

Ensuring Safe and Quality Child Care In Missouri



**Investing in Child Care Today for a
Brighter Future Tomorrow**

June 2019

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ESTABLISHMENT OF THE CHILD CARE WORKING GROUP

Investing in early childhood care and education is essential for Missouri’s current and future workforce. A strong early childhood care and education (ECCE) system is key to attracting new business and skilled workers. Governor Michael Parson envisions a future-ready workforce in Missouri. A well-coordinated, aligned and data-focused early childhood care and education system that ensures quality, access, and efficiency is an essential element of this vision.

On March 4, 2019, Governor Parson announced the creation of the Child Care Working Group. The group is comprised of leadership from the Departments of Health and Senior Services, Social Services, Elementary and Secondary Education, Public Safety, and the Attorney General’s Office. The Child Care Working Group is responsible for providing recommendations to the Governor about how to better ensure safe, quality child care to support Missouri’s workforce by June 1, 2019. The working group reviewed existing statutes, regulations, and initiatives to accomplish this call to action.

“As a parent and a grandparent, I personally know how important it is for parents to have safe child care in place, while they are at work or furthering their education.”

*Governor Mike Parson
News Tribune March 5, 2019*

While many child care providers provide quality care, one child hurt is one child too many. The safety, protection, and well-being of children are a priority. As we look to the future, we must put our most vulnerable first. We also realize creating a safe child care infrastructure is a vital component of strengthening our state’s workforce.



EXECUTIVE SUMMARY

- Safe and quality child care is essential to supporting Missouri's current and future workforce.
- The lack of affordable, high-quality child care has become a barrier to parents' participation in the workforce.
- Missouri has several safety and quality initiatives underway.
- Statutory and rule changes are vital to improve the safety and quality of child care in Missouri.
- A robust comprehensive background screening for all individuals with access to children, in child care, is crucial.
- A review of the existing early childhood care and education system is paramount to improve safety and quality in child care.
- The integration of the existing early childhood care and education system is key to reducing duplication of efforts and to improving efficiencies and effectiveness of the system.
- A streamlined statewide professional development system is important for a strong early childhood care and education workforce.



CHILD CARE QUICK FACTS

- The Early Childhood Agenda for Governor's in 2019 report states, "States need to increase investments in early childhood." (Nova, December 2018)
- Families need affordable, high-quality early childhood programs.
- The lack of affordable, high-quality child care has become a barrier to parents' participation in the workforce. (Schochet, October 30, 2017)
- For every \$1 invested in early childhood care and education in Missouri, an additional 87 cents are generated for a total of \$1.87 in new spending in the state. (Stephanie Schaefer, Susan Gates and Mike Kiernan, 2013)
- Early childhood care and education are critical to Missouri's economic growth. (Stephanie Schaefer, Susan Gates and Mike Kiernan, 2013)
- Background checks, professional development opportunities, and staff to child ratios are essential to safety and quality. (Schochet, October 30, 2017)
- The Department of Health and Senior Services (DHSS), is responsible for regulating approximately 3,500 child care providers. (DHSS, May 2019)
- In SFY'18, DHSS conducted 8,016 inspections. (DHSS, 2019)
- In SFY'18, DHSS conducted 1,541 complaint investigations. 40% (615) were substantiated. (DHSS, 2019)
- The average caseload size for a DHSS licensing specialist is 73. The National Association of Regulatory Administration (NARA) recommends a caseload size of 50-60 child care facilities per licensing specialist. (Licensing Caseloads: Finding the Right Ratio of Licensors to Providers, August 2019)
- The Department of Social Services (DSS) serves approximately 32,000 children monthly through the Child Care Subsidy Program. (DSS, March, 2019)
- 81% (26,278) of child care children are served by a licensed child care program inspected by DHSS. (DSS, March, 2019)
- 61% (19,668) of children receiving child care subsidy also receive Medicaid. (DSS, March, 2019)
- The two primary reasons many parents access child care subsidy is for employment and protective services. This is evidenced by the number of children served and the amount of payments made each month by DSS. (DSS, March, 2019)
- African American children comprise 52.5% of the child care subsidy population, while Caucasians make up 42.7%. The remaining 4.8% is identified as other. (DSS, March, 2019)
- 96% of child care subsidy households are comprised of one parent. (DSS, March, 2019)



CURRENT INITIATIVES



Several important initiatives are already underway to support the focus and efforts of improving safety and quality in child care. While not all-inclusive, these initiatives are highlighted for awareness.

