



4Cs of San Mateo County **Provider Insights on UPK Implementation - Summary Report**

VIVA Social Impact Partners | May 2024





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Executive Summary

San Mateo County is developing a plan to ensure that all four-year-olds and high-need three-year-olds have access to high quality full-day early learning programs. Under the direction of the Child Care Partnership Council (CCPC), a group of diverse stakeholders called the Universal Pre-Kindergarten (UPK) Mixed Delivery Planning Committee is leading this work. The Committee wanted the perspectives of families and child care providers to shape the planning process, and asked the Child Care Coordinating Council (4Cs), San Mateo County's Resource & Referral agency, to lead community engagement efforts. To reach child care providers, 4Cs asked VIVA Social Impact Partners to facilitate five focus group conversations.

In April 2024, VIVA Social Impact Partners connected with 38 family child care (FCC) providers and 20 center-based providers. Focus groups were held online in English, Spanish, and Mandarin, allowing diverse providers to share their experiences and perspectives. Questions centered on experiences with the rollout of Transitional Kindergarten (TK), perspectives on implementing a Family Child Care Home Education Network (FCCHEN), barriers to accepting children with vouchers, and how providers would like to engage in the planning process going forward. VIVA then analyzed providers' input to identify common themes and inform a set of practical recommendations.

The following summarizes key themes and recommendations that emerged from the focus groups:

- 1. Impacts of TK** - The rollout of TK in public schools has impacted many providers' child care businesses. Facing declining enrollment of four year olds, some providers have found creative ways to remain competitive. In contrast, many FCC providers have limited knowledge of the TK rollout in public schools, contributing to uncertainty over how best to adapt.
- 2. Support adapting to TK** - Providers shared ideas for how the county could foster a more inclusive mixed delivery system in the wake of the TK rollout. Popular ideas included building partnerships with school districts to provide wrap-around care, facilitating a communications campaign focused on family choice, and subsidizing the cost of other early learning options for middle-income families. Overall, for some providers, it was important that the county focus on making systems-level changes rather than asking individual providers to adapt their offerings.
- 3. FCCHEN perspectives** - FCC providers were concerned that it would take significant time to fulfill FCCHEN requirements, and their income would also decrease. Before deciding whether to join a FCCHEN, many providers wanted more information about specific impacts on their time, income, and program operations. Despite concerns, some providers saw potential value in being part of a FCC network.



4. **Barriers to accepting vouchers** - Many FCC providers did not understand what a voucher or subsidy meant, and could benefit from more information in order to better support families needing financial help. Center-based providers shared specific suggestions related to the voucher system.
5. **Provider engagement** - Many providers have felt left out of conversations regarding TK and UPK and would like to be involved and informed going forward. Providers are eager to have a say in the county's decisions that affect early childhood education and care, highlighting the importance of their involvement in ongoing planning and policy-making.



Introduction

Background

San Mateo County aims to reach all four-year-olds and high-need three-year-olds with full-day, high quality early learning programs. To meet families' diverse needs, the county would like to develop a mixed delivery early learning system, including Head Start, public and private center-based child care and preschool, public schools (TK), and family child care home (FCC) providers. To advance this vision, the Child Care Partnership Council (CCPC) established an ad hoc committee called the UPK Mixed Delivery Planning Committee. The Committee began meeting in 2023 and now includes 46 diverse members, including school districts, teacher associations, referral agencies, providers from different settings, and families in San Mateo County. By June 2024, the Committee aims to develop a comprehensive plan¹ that includes the following components:

- Needs assessment
- Vision and coherence
- Community engagement and partnerships
- Workforce recruitment and professional learning
- Curriculum, instruction, and assessment
- Facilities, services, and operations

Goal of the UPK Mixed Delivery Planning Committee

Plan for how all 4-year-olds and an increased number of at-promise 3-year-olds in San Mateo County will be able to access full-day learning programs before kindergarten that meet parents' needs in a high-quality, mixed-delivery system of school districts, preschool programs, and expanded learning offerings.

To inform this plan's development, the Child Care Coordinating Council (4Cs) of San Mateo County is leading efforts to understand the perspectives of families and providers. In early 2024, 4Cs contracted with VIVA Social Impact Partners, a private consulting firm based in San Mateo County, to facilitate five focus groups with FCC and center-based providers. Through focus groups, 4Cs and the Planning Committee aimed to understand:

1. The experiences, challenges, and recommendations that childcare providers have for UPK implementation in the current mixed-delivery system in San Mateo County.
2. The pros and cons of establishing a Family Child Care Home Education Network (FCCHEN) in San Mateo County and gauging interest in participating in a FCCHEN.

¹ After June 2024, the work group will continue refining the plan based on ongoing community input.



This report describes VIVA's methodology for gathering and analyzing providers' input, then summarizes key learnings and presents recommendations.

