



## Executive Summary – Early Care & Education Access for Maltreated Children in LA County

*High quality early learning experiences can positively alter a child's life course and contribute to stronger, more stable families and reduced public assistance and intervention costs.*

*Children involved in the child welfare system are the most at-risk for developmental delays, poor academic success, and socioemotional issues – all of which early education services can help mitigate or ameliorate. Yet, state and federal policy does not effectively prioritize young children who are perilously at-risk for abuse and neglect and those who are already in the child welfare system. Child welfare and early care and education advocates must work together to ensure the well-being of the most at-risk children by increasing their access to early care and education services.*

### High quality early learning programs directly support child welfare goals of:

1. **Safety** – Observing and responding to early warning signs of child abuse or neglect, or other child-related risk factors for abuse such as developmental delays, socioemotional and behavioral issues, and health issues
2. **Permanency** – Provide stable, caring access points for children and parents/caregivers to child and family support services from local community based organizations without the traditional stigma of child welfare.
3. **Child well-being** – Promoting the socioemotional development and school readiness of children most at-risk for academic delays and poor psychosocial development, and providing and facilitating stable and responsive relationships with caring adults (teachers, service providers, parents, caregivers etc.)

### ECE Rates are Low for Maltreated Children in Los Angeles County

- A conservative estimate of **12.8% (1,509) of the DCFS caseload under 5 (11,778 as of October 2011)** attend public early care and education programs, including Head Start/Early Head Start and subsidized child care/preschool.

**All children under DCFS supervision should be categorically eligible and prioritized for child care and development services based on current California law as children who are abused/neglected and receiving protective services OR as children who are significantly at-risk of future abuse. They are not receiving these services for a wide variety of implementation barriers due to vague and confusing policies.**

- Currently, *only 2.13% of children receiving state subsidized early care and education services in LA County do so because they are receiving protective services* – no higher than the rate of maltreated young children in California or LA County overall and indicative of unsuccessful identification and prioritization policies and practices for state subsidized care. *Furthermore, only 131 identified at-risk children in LA County were served outside of DCFS's state- contracted child care voucher program in October 2011.*

**Federal child welfare reporting requirements do not mandate education needs assessments for young children under child welfare supervision before they are school-age. Children may then be receiving early care and education services that do not identify or prioritize maltreated or at-risk children, and neither are child welfare agencies necessarily aware of their enrollment.**

- The high overlap of families receiving CalWORKS and those involved with child welfare (up to 87% of child welfare caseloads) shows that families receiving income-based child care and development services are not identified or tracked as families with children at-risk and in need of high quality early learning services.

**Federal Head Start/Early Head Start programs use clearer identification and enrollment policies, yet the mix of priority populations for local programs create inconsistent access for children in the child welfare system.**

- For example, *8% of eligible young children in foster care in LA County are enrolled in the 4 largest Head Start programs* – just above the national average of 6% enrollment of children in foster care in Head Start programs, but indicating the potential for success in targeted enrollment efforts at the local level.

**Program quality variability and the overall shortage of high-quality early learning spaces in California limit the ability to link at-risk children to high-quality programs that meet the needs of children in the child welfare system with high incidences of developmental delays and socioemotional and behavioral issues.**

*As of December 2012, the Los Angeles County Department of Children and Family Services' Executive Team is considering recommendations to strengthen and expand formal partnerships with early care and education programs (such as its successful pilot with Long Beach Unified School District Head Start) – a great step in ensuring local implementation of this paper's Policy Priorities.*

## Policy Recommendations and Priorities.

**Policy Priority 1:** All maltreated and significantly at-risk children under child welfare supervision should be identified and referred by child welfare workers and given enrollment priority in high quality public ECE programs. Policies that achieve this will align with safety and permanency efforts by providing respite and workforce support to parents and caregivers, and will promote child well-being by addressing the significant developmental risks.

**Strategy 1a:** Public early care and education programs (including Head Start) develop priority systems for all children with open child welfare case plans and receiving emergency response services, without regard to a child's placement situation, basing priority tiers in terms of layers of 1.) developmental risk and 2.) immediacy of risk for future maltreatment.

**Strategy 1B:** Child welfare agencies create policies and support practice norms through trainings on including early care and education in case plans. This will capitalize on the potential for children, parents, and caregivers involved with child welfare to access needed services through early care and education programs, including developmental screenings and parenting programs, without traditional stigma of child welfare involvement.

**Policy Priority 2:** Scale up best-practices (including Head Start/Early Head Start models for collaboration and referral) through policies that remove barriers to collaboration and coordination between early care and education systems and child welfare systems. This will promote consistency of care and ultimately enhance efforts to ensure safe, stable environments for children and align policies for young children with policies for school-age children.

**Strategy 2a:** Early care and education systems develop an effective way to identify eligible at-risk children and match them to available slots in the child's geographic area, through a shared, centralized, accurate database with public child welfare agencies.

**Strategy 2b:** Child welfare agencies track the early care and education referral and enrollment status of all young children ages 0-5 under its supervision as part of the family/child's case management.