SAFETY INITIATIVES

“Nathan’s Law”

The Missouri General Assembly recently passed House Bill 397 (2019), which includes “Nathan’s Law”. This bill is named after Nathan Blecha, who died from suffocation in 2007 at an unregulated in-home daycare in Jefferson County serving 10 children. The bill restricts the total number of children to six or fewer, with no more than three children under the age of 2 at the same physical address. The bill will include that children related to the provider are counted in the number of children in care, unless the children are school-age and live in the provider’s home. The bill increases the fine for illegal care from an infraction to a misdemeanor, and allows the Department of Health and Senior Services (DHSS) to assess fines related to illegal care. HB 397 also allows DHSS to file suit in a circuit court in cases of imminent bodily harm to a child in care. Currently, this bill is awaiting approval from the Governor.

Comprehensive Background Screenings

The Departments of Health and Senior Services and Social Services are implementing comprehensive background screening requirements.

All child care providers, staff, and volunteers, who have responsibility for supervising children, and anyone over the age of 17 residing in a home in which care is provided, are now required to undergo a state and national criminal fingerprint background check; a screening of the child abuse and neglect registry; and a check of the state and federal sex offender registry. Anyone found to have a criminal history of a felony against a person, a felony or misdemeanor against a child, a felony or misdemeanor drug conviction in past years, have been found to be a perpetrator of child abuse or neglect, or is listed on a state or national sex offender registry, is ineligible to be employed or volunteer in a child care setting. If the person has resided in Missouri five years or less, a check of the most recent state of residence is also required.

Proposed Child Care Licensing Rule Changes

In January 2019, DHSS filed emergency and proposed rules related to background screening requirements for child care providers. In the proposed rules, DHSS also recommended the following changes:

- Removing outdated or unnecessary requirements.
- Ensuring transparency by incorporating policies into rule.
- Updating rules to include current language for legal entities, such as limited liability companies.
- Increasing child care staff training requirements aligned with Core Competencies for Early Childhood and Youth Development Professionals.

Improvements to Health and Safety for Non-Licensed Subsidy Providers

The Department of Social Services (DSS) conducts annual on-site monitoring of registered and license exempt child care providers. On-site monitoring verifies health and safety requirements are being met by non-licensed subsidy providers.

Support to Public Health Departments

DSS provides CPR and First Aid training to registered or contracted child care providers at no cost. CPR and First Aid are health and safety requirements for providers and their child care staff contracting with DSS. This support assists providers in meeting this requirement.

Expanding the Show-Me Child Care Provider Search

This portal currently provides inspection reports and substantiated complaints of alleged rule violations for licensed providers. DSS is working with DHSS and the Office of Administration to include all providers, with an expected completion date of August 2019. This enhancement will allow the public to view inspection reports for licensed, license-exempt and exempt child care providers registered with DSS. Parents and guardians searching for child care will have the ability to view inspection reports for all providers.

CURRENT INITIATIVES

ParentLink

The ParentLink WarmLine Program provides quality parenting information, materials, and other resources, such as research-related literature, educational brochures, and lending library items, as well as services, such as outreach activities and support groups to proactively strengthen and support Missouri's families and communities. ParentLink is a part of the University of Missouri, College of Education and receives funding from the DSS.

Best Practices in Child Care Regulation

In December 2018, the DHSS was awarded an opportunity to participate in an individualized technical assistance opportunity for states known as *Best Practices in Child Care Regulation: Assessment and Planning for Licensing Systems*. It is offered in partnership with the National Center on Early Childhood Quality Assurance and the National Association for Regulatory Administration. Best Practices provides an opportunity for a child care licensing agency to assess their regulatory program in two areas: organizational management and regulatory management. This work moves at the team's own pace, as the consultant guides the participants through an assessment of their licensing system using *Best Practices for Human Care Regulation, Self-Assessment Tool, and Follow Up Tool*.



