that are trying to move to serve younger children, infants and toddlers, they're waiting a very, very long time to even get licensing out to visit them.

On the Stanford campus, we've been waiting about a year to get one of our classrooms licensed for a toddler option. It is just unthinkable and just horrible when we're able to serve more children and we just cannot because we've been waiting. So the issue with licensing and timeliness needs to be addressed, whether it's the staffing, whatever it is, we just need to be quicker with helping programs, especially if we're thinking about getting licensed for serving the younger population where we know we need care for infants and toddlers.

Another thing on Slide 21 too is the budget impact when you go to serve younger children. I think that's another aspect that really needs to get looked at and incorporated into this report some way, somehow because... or into recommendations or follow up. As you're serving younger children, we know that cost of care is higher. So that's it. Thanks.

Karin Bloomer:

Thanks, Janet. Natali.

Natali Gaxiola:

Well, just to share a little bit of my personal experience as a preschool teacher and seeing the effects of TK and with the expansion, it's also that there's been a lot of movement because we've had even parents unenrolled from TK and bring them back to preschool because of their developmental needs. The beauty and the challenge of early education is that every month matters. That every moment matters with kids that they're developing, that children don't develop in a linear fashion and we can't exactly dictate what skills at what month. There's all these ranges. So that is more of a challenge in the sense of with working with early childhood.

But meeting the needs of kids, it's way more complicated than just creating TK and preschool. And it's a trial and error, and we've seen a lot of movement. So just personal experience, I have kids coming back to preschool from TK because there's certain challenges that they're facing that that environment isn't the most adequate for them at the time.

So I think that there's still a lot to be done in regards to TK. There's still a lot of developmental awareness that needs to happen in these programs. And I think if we would find ways to collaborate with just people who are professionals who've been

experiencing this age group for a much longer time, there would be more of a positive. But I feel like there's a very clear distinction between a TK teacher and a preschool teacher, and it's usually financial implication there. So that was just my 2 cents on this one.

Karin Bloomer:

Thank you, Natali. Donna, and then a council member from the room here. Donna, please go ahead.

Donna Sneeringer:

Yeah, and I mostly will just second what was said by many of my fellow council members. But I want to encourage us as we look at the impacts of TK, not to just look on the impacts to access to care for birth through three. Because school-aged children also use child care, TK children use child care, and particularly for families who work non-traditional hours, work in the 24/7 economy, even if you have a fourth grader, you can't leave them alone at night, on the weekend. When we think about our subsidized child care voucher system, we serve children birth through 12. And I think, yes, we have a shortage of infant toddler care, but the impacts of TK are much more broad than just that piece. And I want us not to lose sight of the full system of services and the impact it has on all kids.

Karin Bloomer:

Thank you, Donna. Stephen Propheter, and then we'll turn it back to you, Caroline, to wrap up. Thank you.

Caroline Danielson:

Wonderful.

Stephen Propheter:

Thank you. I think it's definitely acknowledged that when you introduce a universal program for a certain age group, four-year-old age group, it's going to have impacts on the system. So I think that definitely resonates.

I think one of the things that we're happy to see in the final year of universal implementation, not... When I say final, final has a note of ending something, but I think we continue to grow things. We'll continue to change. So there's a couple of things that I wanted to just lift up. We actually have in TK teacher-child ratios that are like Head Start, so that one to 10 ratio. So that's a thing in all of our TK classrooms this year, which is an important structural equality piece in TK.

And for anyone who maybe wasn't aware, our State Board of Education last week approved guidance for, as part of the follow-up adoption of instructional materials for English Language Arts, English Language Development, inclusive of Transitional Kindergarten. So it's paves the way for adoption of curriculum. So if you're familiar with the TK statute, it says, "The legislative intent is that curriculum is aligned to the preschool and TK Learning Foundations." Our State Board of Education in approving

guidance has taken a step towards bringing one of those domains and having instructional materials that are aligned to the preschool and TK Learning Foundations.

Karin Bloomer:

Thanks, Steve. And Caroline, I'll let you wrap up, and I'll just note that lots of great comments from council members and committee members in the chat that we'll provide to you as well. It's really important.

