How Subsidized Child Care can Support Early Identification and Intervention

## THE FIRST FIVE YEARS: A WINDOW OF OPPORTUNITY

In its April 2019 final report, the Blue Ribbon Commission on Early Childhood Education (BRC) recognized early childhood as a critical period of physical, cognitive, and socioemotional development.<sup>1</sup> The report identified a broad set of recommendations to promote children's healthy development, including the importance of early identification and intervention. The report elevated the potential for early care and education "to mitigate the effects of poverty and narrow disparities based on income and race." The Master Plan for Early Learning and Care, released in late 2020, reenforced the state's commitment "to provide all children with a healthy start by making comprehensive improvements to the state's early learning and care system for young children from birth through age five."<sup>2</sup> The Master Plan for Early Learning and Care is part of a broader effort by the administration to focus on the needs of the whole child and whole family, including increasing access to equitable, quality, and coordinated services.

Regular monitoring of a child's development can help identify a child in need of additional resources or services; unidentified delays during a child's first years of life can significantly affect their school readiness and have long-term effects on their overall wellbeing. National guidelines recommend that a developmental screening performed at well-child visits for all children at 9 months, 18 months, and 30 months of age, or when medically necessary based on identified risks through ongoing developmental surveillance.<sup>3</sup> Per federal mandate, all infants and toddlers participating in Medi-Cal should receive routine developmental screenings with a validated tool during a health care visit, as recommended by pediatricians. The comprehensive benefit package available to children younger than 21 years old who have Medicaid and Children's Health Insurance Program (CHIP) coverage, known as EPSDT (early and periodic screening, diagnostic, and treatment), covers all appropriate and medically necessary services needed to correct and ameliorate health conditions, even if such services are not included in the Medicaid state plan.<sup>4</sup>





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In California, approximately 50% of young children receive their care through the Medi-Cal system. Of those, less than 1 in 4 children received a developmental screen in 2020.<sup>5</sup> California ranked 43rd in the nation in the rate of young children who receive timely screenings. The greatest need for improved developmental screening is in communities of color, where children are less likely to be diagnosed by their provider and less likely to receive services, regardless of the results of a developmental assessment.<sup>6</sup>

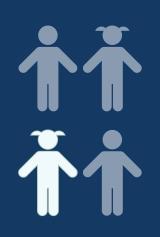
The need for increased early identification and intervention is even more pressing in this post-pandemic environment. Early research out of Brown University found that two years of isolation and disruption in early education and care resulted in reduced fine motor, social, and cognitive skills for children born during the pandemic compared to children born pre-pandemic.<sup>7</sup> Timely access to early identification and intervention supports will be critical to mitigate against developmental delays and social emotional concerns for young children.

For those with demonstrated need, California's Early Start Program exists to ensure that early intervention services are provided for infants and toddler with disabilities and their families in a coordinated, family-centered system of services. The Early Start program is administered by local regional centers,<sup>8</sup> which are responsible for conducting developmental screenings, confirming eligibility, and determining the specific services for which families qualify. Regional Centers contract for specific interventions and resources, including parent coaching, and related therapies (e.g., speech, occupational, and physical therapies). In 2022, California took the positive step to reduce the eligibility standard for Early Start from 33% to 25% delay in one or more developmental areas (i.e., cognitive, expressive communication, receptive communication, social or emotional, adaptive, or physical and motor), thus lowering the barrier to entry.

While the healthcare system is often looked to as the system for promoting children's healthy development, particularly in the prenatal through age three period, recommendations in the BRC report and Master Plan for Early Learning Care **recognize the role of the early care and education as part of the system of intervention**.

## Less than 1 in 4 children

received a developmental screen in 2020





<sup>1</sup> https://speaker.asmdc.org/sites/speaker.asmdc.org/files/pdf/BRC-Final-Report.pdf

<sup>2</sup> https://cdn-west-prod-chhs-01.dsh.ca.gov/chhs/uploads/2020/12/01104743/Master-Plan-for-Early-Learning-and-Care-Making-California-For-All-Kids-FINAL.pdf

- <sup>3</sup> Terms included in this paper align with the American Academy of Pediatrics developmental screening and surveillance definitions. Developmental surveillance describes clinicians' ongoing monitoring for children at risk for developmental delay and should occur during every health supervision visit. Developmental screening involves the use of validated, standardized screening tests used universally at specific ages, as well as when developmental surveillance reveals a concern. https://www.aap.org/en/patient-care/developmental-surveillance-and-screening-patient-care/
- <sup>4</sup> https://mchb.hrsa.gov/programs-impact/early-periodic-screening-diagnosis-treatment
- <sup>5</sup> https://www.auditor.ca.gov/reports/2022-502/index.html#chapter3
- <sup>6</sup> Gallegos A, Dudovitz R, Biely C, et al. Racial Disparities in Developmental Delay Diagnosis and Services Received in Early Childhood. Acad Pediatr. 2021;21(7):1230-1238. doi: 10.1016/j.acap.2021.05.008

<sup>7</sup> https://www.medrxiv.org/content/10.1101/2021.08.10.21261846v1.full.pdf

<sup>8</sup> Regional Centers are a statewide network of 21 community-based, non-profit agencies that help develop, pay for, and manage services for young children who have delays in their development. The Department of Developmental Services contracts and oversees each regional centers' coordination and delivery of services.