QUALITY INITIATIVES

Online, On-demand Training

The DHSS and DSS use Missouri's Core Competencies for Early Childhood and Youth Development Professionals to develop online, on-demand training for child care providers and caregivers. These trainings are provided at no cost to providers and are accessible 24-hours seven days a week.

Child Development Associates (CDA) Initiative

This program offers individuals who provide child care or are employed as a child care staff access to the CDA program at no cost. Offered through Child Care Aware® (CCA) of Missouri, child care staff working in a subsidy contracted or registered facility can apply to complete their CDA with all tuition, fees, and materials paid for through the Early Childhood CDA Initiative.

Infant and Toddler (I/T) Specialist Network

Using the Program for Infant and Toddlers Care, I/T specialists provide training to all facility staff on working with infants and toddlers. In addition to classroom training, the specialists spend time in the infant and toddler classrooms working with teachers to reinforce what has been taught in classes.

Impact Grant

The Impact Grant is a non-financial grant through the State Capacity Building Center providing two years of intensive technical assistance. The intent is to assist states as they develop and expand their capacity for planning, investing in, and implementing quality early childhood systems. DSS is the lead agency in this initiative for Missouri.

The State Capacity Building Center is supported through the Department of Health and Human Services, Administration for Children and Families, Office of Child Care.

Mental Health Consultation (MHC)

The Mental Health Consultation (MHC) is a problem-solving and capacity-building intervention implemented within a collaborative relationship between a consultant with mental health expertise and one or more caregivers, typically an early childhood care and education provider and/or family member. MHC aims to improve the ability of staff, families, programs, and systems to identify, treat, and reduce the impact of mental health problems in

CURRENT INITIATIVES

children from birth to age 6. Missouri's program focuses on reducing the number of children who are expelled from child care settings due to behavior. This program is supported by DSS.

Trauma Smart Training

Trauma Smart is an evidence-based training and support for teachers and families on complex trauma, its effects on children, and how to work with children who have experienced trauma. Training is provided to schools, Head Start, and Early Head Start teachers, and child care providers. This program is supported by DSS.

Child Care Resource and Referral Network

Child Care Aware® (CCA) of Missouri provides an online child care search database for families to search for child care and early learning programs. In addition to the referral network, CCA of MO operates the Workshop Calendar, which offers standard face-to-face trainings, and on-line trainings in real time or on-demand. The Workshop Calendar also offers registration and attendance reporting for early child care and learning conferences. This program is supported by DSS.

Educare

The Educare program seeks to improve the quality of child care and early learning programs by providing resources, technical assistance, and training opportunities at free or reduced cost to child care providers, with an emphasis on family home providers. This program is supported by DSS.

Support of Accreditation

The DSS will provide grants of up to \$5,000 to support child care facilities seeking accreditation. DSS has begun to promote this new initiative. This initiative will assist child care facilities to achieve a level of quality based on quality program standards identified by an accrediting organization.

Opportunities in a Professional Education Network (OPEN)

OPEN supports an integrated and seamless career development system for Missouri's early childhood, afterschool, and youth development professionals. OPEN administers the Missouri Professional Development (MOPD) Registry. Individuals can register for a free MOPD Toolbox account to track their individual training. Child

care providers can associate an individual with their facility to track the individual's training hours. This program is supported by DSS.

Quality Assurance Report (QAR) Pilot

The Department of Elementary and Secondary Education (DESE), in collaboration with the Missouri Head Start State Collaboration Office and the Departments of Health and Senior Services, Mental Health, and Social Services, are developing a pilot voluntary early learning quality assurance report. The early learning quality assurance report will be developed based on evidence-based practices.

The first cohort of programs has started the initial phase of the program assessment process. It is anticipated that the initial assessment results will be available in an aggregate report by December 2020. To learn more about the QAR, please visit: <https://dese.mo.gov/quality-schools/early-learning/quality-assurance-report>.

Preschool Development Grant, Ages Birth to Five

This federal grant is designed to support the state in its efforts to analyze the current landscape of the early childhood care and education mixed-delivery system. It will also implement changes to the system that maximize the availability of high-quality early childhood care and education options across providers and partners, improve the quality of care, streamline administrative infrastructure, and improve state-level early childhood care and education funding efficiencies. The Department of Elementary and Secondary Education (DESE) is the recipient of this federal grant.