**Strategy 2c:** Certify enrollment for a full or academic year in all early care and education settings.

**Policy Priority 3** Build high-quality ECE systems, which meet the dual goals of prevention and early intervention, by working in tandem with child welfare agencies to ensure the safety, permanency, and the well-being of all young children at-risk while enrolled in ECE and beyond.

**Strategy 3a:** Establish formal partnerships with mental health and disability service providers to support early care and education providers in meeting children's mental health, behavioral, and developmental needs.

**Strategy 3b:** Child welfare agencies identify and refer every maltreated or at-risk child to child development and disability services.

**Strategy 3c:** Early intervention and disability service providers establish formal partnerships with child welfare agencies to serve all eligible children in the child welfare system.

**Strategy 3d:** Modify training requirements for child welfare workers and parents, kinship caregivers, and foster parents to include strong early childhood development components.





## Early Care and Education Access for Maltreated Children in LA County

*Too many children involved with public child welfare agencies do not have access to the early care and education services that can help stabilize a family and contribute to a solid foundation for a child's later success. California does not have an effective system, and counties do not have automated and understandable processes, to link these children who are most at-risk for developmental delays and academic challenges, to the existing array of high quality early care and education services in their communities. Advocacy throughout many systems is required to link the children most at-risk with necessary early learning opportunities and ensure every child is safe, in a stable environment, and on track for positive well-being.*

### The State of Children 0-5 in the Child Welfare System in Los Angeles County:

We know that many at-risk children and their families in LA County face multiple challenges, before even coming to the attention of child welfare through an allegation of abuse or neglect. Children who experience abuse or neglect often come from families with multiple environmental stressors, including health and mental health issues, parents with little formal education, and financial insecurity – factors that already place children at a developmental disadvantage.<sup>i</sup> In addition, the majority of families face the continuing challenges of extreme poverty -- up to 87% of families involved with child welfare system have received public assistance through CalWORKS according to statewide estimates.<sup>ii</sup> **Neglect is by far the primary reason young children enter the child welfare system.** If children need to be removed from their families due to immediate safety concerns and placed into out-of-home care, children are then further traumatized through disrupted relationships.<sup>iii</sup> **When children involved with public child welfare have the traumas of maltreatment, disruptions in relationships and instability layered on to other family challenges, the barriers to healthy development and success escalate.**<sup>iv</sup>

It is unfortunately not surprising then that **children involved with public child welfare have been shown to be five times more likely to have developmental delays than children in the general population**<sup>v</sup> - sometimes up to 50% of children on a county's child welfare caseload. **The developmental consequences of disrupted relationships and toxic stress are particularly significant for very young children.** This is particularly important since neuroscience research demonstrates how initial experiences provide scaffolding for later development – basic skills beget more advanced skills.<sup>vi</sup> Consistent dependable adults help children learn about their environments and how to manage stress before it accumulates and harms the development of young brains.

While research shows that **maltreated children have increased risk for an array of poor outcomes**, including low academic achievement, substance abuse, teen pregnancy, delinquency, and adult criminal behavior,<sup>vii</sup> **high quality early learning programs can reverse or decrease those trends.**<sup>viii</sup> **High quality early learning programs reduce the need for special education, enhance school readiness and success, and increase self-sufficiency through adulthood. Programs with strong parent engagement components can also reduce maltreatment rates for at-risk families, particularly for children in low-income and under resourced communities.**<sup>ix</sup>

High-quality programs assure that children are safe, learning and active, and provide another connection to a caring adult who is trained to support child development and enhance the social and emotional well-being of young children. The best programs also provide invaluable supports for families and caregivers, engaging them around a child's development, supporting school readiness, and can even connect families to critical support services. **High quality early care and education programs are a critical prevention and early intervention tool for maltreated children, ensuring a child's readiness to learn in school and life success through adulthood.**

*As of December 2012, the Los Angeles County Department of Children and Family Services' Executive Team is considering recommendations to strengthen and expand formal partnerships with early care and education programs (such as its successful pilot with Long Beach Unified School District Head Start) – a great step in ensuring local implementation of this paper's Policy Priorities.*

## Children 0-5 in the Child Welfare System in Los Angeles County

LA County has over 40% of the state's caseload for maltreated children under 18. In fact, nearly 1/3 of the young children under age 5 who were abused or neglected in California in 2011 were in LA County. LA County has higher rates of abuse/neglect for children of all ages. While California experienced overall reductions in children entering out of home care since 2005, **these rates actually increased for children ages 1-5 in LA County**. As of October 2011, in LA County there were:

- **11,778 abused/neglected young children 0-5** or 32% of the caseload served by the Department of Children & Family Services (DCFS)
- Children involved with the Los Angeles County child welfare system experience particularly high levels of **“caretaker inability to cope,”** or emotional abuse – nearly 35% of cases in LA compared with less than 20% nationally. National trends show higher levels of parent substance abuse than caretaker inability to cope, reinforcing the overwhelming stressors that parents in LA County face without adequate support systems.<sup>x</sup> Still, overall, **children aged 12 and under enter care overwhelmingly because of neglect** – between 70-80% for children under 5, both nationally and locally.

