

STRATEGIES FOR EXPANDING ACCESS TO CHILD CARE SUBSIDY FOR CHILDREN EXPERIENCING HOMELESSNESS

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with generous support from Pittsburgh Child Guidance Foundation

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EXECUTIVE SUMMARY

With generous funding from the Pittsburgh Child Guidance Foundation and the support of the Pennsylvania Office of Child Development and Early Learning (OCDEL), YWCA Greater Pittsburgh partnered with Ounce of Prevention Fund (the Ounce) to identify promising strategies for increasing access to subsidized child care for families experiencing homelessness. The Ounce conducted background research on child and family homelessness, reviewed relevant child care subsidy policies in states across the country, and conducted in-depth interviews with six states in order to analyze the impacts of various policies on access to child care for this population.

The research, state policy review, and interviews revealed a number of promising strategies and common challenges across states. States have addressed access to child care subsidy for families experiencing homelessness through expanding eligibility based on homeless status, collaboration with state and community partners that already serve families who experience homelessness, intentional efforts to identify and outreach to these families and increase public awareness of family homelessness in general, and through use of grants and contracts. Some of the challenges identified include providing adequate supports for children and families impacted by homelessness, lack of data on child and family homelessness, and low availability of child care during non-traditional hours.

Most states are only just beginning to implement the strategies described above, so there is still much to learn as the work unfolds. Based on what is already known about the experience of families and on early implementation efforts of new policies in various states, seven recommendations emerged. They include expanding eligibility specifically for families experiencing homelessness in some way, developing procedures for identifying families experiencing homelessness, conducting intentional outreach to families and providers who serve them, providing training and professional supports to the field, developing a data plan, taking a two-generation approach, and investing in strategic collaborations.

As mentioned above, many efforts to increase access to child care subsidy for families experiencing homelessness are in their beginning stages. In recognition

of the overall dearth of information on the intersection of child care and family homelessness, it is also recommended that efforts to monitor innovations in states should continue. It is likely that more data will be available in the coming years, and states will have much more to share and much more to learn from each other. Hopefully, this report represents the beginning of robust action and attention on the growing need to ensure the most vulnerable children and families can access critical supports like child care. Below are the seven recommendations for Pennsylvania – and other states – to better serve families experiencing homelessness.

Recommendation 1: Expand Eligibility

Many families who experience homelessness have weak support systems and very chaotic lives, and often don't have anyone who can care for their children while they search for a job or housing, or receive critical health and mental health services. Providing automatic eligibility for child care provides an immediate stabilizing force in their lives which can anchor their efforts to become self-sufficient.

Recommendation 2: Develop Procedures for Identification

States should utilize as many strategies as possible to identify families at both the subsidy administration level and at the child care provider level. Families' housing situations can fluctuate throughout the year, and processes should be in place to identify and assist families who are experiencing homelessness at the point of application for child care subsidy, and while families are already being served by a child care provider.

Recommendation 3: Conduct Outreach

Intentional outreach at all levels to educate subsidy staff, providers, and families about the opportunities available for support, can ensure that good policies don't just sit on a shelf.

Recommendation 4: Provide comprehensive training and professional supports for staff

Stakeholders at all levels—from agency leadership, to eligibility staff, to child care providers will need training and support to ensure the needs of families experiencing homelessness are met. At minimum, child care providers and subsidy

staff should have training that addresses how homelessness is defined, information about the causes and prevalence of homelessness among families, and the impacts of homelessness on children, parents, and the community.

Recommendation 5: Develop Data Plan

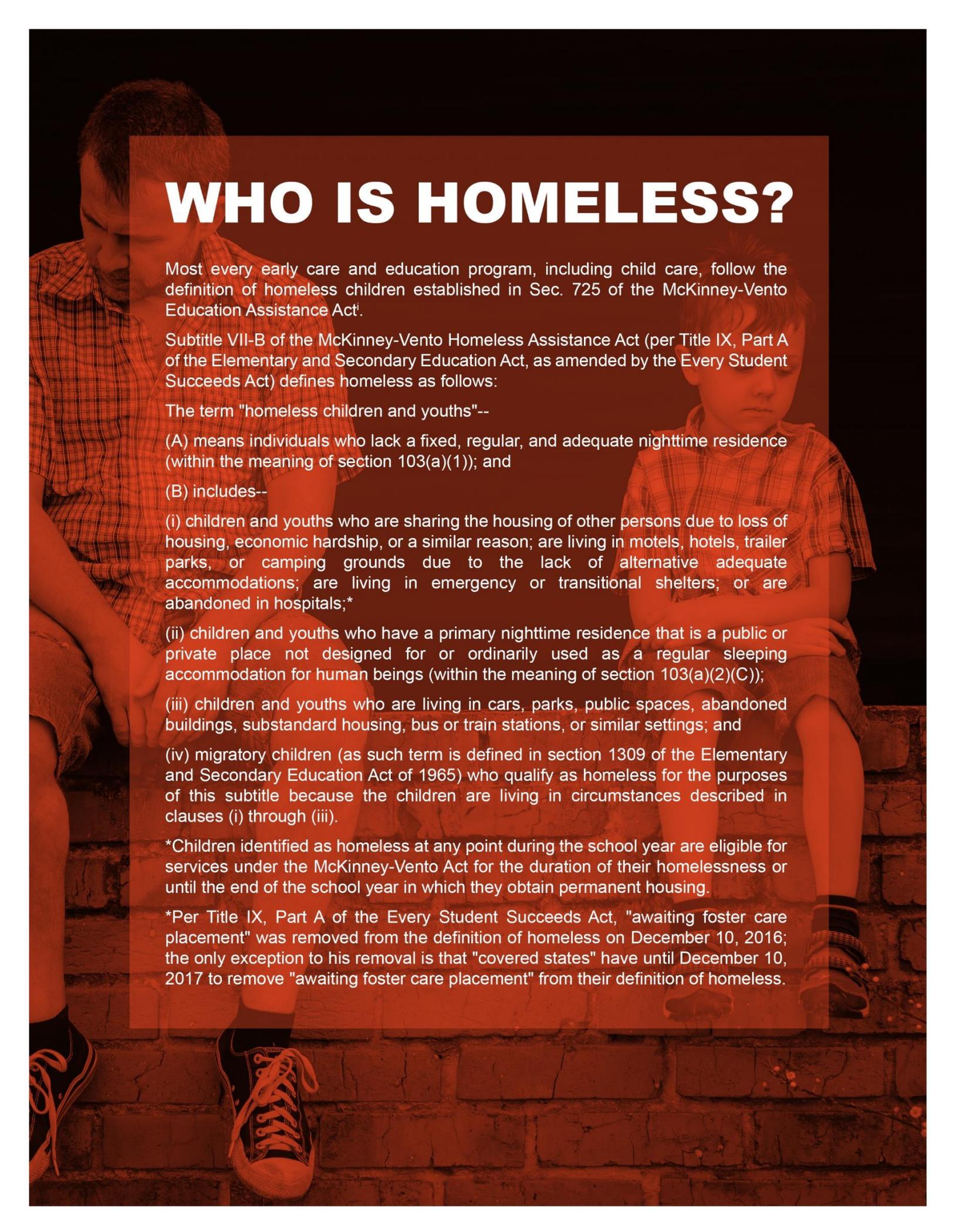
States must develop procedures for identifying families experiencing homelessness at both the provider and subsidy application level and for capturing this information in their data systems. Child care subsidy agencies should also work collaboratively with partners across early care and education, homeless services, public benefits, workforce development, State Education Agencies, and other relevant stakeholders to develop a plan for improving data collection and use as it relates to families experiencing homelessness in a coordinated fashion.

Recommendation 6: Take a two-generation approach, whenever possible

States could do more to leverage child care assistance as a mechanism to connect families experiencing homelessness to programs that offer a two-generation approach, which stand the best chance of helping families resolve their homelessness and heal from its devastating impacts. At minimum, states should consider how to craft policy and systems that connect families with the highest quality early care and education programs—these programs, like Head Start programs for instance, will be best equipped to meet the needs of the most vulnerable children and families inside of the program, and also best positioned to collaborate with other service providers in the community.

Recommendation 7: Invest in Collaborations

States seeking to improve access to child care for homeless families should consider how to leverage child care as a foundation for coordination, and even integration, across various service systems. States should consider dedicating staff who can coordinate cross-sector service provision, making more efficient use of the resources and services available for families.



WHO IS HOMELESS?

Most every early care and education program, including child care, follow the definition of homeless children established in Sec. 725 of the McKinney-Vento Education Assistance Act¹.

Subtitle VII-B of the McKinney-Vento Homeless Assistance Act (per Title IX, Part A of the Elementary and Secondary Education Act, as amended by the Every Student Succeeds Act) defines homeless as follows:

The term "homeless children and youths"--

(A) means individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1)); and

(B) includes--

(i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals;*

(ii) children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 103(a)(2)(C));

(iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and

(iv) migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in clauses (i) through (iii).

*Children identified as homeless at any point during the school year are eligible for services under the McKinney-Vento Act for the duration of their homelessness or until the end of the school year in which they obtain permanent housing.

*Per Title IX, Part A of the Every Student Succeeds Act, "awaiting foster care placement" was removed from the definition of homeless on December 10, 2016; the only exception to his removal is that "covered states" have until December 10, 2017 to remove "awaiting foster care placement" from their definition of homeless.