The grant requires five activities which include: Conducting a statewide birth to five needs assessment of the availability and quality of existing programs, updating the early childhood strategic plan, providing activities to maximize parental choice and knowledge, sharing best practices, and improving the quality of early childhood care and education. The Preschool Development Grant is scheduled to be completed by December 31, 2019. A competitive grant opportunity to build on the work that was started in the current Preschool Development Grant Birth to Five is scheduled to be available in fall 2019. To learn more about Preschool Development Grant, please visit: <https://dese.mo.gov/quality-schools/early-learning/PDGB-5>.

CHILD CARE STAKEHOLDER ENGAGEMENT

The Child Care Working Group recognized and determined that child care stakeholder engagement was essential to identifying recommendations for ensuring safety and quality in child care. The benefits of child care stakeholder engagement include, but are not limited to, the following:

- Ensuring open and transparent communication between state leaders and stakeholders.
- Increasing government accountability.
- Impacting and improving the quality of decision-making at the state level.
- Supporting improvements to the efficiency and effectiveness of early childhood infrastructure in Missouri.

On May 1, 2019, the Child Care Working Group held a public comment hearing to listen to child care stakeholder feedback on the following questions:

1. How can we enhance safety in child care?
2. How can we enhance quality in child care?
3. How can we encourage and strengthen professional development opportunities for the child care workforce?
4. What are two or three actions you believe the state should set as priorities for improving safety and quality?

Child care stakeholders came from across the state to share their perspectives and expertise during the public comment hearing. Departments were provided an opportunity to use the feedback from the public comment hearing as they crafted their recommendations. The child care stakeholder comments were compiled and can be viewed at: <https://health.mo.gov/information/publicnotices/publiccomment.php>.

Two themes resonated from the perspective of stakeholders. These themes include the following:

- A need for improved communication and collaboration between state government and child care stakeholders that allows for a bilateral flow of communication.
- A call for an integrated and coordinated statewide professional development system.

The hope is that through the engagement of child care stakeholders, the groundwork will be laid for ongoing and transparent communications for improving the early childhood infrastructure, e.g. professional development, in Missouri. Throughout this report, you will find recommendations addressing the two themes.



CHILD CARE WORKING GROUP RECOMMENDATIONS

The following pages offer recommendations on how to ensure safety and quality in child care for consideration by the Governor. Each recommendation provides a Rationale. The Rationale explains why Missouri needs to implement the recommendation. It should be expected that as dialogue continues about these recommendations and new information is presented, the proposed recommendations may change or evolve.

REVISE STATUTORY LANGUAGE TO IMPROVE SAFETY AND QUALITY IN CHILD CARE

I. Enhance and expand background screenings of child care professionals.

1. Revise Section 210.254, RSMo to require, at minimum, a background screening through the Family Care Safety Registry for license-exempt child care providers and their employees.
2. Explore the feasibility of utilizing Rap Back for child care providers.
3. Streamline the background screening process by creating a single cohesive process when multiple agencies are involved.

Rationale

Background screenings are needed to ensure the staff and personnel at a child care facility do not have findings related to child abuse or neglect, child endangerment, or crimes against persons, such as assault convictions. While the Family Care Safety Registry conducts a check of Missouri offenses, an FBI check is needed to ensure an individual does not have a conviction or offense in another state that should prevent them from working with young children. As Missouri borders eight states, it is not uncommon for caregivers or child care staff to live in a bordering state but work in a child care facility in Missouri. To ensure children's safety, Missouri should require an FBI check for all caregivers and staff in child care programs that are operated by a religious organization. However, at a minimum, all child care staff members who work in child care facilities that are operated by religious organizations must be screened through the Family Care Safety Registry, which includes a criminal background check and child abuse/neglect screening for Missouri.

II. Allow for non-expiring child care licenses.

1. Revise Section 210.221, RSMo to allow for non-expiring child care licenses.
2. Rescind child care licensing rules related to renewals, if legislative changes are passed.