### **Data Highlight:**

*LA County DCFS Caseload Breakdown:  
5,888 children in out of home care (2,143 in  
foster care; 2,843 in kinship care)*

*5,077 young children remained in their  
homes under DCFS Supervision*

*813 young children without open cases, but  
receiving “Emergency Response” services  
from DCFS to assess and address immediate  
safety risks.*

California's subsidized early care and education programs represent a mixed delivery system including:

- Contracted care between licensed providers (including licensed Family Child Care Homes) and the CA Department of Education (CDE), which reimburses providers for care based on enrollment numbers.<sup>1</sup>
- Vouchers provided directly to families through contracted voucher agencies, designed to promote flexibility and parent choice in the child care setting that best meet the family's needs (including unlicensed family child care settings). Families currently on and transitioning off public assistance can obtain vouchers through programs administered by the Department of Education.<sup>1</sup> Other low-income, working families can receive vouchers through contracts between the Department of Education and public and private Alternative Payment Providers.<sup>1</sup> **LA DCFS has contract with CDE to provide such vouchers to its clients.**

Federal grants for Head Start and Early Head Start programs also target low-income and other vulnerable populations, including children with disabilities, pregnant and parenting teens, and children in foster care.

## ECE Service Rates are Low for Maltreated Children in Los Angeles County

**Of the 11,778 maltreated children under five under LA DCFS Supervision in 2011, a conservative estimate of 12.8% currently attend publicly funded early care and education programs, including Head Start/Early Head Start and state subsidized care** (n=1,509; 1,042 in subsidized services and 467 in Head Start/Early Head Start). The data needed to track the number of children under age 5 served in a comparable group of publicly subsidized early care and education services at the national or state level is not readily available. However, we do know that only 6% of children in foster care across the nation are enrolled in Head Start, even though regulations state that they are categorically eligible<sup>xi</sup>. LA County experiences similarly low rates – only **8% of eligible young children in foster/kinship care in LA County are attending the 4 largest Head Start grantee programs in the county, just above the national average.**<sup>1</sup> **Overall, it appears programs which primarily target low-income families do not systematically give access, let alone priority, to children with the additional layer of risk – a history of maltreatment.**

<sup>1</sup> Young children in foster care and kinship care were included in this calculation. There is inter-program flexibility for categorical eligibility for children in kinship care in Head Start programs throughout the US. Eligibility beyond “foster care” depends on local priority populations and state policies around kinship care. However, in LA County, children in kinship care are afforded the same eligibility in Head Start as children in foster care. There is more ambiguity around whether children in their homes under DCFS supervision are categorically eligible for Head Start programs and excluded from the calculation.

## Los Angeles County – Rates of Maltreated/At-Risk Children Enrolled by Program (2011 Enrollment)

State Subsidized Early Care & Education Program	Children <5 Yrs Served by ECE Program	Children <5 Yrs Supervised by DCFS Served by ECE Program	% Children Served Also Supervised by DCFS
<b>State Contracted Child Care (October 2011 Enrollment)</b>			
Family Child Care Home	741	1	Less than 1%
General Child Care	4,810	36	Nearly 1%
CA State Preschool (CSPP)	40,312	94	Less than 1%
<b>TOTAL in State Contracted Care</b>	<b>45,863</b>	<b>131</b>	<b>Less than 1%</b>
<b>State Subsidized Voucher Child Care (Administered by CA Department of Education)<sup>2</sup> (October 2011 Enrollment)</b>			
CA Alternative Payment Program (CAPP)	3,081	911	29.57%
<i>LA DCFS CAPP Vouchers</i>	<i>911</i>	<i>911</i>	<i>100.00%</i>
CalWORKS Stage 2	9,513	CPS Children Not Identified	
CalWORKS Stage 3	2,650	CPS Children Not Identified	
<b>TOTAL in Voucher-based Care</b>	<b>15,244</b>	<b>911</b>	<b>5.98%</b>
<b>TOTAL – Non-CalWORKS Subsidized Care<sup>3</sup></b>	<b>48,944</b>	<b>1,042</b>	<b>2.13%</b>
<b>Four Largest Head Start/Early Head Start Grantees in LA County- 2011 Cumulative Enrollment</b>			
LA County Office of Education HS/EHS	26,112	390	1.49%
Long Beach USD HS/EHS	2,639	40	1.83%
Center for Com. & Family Services HS/EHS	1,713	14	Nearly 1%
Options – A Child Care and Human Services Agency	1,431	23	1.61%
<b>Total of 4 Largest Head Start Grantees</b>	<b>31,895</b>	<b>467</b>	<b>1.46%</b>

Table 1: 1,042 children identified as “CPS” children in state subsidized child care and development programs and 467 children in foster care across the three largest Head Start/Early Head Start programs in the county. Sources: 2011 Head Start Program Information Reports; CA Dept. of Education - Child Development Division Data Reports

### Federal child welfare reporting requirements do not mandate educational assessments for young children before they are school-age.

Child welfare workers can choose, but are not required, to indicate in the federal Child Welfare System/Case Management System that a young child is in “preschool” as a grade level – the only option for a child who is not in kindergarten.

LA County DCFS has begun to systematize and track the number of children who need referral to early care and education programs electronically. When a child welfare worker is recording information for any child under age 5 and does not report the child as “in preschool” in the CMS/CWS, they are automatically taken to the new ECE referral system.