HOMELESSNESS AND THE CHILD CARE AND DEVELOPMENT BLOCK GRANT ACT OF 2014

In November 2014, Congress passed and President Barack Obama signed the Child Care and Development Block Grant Act of 2014 (Pub. L. 113-186) (“CCDBG Act”), reauthorizing the federal child care program for the first time in 18 years. The CCDBG Act makes significant changes to the Child Care Development Fund (CCDF) programⁱⁱ, including strengthening health and safety standards, establishing more family-friendly policies, improving overall quality of child care, improving access and continuity of care, and promoting family choice while empowering parents to make informed decisions about child care through improved consumer education requirements. The CCDF program has two goals: supporting the ability of parents to work and supporting child development. The CCDBG Act underscores the equal importance of the latter goal by recognizing high-quality child care as a key component of the larger early care and education system. The CCDBG Act also includes new provisions meant to increase access to child care for families experiencing homelessness, which follows a recent trend seen in many other early care and education programsⁱⁱⁱ. The final rule^{iv} implementing the CCDBG Act was published in September of 2016.

In recognition of the many barriers families experiencing homelessness face in accessing vital early childhood services, the law and the updated CCDF regulations included a number of new requirements related to homelessness. In particular, states, territories, and tribes implementing CCDF are required to:

- use the definition of homelessness from the education subtitle of the McKinney-Vento Act, which includes families sharing the housing of others due to economic hardship

- establish a grace period that allows children experiencing homelessness to receive child care while their families take action to comply with immunization and health/safety requirements
- provide support to families in obtaining immunizations, etc.
- use funds for activities that improve access to child care services
- establish procedures to permit enrollment of children experiencing homelessness while required documentation is obtained
- provide training and technical assistance on identifying and serving children and their families experiencing homelessness
- conduct specific outreach to families experiencing homelessness
- coordinate with early childhood programs serving children experiencing homelessness, State Coordinators for Homeless Education, and, as practicable, local liaisons and CoCs
- collect & submit data on children experiencing homelessness receiving child care assistance
- prioritize families experiencing homelessness for services; failure to do so may result in a reduction in funding^v

These new provisions in CCDBG, along with similar efforts to better align early care and education programs with the protections afforded students experiencing homelessness under the McKinney-Vento Act^{vi}, have prompted many states to take action to better serve families experiencing homelessness. CCDBG reauthorization presented states with a new opportunity to advance access to high quality child care for families experiencing homelessness by unlocking new policy strategies available to states to more intentionally target families experiencing homelessness in their CCDF programs, as well as clarifying and emphasizing those strategies that already existed. A handful of states already implemented some of the new requirements in their existing child care subsidy programs; however, most needed to develop new policies and procedures to implement the law.

DATA ON HOMELESSNESS

At the federal level, there are three primary sources of data on child homelessness: the Homeless Management Information System (HMIS)^{vii}, Annual Homelessness Assessment Report (AHAR)^{viii}, and enrollment information on homeless students collected by the Department of Education^{ix}. Many early care and education programs also collect data on the numbers of children experiencing homelessness who are enrolled in programs, but these data sets are much smaller. Unfortunately, the federal agencies that collect these data do not operate under the same definition of homelessness, and each data set has significant limitations in estimating the number of young children who experience homelessness.

HMIS and the AHAR only capture information on children and families who are served by programs funded by the Department of Housing and Urban Development (HUD), which does not reflect families defined as homeless under early childhood and education policies, such as those who are sharing the housing of others due to economic reasons or who are staying in motels. HUD defines homelessness more narrowly than most early care and education programs, with more of a focus on literal homelessness and people who are staying in shelters. It should also be noted that families who experience homelessness in communities that are not served by HUD-funded programs are less likely to be counted in these data. The Department of Education (ED) requires school districts to identify and report on the number of students who are experiencing homelessness according to the McKinney-Vento definition, which is broad and also applies to nearly all early care and education programs. Unfortunately, ED data only counts children enrolled in school, and because preschool and other early childhood programs are not universally available, these data drastically under represent children younger than school age. In addition, ED data relies upon families to self-report their housing status or for school personnel to identify them, which also makes it likely that the ED numbers represent an undercount for all children.

Limitations of currently available data make it impossible to arrive at a truly accurate count of the number of children and families who experience homelessness. One commonly used methodology for estimating the number of children under the age of six experiencing homelessness is to apply the HMIS estimate of the percentage of young children who are served in federally-funded shelters, approximately 50%, to the ED data on all students who are identified as homeless by schools. Although this estimate can be useful, policy makers should use caution when using this estimate, or any of the above mentioned data sources, for policy development. Finally, because there is no agreement on the definition of homelessness across federal agencies and, by extension, among researchers in the field, evidence about patterns and rates of homelessness among families and effective homelessness interventions for families is also fragmented, making it challenging to draw conclusions about how best to prevent and end homelessness. Policy makers should keep in mind that the homeless services field is still very young, and an evidence base is still developing.

HOMELESSNESS, YOUNG CHILDREN, AND CHILD CARE

Children who experience homelessness face a host of challenges that threaten their health, development, and ability to succeed in school. Children and families experiencing homelessness face barriers to accessing high-quality child care and other early education programs that exceed those confronted by families in poverty with stable housing, even as the research tells us that such programs are particularly beneficial for children experiencing homelessness.^x

Families experiencing homelessness are also the fastest-growing segment of the homeless population, with approximately 2.5 million children nationally estimated to experience homelessness over the course of a year.^{xi} Most children who experience homelessness are very young, with children under six accounting for nearly half of all children in federally funded shelters.^{xii} Shockingly, the age at which a person is most likely to be found in a homeless shelter in the United States is infancy.^{xiii}

Research has shown that homelessness puts children at increased risk of health problems, developmental delays, academic underachievement, and mental health problems.^{xiv} In fact, children who are homeless are sick four times as often as other children, experience four times the rate of developmental delays and have three times the rate of emotional and behavioral problems.^{xv} Sadly, most children experiencing homelessness do not receive the services they need to address their high rates of medical problems, developmental difficulties, and mental health needs.^{xvi} In addition, over half of all children who experienced homelessness at some point by age five moved more than three times during that period. Studies have found that frequent moves during early childhood negatively impact school achievement.^{xvii} Further, one recent study found that families who

had experienced housing instability in the past six months were less likely to be enrolled in early education and center-based care compared to families who had been stably re-housed following a homelessness episode.^{xviii} That same study also found that in the months following a shelter stay, many families continued to experience both housing instability and instability in child care arrangements, which was linked to increased behavioral problems in children.

Early care and education services, including child care, can help mitigate the impacts of homelessness on these vulnerable children. Research overwhelmingly shows high-quality educational experiences in the preschool years can have a positive effect and long-term benefit throughout a child's education. Additionally, data from the Family Options Study, sponsored by the U.S. Department of Housing and Urban Development, found that preschool aged children who had experienced homelessness and who were enrolled in Head Start or other center-based care showed better pre-math and pre-reading skills than other children experiencing homelessness who were only in parental care^{xix}.

Families experiencing homelessness face a number of interconnected challenges that can make it more difficult to access resources, especially child care. The most prevalent barrier to infant and child care is the cost. According to the 2016 Child Care Aware of America report, "the average cost of infant care exceeds 10 percent of the state's median income for a two-parent family."^{xx} In Pennsylvania, the cost of care exceeds 12 percent of a married couple's median income, which is well above the U.S. Department of Health and Human Services' standard for child care affordability of seven percent.

While child care subsidies are available for low-income parents, mothers who experience homelessness are less likely to access subsidies than both stably-housed mothers and mothers at risk of homelessness.^{xxi} Because of lack of resources and information, parents who experience homelessness

either believe that they are ineligible for subsidies or find the process of accessing subsidies to be too cumbersome and confusing to be worth the effort of signing up.^{xxii} Further complicating their ability to pay for child care or access subsidies, families experiencing homelessness are known to move so often throughout a single year that child care is often interrupted, leading to deficiencies in the quality of care and education. A 2009 report from the Institute for Children and Poverty found that “over half of children who experienced homelessness at some point by the age of five moved more than three times during that period.”^{xxiii} Homelessness and frequent moves can put a child at risk for negative developmental outcomes.

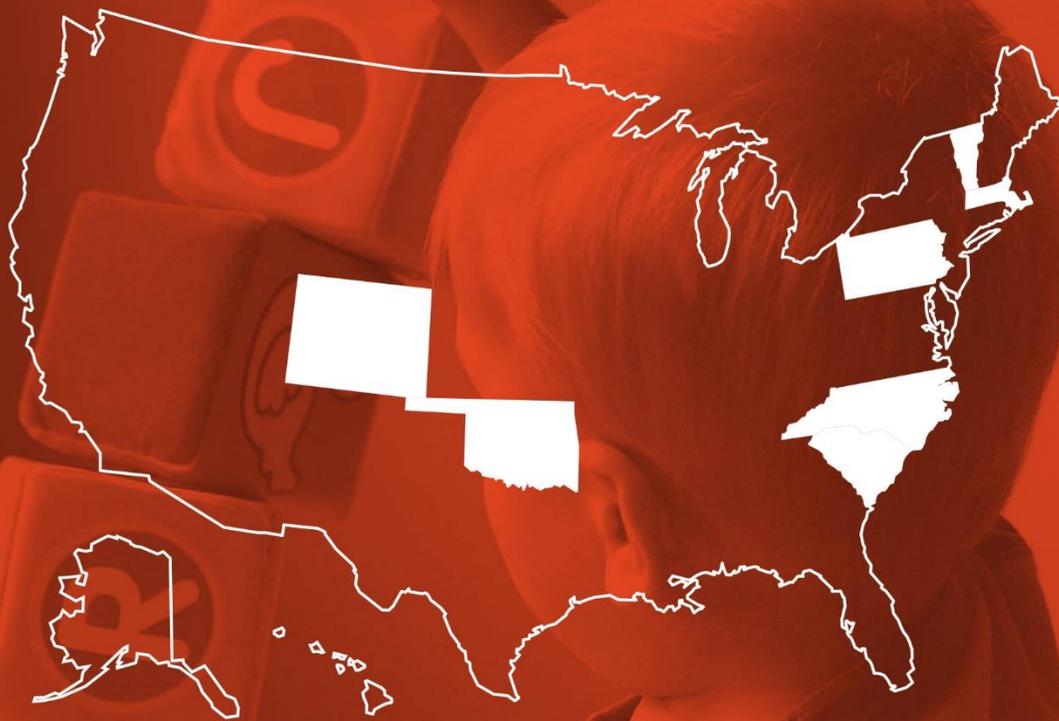
Access to affordable child care can help parents pursue education and employment opportunities by providing them with the time and support needed to focus on work and school while their children are in care. Further, placing a child in care aids in the child’s development and increases his or her future educational attainment, leading to a multigenerational impact on education and employment. Unfortunately, only 10 percent of low-income parents are enrolled in education or training and 25 percent of those parents are also working full time, making child care an especially important need.^{xxiv} Despite this need, the Urban Institute identified a number of eligibility policies in the Child Care and Development Block Grant that limit the ability of parents seeking education to obtain child care subsidies.^{xxv}