Rationale

Section 210.221, RSMo provides the department with the authority to issue child care licenses, however it restricts the department from issuing a license for more than a two-year period. This requires child care providers to reapply and undergo a license renewal process every two years, which involves considerable work for licensees and DHSS staff. To ensure due process, DHSS sends a letter to each licensee who is not in compliance with licensing rules at least 30 days before the license expires. The letter advises of DHSS' intent to deny the renewal unless 1) the licensee corrects the rule violation(s) prior to the expiration of the license, or 2) the licensee appeals the proposed action. The process is costly in both staff time to prepare the letters and in the mailing cost, as each letter must be sent by certified mail. During SFY'18, DHSS sent 556 such letters at an average cost of \$8.32 per letter. Licensees view this process as a negative action and it does not demonstrate DHSS' work to establish a positive relationship with child care providers.

This change will allow DHSS to continue to regulate licensed child care programs through inspections and legal actions, when necessary, to protect the health and safety of children in out-of-home child care settings. In addition, licensed child care providers will see a reduced burden in submitting renewal paperwork and DHSS staff will see a reduced burden in sending denial of renewal letters to each licensee when the licensee is not in compliance with licensing rules at least 30 days prior to the expiration of the license. This change will also result in a cost savings to the department in mailing costs.

III. Clarify child care exemptions in statute.

1. Revise Sections 210.201 and 210.211 RSMo to clarify exemptions and add definitions currently not in statute.

Rationale

Section 210.201, RSMo is titled Definitions, however, this section contains exemptions from licensure. Section 210.211, RSMo is titled Exceptions, however, there

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are terms that are used that are not defined in Section 210.201, RSMo. These statutes provide the basis for determining which child care programs are required to be licensed and which programs qualify for a statutory exemption. It is imperative that individuals, parents, the public and the department have a clear understanding of the statutory exemptions.

As an example, each year, DHSS receives exemption determination requests from child care programs reportedly operated by a school. Section 210.201, RSMo provides an exemption for child care programs that are operated by a school, however, there is no definition of a school in that section. Many of the requests are from Montessori schools, which often care for children from birth to six years of age and offer kindergarten. There is no easily identifiable way to determine whether these programs are child care programs or are child care programs operated by a school. As Maria Montessori did not copyright her program, anyone is able to find the materials online and state they are a Montessori school. Often, these programs care for a greater number of infant/toddlers and preschoolers than school-age children and their schedules and fees are often more like a child care program than a school. As these programs are required to submit annual documentation to verify that the program continues to qualify for a school exemption, it is possible for the program to qualify for an exemption one year but not the next. This is confusing to the programs and makes it difficult for them to plan from year to year. It is also difficult for the DHSS to explain how a program could qualify for an exemption one year but not the next. Based on consultation with other states and the knowledge that DHSS has granted school exemptions to Montessori schools, DHSS is proposing to add an exemption in the statute for Montessori schools. This exemption will require accreditation by either the American Montessori Society or the Association Montessori Internationale which will make requirements for this exemption clear.

REVISE REGULATIONS TO BETTER SAFETY AND QUALITY IN CHILD CARE

IV. Revise child care licensing rules to include evidenced-based practices and research that support safety and quality in child care.

1. Revise rules related to staff/child ratio and supervision of children when they are outside.

2. Specify the type and depth of resilient material used to cushion a child's fall from outdoor play equipment in rule.
3. Require child care providers to report serious injuries and child deaths that occur in the child care setting in rule.
4. Add group size requirements for preschool and school-age groups in rule.
5. Engage child care stakeholders in the rule promulgation process by hosting meetings and webinars to garner child care stakeholder participation.

Rationale

The majority of Missouri's child care licensing rules have been in place since 1991. While the state must be sensitive to any costs associated with revisions, the state must also ensure the regulations protect children's health and safety.