Caroline Danielson:

Thank you so much. So again, really-

Karin Bloomer:

That will provide to you as well. It's really important.

Caroline Danielson:

Thank you so much. Yes, so again, really appreciate the opportunity to bring this research to the council and to get some input and I look forward to seeing the written comments as well. As the state's implementing the 2020 master plan for early learning and care. It's affecting the whole system. We're seeing at least in the licensing world, in the TK world, that we have a higher supply than in during the pandemic. Focus group participants and survey responses suggest that affordability for families has improved, but we have challenges. We heard on the provider side cost challenges, infant and toddler care challenges and TK is really top of mind. So thank you again. As VPIC, we believe further integrating data access across these complex pieces could help legislators and other stakeholders improve their ability to understand the whole system as it's evolving. So that's one of our recommendations as well. Thank you.

Claire Ramsey:

Thank you Caroline. Really appreciate you bringing the research and thank you to all the council members for that robust engagement. I will turn it to Karin now to highlight we are ending this segment and we'll have another round of public comment in the chat.

Karin Bloomer:

Yes, thanks Claire. We'll open up the chat feature for all public attendees now for the next five minutes on this most recent agenda item as we turn to the next one, agenda item four.

4. Looking Ahead to 2026

- [2026 Meeting Dates](#)

Claire Ramsey:

Thanks Karin. So for our last agenda item, as I mentioned, it's a little bit of a mixed set of topics related to things upcoming in 2026. So first I just want to start by sharing the dates for our upcoming four meetings in 2026. As you see, they mostly are on Thursdays, but there is one Wednesday. So we'll have February 26th, May 27th, August

27th, and November 19th. And all meetings like this year will run from 9 to 12 o'clock. Those dates will also be provided in writing, but wanted to flag those for everyone so that we know we have our calendar set for next year.

- Subcommittee Budget Letter

Claire Ramsey:

Next I want to move on to our subcommittee budget letter. So this last year, as you all know, we continued the tradition of having the council draft, respond to and then submit a budget letter on topics that were relevant to the council and this year we're asking... Last year we had two volunteers who did a wonderful job on that and that was Andrea and Donna and we thank them again for doing that last or... I mean I'm talking about 25, like it's already over. It's not, it's very much not. But the budget session is over for this year and we thank them for drafting and submitting those letters.

We are again looking for two volunteers for the coming years, for the coming 2026 budget and we will basically ask those volunteers, will basically be volunteering to draft the letter, which they will then bring to the February council meeting for feedback and comment and approval and then submission on the budget. I see that we can do this a couple ways. If you would like to raise your hand to indicate you would like to volunteer or if you would like to say in the chat that you're interested in volunteering, we will look for raise hands. See Andrea is volunteering again, which is wonderful. Thank you. Would anyone like to join Andrea to be the second person to support the budget letter? I'm giving everyone a moment to think.

Karin Bloomer:

Can be a subcommittee of one.

Claire Ramsey:

So Andrea, what I would say is just confirming your hand is raised to volunteer, right? I don't want to say you have a question and I told you.

Andrea Fernandez Mendoza:

No I did and I put it in the chat as well.

Claire Ramsey:

Thank you. That is wonderful. We accept your offer to work on the budget letter and I'm just checking to see if we have any other comments in chat.

Karin Bloomer:

I see Zoila's raised hand now.

Claire Ramsey:

Oh great, thank you. I'm having a little... Sorry. I think trouble with sometimes the glare. Yeah, Zoila, wonderful. So Andrea and Zoila, thank you for volunteering. You will be our two-person subcommittee for the budget letter and please let us know if you need

anything to make sure you know what comes next and what the process for the February 26 meeting will look like.

Zoila Carolina Toma:

Thank you.

- [Enacted Legislation Impacting the Council](#)

Claire Ramsey:

Thank you both. And then lastly in this section I do want to talk about two pieces of legislation that were recently enacted that impact the council. So the first is AB495 and I just want to first acknowledge that this is actually a fairly large piece of legislation with a number of different components. I am not speaking to the larger bill right now or to the numerous other components. I am specifically focused on a requirement that the office of the attorney general published model policies limiting assistance with immigration enforcement at licensed child daycare facilities and licensed exempt California state preschool program facilities to the fullest extent possible consistent with federal and state law. Their work requires them to consult with a number of stakeholders which include but are not limited to, child daycare licensees, the Department of Social Services, the Department of Education and our ECPC.