The technology has resulted in the following data (Table 2, next page):



**Data Highlight:**  
*In 2011, LA County DCFS identified 269 3 & 4 year-old’s as “in preschool.”*

<sup>2</sup> The data table does not include number of children receiving child care subsidies through CalWORKS Stage 1 which is administered by the CA Department of Social Services. Data for Stage 1 child care uptake rates for 2011 was unavailable at the time this brief was written.

<sup>3</sup> Children receiving protective services are not identified or tracked in CalWORKS Stages 2 & 3 programs.

## LA County DCFS Two-Click Referral System – Children Ages 3-4 Assessed for Referral to ECE Program (October 2011-October 2012)

Referral Consent	Referral Consent "No" - Reason	Referral Consent - No; Reason - Already Enrolled; ECE Program Type	Number of Children
No			
	Caregiver not interested		142
	Child has special needs that the program can't accommodate		44
	Child is already participating in an Early Care or Education Program	Child Care Services at a licensed Child Care Center	137
		Child Care services at a licensed Family Child Care Provider in a home	65
		Early Education Program at a Community Preschool (church/private or other preschool)	207
		Early Education program at a Head Start Preschool	303
		Informal daycare services with family member/friend/neighbor	31
	<b>Child is already participating in an Early Care or Education Program Total</b>		<b>743</b>
	Parent Caregiver can't/won't transport		32
	The program's hours are not feasible for family		11
<b>No Total</b>			<b>972</b>
<b>Yes Total</b>			<b>2,235</b>
<b>Assessed Total</b>			<b>3,207</b>

Table 2: 3,207 children ages 3-4 assessed for a referral to ECE programs. 2,235 were referred, 972 were not referred. Resource: South County/Long Beach Early Care Systems Advisory Committee Report (October 2011).

### Summary:

- Since October 2011, 3,207 children aged 3 or 4 being assessed for a referral to an early care and education program, primarily Head Start. Of these children, 2,235 had a caregiver or parent consent for a referral and were referred, and 972 were not referred.
  - The vast majority of non-referred/already enrolled 3 and 4 year-old's (n=647) are in a center-based program, with the majority in Head Start (n=303).
  - **The 743 not referred/already enrolled children and 269 "preschool" children in the CWS/CMS most likely are not reflected in "CPS" counts for subsidized care programs or Head Start counts of "foster children," reported in Table 1. There is no way to know without one centralized database that links to other public data systems.**
  - **A total of 117 children under DCFS supervision were referred through this system to Long Beach's Head Start Program, with 11 successful enrollments and 68 applications completed or pending from October 2011 through July 2012. The low enrollment per referral rate speaks to many issues, including overall lack of program capacity.**

*There is no data (with the exception of children who were successfully enrolled in Long Beach USD's Head Start/Early Head Start Program) on the number of county-wide enrollments in Head Start or other publicly funded programs that this system has resulted in for 2011 or 2012.*

## Policy Barriers to Early Care and Education for Vulnerable Children

### State-Subsidized/Contracted Early Care and Education Programs

California funds its various public early care and education programs through a mix of federal and state funds. One primary source of federal funds, the Child Care and Development Fund (which funds State Preschool, General Child Care, and the Alternative Payment Programs, and but not CalWORKS Stages 1, 2 & 3 programs), specifies that states must develop eligibility rules for children "receiving protective services." However, states are given broad authority to expand or narrow the population of children that fall under this category through policy or regulations "beyond formal child welfare or foster care cases."<sup>xii</sup> **Federal CCDF regulations explicitly note that state plans do not necessarily have to include children in foster care in these definitions.**<sup>xiii</sup> Furthermore, since CCDF funds use income as the primary mechanism for eligibility, states have the option, but are not mandated, to waive income/work eligibility requirements for children under the "protective services"

definition either on a case-by-case or categorical basis. **California only waives requirements for protective services children on a case-by-case basis, based on verification of necessity by a child welfare worker.** The California Education Code clarifies the eligibility and priority policies that apply to all Department of Education administered programs. The Education Code prioritizes “children who are receiving protective services, OR who have been identified as being abused, neglected or exploited, OR who are at-risk for abuse, neglect, or exploitation.” Based on a child welfare understanding of current California law, the definitions of “children receiving protective services” and “children at-risk of abuse/neglect,” describe all children under DCFS supervision and therefore these children should be categorically eligible and prioritized for child care and development services. These children have been maltreated, are at-risk of future abuse or neglect, and are receiving protective services because they have been abused/neglected. **However, based on early care and education understanding of the policy, only children who can be classified as “imminently at-risk” of abuse/neglect are currently able to receive subsidized child care and development services due to vague, confusing identification and enrollment policies.**<sup>4</sup> Furthermore, California’s elimination of the Centralized Eligibility List (CEL) (which used to act as a waiting list for children in need of child care) means that identification, certification, priority, and enrollment processes for abused/neglected children are carried out at the program site-level, exacerbating the problems of accurately identifying and enrolling abused and neglected children.