1. Supervision and appropriate staff/child ratios are the basis for child protection in group settings. Supervision is directly tied to safety and the prevention of injury. With proper supervision and in the event of an emergency, supervising adults can quickly and efficiently remove children from any potential harm. Current licensing rules permit family child care providers to allow children three years of age and older to play outside without an adult present, with the caregiver providing frequent supervision. *Caring for Our Children: National Health and Safety Performance Standards* states that caregivers should provide active supervision of children by sight and hearing at all times, including when children are outdoors. Recognizing that children are more active when playing outside, staff/child ratios during outdoor play should be at least the same, if not higher, than the ratio required when the children are indoors.
2. The U.S. Consumer Product Safety Commission (CPSC) estimated there were more than 200,000 emergency room-treated injuries annually. The most recent study of 2,691 playground equipment-related incidents reported to the CPSC from 2001-2008 indicated that falls represent 44% of injuries. The surfacing under and around playground equipment is one of the

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most important factors in reducing the likelihood of life-threatening head injuries. A fall onto a shock absorbing surface is less likely to cause a serious head injury than a fall onto a hard surface. The CPSC's *Public Playground Safety Handbook* outlines the depths of various impact absorbing materials. Rather than allowing licensees to determine the necessary depth of the resilient material, the rules should be revised to require the depths outlined in the *Public Playground Safety Handbook*.

3. While licensing rules are designed to protect children's health and safety, unfortunately, each week children in child care are injured through accidents, faulty equipment, failure of caregivers to provide appropriate supervision, or through mistreatment. In order to provide better protection to children, the state must be aware of all serious injuries and any incidents where a child died while in care. This allows the state to investigate the incidents, to see if the accident that resulted in a serious injury/death was preventable, and to take any appropriate actions to address the concerns. In addition, the collection of data will allow Missouri to conduct data analysis to determine whether any licensing rule changes are needed and/or to target training for child care providers.
4. Missouri child care licensing rules include group sizes for infants through two-year-olds. However, the rules do not include group sizes for preschool or school-age children. Group size refers to the number of children assigned to a caregiver/teacher or team of caregivers/teachers occupying an individual classroom or well-defined space within a larger room. *Caring for Our Children: National Health and Safety Performance Standards* states that children benefit from social interactions with peers. However, larger groups are generally associated with less positive interactions and developmental outcomes. Group size and ratio of children to adults are critical factors to children's health, safety, and development. Small group size helps ensure that children get one-on-one attention from a caregiver who is available to take care of each child's individual needs. Smaller groups of children are also easier to manage and the caregivers are less likely to

become overwhelmed and frustrated. This type of responsive caregiving is important to promote children's social and emotional development, physical well-being, and overall learning.

5. Child care stakeholder engagement is essential for ensuring safe and quality child care. Their feedback regarding feasibility, barriers to implementation, cost and roll-out of potential rules is necessary for ensuring compliance upon promulgation.

In addition to the benefits for children, the Department of Health and Human Services, Administration for Children and Families, Office of Child Care requires that states define group sizes in regulation through the Child Care Development Fund's state plan. Missouri is currently under a corrective action due to the lack of defined group sizes for preschool and school-age children. This change is needed for Missouri to comply with these federal requirements.

V. Revise regulations for registered and contracted child care subsidy providers.

1. Revise rules to comply with Child Care and Development Fund requirements related to health and safety standards (based on Caring for Our Children Basics; Health and Safety Foundation for Early Care and Education), professional development, background screenings for registered and license-exempt providers, limiting the number of children, record keeping, and requirements for contracting with DSS for payment.

Rationale

DSS is required to submit a state plan for the Child Care and Development Fund every three years. The plan for FFY-2019 through FFY-2021 has been submitted and conditionally approved. The conditional approval of Missouri's state plan is dependent upon compliance with the federal regulations by September 30, 2019 in relation to defining health and safety standards; defining staff to child ratios and group sizes for license-exempt child care providers; and completion of state and federal background screenings for licensed, license-exempt, and regulated child care providers. Each of these areas addresses health and safety and will allow DSS to hold child care providers receiving subsidy payments to higher standards for serving children.

CHILD CARE WORKING GROUP RECOMMENDATIONS

VI. Implement sanitation standards for licensed and license-exempt child care facilities.

1. Adopt current sanitation and safety guidelines into rule.

Rationale

The DHSS' Environmental Child Care Program has operated using guidelines for many years. Regulated (licensed and license-exempt) child care facilities are required to have a compliant sanitation inspection pursuant to section 210.252, RSMo. The promulgation of sanitation standards would not cause a fiscal impact to the providers or the state agency, as these guidelines are currently used for determining sanitation compliance. Most child care facilities comply with the guidelines, however, there is little recourse for non-compliant providers because of the lack of legal authority. Sanitation inspections check for the following, which include but are not limited to:

- Food safety and storage
- Water supply
- Waste systems
- Chemical storage and accessibility to children
- Lead paint
- Playground equipment for environmental hazards e.g. chemical or waste contamination, proper cleaning etc.
- Insects and pests
- Testing for bacteria

The intent of sanitation rules is to ensure minimum health and safety standards for children while in a child care setting. Ensuring sanitary conditions reduces the risk of illness and harm to children. The intent is not to impose more regulations but to have the ability to ensure child health and safety.