So that is the part of the work that I wanted to lift up to all of you. We were actually able at the Department of Social Services to connect with the attorney general's office on this requirement. We just were able to talk to them this week and to hear that they are going to be under a tight timeline obviously to receive consultation with these different groups and to publish by their required deadline of April 1st. So we should expect more to come on information on how that consultation will work and how they are looking to engage. But we know they're very actively already starting to think through how this will look and the process they will be engaging in for consultation, and we do expect to hear more and we'll be also discussing how best to make sure that council members are kept up abreast of what is happening. So that's a little bit of sort of a status update of more to come, but this requirement is in law and these policies I know are very important to families and to providers and we look forward to the attorney general consulting and to their publishing in April of these model policies.

The next bill I wanted to highlight to make sure everyone was aware of was assembly bill 563 and this bill requires the ECPC, the annual report to be submitted to the appropriate fiscal and policy committees of the legislature and to include at minimum the successes, challenges and gaps in the state's childhood education systems and recommendations to facilitate advancing the state's vision for children, families, and community. And it requires the council to develop policy proposals and budget requests for the legislature to consider related to facility needs, workforce needs and family access. So just want to also flag that we have been publishing an annual report but this formalizes that requirement and adds some specific elements that are being requested

to make sure that those are included and for it to be formally submitted to the legislature.

So I think both bills really represent and reflect the importance of this council on the various policy development that's happening in these different spaces and the expertise and experience that the council members are bringing to topics. So we look forward to both these bills providing for more engagement from the council on important topics related to early childhood education. With that, I will see if there are any questions on either of those two bills. Again, they were mostly just wanted to flag that they were enacted and we expect more to come specifically especially on PB495. And I see Robin's hand up. Thank you.

Robin Layton:

Hi, thanks for bringing these bills to our attention. I think it's important to know that for the past... Since the beginning, the council members have never been involved in the annual report. It's been showed to us after, so I think it's really important that we see a draft before and also I don't believe we've developed proposals. We've only done this budget letter, which really came from a need of not feeling like we were being heard. So I think it's really important that we're a part of reviewing and even maybe adopting the annual report before it gets submitted. And then I put it in the chat, I think for the previous bill, I think that's great. Hopefully that has to do with the fact that we need protections so that they can't enter our schools. Why not invite them to present to us at the February meeting? I think that would be really... If they're now by August 1st supposed to be engaging with us and they've already started, we have a February date so I would strongly suggest that that be put on our agenda.

Claire Ramsey:

Thanks Robin for both pieces of feedback and I just want to say that we did flag for them the February date for their awareness, so they do know that is the next council meeting coming up. So appreciate that. Thank you. Karla?

Karla Pleitéz Howell:

Thank you so much. Really appreciate the sharing of assembly bills. For assembly bill 495, I wanted to share, LAUSD has written a letter to the feds to at least have a safe zone around schools, sharing that in case for folks who are presenting CDE alignment of some of this in regards to what's being requested because there is definitely the fear of entering the schools, but what surrounds the schools and families and parents waiting around would be really terrific to hear more on that alignment and would recommend that we consider a broader scope if possible.

Claire Ramsey:

Thanks Karla, appreciate the feedback. And if you have that resource to also share with the council, that's very helpful. Thank you. And Donna, you'll be our last comment or question for this segment and then we'll move to our final public comment session.

Donna Sneeringer:

Man, I keep coming in last. I wanted to just comment on the AB563. I think this is a real opportunity for the expertise that's part of this council to provide legislative ideas to members of the legislature. I think any of us who've worked in advocacy for any period of time know that there's a scramble every year to try to find legislative bills. They often are not connected to what many of us talk about in this type of setting and it is really an opportunity to craft and lift up ideas that members of the legislature could choose from as they're looking for legislative opportunities.

So I second Robin, I think we need to approach this differently than we have just our regular report and perhaps there needs to be a working session where we can come together and brainstorm what needs to go into the report or some way for us to submit things to be considered for the report. But I do agree that there needs to be much more robust engagement of council members so that the expertise that sits here for several hours quarterly is actually shared with legislative staff and the administration as they're considering policies.