Homeless parents are especially vulnerable to these challenges. They tend to rely mostly on informal child care arrangements and are often forced to quit jobs or schooling due to instability in child care access.^{xxvi} Removing the barriers that exist to allow homeless parents to access affordable child care can help break cycles of poverty and improve both the parents’ and their children’s likelihood of obtaining meaningful employment and stable housing.

Children who have stable housing demonstrate better educational outcomes, like better vocabulary skills, grade retention, and higher rates of

high school completion than children experiencing homelessness.^{xxvii} This is especially prevalent in young children, underscoring the need to remove barriers to child care access for homeless families. Child care instability can also lead to poor attachment to child care providers and often interferes with cognitive development, school readiness, and academic progress.^{xxviii} Providing families experiencing homelessness with child care subsidies has increased permanency with licensed child care providers, thus mitigating the negative impacts of instability.^{xxix}

BEST PRACTICES FROM ACROSS THE COUNTRY



Through interviews with Colorado, Massachusetts, North Carolina, Oklahoma, South Carolina, and Vermont, The Ounce of Prevention compiled best practices to better serve families experiencing homelessness.

Best practices include:

- Modify provisions to remove barriers and expand eligibility
- Collaborate with other agencies to facilitate supports
- Increase awareness to improve identification and engagement practices
- Utilize grant and contracts to provide and improve quality of child care

INCREASING ACCESS TO CHILD CARE FOR CHILDREN EXPERIENCING HOMELESSNESS

In 2016, Pennsylvania Office of Child Development and Early Learning (OCDEL) and YWCA partnered on a small pilot project in Allegheny County aimed at serving more families experiencing homelessness in child care. Learnings from the pilot revealed that simply prioritizing families for child care funding by placing them at the top of wait lists and utilizing contracted slots were not effective, as many families were not employed and thus not eligible for child care subsidy. OCDEL has remained committed to serving more families experiencing homelessness in child care and is currently considering new regulations that would provide a period of presumptive eligibility for families experiencing homelessness, thus providing them time to search for a job or engage in some other activity that would make them eligible for subsidy. Around the same time, YWCA Greater Pittsburgh received private funding to identify strategies to increase access to child care for families experiencing homelessness, and partnered with Ounce of Prevention Fund (the Ounce) to review child care subsidy policies related to homelessness in states across the country, analyze the impacts of those policies on access to child care, and identify recommendations for Pennsylvania to consider as they move forward in their efforts to improve services to this very vulnerable population.

In order to identify recommendations, the Ounce first reviewed the literature to better understand what is known about barriers and facilitators to child care for families experiencing homelessness, as well as the role of child care in mitigating the impacts of homelessness and supporting families in resolving homeless episodes. The Ounce also investigated state child care policies related to homelessness via review of CCDBG law and regulations, state CCDF plans, written and posted state policies, and in depth interviews with CCDF staff in six states identified through the initial review process as having more robust policies.

Below, a summary of themes that emerged from the policy review and interviews are presented, along with recommendations for how states hoping to improve access to child care for this population might best achieve that goal.

EXPANDING ELIGIBILITY

The CCDBG Act has provisions that allow states to expand eligibility for CCDF for families experiencing homelessness, and in turn, remove common barriers to child care, employment, and education. Empowering families experiencing homelessness to obtain employment or further their education allows states to leverage CCDF as a powerful tool in preventing and ending family homelessness.

Several of the states interviewed for this report expanded eligibility through policies that provide special eligibility for homeless families.

- In **Vermont**, families experiencing homelessness are automatically eligible for child care subsidy based on their status as homeless. Parents experiencing homelessness are authorized for 12 months of child care subsidy, during which time they also receive community-based comprehensive services designed to support them in obtaining housing, employment, health and mental health services, and stabilizing their families.
- **South Carolina** has also expanded eligibility for families experiencing homelessness by granting families a 12 week period of presumptive eligibility. This presumptive eligibility period provides families with time to find housing, employment, and gather their eligibility documentation. At the end of the 12 week period, families who submit all paperwork required for eligibility, including proof of employment, continue on through the remainder of the 12 month eligibility period. Assistance is terminated for those who are unable to prove eligibility.
- **Colorado** drafted and approved rule changes^{xxx} that authorize families to receive child care assistance during a stabilization period during which families are not required to participate in an eligible activity. The stabilization period is to be at least 60 days within a 12 month period, although given the country-administered nature of the program, there is some flexibility in extending it. It was noted that the minimum length was decided in conjunction with the

Colorado Coalition for the Homeless and aligns with the typical length of transitional housing. Upon receipt of the necessary verifications the household can continue to be authorized for care beyond the stabilization period.

COLLABORATIONS

The CCDBG Act places new emphasis on collaboration as a strategy for supporting children and families experiencing homelessness. Lead Agencies in states are now either required or encouraged to coordinate with early childhood programs serving children experiencing homelessness, State Coordinators for Homeless Education, and, as practicable, local McKinney-Vento liaisons and Continua of Care^{xxxi}.

Indeed, nearly every state interviewed for this report cited collaboration as one of the most critical, if not the most critical, strategy they used to reach and serve children experiencing homelessness.

- In **South Carolina**, the CCDF program partnered with the state's McKinney-Vento State Coordinator stationed in the Department of Education and several homeless coalitions throughout the state to identify and refer families to the child care subsidy program. This allowed the state to rely on the strong connection and expertise that these service partners already had with families on the ground to ensure they could apply.
- In **Oklahoma**, state subsidy staff participated in and/or led a number of public-private working groups, inclusive of the state's McKinney-Vento state coordinator, the Head Start Collaboration Office, and community service providers. These groups helped to inform policy development and produced a number of innovative next steps and visions for policies and practices that would improve access to child care for families experiencing homelessness. One outreach product developed from these efforts was a bookmark that could be handed out to families experiencing homelessness that had information about accessing child care subsidy.

IDENTIFICATION, ENGAGEMENT, AND PUBLIC AWARENESS

The CCDBG Act requires procedures for enrollment of children experiencing homelessness in child care subsidy programs pending completion of required documentation, as well as outreach to homeless families. Several states noted that the process of implementing the new homelessness provisions in the CCDBG created a new awareness of family homelessness in their state. Many interviewees shared that stakeholders were often surprised to learn how prevalent homelessness was among families in their states, the extent of the negative impact homelessness has on families, and the barriers it creates to self-sufficiency. CCDBG mandates that states use the educational definition for homelessness (also known commonly as the McKinney-Vento definition) which is broad and inclusive of families who are very transient and living in “doubled up” situations. Many agency leaders, eligibility staff, and child care providers were unfamiliar with this definition and a great deal of training was required for stakeholders at multiple levels. Many states also noted learning that many families would not identify themselves as homeless on an application if the question was asked directly—screening procedures would have to be more sensitive and nuanced, particularly to identify those families who are not in shelters or staying outside. For many states, the process also revealed weak connections to the systems that serve families experiencing homelessness and hold the most expertise on the issue. Ultimately, many states were able to utilize training and leverage new collaborations to inform their efforts to identify and outreach to families experiencing homelessness.

- **North Carolina** contracted with a community service agency to conduct outreach throughout the state with families and homeless service providers to ensure they were educated about the child care subsidy program. The contracted agency also screened families for child care eligibility as well as other early childhood programs at outreach events. Supporting these efforts, the state is creating a video training series appropriate for staff at all levels, as well as a social media campaign aimed at increasing public awareness of family homelessness in the state.

- **Colorado** noted that there is now a training online for child care providers on best practices for identifying and supporting families experiencing homelessness and the state is looking into adapting this slightly to be used with county intake workers and others in order to increase awareness and education. The application for its child care program was also updated to incorporate more key questions about the family's living situation.

GRANTS AND CONTRACTS

Under CCDBG reauthorization, states were reminded of the many opportunities to utilize grants and contracts to provide and improve quality of child care. In the review of state policies and in interviews, several states were identified that are utilizing grants and contracts to serve families experiencing homelessness in their child care subsidy program. States report using this approach as a way to prioritize families experiencing homelessness for services, as well as to guarantee slots in high-quality programs that can better meet their needs.