VII. Adopt the International Series of Fire and Building Codes for child care facilities.

1. Revise existing fire and building code regulations to comply with current safety standards.

Rationale

Approximately 60% of all child care facilities in the state are located in areas that are currently using the International Code Council (ICC). This information was found by overlaying all current child care locations with the current list of fire departments reporting use of the ICC codes and looking at a 5-mile radius map.

New buildings and large renovations are required by state law to be designed by licensed architects. These architects are required by law to design and draw the building plans to meet the International Building Code (IBC) - 2015 edition. This creates conflicts when the plans are reviewed by the Division of Fire Safety because DHSS rules and local adopted codes do not align. This can create additional costs to facility owners as well as delay construction while variances or exceptions are sought and granted for the building. This becomes time consuming for the facility as well as Division of Fire Safety staff. Use of the IBC codes for new construction and major renovations would save time and costs for the owners as well as create a more efficient process for inspections and licensing.

It is key to note that since new buildings and renovations are already designed to the IBC code, costs would be reduced for builders, owners, and the Division of Fire Safety.

INTEGRATE AND COORDINATE EARLY CHILDHOOD CARE AND EDUCATION PROGRAMS AND EFFORTS

VIII. Fulfill the Preschool Development Grant Birth to Five Requirements.

1. Utilize the Preschool Development Grant Birth to Five needs assessment to improve Missouri's early childhood infrastructure.

Rationale

A part of the Stronger Together Missouri Preschool Development Grant process is a state needs assessment. This process will assess the early childhood infrastructure in Missouri and will identify efficiencies and areas for system restructuring. The needs assessment may surface additional areas for improvement. We anticipate several areas of growth for Missouri to include but not be

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limited to improving early learning provider competency, consistent health and safety standards for all early learning programs, and authentic family engagement practices.

IX. Implement an integrated professional development system to better serve providers and caregivers.

1. Utilize results from the Impact Grant and the Preschool Development Grant Birth to Five to streamline and enhance Missouri's professional development framework. Areas of focus will include the following:
 - Professional development standards and competencies
 - Career pathways
 - Advisory structure
 - Workforce information
 - Professional development training opportunities
 - Streamlining training requirements and timeframes
 - Professional development support
 - Funding

Rationale

An improved professional development framework for the early childhood workforce will provide guidelines on:

- Competencies expected of a quality workforce.
- Professional development activities for improving the knowledge and skills of the workforce.
- A mechanism for tracking professional development.
- The ability to apply qualified activities to an advanced degree and define a clear path to advancement in early childhood.

During the May 1, 2019 child care stakeholders meeting, the child care working group received input from numerous child care providers and advocates. One of the prevalent themes was regarding the need for an enhanced and better coordinated professional development system for child care providers.

With the additional CCDF discretionary funds and the funds from the Preschool Development Grant, DSS and DESE will be able to establish a well-defined professional development framework. In addition to funding, fulfilling vacancies on the Coordinating Board for Early Childhood would strengthen the execution of the board's mission and strategic plan.

X. Implement an integrated system for communicating with parents, child care providers, and the public.

1. Streamline e-mail listservs for communication with providers.
2. Create an early childhood and education website that can be used across state departments.
3. Collaborate with departments' communication staff to develop one website page for early childhood care and education.
4. Collaborate with departments' communication staff to develop one communication platform for mass e-mailing.

Rationale

During the May 1, 2019 child care stakeholder public comment meeting, communication was a theme mentioned by several stakeholders. It was indicated that communication between child care providers and departments could be improved.

Parents, child care providers, stakeholders, and the general public are not always familiar with which department has information on child care or early childhood services. One integrated landing page for early childhood services and programs will improve the ability of families, providers, and stakeholders to locate this information.