Claire Ramsey:

Thank you Donna. And I realize Janet, you had raised your hand. Do you have something very, very quick for our last comment? I just want to make sure public comment gets-

Janet Zamudio:

Yeah, I do have something very quick and it's also related to this agenda item and that's a workforce registry and just wondering why that timeline got pushed to December and if there's any way that at a county level, counties can help download data for providers in a big download rather than each individual person trying to figure that out on their own. So just wanting to uplift that because I think that's super important and is happening next month that there's kind of a deadline and so is there a process for that? Could there be some leeway around that? So I just wanted to uplift that in this meeting.

Claire Ramsey:

Thanks Janet. We can take that question back and circle back with you on that particular question. All right, with that, thank you all for working through all these different robust agenda items. We had a lot as always on this agenda and appreciate all your thoughtfulness getting through it all. With that I'm going to turn it over to Karen so we can open up general public comment.

5. General Public Comment

Karin Bloomer:

Thank you so much, Chair. We are at this time opening up the chat feature for written comment through the adjournment of today's meeting. If you'd also like to make verbal comment, please use the raise hand feature at the bottom of your Zoom screen and I will call on you one at a time to unmute. We ask that speakers keep their comments to two minutes or less so that we can accommodate as many voices as possible. I'll let you

know when you have 30 seconds left and when your two minutes is up, if again you're going to use up the maximum time. Please understand that public comments are statements submitted for the public record. Counsel members are not in a position to respond to questions or comments at this time. And with that we will take the first raised hand. I see Marcella Graves, we're unmuting you on our end. Please unmute and go ahead.

Marcella Graves:

Yes. Hi everyone. Can you hear me?

Karin Bloomer:

Yes, we can.

Marcella Graves:

Oh yes. Hi. My name is Marcella Graves out of Fresno. I just wanted to say that we still, I'll just keep on saying this, but the true cost of care for providers, us providers, we need fair pay so we can continue to provide quality care and that's what we do. We provide quality care, we go to school trying to keep up with our hours of education and stuff like that and so we put a lot of love in this, a lot of one-on-one and we do a lot of community work for our parents. A lot of parents are in such need of a lot of things like food and stuff for their housing, especially since when the government shut down, I helped a lot of my parents with food and stuff and access, gave them access to a lot of things that were going on like free turkey drives and stuff like that and even took a couple of parents down there to get turkeys. So please think of us providers and the true cost of care and respect and appreciate the work that we do do. Thank you.

Karin Bloomer:

Thank you so much. Crystal Jones, you're next. We're unmuting you on our end. Please unmute and go ahead.

Crystal Jones:

Hi everybody. Just wanted to answer some specific questions in regards to what was asked earlier in regards to what is non-traditional hours, which refers to times outside of the typical nine to five workday. So anything out of the nine to five workday will be considered non-traditional working hours for providers, which refers to evenings, nights, weekends, and holidays. There was another question that asked us what was the stagnation and decrease in family and small child cares. The issue is partnerships, collaboration and the respect for parents and providers. Us making the main thing the main thing and focusing on really meeting the needs of all children and serving all parents. We have to build a system that is in alignment with one need and one focus, that's high quality child care for all children and parents that we serve throughout this state and that will set trends for other areas that we are trendsetters for.

It's critical, and I cannot stress it enough for you guys to really stop the nonsense, stop the conversation, be true to what you promised us in the beginning with contracts, with resources and real partnerships and collaborations from these prime organizations that

get the grants, that get the support, that keep doing their services, but yet denying the small businesses, which we have not enough as you see, we're fighting for rates and improvement, yet still sustaining our children and services with low income, not enough income, going over and beyond to serve children yet don't have what we need personally as leaders and providers. We need direct service contracts like the school districts. We need someone to step up and arise and make this our own type of LEA entity for child care services. Just like Donna said, it don't matter the age. All children need child care and protection to support and strengthen that parent. We as a state, that's our responsibility, that's our purpose, to serve and serve with excellence and provide the services needed for children to thrive and parents to be protected. Thank you.