If priority mechanisms are working as federal and state law intends, the state should expect that the number of children who receive priority for subsidized child care under this heading would be significantly higher than the number of young children who suffer abuse or neglect overall. However,

- **Only about 2% of children in California who receive subsidized child care and development services through CCDF (non-CalWORKS) programs do so because they are receiving protective services – below the national average of 4%.<sup>xiv</sup> In LA County, the percentage is about the same – 2.13%, with the majority through the California Alternative Payment Program through DCFS.** This is astonishing considering the higher rates of child abuse/neglect in LA County than California overall. In California, 1.3% of children under five were victims of maltreatment in 2011 (the national average is around 1.2% of children under five). In LA County, about 1.71% of children under 5 were verified victims of maltreatment in 2011 – nearly the same proportion of children under 5 identified as “CPS” and prioritized in state subsidized ECE programs in Table 1.
- **The percentage** of children enrolled in the 4 largest Head Start grantee programs in LA County in 2011 identified as “foster children” is 1.71% - the exact proportion of maltreated young children in the county.

*In comparison, nearly one-third (31%) of the children receiving subsidized child care through CCDF programs in Arizona are referred due to their status as receiving protective services – the highest rate in the country.<sup>5</sup> Arizona’s policy prioritizes “children in foster care or children with an open child welfare case plan,” – a much clearer and more definitive rule for identifying maltreated children and one that California should consider as a model.*

**These numbers suggest there continue to be systemic barriers to priority enrollment of maltreated children in publicly funded early care and education programs.**

<sup>4</sup> The practice of only certifying children “imminently at-risk” seems to only apply to the 813 children receiving Emergency Response (ER) services from DCFS, and not the 10,965 young children with open cases, though there is no data to confirm the actual relationship that children coded as “CPS” in state subsidized care may have to child welfare agencies.

<sup>5</sup> Arizona had an abuse/neglect rate of 0.3% of children under age five in 2010.

## CPS Priority for Children “At-Risk” of Abuse or Neglect in Non-CalWORKS Programs

Currently, referrals from a range of social service or legal professionals **is required to prove that child care is necessary for the child to remain in the home – either by providing respite or allowing parents to work.**<sup>xv</sup> According to California Department of Education regulations, child welfare workers and other professionals must assess the home situation as risky enough to warrant enrollment in a formal child care program, but not problematic enough to necessitate removal of the child and placement in out-of-home foster or kinship care. Because many referral professionals are not prepared to play that role, **referrals for “at-risk” children who may not (yet) be involved with the child welfare system are difficult to evaluate and are inconsistently successful, according to anecdotal reports.**

Subsidized child care services are terminated for children deemed “at-risk” after three months unless the family can demonstrate that the child care services are still necessary to keep the child at home without child welfare supervision, the family is income eligible, or the family can demonstrate they are (now) receiving protective services from the child welfare agency. **Time limits for receiving child care and development services for children deemed “at-risk,” ignore the unpredictable nature of family turmoil, changes in placement, and the necessity of consistent caregiving and stable environments for young children, especially those who have been or are at risk of maltreatment.**

## CPS Priority for Children Receiving Protective Services in Non-CalWORKS Programs

**Proving a child is “receiving protective services,” and not just “at-risk of abuse/neglect” is a more definitive mechanism for accessing child care and development services.** However, this method would require that child welfare workers, biological parents, relative caregivers, and others included in the family team see the need for early care and education and that DCFS staff ensure that it is formally included in the child’s safety plan. However, **research shows these groups do not understand the preventive value of early care and education** or to accurately identify developmental issues, **resulting in low referral rates into early learning programs or inclusion into a case plan.**<sup>xvii</sup>

*Even when early care and education services is written into a case plan, administrators, child welfare workers and other professionals have anecdotally reported that **children who are in foster or relative care may not be considered “imminently at-risk” and are therefore not eligible for priority enrollment.** Some California counties administering state subsidized programs explicitly exclude children in foster care receiving priority.<sup>6</sup> **This practice effectively excludes about half of LA County DCFS’s caseload who are in foster or relative care.** Foster/kin caregivers must then meet income and need requirements. This has been especially problematic since foster care payments for the abused child are included in this calculation.<sup>xvi</sup> **Securing high quality child care for children in foster or relative care, children who may be no less in need of supportive services than those who remain in their biological home, remains difficult and inconsistent on a statewide and local basis.***

**When child care services are part of the case plan, there may also be a question about whether failure to secure child care services or to maintain enrollment may jeopardize the chances of keeping children at home.**<sup>xviii</sup> **Successful enrollment and attendance in these programs requires diligent attention to documentation and persistence in trying to locate program vacancies that may be beyond the capacity of stressed families and caregivers.** Families regularly struggle to maintain attendance for child care and development programs because of transportation, conflicting appointments and requirements with multiple public systems, poor program quality, and a lack of availability of auxiliary medical/disability services for the child.<sup>xix</sup> Assistance from the public

<sup>6</sup> San Diego County. “Commonly Asked Questions.” San Diego County Centralized Eligibility List. [https://www.childcaresandiego.com/TextPages/commonly\\_asked\\_questions.aspx](https://www.childcaresandiego.com/TextPages/commonly_asked_questions.aspx)