Communication between departments and early childhood stakeholders could be improved by using an e-mail system such as GovDelivery. GovDelivery is able to



CHILD CARE WORKING GROUP RECOMMENDATIONS

be formatted so multiple lists of recipients can be defined and departments are able to target specific populations in which to send information, as well as send joint messages.

EXPAND QUALITY INITIATIVES TO SUPPORT EARLY CHILDHOOD CARE AND EDUCATION

XI. Establish a child care provider advisory group.

1. Develop and implement a child care provider group with participation by each department.
2. Utilize the State Capacity Building Center to determine a child care provider advisory group structure to benefit the needs of the state's child care provider population.

Rationale

A few of the issues brought up during the May 1, 2019 child care stakeholders meeting are areas that a state department is not able to address: enforcement of breaks for child care staff, structures on playgrounds to provide shade, and training on accreditation. Local or regional child care provider groups would be able to discuss issues and define solutions. Advisory groups could also be utilized to advocate for rate increases in state subsidy and educate legislators on the financial issues child care providers face in serving subsidy families.

XII. Explore differential monitoring for DHSS inspectors to improve the depth and frequency of monitoring based on a facility's compliance history.

1. Access technical assistance from the State Capacity Building Center to explore the feasibility and system changes needed to implement differential monitoring.

Rationale

A differential monitoring system would allow DHSS to maximize its resources and provide a stronger focus on those rules that have a direct impact on child safety.

This type of system recognizes a provider's strong record of compliance with either shortened or less frequent inspections. This allows DHSS staff to focus more time and attention on those facilities with compliance issues through additional inspections and targeting the inspection on the problem issues.

While differential monitoring systems increase efficiencies and provide for greater effectiveness, the implementation of a differential monitoring system must not be viewed as a way to decrease the number of annual inspections or the number of licensing staff. Rather, it is a way to identify the licensing rules that most impact children's safety and maximize resources by allowing licensing staff to provide technical assistance to struggling facilities and more quickly address those facilities that do not make the necessary improvements to ensure the children's safety.

XIII. Expand the Quality Assurance Report pilot.

1. Educate child care providers about the Quality Assurance Pilot.
2. Increase provider participation in the Quality Assurance Report pilot throughout the state.

Rationale

The goal of the Quality Assurance Report Pilot is to provide a continuous quality improvement process for early learning programs and to provide families with consumer education about the quality of early learning programs. The expansion will provide consistent standards, discern possible efficiencies and provide a more effective early learning system for children, families, and providers.



CONCLUSION

The need to protect the health and safety of children is paramount. Parents and caregivers who are working or pursuing their education should not have to worry about the safety and well-being of their children in a child care setting. This report shares recommendations the Governor can use to impact safety and quality in child care, which will have a lasting impact on generations to come.

Over the last several decades, evidence-based research and best practices for early learning and education have evolved, which is evidenced by a nationwide movement for comprehensive background screenings, enhanced professional development systems, caseload sizes for licensing specialists, annual inspection requirements, and quality assurance systems. Research shows that early childhood experiences have a long-term impact on an individual's life span.

Key recommendations focus on the following:

- Raising public awareness of the importance of safe and quality child care. DHSS has produced a one-hour training for caregivers related to safety, reducing caregiver stress, the impact of trauma, and the importance of safe, quality child care.
- Identifying key legislative and regulatory areas that need to be improved to support safe and quality child care.
- Reinforcing the importance of comprehensive background checks for individuals who have access to children in child care settings.
- Identifying the support needed for the child care workforce.
- Increasing awareness of the need for a strong early childhood professional development system.
- Encouraging integration and coordination of existing early childhood systems to improve efficiencies and effectiveness in service delivery at both the state and local level.

Safe and quality child care is essential to supporting Missouri's current and future workforce. We hope these recommendations will be the catalyst for conversations on how to move safety and quality forward in Missouri's child care programs.

“High-quality early childhood programs can boost the upward mobility of two generations by freeing working parents to build their careers and increase wages over time while their child develops a broad range of foundational skills that lead to lifelong success.”

James J. Heckman

The Henry Schultz Distinguished Service Professor of Economics at the University of Chicago, and a Nobel Memorial Prize winner in economics



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