- For many years prior to reauthorization, the **Massachusetts** Department of Early Education and Care (EEC), which manages the state's subsidized child care system, has collaborated with the state agencies responsible for housing and homeless services and child welfare to provide child care to families experiencing homelessness. Families who receive services through the Department of Housing and Community Development (DHCD) or the Department of Children and Families (DCF) are eligible to be referred for one of 693 contracted child care slots dedicated for children experiencing homelessness. Contracted providers receive an additional \$17.22 per day intended to be used for support services for homeless families. The state is not yet able to track how programs are using the enhanced rate. Families who are connected to a contracted slot are approved for 12 months of eligibility and there is currently no limit to the number of times a family may be reauthorized for an additional 12 month eligibility period.
- Prior to reauthorization, the state of **Virginia** utilized grants and contracts under a program called the Childcare for Homeless Children Program (CHCP) in order to ensure families experiencing homelessness could be connected quickly to subsidized child care. In some parts of the state, it could take

considerable time to process a child care application and approve families for assistance. In recognition that these families often cannot afford to wait for their subsidy to be approved, the state contracted with homeless service providers (via the states' Department of Housing and Community Development) who identified eligible families and could begin payment for child care services immediately while the family's application was being processed. The CCHCP is no longer active and funds are now provided directly to localities with a priority for families experiencing homelessness^{xxxii}.

- Prior to reauthorization, **Washington** State provided short-term eligibility for families experiencing homelessness through its Homeless Child Care Program (HCCP). The purpose of the HCCP was to support families experiencing homelessness to stabilize and work toward becoming eligible for the state's Working Connection Child Care program (WCCC). The state contracted with thirteen community-based agencies in 25 counties who were responsible for interviewing families, determining eligibility, assisting families in finding licensed child care, and authorizing subsidy and paying for providers. Contracted agencies also assisted families in accessing needed services and supports^{xxxiii}. Washington updated regulations related to homelessness in 2017, allowing families experiencing homelessness to access child care assistance through the WCCC program.^{xxxiv}

A number of advantages and disadvantages to grants and contracts were identified through the interviews and background research. Because their transiency can create barriers to consistent attendance, families experiencing homelessness may struggle to find child care providers willing to serve them because programs are often under pressure to be fully enrolled every day. Grants and contracts can also be used to build the supply of child care for this particular population by allowing programs to be paid based on enrollment rather than attendance. The practice would also reserve slots specifically for families experiencing homelessness, which may make it easier for families to find an opening quickly. One other potential benefit of using contracts is the ability to ensure that vulnerable families are served by child care providers with specialized training, support, and resources to meet their unique needs. On the other hand, although contracted slots may help states limit the financial impact of expanding eligibility for families experiencing

homelessness by limiting the number of slots available to a predictable and finite number, the major disadvantage is just that—access is limited to only the number of contracted slots.

OTHER CHALLENGES AND CONCERNS

Some states surfaced concerns about the unintended impact of prioritizing very vulnerable children and families for services. Although it is important to create access for families, it is also important to consider the services and supports the families, children, and providers serving the families will need once enrolled. For instance, experiences of trauma are very common among families who experience homelessness^{xxxv} and trauma symptoms can often be difficult to recognize or easily misinterpreted without the proper training. Unfortunately, many organizations and providers may not be equipped to meet this need. Similarly, children who experience homelessness are also more likely to have developmental and/or behavioral challenges, making it critical to have an ample supply of inclusive child care settings that are well-equipped to support children with special needs. This is another area where many states and communities face challenges.

Additionally, because families experiencing homelessness often have few resources and social supports, and are often highly mobile and managing high levels of chaos in their lives, they may struggle with regular attendance at child care programs and face extra barriers related to transportation and juggling unpredictable schedules that are out of their control. Additionally, families may not have enough diapers for their small children, have enough clean clothes, or have access to identification and health documents. Many early care and education policies can make it difficult for programs to accommodate these challenges and most programs do not have resources to support families with some of these basic needs that facilitate their full and regular participation.

Like other low-income families, many families experiencing homelessness need child care during evening, night, and weekend hours due to their work schedules. Many communities across the country struggle with low supply of center-based and family child care available during non-traditional hours, meaning many families must depend on informal child care arrangements or family, friend, and neighbor care. As mentioned earlier, because many families experiencing homelessness

have weak social support networks, they may be very limited in identifying a family member or friend who can care for their child(ren), which compounds these families' challenges in finding care during non-traditional hours. Any effort to increase access to child care for families experiencing homelessness will likely have to include addressing access to care during non-traditional hours and improving the quality of that care. Unfortunately, this is a common challenge across many states for which there is no easy solution

Lack of data also emerged as a common challenge. Currently available data on rates of homelessness among children and families are extremely limited and fragmented. Although many sources of data exist, they capture different facets of homelessness, and there is no agreement across agencies that gather data on how homelessness is even defined. This poses major challenges for program planning and policy development addressing child homelessness.

Interviews with states revealed that there are also significant limitations in available data specific to child care and homelessness. Most states interviewed could offer very little in the way of hard numbers as it relates to financial impacts of their policies and even the number of children experiencing homelessness that they serve. On a positive note, several states noted that they were in the process of transitioning to a new data system or were actively making much needed updates. This could mean that in the coming years, additional data will become available.

SNAPSHOT ON PENNSYLVANIA



The US Department of Health and Human Services' (HHS) Administration for Children and Families (ACF) reports^{xxxvi} that 2,031 children under age 6 and experiencing homelessness were served by Pennsylvania Head Start and Early Head Start in 2015. Meanwhile more than double that were identified by Pennsylvania McKinney-Vento-funded early childhood education programs in the same year, bringing the total to 6,242 children under age 6 being served by either program. According to ACF this represents 29% of children experiencing homelessness in 2015 given its calculation that 21,301 children under age 6 experienced homelessness in the state that year.

During the 2015-2016 school year, the Pennsylvania Department of Education reports identifying and serving 27,724 students experiencing homelessness in the state's Education for Children and Youth Experiencing Homelessness program.^{xxxvii} The communities with the highest counts of students experiencing homelessness were Philadelphia (5,518), followed by Allegheny County (3,269), Lancaster County (1,812), Berks County (1,522), Erie County (1,481), and Chester County (1,203). Most students identified as homeless in the state were "doubled up" and 5% of all homeless students were migrant, accounting for 26% of all migrant students in the state. The number of students experiencing homelessness in more than one year is also on the rise.^{xxxviii}

The US Department of Housing and Urban Development (HUD) reported^{xxxix} there were 4,269 children under age 18 living in one of 2,200 households with at least one adult and one child located in emergency shelters, transitional housing, or unsheltered at a point in time in February 2016. The numbers are reported by Continuums of Care (CoCs) as part of their program application process for Fiscal Year 2016 following HUD's Point-in-Time Count Methodology Guide.

RECOMMENDATIONS

Based on the review of the literature and state policies, as well as interviews with six states, the authors of this report put forth seven recommendations for increasing access to child care subsidy for children and families experiencing homelessness. They include expanding eligibility specifically for families experiencing homelessness in some way, developing procedures of identifying families experiencing homelessness, conducting intentional outreach to families and providers, providing training and professional supports to the field, developing a data plan, taking a two-generation approach, and investing in collaborations. Additional detail on each recommendation is provided below.

RECOMMENDATION 1 EXPAND ELIGIBILITY

Of all the strategies identified by states, expanding eligibility seemed to be the most promising in ensuring better access to child care for families experiencing homelessness. Most parents who experience homelessness want and need to work or further their education in order to resolve their homelessness; however, homelessness creates considerable barriers to employment and education, basic requirements for accessing child care. Many families who experience homelessness have weak support systems and very chaotic lives, and often don't have anyone who can care for their children while they search for a job or housing, or receive critical health and mental health services. Many families express frustration that they can't get a job without child care, but can't get child care without a job. Providing automatic eligibility for child care provides an immediate stabilizing force in their lives which can anchor their efforts to become self-sufficient.

Some of the ways states can expand eligibility to homeless families include:

- Grant a period of initial job search in the state's definition of working.
- Provide a presumptive eligibility period for children and families experiencing homelessness. The final CCDF rule clarifies that states can permit children experiencing homelessness to immediately enroll in child care and provide a grace period for submitting required documentation; if the child is found to be

not eligible once documentation is submitted, states can cease child care assistance and the situation is not considered to be an error or improper payment.

- Include homeless children in the state’s definition of “protective services.” This would allow states to waive work and school requirements and provide eligibility for child care assistance to families experiencing homelessness.
- Utilize grants and contracts to create dedicated slots for children experiencing homelessness.

For states that have waitlists for child care subsidy, it will be impossible to expand eligibility for families experiencing homelessness without also prioritizing these families for subsidy as well. States will have to consider how to prioritize families for both subsidy and for physical space in child care programs. Regarding prioritizing families for subsidy, states should place families experiencing homelessness at the top of the waitlist and make efforts to stay in close contact with those families while they are on the waitlist so that when a subsidy becomes available, they can quickly be served. States could also consider utilizing contracted child care slots, in addition to vouchers or certificates, to ensure children have priority access to both subsidized care and child care slots. On the supply side, utilizing contracted slots and/or paying providers based on enrollment rather than attendance, can make it easier for private child care providers to serve families experiencing homelessness, who may struggle with consistent attendance for a period of time while the family stabilizes. Additionally, providing an enhanced reimbursement rate can provide an incentive for child care providers to serve families experiencing homelessness.

RECOMMENDATION 2 DEVELOP PROCEDURES FOR IDENTIFICATION

In order to serve families experiencing homelessness in child care, states must have mechanisms to identify these children and families. Unfortunately, it is not always obvious when a family is experiencing homelessness, and families will not always self-identify, often due to fear of child welfare involvement, stigma, embarrassment, or other reasons.

States should utilize as many strategies as possible to identify families at both the subsidy administration level and at the child care provider level. Families' housing situations can fluctuate throughout the year, and processes should be in place to identify and assist families who are experiencing homelessness at the point of application for child care subsidy, and while families are already being served by a child care provider.