### **Children Involved With or Known to Child Welfare but Not Deemed “At Risk” or “Receiving Protective Services”**

*Current policy certainly does not capture a group of children that has no official status, yet is nevertheless quite similar to children currently under DCFS supervision. These children include those with parents who are/were under DCFS supervision (such as pregnant and parenting teens in or aging out of foster care – including 282 young children in LA County with parents under DCFS supervision). Young adults with a history of maltreatment are more likely to experience poverty and unemployment, and be investigated for abuse or neglect of their own children.<sup>xx</sup> Current policy also leaves out children who had open cases, which are now closed (and reside either with a relative, permanent caregiver, or adoptive parent, or successfully reunified with a biological parent). Younger children are also more likely to re-enter the child welfare system after returning home, suggesting that time-limited protective services do not always eliminate systemic challenges children face. This presents an opportunity for early care and education systems to provide an ongoing stable, developmentally beneficial, and child-centered family support for these very at-risk children.*

child welfare agency or their partner community based organizations who work to support and preserve families can be extremely helpful to families in navigating the complexities of the subsidized child care system.

Though families receiving protective services and those “at-risk” are categorically eligible without regard to income, **family fees may be assessed based on income unless the referral states it is necessary to waive the fee.**<sup>xxi</sup> Family fees and time limits make it harder for families by creating negative incentives for caregivers and parents to enroll a child. **Eliminating time limits on services by enrolling a child for a full year will bring early education policy more in alignment with state policy for school-age children who are allowed to maintain their enrollment in a school, despite child welfare placement changes.**

### **Federal Head Start and Early Head Start Programs**

**Federal Head Start/Early Head Start programs use clearer identification and enrollment policies, yet the mix of priority populations for local programs create inconsistent access for children in the child welfare system.**

Head Start and Early Head Start programs include heavy emphasis on quality early learning opportunities that include parent engagement components and federally mandated systems for developmental screenings and referrals. These programs are especially necessary for children and families most at-risk. Children in foster care are categorically eligible without regard to income and are certified for the full academic year, unlike state subsidized child care. Though Federal policy mandates that Head Start and Early Head Start programs develop plans to address the needs of children in foster care and report how many of these children are served as a “priority population,” **there is no categorical mandate to prioritize them in enrollment above other income-eligible families or children with disabilities.** New Federal mandates will soon require Head Start grantees to track and give priority points to all children served who have open child welfare cases – a significant improvement to addressing the access gaps for all abused and neglected children. This definition also leaves out the 800+ children receiving Emergency Response services, who may never have an open case. Still, the task of selectively prioritizing and subsequently enrolling children in foster care and all children under DCFS supervision requires the grantees to conduct successful identification, outreach, and enrollment activities. These processes can be complicated and lengthy requiring heavy coordination with DCFS. **They also require strategic blending of public funds and alignment of state and federal requirements for their use.**

### **Access Challenges to Early Care and Education Programs**

**Due to differing levels of quality and the overall shortage of high-quality early learning spaces in California, parents, caregivers, and child welfare workers struggle to identify high-quality programs and enroll children in programs that meet the needs of a traumatized child and best promote overall child well-being, safety, and permanency.**

State subsidized care through vouchers (such as the CalWORKS and Alternative Payment Programs) has been used to provide parents and caregivers flexibility and choice in the child care setting that best meet the needs of the family, opening up child care settings beyond contracted, generally licensed, center-based care. To ensure children under DCFS supervision receive high-quality care, children receiving vouchers through DCFS's CAPP contract are required to use the vouchers in licensed care settings. **Limiting subsidized early care and education referrals for abused/neglected children to vouchers for licensed care is likely creating a bottleneck for families and children in crisis that need flexible care options, given the overall shortage and high cost of center-based slots, particularly for children under 3 in LA County.**<sup>xxvi</sup>

Neither does licensing either a center-based or family child care home serve as an adequate proxy for quality, availability, and preparedness of early learning teachers and support staff to serve traumatized and behaviorally or developmentally challenged children, especially those involved with the child welfare system. **Increasing referrals to high-quality programs such as CA State Preschool and Head Start/Early Head Start would increase the overall enrollment rate of children under DCFS supervision in programs that are best able to meet their developmental needs.**

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*One-third of children aged 2-5 in the child welfare system need mental health services and auxiliary socioemotional supports.<sup>xxii</sup> Behavioral and emotional issues in young children can severely limit the child's ability to participate in early learning settings and put the child at an increased risk for expulsion from the program.<sup>xxiii</sup> In fact, young children overall are drastically more likely than school-age children to be suspended or expelled from educational settings because of behavior.<sup>xxiv</sup> This is a data point that cannot be fully explained by the presence of children involved in the child welfare system and points to systemic issues in the early care and education system in addressing the emotional and behavioral needs of all children. **Still, evidence shows that strategies such as early childhood mental health consultation and linkages to mental health assessments and services significantly reduce expulsion rates, reduce provider/teacher stress, and increase provider's sense of efficacy.<sup>xxv</sup> These strategies provide additional opportunities to expand access and improve quality for early care and education programs that serve children in the child welfare system.***

**Children may be receiving subsidized child care and development services through programs that do not track or prioritize maltreated or at-risk children. Without proper tracking, it is impossible to know how and if we are adequately serving the children most in need of services.**