Karin Bloomer:

Thank you so much. Deo Agustin, we're unmuting you on our end. Please unmute and go ahead. Deo Agustin. Oh please go ahead. Yes.

Deo Agustin:

Hi. Well my name is Saul not Deo. Sorry. My comment to is that a cost of care should be implemented, especially to this economic times that we all child care providers are facing in today's economy. As a Californian we are largest global in the world. So if we want actions, let's put them into... Because at the end of the day, providers have been a strong force on this economy. So this situation many providers are suffering, they're closing their doors. Many of them are basically struggling to stay afloat, using their savings to or savings that they have basically accumulated for these past... Just to keep up to the necessity of the community and especially right now with the dire situation is happening in today's economy. So cost of care, it is needed. We need to put those in action initially for child care providers. And we thank CCPU, the planning committee and all of the work they're basically doing and bringing that information to the committee and especially letting know the state, it's important to bring the cost of care into action into basically to happen. Thank you.

Karin Bloomer:

Thank you so much. Alan Guttman, we're unmuting you on our end. Please unmute and go ahead.

Alan Guttman:

Hi. Thank you for letting me speak for a second. So there was one member who did mention high quality care and education. It's not enough to talk about increasing or decreasing capacity. It's vital that the capacity of high quality early care and education is considered. This may explain why parents and the public perceive a decrease in capacity. Perhaps their perception is a decrease in the capacity of high-quality care and education or care and education that fully meets their needs and is affordable. Finally, California must be as progressive in the area of early care and education as it is when it comes to concern for climate change and environment quality and other standards of living. California is long overdue to unify its early care and education to create and facilitate a genuinely seamless system to best serve children, families, and

all provider options and types. There would be significant savings generated by unifying the system and fully integrating all services through the Department of Education. It's long overdue. It's ironic that this is the area that California lags behind other states. Thanks for your time and happy holidays to all in the community and on the council.

Karin Bloomer:

Thank you. Virginia Robles, we're unmuting you on our end. Please unmute and go ahead.

Virginia Robles:

Hi, my name is Virginia Robles. Can you hear me?

Karin Bloomer:

Yes, we can.

Virginia Robles:

Okay, great. I'm listening to all this and I agree with everybody, but I have one question. It's probably going to take everything off. I was a licensed child care provider, but my landlord kept raising the rent so I had to go unlicensed and of course now I'm doing child care for family and friends and I'm getting half of what I'm getting paid for and I'm working just as hard as I was when I was licensed. I act like a teacher, so I buy my own curriculum to teach the kids and I do all that great stuff because I want to and I love the kids. But my biggest question is when are they going to fix... Right now I'm hitting a hard time. I can't afford to keep paying the rent the way it is. My landlord just keeps raising it over and over in the house right now where it needs a lot of work.

So I'm looking for a place to live. But in these last five months I've had to work as an unlicensed child care provider and I lost all the benefits of being a licensed care provider. Is that ever going to get fixed with the state? And I just want to say that I appreciate everything you guys do. If it wasn't for you guys, I don't think a lot of us would be where we're at. And if there's another number I need to talk to, somebody else I need to talk to connect in regards to that because I basically don't get anything, the healthcare, none of that anymore because I had to go unlicensed. There was a mistake through the state. I told them I wanted to just close down for a little bit, but I didn't want to get rid of my license. They shut my license down. So now I'm in the process of redoing it. But in these last six months, I've been making half the money for the kids and I had to get more kids just to try to make up on what I'm losing.

Karin Bloomer:

Thank you so much for your testimony. Next we'll turn to Liz Scully. We're unmuting you on our end. Please unmute and go ahead.

Liz Scully:

Great. Hi. Thank you. Good morning. My name is Liz Scully. I'm the executive director of the San Mateo County Family Childcare Organization and a former family child care provider in San Mateo County for over 17 years. And I just want to raise a concern or

thought about how we're actually collecting and understanding the data on the number of subsidized child care spaces available in family child care homes. We often hear that there are not enough subsidized spaces, but what I'm trying to understand is how those numbers are being determined. So for example, as a family child care provider, I may be licensed for 14 children, but I may choose to offer only 3 subsidized spaces. So how are we tracking the actual subsidized availability rather than simply just relying on a licensed capacity for these family child care homes?