## LEVERAGING THE EARLY CARE AND EDUCATION SYSTEM TO PROMOTE EARLY IDENTIFICATION AND INTERVENTION

Families would benefit from a consistent source of information on their child's developmental progress; for many, child care providers are these trusted messengers. Child care providers regularly interact with families and are attuned to how a child grows and changes over time. A child care environment where caregivers are trained to look for signs of potential concerns and are equipped with tools to promote child development can help mitigate against the short- and long-term impacts of developmental delays. This positioning of child care aligns with other place-based approaches that center resources and support in spaces and places where families are.

For children enrolled in the federal Head Start, monitoring of developmental progress is already a standard of care. Head Start programs provide comprehensive developmental services for children from low-income households from birth to entry into elementary school. California's Head Start program is the largest in the nation.

For children in state subsidized child care, access to these supports varies. The subsidized child care provide vouchers for families to obtain care in licensed child care centers, licensed family child care homes, or license-exempt care (also known as Family Friend or Neighbor Care).<sup>9</sup> Given its size and reach, how can the subsidized child care system help more children access early identification and intervention services?

## SUBSIDIZED CHILD CARE

- > On average, at any time, the subsidized child care system will have 288,000 children enrolled statewide
- Children of color make up 74% of all children ages five years and under but comprise 87% of children eligible for subsidized care (BRC Final Report)
- > Approximately 85% of children enrolled in subsidized care are Medi-Cal eligible (CCRC's Research Department, 2023)





**85%** of children enrolled in subsidized care are Medi-Cal eligible

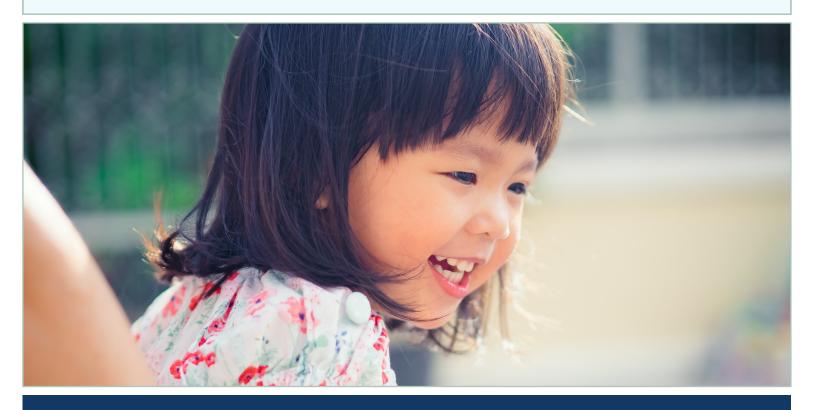
<sup>9</sup> The state's subsidized CalWORKS Child Care Program includes Stages 1, 2, 3 administered by the CA Department of Social Services and CA Department of Education. Stages One and Two services are considered to be an entitlement; however, Stage Three services are dependent on fund availability. CalWORKs cash aid recipients are eligible for Stage One and Stage Two child care based on their eligibility for cash aid. Currently to qualify for state subsidized child care a family must earn 85% or less of the state median household income or approximately \$71,500. Medi Cal eligibility for children is up to 266% of federal poverty level or less than \$79,800 for a household of four.

Lack of training, information, and ongoing support – not to mention the day to day demands of meeting children's needs – can limit providers' ability to monitor child development and foster inclusive child care environments. **Child care services agencies already play an important role in the subsidized child care system and are well positioned to support early identification and intervention.** These agencies, funded by the California Department of Social Services, are located in every county in the state. They help families arrange child care services and makes payment for those services, recruit and train child care providers, and collect data from parents and child care providers.

Recent models have tested how child care services agencies can expand their capacity to support families and child care providers in early identification and intervention. Opportunities to expand on this role include:

- Care Coordination and Case Management: Child care services agencies staff could provide case management support to families with children under three years, including administering the assessment and helping parents get connected to service. As needs are identified, case managers could refer families to Regional Center, managed care, or schools.
- Quality Coaching for Providers: Child care services agencies staff could provide quality coaching for providers so that they are better equipped to have development-related conversations with parents and to embed inclusive, developmentally appropriate approaches in their childcare settings. This idea builds upon new models emerging at the state and national level to provide consultative support, coaching and technical assistance to child care providers to support early identification and support.
- Support for Regular Monitoring: Matched to the American Academy of Pediatrics Bright Futures guidelines, staff could, in partnership with child care providers, monitor the frequency of screenings and monitor development over time, including for those children who don't quality for Early Start.

On November 7, 2023, leaders from around the state will gather to explore the potential role, feasibility, and financing for the subsidized child care system to address the disparities in developmental screening and intervention services and assess how child care can be part of the solution.













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