**The electronic referral system developed by LA DCFS does not align with the federally mandated statewide Child Welfare System/Case Management System database, which collects and aggregates mandated child welfare reports from all California counties and sends the data back to federal agencies.** Consequently, child welfare workers who indicate in the CWS/CMS system that a 3 or 4 year old child is enrolled in "preschool" (the only early learning category available) are not taken to the referral system. As a result, 269 children in LA County are identified as enrolled in preschool, but nothing about type of care or funding stream is tracked. Furthermore, **the referral system does not link to any external program, public agency or department, or child care resource and referral center, and is currently used for DCFS data tracking purposes only.** Consequently, this system does not have the ability to track enrollment once a referral is made, nor can providers access a list of children under DCFS supervision who need care. Pushing this list out beyond Head Start to child care resource and referral networks could be a useful next step in linking children under DCFS supervision in a systemic way to child care and development services.

**The high rates of overlap between DCFS and CalWORKS caseloads means many DCFS supervised children could be (but not necessarily are) receiving child care and development subsidies and their enrollment is not tracked in either system.** At-risk and maltreated children are prioritized in voucher-based systems of child care, including CAPP, but are unlikely to be identified because their families meet income thresholds or are current or former recipients of CalWORKS. Even in center-based care, administrators have been known to certify a DCFS supervised child based on the family income to bypass the 3-month restriction of services. Yet, this means a child loses priority in enrollment and may also be subject to a family fee.<sup>xxvii</sup>

**Child welfare policies that separate education rights and decision-making authority from other rights and decisions mean that caregivers and parents face additional barriers to determining who is responsible for enrolling a child and which system serves as the primary link between foster parents, biological parents, child welfare agencies, and early care and education providers.**



For a number of reasons, child welfare workers, parents, and caregivers used to working in the child welfare system may view the steps needed to navigate yet another unfamiliar system as presenting daunting challenges. Child welfare policy mandates that children with open child welfare cases have an identified education rights-holder who may or may not be the biological parent. **For children in out of home care, this can mean their foster/kin caregiver does not necessarily have the legal authority to make education-related decisions, including enrolling a child in early care and education programs.**<sup>xxviii</sup> It would also mean child welfare, foster/kin caregivers, and biological parents will need to establish relationships with each other to ensure children's needs are being met through early childhood programs.

**Child welfare workers, parents, caregivers, and service providers do not have clear responsibilities to ensure children receive services that relate to goals of well-being, unlike clear child welfare goals for safety and permanency.** For example, California's incomplete implementation of Federal requirements for referrals to developmental screenings for maltreated children ages 0-3 in part stems from identification and referral responsibility. Should child welfare workers or parents/caregivers be responsible for identifying and pursuing services, or should service-providers proactively identify/recruit at-risk children in some systematic way? **Developmental screenings and early intervention services are yet another access point to early learning opportunities that are underutilized because of incomplete collaborative partnerships between early childhood and child welfare systems.** Without assistance from those who understand the nuances of the early care and education system, child welfare agencies will not be successful in addressing the logistical and emotional barriers that may stop parents and caregivers from utilizing services. **Training and supporting liaisons within and external to child welfare is a critical tool for increasing access to early childhood services.**

## Policy Recommendations

**Policy Priority 1: All maltreated and significantly at-risk children under child welfare supervision should be identified and referred by child welfare workers and given enrollment priority in high quality public ECE programs. Policies that achieve this will align with safety and permanency efforts by providing respite and workforce support to parents and caregivers, and will promote child well-being by addressing the significant developmental risks.**

**Public early care and education programs (including Head Start) develop priority systems for all children with open child welfare case plans and receiving emergency response services, without regard to a child's placement situation, basing priority tiers in terms of layers of 1.) developmental risk and 2.) immediacy of risk for future maltreatment.**

- Children in out of home care (both voluntarily and court-ordered) should receive highest priority, regardless of caregiver need or income, modeling priority for Head Start/Early Head Start programs. Foster care and non-needy relative care payments are excluded from assessments of family fees.
  - Definition will include the 3,654 children 0-5 in LA County in Family Reunification (Oct. 2011)
  - Definition will include the 2,234 children 0-5 in LA County in Permanent Placement (Oct. 2011)
  - Definition should include a subset of 813 children 0-5 receiving Emergency Response services (Oct. 2011) who are removed from their homes before a case can be opened.

- Children who remain at home under DCFS supervision (both voluntarily and court-ordered) and children of teen parents who are under child welfare supervision receive second priority.
  - Definition will include 5,077 children 0-5 children in Pre- or Post- Placement Family Maintenance (Oct. 2011)
  - Definition should include 282 children 0-5 with parents under DCFS supervision (May 2011)<sup>xxix</sup>
  - Definition should include a subset of 813 children 0-5 receiving Emergency Response services (October 2011) who remain in their homes without an open case.
- Children who have a history of DCFS supervision receive third priority.<sup>7</sup>

**Child welfare agencies create policies and support practice norms through trainings on including early care and education in case plans. This will capitalize on the potential for children, parents, and caregivers involved with child welfare to access needed services through early care and education programs, including developmental screenings and parenting programs, without traditional stigma of child welfare involvement.**

- Require developmental/education needs assessments for every young child 0-5 during decision-making meetings and other points of engagement with the system, allowing workers flexibility to consider and mitigate barriers while increasing overall enrollment rates of maltreated children. These requirements will align with similar education requirements for school-age children.
- Emergency Response workers specifically trained to successfully enroll children who do not have open child welfare cases and provide families with care options that best meet their needs.
- Special training to support case workers in early identification of developmental delays and how early care and education can be used to ameliorate delays.

