Fortifying the Infant and Toddler Care System

The need for a more abundant and improved infant and toddler system in Los Angeles County is longstanding. Low infant-toddler child care capacity has far reaching consequences, as the struggle to find care requires parents and caregivers to decide between reducing their working hours or leaving the labor force entirely, impacting not only their own family but also the overall economy. The current capacity to provide infant-toddler care to working families in LA County is only 13%, with workforce shortages and high price for care being two significant factors contributing to this low capacity. Also, without proper planning and response, an unintended consequence of the historic expansion of Transitional Kindergarten (TK) for all 4-year-old children in California and the creation of Universal Prekindergarten (UPK) could further impact this already low capacity.

Workforce shortages are pronounced in the infant-toddler care sphere, as hiring and retaining staff remains challenging due to low wages paid to providers. In addition to low pay, child care workers are less likely to have access to benefits through their

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employer. Notably, approximately 50% of family child care and center-based providers earn a wage low enough to qualify for state and/or federal subsidies such as Medicaid, WIC, and SNAP. Child care workers are seeking better jobs, and, with school districts ramping up to provide TK to all 4-year-olds by 2026, early care and education providers are leaving their programs to work in school district TK programs that pay more.

In addition to workforce challenges, the high price for child care also impacts the current capacity for infant-toddler care in LA County. In 2022, a family in LA County earning 85% of Standard Median Income (SMI) (under \$74,251) will pay approximately 20% (\$14,850) of their household budget for infant-toddler care and on average \$25,992 in rent for a 2-bedroom apartment, making child care expenses the second largest expense for families after housing. Parents and caregivers have difficulty finding affordable options and may not know how to access Resource and Referral agencies that could aid in finding child care options. As a result, available options are not filled, further affecting the existing child care system, and parents do not receive the care they need, further impacting their families and the economy.

The expansion of TK and UPK has also changed the early child care landscape, and adjustments should be considered to ensure that both systems work together harmoniously. While UPK is a tremendous step that provides access to free education and care, the potential impacts of 4-year-olds leaving non-school district based early care and education programs to enroll in TK programs must be addressed to maintain and improve upon the current infant-toddler system. The financial business model for infant-toddler programs relies on revenue from 4-year-old preschool tuition to "subsidize" the higher cost of infant-toddler care. As a result of reduced preschool enrollment in private

preschools, community early education centers, and family child care homes, it is anticipated that some infant-toddler programs will need to raise their prices, permanently close their business, and/or reduce the quality of care they provide. Due in large part to an already present lack of infant-toddler spaces in eligible child care facilities and homes, only 8% of infants and toddlers eligible for subsidized infant-toddler care utilize these services. The departure of 4-year-olds from the private early care model will likely further reduce this already low capacity to care for infants and toddlers.

Increased awareness and support for preserving and improving upon the current infant-toddler system is necessary to ensure that the infant-toddler system succeeds and works in concert with UPK to provide families with child care options they can afford.

I, THEREFORE, MOVE THAT THE BOARD OF SUPERVISORS direct the Office for the Advancement of Early Care and Education, within the Department of Public Health, in collaboration with the Department for Economic Opportunity and in partnership with early care and education stakeholders, to develop a blueprint identifying immediate and long-term efforts to fortify the infant and toddler care system and to report back to the Board of Supervisors in 180 days.

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