For my work with many family child care providers across San Mateo County, I believe there are more subsidized spaces available than the current data actually reflects. I know many providers who have openings, particularly for infants and toddlers right now and who are willing and able to take those subsidized families, yet that connection is never happening. So this is where I see a major disconnect. We continue to advocate for more funding to create new subsidized programs because we're told we don't have enough subsidized spots, but many of those spots are already existing in family child care homes. They're just not being filled. I just want to encourage, I think the issue seems to be rather the connection between the resource and referral agencies and the providers who currently have the subsidized openings. So I just would love to encourage us to take a closer look at how we're really collecting and understanding this data. Thank you.

Karin Bloomer:

Thank you. Seeing no more raised hands from the members of the public, I'll turn it back to the Chair.

Claire Ramsey:

Thank you Karin. And thank you to all members of the public who listened in today and to those especially who provided feedback. Appreciate hearing from you always in your participation in this meeting. We do have one raised hand from Socorro Martin, and so since we have a few minutes, we'll be able to call on you before the end of the meeting. Please, Socorro, go ahead.

Socorro Martin:

Thank you so much for the opportunity. Yes, my name is Socorro Martin and I'm a home daycare provider. And sorry, I wasn't able to chime in on a lot of the... As you were going through the meetings. I do believe that I'm fair paid.

I mean even a good example today is even this meeting, being in this meeting, I had to hire two people to come so I could be in this meeting. And it's difficult. It's very hard for us providers to try to even be a part of the community and everything. And also another thing I was going to add, just even the policies with people trying to get new licenses, I have helped many, many providers try to get their license and we all talk, we all have communication and just to hear that this analyst has different rules and regulations and this person requires this. My analyst was at my home almost a year ago. She was here for eight hours and that's unbelievable. I'm trying to cater to what she needs and what I

need to do. It is difficult. It is absolutely difficult, but I just wanted to share that. Thank you so much for everything.

Claire Ramsey:

Thank you Socorro. And we have one last raised hand from council member Mary Ignatius, and we do have time, so we'll... Mary, please.

Mary Ignatius:

Yeah, I'm sorry. I just wanted to wait and now that we had some time... I think for me these last six years on this council have just been, I think it feels like the expertise and the brilliance that comes from this council and from the public comments that we receive from the 300, 400 people that listen in on these topics. I think Serena put it in the chat. There have been so many discussions and then none of that gets reflected into what then comes back to us. What comes back to us is the same questions and you receive the same responses and then the data that PPIC just showed us, showed us exactly what we said the outcomes would be. And so there just feels like, for me, I feel like we keep getting gaslight. The people are speaking truth, and then we come back and we just have the same conversation over and over again.

And I'm really stuck on the regions and how Alameda County got put into region two with these four or five or six other really small counties. It almost feels like there was an intention to put Alameda in that category so that you lowered the reimbursement to what those counties will get. Sometimes I feel like we are adversaries instead of partners and that we are always having to play defense with the decision makers. And it doesn't have to be that way. We are facing so much gaslight from a federal administration who doesn't care about us and we have so much control in California to do it right and to listen to those who are directly impacted to make the system better. And so I just hope... I think Donna's suggestion about vetting legislation here to then go out to lawmakers, to author instead of then fighting through it. And as it goes through the process, we could just all be working so much better together and simpler if we figured out a way to integrate what the experts that you have on this council and the public are saying. And we're all tired. I'm sick right now, but I think we're all tired of the same conversation over and over again. So I just encourage this council, and in the next council with new people coming on that we move to action because otherwise it just feels like a waste of time. Sorry.

Claire Ramsey:

No, thank you Mary. And again, thank you Socorro and Mary for those final council member comments. Thank you all for your service throughout this year of council meetings, of drafting budget letters, of providing feedback in multiple spaces. We do truly appreciate the partnership. We will send out those dates for next year and of course more to come on the two legislative requirements related to the council. With that, I wish you all a very happy Thanksgiving next week, a happy holidays and end of the year. And thank you for all the work you're doing on behalf of families and children in California. So thank you all. With that, I adjourn the meeting.

END OF TRANSCRIPT