Whether it is an interview with a child care provider or a child care subsidy worker, or on an application form, questions regarding housing status should be posed in a sensitive way that aligns with the broad McKinney-Vento definition. Many families will not identify as homeless if the question is asked plainly, as in "Are you homeless?" Instead, questions should ask families to describe their living situation and note whether that situation is permanent. In addition, families could be offered options to choose from, such as car, motel, shelter or living temporarily with family or friends.

Fortunately, schools can provide good models for identification procedures, as they have been required to identify homeless students for decades under the McKinney-Vento Act. The National Center for Homeless Education offers information on best practices, examples of policies and procedures, and sample forms on its website, <http://center.serve.org/nche/>. Some additional identification strategies for states to consider include:

- Developing formal referral relationships with other providers who work with families experiencing homelessness, such as McKinney-Vento liaisons, Head Start programs, or family shelters. A specific referral form could serve to verify a family's homeless status as well as signal to whomever is processing the family's application that the family is experiencing homelessness and therefore may need to have expedited services or additional support and coordination to make sure they get connected with services.
- Utilizing a residency questionnaire or integrating questions about housing into existing forms or family interviews.
- Monitoring subsidy applications for addresses of known family shelters and low-cost motels in the community and confirming the family's housing status with additional follow up.

RECOMMENDATION 3 CONDUCT OUTREACH

Taken alone, even policies that directly expand eligibility for child care subsidy for families experiencing homelessness will do little to ensure children are served in child care if families, child care providers, and subsidy staff are unaware of the policies and don't feel empowered to implement them. Intentional outreach at all levels to educate subsidy staff, providers, and families about the opportunities available for support, can ensure that good policies don't just sit on a shelf and gather dust. Some potential strategies for conducting such outreach include:

- Disseminate policy guidance to subsidy staff and child care providers to clarify any policies related to homelessness; such guidance should explain the policy and instill confidence that the policy is sanctioned and it is expected to be followed.
- Develop written materials about homeless-specific policies and distribute them to partners that serve families experiencing homelessness; consider materials that are more eye-catching, such as colorful flyers, bookmarks, brochures, etc.
- Provide presentations at public meetings where early care and education and homeless services staff and policy makers gather, such as Continua of Care meetings, Early Childhood State Advisory Councils, Local Interagency Coordinating Councils, etc.
- Consider a social media campaign to promote new homeless-specific policies.
- Enlist partners that work with families experiencing homelessness directly; contract with community-based providers who work with families already to spread the word and recruit families to the program or negotiate a Memorandum of Understanding with local school-based McKinney-Vento liaisons.

RECOMMENDATION 4 PROVIDE COMPREHENSIVE TRAINING AND PROFESSIONAL SUPPORTS FOR STAFF

Based on interviews with states and the dearth of research on homelessness and young children, it is clear that the field is challenged by a tremendous learning curve when it comes to family homelessness. Overall awareness of the prevalence and impact of homelessness on families with very young children is low.

Stakeholders at all levels—from agency leadership, to eligibility staff, to child care providers will need training and support to ensure the needs of families experiencing homelessness are met.

At minimum, child care providers and subsidy staff should have training that addresses how homelessness is defined, information about the causes and prevalence of homelessness among families, and the impacts of homelessness on children, parents, and the community. As mentioned above, providers and subsidy staff should also have specialized training in how to identify homeless families and talk to them about their housing situation without stigmatizing them or losing engagement, as well as training on how to implement any homeless-specific policies.

Some additional training and professional support considerations include:

- Providing trauma-related training to all staff who interact with families who experience homelessness; because experiences of trauma are very common among families who experience homelessness, all staff should be trained to recognize trauma symptoms in both adults and children and respond appropriately.
- Ensuring providers who work with families experiencing homelessness have access to mental health consultation, which can support child care providers and teachers to make appropriate adjustments to curriculum, interactions, routines, or physical space so children can be comfortable and successful in a program.
- Providing access to technical assistance for child care providers and subsidy staff who work with families who experience homelessness; this could include designating a homelessness specialist at a local Child Care Resource or Referral agency or contracting with an expert provider in the community who can assist staff with problem-solving, identifying or navigating resources, etc.
- Providing an enhanced reimbursement rate or small grants to providers who work with families experiencing homelessness; extra funds could allow programs to address barriers or fulfill particular needs, such as transportation or diapers, or to increase pay for highly-qualified staff or pay for staff supports.

- Collaborating with other service sectors that serve families experiencing homelessness to provide community-based inter-professional training; such training can build knowledge among child care providers (and vice versa) about other services and resources that homeless families need or often interact with, such as housing or child protective services, while providing a venue for establishing professional relationships with collaboration partners.

Create designated competencies within the Quality Rating and Improvement System that indicate that programs and staff are adequately prepared to serve children experiencing homelessness and their families and drive families experiencing homelessness to those programs.

RECOMMENDATION 5 DEVELOP A DATA PLAN

Currently, the available data on rates of homelessness among children and families are extremely limited and fragmented, which poses significant challenges in developing sound policy that is responsive to the needs of this vulnerable population. Further complicating the data landscape is the fact that many states are using child care subsidy data systems that were not designed to capture data on families who experience homelessness, and are limited in their ability to analyze and effectively use data on this population to inform policy. It is also clear that data systems are not the only limiting factor in collecting and using data on families experiencing homelessness—as discussed above, families still must first be identified in order to obtain an accurate count, and this requires significant training and development of sound procedures.

Although relatively little is known about child care and families experiencing homelessness at this moment in time, states have an opportunity to advance our collective understanding of what role child care can play in addressing homelessness by engaging in careful planning to collect and analyze data moving forward. At minimum, states should develop procedures for identifying families experiencing homelessness at both the provider and subsidy application level and for capturing this information in their data systems. Child care subsidy agencies should also work collaboratively with partners across early care and education, homeless services, public benefits, workforce development, State Education Agencies, and other relevant stakeholders to develop a plan for improving data

collection and use as it relates to families experiencing homelessness in a coordinated fashion. Together, cross-sector partners can paint a more complete picture of how many families are experiencing homelessness and what their needs are, as well as whether child care policies are impacting overall family stability and well-being in other areas, such as employment and educational attainment.

RECOMMENDATION 6 TAKE A TWO-GENERATION APPROACH, WHENEVER POSSIBLE

Families who experience homelessness often have very complex needs, and in order to truly thrive, the entire family will require a comprehensive array of closely coordinated supports and services across multiple service systems^{xl}. For children experiencing homelessness, early care and education programs must be prepared to support their sometimes significant developmental, health, and behavioral challenges and serve as an important platform for preventing or mitigating further harm done by homeless experiences while promoting school readiness. For parents experiencing homelessness, reliable child care represents just one critical service need that makes it possible for them to access the many other services and supports they need, which can often include medical and mental health care, substance use services, legal services, housing assistance, education and training, and employment. Although families come together as a unit, too often, the services available for families do not, and are instead delivered in siloes. Such fragmentation can create serious barriers to access as well as limit the potential impact of services on families. States could do more to leverage child care assistance as a mechanism to connect families experiencing homelessness to programs that offer a two-generation approach, which stand the best chance of helping families resolve their homelessness and heal from its devastating impacts.

At minimum, states should consider how to craft policy and systems that connect families with the highest quality early care and education programs—these programs, like Head Start programs for instance, will be best equipped to meet the needs of the most vulnerable children and families inside of the program, and also best positioned to collaborate with other service providers in the community. Children and families who experience homelessness but who are not eligible for services funded by the Department of Housing and Urban Development may benefit most from early care and education programs that provide a case

management or family support function. For these families, access to case management is limited. Case management or family support services that are focused first on helping the family meet basic needs and make connections with other mainstream services and supports, like TANF or SNAP, provide an entry point to a full array of community-based services that can help families resolve their homelessness.

Some additional considerations for creating two-generation approaches include:

- Collaborating with Head Start and Early Head Start programs to create more full-day, full-year center-based services where children can receive child care and families can receive the full range of services that they need.
- Partnering with other state agencies to create an integrated services model for families experiencing homelessness; states could leverage housing, workforce development, and child care dollars to create a specialized program for families experiencing homelessness.
- Maximizing the impact of housing interventions, such as rapid-rehousing, by intentionally pairing them with child care and perhaps other state or federally funded supports, like employment services. When a family becomes housed after a period of homelessness, the negative impacts of homelessness do not automatically stop. Many families will require ongoing supports during this vulnerable period to ensure they can remain housed and be successful long term.
- Contracting with community-based programs to assist families experiencing homelessness who receive child care subsidy in creating a service plan and provide case management services that support families in managing multiple services.

RECOMMENDATION 7 INVEST IN COLLABORATIONS

Children and families who experience homelessness often have complex needs that can't be met entirely by any one service system alone. At the same time, service systems often operate in silos, which can result in duplicated services, conflicting messages to families, gaps in services, and a confusing landscape that is painfully difficult for vulnerable families to navigate. System-level fragmentation

can impede the ability to leverage valuable resources and expertise across systems to effectively support families. Building systems that work well for families experiencing homelessness requires establishing formal and supported cross-sector collaborations.

Perhaps the most cost-effective strategy states have utilized is investing in collaborations. States seeking to improve access to child care for homeless families should consider how to leverage child care as a foundation for coordination, and even integration, across various service systems. One of the major pitfalls of relying on collaboration is that it is often more difficult to carry out in practice than in theory--lack of time and lack of cross-sector knowledge, as well as lack of incentives to work outside of one's silo, creates barriers. In addition, staff turnover can impede collaboration that relies primarily on personal relationships. States should consider dedicating staff who can coordinate cross-sector service provision, similar to what Vermont has done; this relatively small investment could help to make more efficient use of the resources and services available for families.