**Policy Priority 2: Scale up best-practices (including Head Start/Early Head Start models for collaboration and referral) through policies that remove barriers to collaboration and coordination between early care and education systems and child welfare systems. This will promote consistency of care and ultimately enhance efforts to ensure safe, stable environments for children and align policies for young children with policies for school-age children.**



**Early care and education systems develop an effective way to identify eligible at-risk children and match them to available slots in the child’s geographic area, through a shared, centralized, accurate database with public child welfare agencies.**

- Policymakers remove policy and practice barriers to sharing information about the young children under voluntary or court-ordered supervision, including removing barriers to and obtaining caregiver consent, so that early care and education systems can properly identify these children and match them to open-slots in a real-time basis.
- Child welfare and education administrators collaboratively create and support streamlined, single-entry data reporting systems at the site/program-level that connect to centralized systems, which are accessible to child welfare and education stakeholders alike.
- Early care and education providers maintain feedback loops about enrollment with the shared data system.

**Child welfare agencies track the early care and education referral and enrollment status of all young children ages 0-5 under its supervision as part of the family/child’s case management.**

- Update the statewide CWS/CMS data system to accommodate the practice of assessing and documenting the variety of early learning opportunities available to young children in the child welfare system, beyond “preschool” for 3- and 4-year olds, so that aggregate data can be analyzed and utilized in service planning and needs assessments.
  - Include children whose families are receiving child care as an income-based or public assistance-based program (i.e. CalWORKS Stages 1, 2, & 3).
  - Include children enrolled in non-public early care and education settings, including faith-based and informal care with family/friend/neighbor care providers.
  - Include children who are receiving Emergency Response services.

<sup>7</sup> Data is available but methodology for estimating numbers of children 0-5 with closed cases in LA County is in development.

- Child welfare workers proactively establish relationships with early care and education providers and make them aware of a family’s involvement with child welfare, ensuring that providers certify families based on child welfare need first, before income or work needs are assessed.

**Certify enrollment for a full or academic year in all early care and education settings.**

- Once enrolled as a child under DCFS supervision in any program, allow children to maintain their enrollment despite child welfare placement or case plan status changes for the full academic year – just as their school-age peers are allowed.<sup>xxx</sup>

**Policy Priority 3: Build high-quality ECE systems, which meet the dual goals of prevention and early intervention, by working in tandem with child welfare agencies to ensure the safety, permanency, and the well-being of all young children at-risk while enrolled in ECE and beyond.**



**Establish formal partnerships with mental health and disability service providers to support early care and education providers in meeting children’s mental health, behavioral, and developmental needs.**

- Explore and utilize public health, including MediCaid, and disability funding streams to provide supportive services to early care and education providers to improve the overall quality and comprehensiveness of early childhood development programs.
- Utilize recent system-level collaborations between child welfare and public mental health systems to create mental health access points within early care and education settings for children and families involved with the child welfare system. Such efforts should include mental health consultations to teachers and care providers, and on-site infant/young child mental health specialists for young children exhibiting symptoms of distress.
- Support and develop parent-engagement components of early childhood programs that include temporary and permanent caregivers and parents to promote consistency of care, child well-being, and assessment and referrals to family support services that promote safety and strengthen families.

**Child welfare agencies identify and refer every maltreated or at-risk child to child development and disability services.**

- Expand the Federal IDEA Part C requirement for a referral to a developmental screening for all children 0-3 years old who come in contact with child welfare agencies to include all children 0-5.

**Early intervention and disability service providers establish formal partnerships with child welfare agencies to serve all eligible children in the child welfare system.<sup>8</sup>**

- Establish formal collaborative partnerships between developmental assessments/services (such as Early Start), child welfare agencies, and early care and education program recruitment efforts to provide multiple access points to early learning opportunities.

**Modify training requirements for child welfare workers and parents, kinship caregivers, and foster parents to include strong early childhood development components.**

- Require intensive training on the benefits of early learning on the developing brain, the impact of trauma on a child’s outcomes and the reparative effects of high-quality early learning experiences.
- Develop a comprehensive resource guide that explains the diverse set of early care and education opportunities, their benefits, and include concrete strategies to help vulnerable families access these services, even in the absence of child welfare involvement.

<sup>8</sup> Head Start/Early Head Start programs have used strategies such as MOU’s and partnerships with local disability service centers to successfully identify and recruit very at-risk children. LA DCFS has similarly seen an increase in children served by local Head Start/Early Head Start programs in 2012 due to an MOU and recent developments of the electronic referral system. Likewise, DCFS’s Alternative Payment contract with the CA Department of Education comprises the majority of child care enrollments for children on its caseload, highlighting the potential for broad success of targeted and formalized efforts to serve very at-risk children.

## End Notes

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