Multiple entities should be engaged in collaboration to benefit children and families who experience homelessness:

- Homeless service providers (including family shelters, rapid rehousing providers, and permanent supportive housing providers)
- Housing Authorities
- Continuum of Care
- State Coordinators for Homeless Education and local McKinney-Vento liaisons
- Head Start Collaboration Director
- State or Regional Interagency Councils on Homelessness
- TANF agency representative
- Workforce agency representative and providers

Some of the ways states can support collaboration with these stakeholders include:

- Utilize memorandums of understanding to define support referral and co-case management across service systems
- Develop a statewide plan to end homelessness among families
- Identify opportunities to leverage funding across systems to more effectively target comprehensive service approaches for families experiencing homelessness
- Develop joint plans for data collection and analysis
- Develop inter-professional training that can increase knowledge and awareness of the needs of children and families experiencing homelessness while simultaneously establishing professional relationships and building capacity for effective collaboration

CONCLUSION

The enactment of the CCDBG Act presented significant opportunities to advance access to high-quality child care for children and families experiencing homelessness. New provisions designed to better align child care with the education subtitle of the McKinney-Vento Act provide a jumping off point for ensuring some of the most vulnerable children are able to be cared for in safe, developmentally supportive environments, and that their parents have the opportunity to work toward stabilizing their housing and their lives. The potential impact of realizing these opportunities transcends the dual goals of CCDF to support both employment and positive child development—for families who experience homelessness, access to child care is critical to resolving and preventing homelessness. For most states, however, the work is only at its beginning stages. There is much to learn from early efforts at implementation, but ultimately, ongoing study of states' approaches is necessary to continue innovating in this area.

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Ounce of Prevention Fund (the Ounce) is a private-public partnership dedicated to providing all children—especially those from low-income families—with high-quality early childhood experiences from birth to age 5. To give children and families most in-need the best chance for success, the Ounce develops programs, conducts research, trains educators and strongly advocates for early childhood education, in Illinois and across the country. Our early childhood programs, such as Educare, have created national models of high-quality early childhood education, ensuring that more children have access to opportunities best suited for their future success.

APPENDIX A: INTERVIEW PROTOCOL

The authors of the paper emailed representatives from the six states identified in Appendix A as well as New York and Washington State and shared the interview protocol.

1. Please describe the CCDF policies in your state that impact homeless children and families.
 - a. What are the goals of the policies?
 - b. Why did you begin implementing these policies?
 - c. When did you begin implementing these policies?
 - d. What is the cost of implementing these policies?
 - e. Did you partner with other programs or state agencies to create the policies? Who?
 - f. Do you partner with other programs or state agencies to implement the policies? Who?
2. What would you consider the biggest success in implementing your policies?
3. What have been the biggest challenges?
4. What has been the financial impact of these policies, if any?
5. How have these policies impacted your CCDF program?
 - a. Do you have data that can help you measure impact? What data analyses have you done to measure impact?
 - b. Have you seen an impact on waitlists?
 - c. Have you seen an impact on staff or in CCRRs?
6. How have your policies impacted child care providers?
7. How have these policies impacted the housing stability of homeless families in your state?
8. How have these policies impacted homeless parents?
 - a. How have these policies impacted employment rates among parents experiencing homelessness? How do you know?
 - b. How have these policies impacted the ability of parents experiencing homelessness to obtain education? How do you know?
9. How have these policies impacted children?
 - a. How have the policies affected health, well-being, and school readiness?
10. How have these policies impacted the housing or homeless services sectors in your state?
11. What critical resources, infrastructure, or conditions are needed to implement your policies successfully? What are the “key ingredients” for making it work?

- 12.** If you had a magic wand and could change anything about your policies or practices as they relate to homeless families, what would you change?
- 13.** If you could go back in time and do anything differently as it relates to your policies impacting homeless families, what would you change?
- 14.** What advice do you have for other states hoping to implement CCDF policies aimed at increasing access to high-quality child care and other early learning programs for families experiencing homelessness?
 - a.** What data analyses should states do before implementing similar policies?
 - b.** What partners should states engage?
- 15.** Is there anything else you'd like to share that we didn't ask about specifically?

APPENDIX B: CCDF STATE PLAN OVERVIEW FROM ACF

The Administration for Children and Families published a chart titled “Homeless Families with Young Children, FY2016-FY2018 Child Care and Development Fund (CCDF) State Plans” that pulls excerpts from Section 3.2.2 Improving Access to High Quality Child Care for Homeless Families. That chart was an initial tool for identifying states for follow up interviews and can be found online here: https://www.acf.hhs.gov/sites/default/files/eecd/homeless_table_ccdf_fy2016_fy2018_state_plan.pdf.

APPENDIX C: STATE VIGNETTES (INTERVIEWED STATES ONLY)

COLORADO

The Colorado Department of Human Services' (CDHS) Colorado Office of Early Childhood, Division of Early Learning operates the Colorado Child Care Assistance Program (CCCAP) ^{xli} in conjunction with each county's Department of Social/Human Services. The state's commitment to localism means that some of the policies that improve access for families experiencing homelessness—such as tiered reimbursements and grants and contracts—are decided at the county level. Regardless, consultation with the Colorado Department of Education, the Colorado Coalition for the Homeless, and others on the creation of the state's CCDF plan and ongoing coordination between state and local organizations has led to state-level initiatives and policies to support these families.

For example, families experiencing homelessness^{xlii} are a target population^{xliii} for receiving subsidies or rather may have a priority to be served regardless of waiting lists. Currently only 10 of the 64 counties have waitlists though and the number of children currently on one was 1,412 as of September 29th. It was also noted during the interview that the county with presumably the largest homeless population, Denver County, does not currently have a waitlist for its CCCAP program.

Building on this prioritization, the state also drafted and approved rule changes^{xliiv} that authorizes these families to receive child care assistance during a stabilization period (of at least 60 consecutive calendar-days within a 12 month period). During this period the adult caretaker(s) or teen parent(s) are not required to participate in an eligible activity or provide verification of their eligible activity if such participation exists. They are also permitted to self-declare residency as well as citizenship and identity of the child and verification of immunization status is not required during this period. Upon receipt of the necessary verifications the household can continue to be authorized for care beyond the stabilization period.

The minimum length of the stabilization period was determined in conjunction with the Colorado Coalition for the Homeless and aligns with typical length of transitional housing. It should be noted that counties do have the ability to extend the length of this stabilization period. With respect to being deemed eligible for this designated period of care, the CCCAP application includes a section aimed at identifying instances of a family experiencing homelessness that an applicant would answer and then the intake worker would determine if an authorization via a stabilization period is necessary. CDHS representatives noted that given the relatively recent adoption of this policy, data are not available yet on the number of families receiving child care through this method although it is expected the number is small and therefore the financial impact would be minimal. A potential reason for the number eligible being low is that many families meeting the definition of homelessness could already be receiving care based on their receipt of TANF assistance. CDHS provides child care subsidies under the auspices of CCCAP to four programs—Low-Income, Colorado Works (TANF), Protective Services, and Child Welfare—in which the ‘Low-Income Program’ is the component for low-income families in an eligible activity not receiving child care assistance through the other programs.

In terms of other strategies for supporting access a couple of counties are exploring the possibility of contracted slots but representatives felt that this would likely be done first as a pilot and the current data system would need some changes in order to avoid a lot of additional manual labor on the part of counties and providers.

As noted in the sections above, these policies are only impactful when the families in need are identified and providers are supported in implementing them. CDHS representatives noted that there is now a training online for child care providers on best practices for identifying and supporting families experiencing homelessness and they are looking into adapting this slightly to be used with county intake workers and others in order to increase awareness and education. Given the county administration though, most of the partnerships and collaborations between agencies and service providers around outreach happen at the local level. The state’s approved CCDF plan even noted that outreach strategies would be developed by the county departments of social/human services and other local

organizations, such as Resource and Referral agencies. Collaboration with McKinney-Vento liaisons was encouraged.

While the devolution to counties has its benefits—including flexibility in adapting to the needs of the area—the representatives noted that this approach can also be a major challenge. It is often difficult to obtain uniformity on certain items that could benefit from a consistent approach. Other recommendations for states include a review of the capability of data systems in terms of implementing changes and engaging community groups early and often.

MASSACHUSETTS

Massachusetts is somewhat unusual in that per state law, families have a right to shelter; therefore, the state tends to have a very high shelter census, and because families must be provided with shelter even if a bed is not available, the state spends a great deal to house families in motels. Similarly, Massachusetts tends to have a greater focus on homelessness across many state agencies. As a result, Massachusetts has the most robust and well-developed child care policies related to homelessness of any state reviewed in this report.

Like many states, Massachusetts' child care subsidy system is in a time of transition as the state works to implement the new requirements of the Child Care Development Block Grant Act of 2014. For many years prior to reauthorization, the Massachusetts Department of Early Education and Care (EEC), which manages the state's subsidized child care system, has collaborated with the state agencies responsible for housing and homeless services and child welfare to provide child care to families experiencing homelessness. Families who receive services through the Department of Housing and Community Development (DHCD) or the Department of Children and Families (DCF) are eligible to be referred for one of 693 contracted child care slots dedicated for children experiencing homelessness. Contracted providers receive an additional \$17.22 per day intended to be used for support services for homeless families. The state does not have a mechanism for tracking how providers use the rate add-on. Parents are subject to a parent fee, but many do not have one due to low incomes. Families who are connected to a contracted slot are approved for 12 months of eligibility and there is currently no limit to the number of times a family may be reauthorized for an additional 12 month

eligibility period. The contracted slots were awarded in 2010 through a competitive procurement process and will be up for rebid in early 2018. The total child care budget in Massachusetts is approximately \$500 million and the total spent on homeless child care contracts is approximately \$11 million.

In 2016, Massachusetts elected a new governor who identified addressing family homelessness as a top priority for his administration. Around this time, in FY2016, funding became available to release approximately 1700 additional child care vouchers. In order to align with the governor's priorities, Massachusetts chose to prioritize homeless families for these new resources. Per regulation, the homeless child care contracts are only tied to DHCD and DCF, which greatly limited the reach of the child care program for families served by shelters or services operated by private or other state agencies. In order to serve this population, Massachusetts created a new policy that allows families served by any shelter to access a child care voucher (so long as the family provided a letter from the shelter verifying receipt of services). Because families experiencing homelessness are included in Massachusetts' definition of "in need of protective services" the state was able to provide eligibility in this way. Of the 1700 vouchers available, approximately 20% of those went to homeless families.

Looking ahead, Massachusetts is in the process of making changes to the homeless child care program as a part of their regulatory changes to meet new CCDBG guidelines. The recent experience of expanding use of vouchers for homeless families demonstrated the value of this approach, so the state plans to update its regulations to designate homelessness as a service need, thus allowing access to child care subsidy through a voucher in addition to through contracted slots. Because CCDBG mandates that states use the educational definition of homelessness, which is inclusive of families who are not served in shelter or through formal homeless services, the state is also exploring how other service partners, such as McKinney-Vento liaisons stationed in schools, may certify families as homeless and eligible for child care subsidy. Additionally, because these changes will significantly increase the number of homeless children and families eligible for subsidy, EEC is evaluating how to adapt current homeless guidelines to maintain services for homeless families given limited resources.

Finally, in order to comply with state procurement law, the state plans to rebid all of its child care contracts, including the homeless child care contracts.

Massachusetts reports that providing child care to homeless families through a mix of vouchers and contracts has allowed them to address the changing dynamics of homelessness in Massachusetts, where more families are being served by agencies outside of DHCD and DCF. They also report that vouchers provide more flexibility for families who need to move to new communities in order to be housed—although a family in a contracted slot can continue receiving child care through a voucher in the new community, there is far less paperwork and effort required on behalf of the family to change child care providers if the family is using a voucher. Some of the challenges noted include managing major changes both in policy and due to the contract rebid process. Contracts have been in place for more than seven years, and the needs and location of homeless families have changed significantly during that time frame. Another challenge mentioned included developing new procedures for verifying homelessness for families not served in shelters and who may not be touched by other services.

Like other states, Massachusetts shared that it is difficult to quantify the impact of their homelessness policies, largely due to limits in data and technology infrastructure. They reported that there is strong support for the policies and that in general, child care for homeless families is seen as a worthwhile expenditure. They reported that they do not perceive a substantial impact at this time on waitlists due to their homelessness policies, but noted that when they implemented the new voucher policy, many homeless families were not on the wait list and they had to rely on partner agencies to assist in getting the word out to families and homeless service providers; they did see a surge in the waitlist once greater awareness of the opportunity was raised.

In terms of advice for other states and lessons learned, Massachusetts offered that in order to serve homeless families, it is important to be flexible. In addition to removing barriers to child care subsidy eligibility, Massachusetts also provides a six-month grace period for families to produce medical/immunization documentation and provides flexibility for families in producing other paperwork required to apply for subsidy, such as income documentation. In addition, through a number of initiatives aimed at expanding access to early care and education for

highly vulnerable children, Massachusetts has identified an unintended consequences that vexes many providers—sometimes, when there is a big push to help groups like homeless families, child care providers can become saturated with higher needs children, such as those who have experienced trauma or who have developmental and/or behavioral issues. This can lead to programs with a high number of high needs children in each classroom. Massachusetts mentioned that although it is important to serve the most vulnerable children, research indicates that such classroom composition is not good for children and creates major challenges for early childhood staff.

NORTH CAROLINA

North Carolina has a state supervised and county administered CCDF program. Financial assistance for child care is provided to families who are income eligible and have a service need, which can include employment, education (GED, high school, post-secondary), developmental need of the child, participation in the TANF program, and involvement with or at risk of entering the child welfare system. Approximately half of the counties in the state have wait lists for child care subsidy; the informants from North Carolina noted that they have seen a recent rise in wait list numbers, however, they believe this rise is largely due to the new federal expectations for CCDF programs, particularly the move to require 12 month eligibility periods.

Historically, each county in North Carolina must set aside a percentage of their total funds to serve children with special needs. In response to CCDBG's new requirements aimed at increasing access to child care for children experiencing homelessness, North Carolina established a new policy that was rolled out in early October 2017 to allow counties to also serve families experiencing homelessness through the set aside and to allow it to be up to 4% of a county's allocation. Homeless families still must meet regular eligibility requirements of the program, however, this approach will ensure that homeless families can be prioritized for services should a county have a wait list. Families who experience homelessness are identified at the point of application through a series of questions that inquire about the family's living situation. Because the policy is so new, North Carolina does not have any data yet on the number of homeless families they are serving nor on the effects of the policy on the program or families. The informants did note

that the state is transitioning to a new case management system that will allow for more sophisticated data analyses and that they believe more information will be available in the future.

Another key component to North Carolina's approach to serving children experiencing homelessness in their CCDF program is an intentional investment in training, public awareness, and outreach to families and providers. The state awarded a grant (through a competitive bid process) to the Salvation Army to lead this work. The Salvation Army has been conducting outreach events throughout the state at partner organizations that serve homeless families, such as shelters. The goal of the events is to raise awareness about the child care program among families and homeless services providers, as well as to screen families for eligibility for child care financial assistance, Head Start, and other early learning programs and services. Finally, the Salvation Army is also leading a social media campaign to raise public awareness about family homelessness. These efforts will be supported by a video training series on family homelessness produced by the state that will be available for subsidy workers, child care providers, and any other interested stakeholder. The informants from North Carolina noted that awareness and identification of homeless families has been very critical to their approach and that they are seeing great success in educating the workforce about family homelessness.

In order to support their work with homeless families, North Carolina worked closely with expert partners who would advise them best practices for working with the homeless population. Along with partners, the state conducted a focus group that informed procedures for identifying homeless families; a state legislator who is a champion of the homeless population attended the focus group as well, which demonstrated the high level of engagement in the issue.

North Carolina identified two primary challenges, including lack of data and limitations of their current policy on homelessness. They acknowledged that the set aside approach does not provide direct access to child care for homeless families, so the policy could have limited impact on families. In addition, like many states, the state's current data system does not allow for sophisticated data analysis. As noted above, as the state rolls out a new case management system, they expect to be able to leverage data more in the future and plan to do further

analyses of how the policy is impacting families and the program. The informants noted that homelessness is a large and complex problem and it can be overwhelming trying to address it. They would encourage other states to start small and focus on what they can do instead of what they can't—this allows the ability to build knowledge, awareness, and momentum over time. The informants have found tremendous value in their collaboration with partners, and feel that their efforts to engage stakeholders broadly with patience will yield higher return in the future.

OKLAHOMA

Over the past few years, representatives from the Oklahoma Department of Human Services (DHS) have led and/or participated in a number of public-private working groups about children experiencing homelessness, with a group in particular focused on access to high quality child care for this population. These collaborative efforts, which included the McKinney-Vento state coordinator, the Head Start Collaboration Office, and community service providers, produced a number of innovative next steps and visions for policies and practices that would improve access to child care for families experiencing homelessness. Due to the efforts of this workgroup, an informational bookmark outlining benefits available through DHS for homeless families was created and has been distributed statewide through various state agencies and community partners^{xlv}.

A draft plan was developed from these efforts outlining subsidy policies for children experiencing homelessness and providing new professional development and training opportunities for providers to enhance delivery of services to homeless families. Specifically, the plan outlined that homeless families qualify for child care subsidies even when not meeting a traditional need factor. Homeless families also qualify for the state's most comprehensive payment rate that includes absent day payments, and may also qualify for a waived copayment. Subsidy policies also dictate that all families, including homeless, must choose a provider who participates in the state's QRIS program at a high quality level. In terms of professional development and training for providers, the draft plan highlights a desire to provide consistent content across the early learning system including the use of the Administration for Children and Families Early Childhood Self-

Assessment Tool for Family Shelters^{xlvi} as a guide for conversations between providers and homeless families.

For three consecutive years Oklahoma has faced significant declines in state revenues which have impacted programs and services across all state agencies including DHS. In 2016, there was a two month subsidy enrollment freeze for new applicants and there is the potential for another freeze in the near future. However, homeless families are designated as a priority group and will continue to be approved for benefits during an enrollment freeze.

Starting in October 2016, DHS revised child care subsidy policy specifically naming homeless families as a group that can be approved for protective or preventive care-- articulating/formalizing in rule a practice that was already in place. As the policy states, "benefits may be used as an early intervention strategy in certain critical situations to help prevent neglect, abuse, or exploitation of a child. The worker may approve child care in these situations to help stabilize the family or enhance family functioning."^{xlvii} These benefits can be presumptively approved for up to 30 days (with the option of an extension), during which time the family has a chance to provide required verification for continued eligibility.

In addition it is important to provide some context about Oklahoma's eligibility system in general. The child care subsidy program has the shortest eligibility determination period of any of the human services programs with the goal of starting benefits as soon as possible. Per policy, applications must be approved within two working days of an interview and receipt of all verifications. Applicants may apply via fax, email, in person at a local DHS office or online at www.okdhs.org. Phone interviews are encouraged, and online applicants are to receive a call back that day if at all possible. Presumptive eligibility of 30 days is given in situations where verification is out of the applicant's control to immediately provide. Once required verification is provided, a full eligibility determination is made and care is extended when eligible. On the systems side, Oklahoma has recently developed a homeless indicator in the data entry system which will allow DHS to track and report on homeless populations as required by CCDBG. DHS has also recently awarded a contract for a new web-based eligibility system which is in the early stages of development.

SOUTH CAROLINA

In March of 2016, the South Carolina Department of Social Services (DSS) began partnering with the South Carolina Department of Education and the South Carolina Coalition for the Homeless on an initiative to provide child care vouchers to families experiencing homelessness. The ultimate goals of the initiative are to promote family economic stability in order to afford families the opportunity to become self-sufficient in order to ultimately access housing. Under this new initiative, child care vouchers are available on a first come, first serve basis to families who meet the McKinney-Vento definition of homelessness and who are working, in school, in a training program, actively participating in job search, or currently enrolled in a drug and/or alcohol or mental health treatment program.

Families can apply for the homeless child care voucher through a designated referring entity, which includes the Department of Education and Homeless Coalitions throughout the state, as well as other social service providers. DSS has a designated staff person to review the applications and determine eligibility. Families who apply and are found eligible and who are working, in school or in a job training program are given 52 weeks of child care. If the family is job searching or in a drug/alcohol or mental health treatment program, the family will receive 12 weeks of presumptive eligibility to allow the family time to find employment or to complete the drug and/or alcohol or mental health treatment program. At the end of the 12 weeks, if the family is then working, in school or training, the funding will be extended for the remainder of the 52 weeks of child care. If they are not working, in school or in a training program at the end of the 12 weeks, services end. Eligible families have a variety of choices of child care providers; from center based care to family, friend, and neighbor providers. The child care facility must be participating in the South Carolina Voucher Program. Families experiencing homelessness are not charged a co-pay; however, parents may be required to pay the difference between the voucher amount and the amount charged by the child care provider. One important piece of context to note is that financial assistance for child care is typically not available to the general low-income working family population in South Carolina; child care vouchers are typically limited to certain special populations, including families receiving or transitioning off of TANF, children with special needs, children involved with child protective services,

families impacted by domestic violence, parents seeking a high school diploma or GED, and the newest category, families experiencing homelessness. South Carolina also does not maintain a waitlist for child care vouchers.

For Federal Fiscal Year ending September 30, 2017, South Carolina DSS reports spending approximately \$2 million on the homeless voucher program. The program began with only 250 vouchers available through referral from the Department of Education or one of four homeless coalitions in the state; as of October 2017, the program has served over 1100 children and has expanded to accept referrals from a wide variety of partners. Because South Carolina does not maintain a waitlist, DSS reports no impact on waitlists due to implementing their policies related to homelessness. DSS was not able to estimate the impact of the homeless child care voucher initiative on parent employment due to lack of available data.

The DSS representative interviewed by the authors of this report reported that she considers the homeless voucher initiative to be a success and identified some key factors that contributed to that success. First, she stressed the value of strong partnerships around the state. DSS intentionally worked with partners that had ready access to and considerable expertise working with families experiencing homelessness, which helped them ensure that policies and procedures were appropriate for the population and that they could reach homeless families. Second, the DSS representative shared that “getting the word out” about the initiative was one of their biggest challenges and that the key to overcoming that challenge was to actively educate people in the community about the new opportunity. DSS representatives travelled around the state doing more than 100 presentations for social service providers and other relevant stakeholders to ensure awareness of the initiative. Another important component the DSS representative mentioned was having the right staff in place to work with homeless families. Although training can play a role in preparing staff to work with homeless families, the DSS representative stressed the importance of assigning the role to someone who is compassionate, patient, and flexible to meet the needs of homeless families, because “homelessness does not start at 8 am and end at 5 pm.” These are qualities that can’t always be taught. The DSS representative also offered advice for other states hoping to implement a similar initiative. Because so

much is still unknown about families experiencing homelessness, it can be very difficult to predict how child care policies will impact both the families and the child care subsidy program. She urged states to start small, jump in, and recalibrate efforts based on their experiences. Finally, the DSS representative also recommended putting a strong team in place across organizations to help identify families experiencing homelessness and collaborate on policy and procedure development.

VERMONT

The child care financial assistance program in Vermont is administered by the Department of Children and Families (DCF). In order to be eligible for child care subsidy, families must meet income guidelines and have a [service need^{xlviij}](#), which includes employment, education, participation in TANF, the parent or child has significant health needs, the family is involved with the child welfare system, or the family is experiencing a significant life stressor, known as the “family support” service need. Families who experience homelessness are granted automatic eligibility based on their homeless status under family support. Families who are found eligible under family support are served through a more comprehensive service model called Children’s Integrated Services (CIS). The Child Development Division contracts with agencies in 12 communities throughout Vermont to provide CIS services. The CIS team is made up of professionals that provide services in the following areas: Nursing, Early Intervention, Early Childhood and Family Mental Health, Family Support, and Specialized Child Care.

When a family is identified as homeless and found eligible under family support, the family’s application is forwarded to a CIS Child Care coordinator in their community. The CIS Child Care coordinator works with the family and the local CIS referral and intake team to assign a primary service provider, who will continue with the family to create a service plan that includes not only child care, but all of the services the family may need. Families are approved for 12 months of child care financial assistance, and during that time, the CIS primary service provider works to support the family in meeting their goals identified on the service plan. One goal of the service plan is to help the family become eligible for child care financial assistance under a different service need, such as employment or education. If the family does not qualify for child care assistance under a different

service need after the initial 12-month eligibility period, care can be extended for another 12 months on a case-by-case basis.

Although Vermont has always approved child care assistance under the family support service need, which could include homelessness and housing instability, the explicit focus on homelessness is relatively new. The policy to automatically approve child care for families experiencing homelessness has been in place for approximately two years, with implementation ramping up only in the last year. Similar to other states, Vermont does not have the data to estimate the cost of the new homeless policy and also does not yet have an accurate count of the number of families experiencing homelessness served in the child care subsidy program. The state can report the total cost of the family support program, but because families can qualify under family support for reasons other than homelessness, it is unknown what the impact is of the homeless policy alone. Vermont reports that they have not seen a rise in the total cost of the family support program since implementing the new homeless policy.

In terms of positive impacts of the homeless policy, the informant from Vermont reported that their CIS program has served to better integrate services for families at the local level. Through the process of creating a single comprehensive service plan for families, community service providers on the ground have begun to break out of their silos and work together more efficiently and successfully. Similarly, at the state level, DCF staff have begun the process of using the CCDF Self-Assessment Tool for Serving Families Experiencing Homelessness^{xlix}, which has revealed that although they have collaborations in place across state agencies, the quality and depth of the collaborations could be improved; DCF is actively working to strengthen those critical partnerships. Another positive impact is simply that families experiencing homelessness are able to be served and the state continues to not have any wait lists. Additionally, the new policy has made it easier for families experiencing homelessness to continue their child care subsidy and service plan even when they move to a different community, which is fairly common for families. Prior to the new policy, families would have to reapply for child care financial assistance in their new community—now, the case is simply transferred.

As noted by many other states, data is a major challenge. The informant from Vermont noted that in addition to the challenges within just the child care subsidy

data system, there are challenges across state agencies as well. Vermont has made a statewide commitment to ending homelessness by 2020, but because each agency operates a different system and those systems do not talk to each other, it is difficult to get a true count of the number of people who experience homelessness in the state and to always know what services they are receiving. One benefit of families entering the proverbial service door through child care assistance is that they will automatically be connected to other services in an integrated way. Families who enter through the shelter system, for instance, may receive referrals to other services but they will not have one service plan and a group of providers who are working together and are aware of what the other service providers are doing.

Vermont's informant offered that although the size of Vermont certainly contributes to their success in serving vulnerable families, she also credited the culture of collaboration within her agency and throughout the state, as well as the strong program design of Children's Integrated Services, which is focused on integration of services for children and families. She also offered that for an initiative to take hold and grow like it has in Vermont, it takes someone willing to be a champion and to lead the charge, which is the role that DCF has played. Finally, she noted that in larger states for which the Vermont approach won't translate well to, she would recommend considering focusing on local initiatives and investing heavily in cross-system collaborations that go beyond the superficial and are truly integrated.

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^{xl} U.S. Department of Health and Human Services, U.S. Department of Housing and Urban Development, and the U.S. Department of Education. (October 31, 2016). “Policy Statement on Meeting the Needs of Families with Young Children Experiencing and At Risk of Homelessness.” Washington, D.C.: U.S. Department of Health and Human Services, U.S. Department of Housing and Urban Development, and the U.S. Department of Education. <https://www.acf.hhs.gov/sites/default/files/ecd/echomelessnesspolicystatement.pdf>.

^{xli} CCCAP provides child care subsidies to households in the following programs: Low-Income, Colorado Works (aka TANF), Protective Services, and Child Welfare. This example refers to the policies and regulations around the Low Income Program.

^{xlii} Definition in alignment with McKinney-Vento. See: Colorado Department of Human Services. “Colorado Child Care Assistance Program.” Code of Colorado Regulations 9 CCR 2503-9. Effective September 30, 2016.

^{xliiii} Other target populations include households with incomes at or below 130% federal poverty guidelines, teen parents, children with additional care needs, and segments of population defined by county.

^{xliv} See 3.909: “Eligibility for Families Experiencing Homelessness.” Effective September 30, 2016.

^{xlv} See “Opportunities for Children Experiencing Homelessness bookmark.” (July 2017). <http://Nwww.okdhs.org/OKDHS%20Publication%20Library/17-17.pdf#search=17%2D17>.

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