Methodology

In April 2024, VIVA Social Impact Partners facilitated five focus groups for family child care home (FCC) providers and private center-based providers working in San Mateo County.² VIVA facilitated each 90-minute focus group via Zoom, and each participant received a \$100 stipend for their participation. In total, 38 FCC providers and 20 center-based providers participated.

The three focus groups for FCC providers were each facilitated in a different language: English, Spanish, and Mandarin. They included both small and large FCCs that are non-Title 5 licensed and license-exempt. Participants included owners and assistant teachers, and programs had varied hours of operation. The two focus groups for center-based providers included directors and staff from privately funded, non-Title 5 licensed or license-exempt programs, including Head Start. Focus groups for center-based providers were offered in English only. 4Cs recruited all focus group participants and aimed to include providers from northern, central, and southern regions of the county. For a detailed breakdown of participant demographics by setting, see *Appendix I - Provider Demographics*.

VIVA developed focus group protocols to answer key "learning questions" developed by 4Cs (see *Appendix II - Learning Questions*). The learning questions guided the more detailed structure and questions of the focus group protocols (see *Appendix III - Protocol for FCCs* and *Appendix IV - Protocol for Centers*). After conducting all focus groups, VIVA analyzed and coded notes across sessions to identify themes and insights, including differences according to primary language (for FCC providers only) and setting (FCC providers vs. private center-based providers). Recommendations were also developed based on direct suggestions from providers and VIVA's understanding of key insights in the context of the Committee's work.

² Focus groups included FCC and private center-based providers because the UPK Mixed Delivery Planning Committee was interested in hearing the perspectives of non-Title 5 early learning programs.



Key Findings

Impacts of Transitional Kindergarten

The Committee sought to understand providers' experiences, challenges, and recommendations regarding UPK. Discussions focused on the impacts and implications of Transitional Kindergarten (TK), a significant change from the state that is now shaping San Mateo County's mixed delivery system.

Concerns

Center-based and FCC providers shared how the introduction of TK in public schools has impacted their programs. Many providers mentioned how TK has reduced their profit margins. In recent years, many have lowered their total enrollment or increased enrollment of younger children. With lower teacher-child ratios required for infants and toddlers,³ providers described needing to hire more staff or decrease the total number of children they serve. Providers also described how TK has impacted their staffing. They have laid off staff due to declining enrollment, lost teachers who decided to work at TK programs for better benefits and hours with fewer requirements, and needed to hire less qualified staff to replace them.

Providers were also concerned that TK programs limit family choice. They explained how TK programs are free, creating a significant cost differential that incentivizes families to send their children to TK. Two center-based providers further noted that some school districts are telling families that they must enroll in TK in order to save a spot for kindergarten at their home school. Providers further noted that parents may have limited knowledge of early childhood education and development, leading to uninformed decisions about where to enroll their children.

Across focus groups, providers had varying levels of knowledge of TK programs. Several Mandarin-speaking providers did not know that public schools now offer a free year of TK for four-year-olds. In contrast, many center-based providers were very knowledgeable about TK programs and shared specific concerns regarding TK's quality and safety. For instance, many shared that they believe TK's emphasis on academics is not developmentally appropriate. Providers reported hearing that TK classes may not confirm whether authorized adults are picking up children after school and that children may be walking to the bathroom unattended. Providers also mentioned how TK's limited hours may pose a challenge for families.

Both FCC and center-based providers also expressed frustration at feeling excluded from the TK rollout, despite efforts to make their voices heard. Several highlighted how the concept of a mixed delivery system is nice in theory, but has not reflected their current reality, which, in their opinion, seems to favor TK over other options.

³ Infants and toddlers include children ages 0 to 24 months.



Adapting to TK

In addition to sharing concerns, providers described how they are already adapting and responding to the introduction of TK.

Some English-speaking FCC providers and many center-based providers have tried modifying their programs to attract preschool families in a more competitive market. For example, several English-speaking FCC providers added extracurricular activities, such as yoga and cooking, and center-based providers in both focus groups made changes like adding a language immersion program or highlighting their play-based approach. Mandarin-speaking FCC providers did not describe making any changes to adapt to TK.⁴

Four center-based providers also described extending their program hours or offering after-school programs. A few providers also mentioned other strategies, such as offering discounts to families who keep their four-year-olds enrolled in their programs or fostering relationships with representatives from local public schools with the goal of coordinating before/after school care. Additionally, many center-based providers noted that they communicate with families to help them understand their four-year-old's early care and education options.

Desired Supports

After sharing how their programs are responding to TK, focus group participants considered how the county could best support FCC and center-based providers and the families they serve. VIVA presented a list of proposed strategies from the UPK Mixed Delivery Planning Committee (see table below) and asked providers to brainstorm other ideas.

PROPOSED STRATEGIES FROM THE UPK MIXED DELIVERY PLANNING COMMITTEE

- a. Support for building partnerships with school districts to provide before/after school wrap-around care.
- b. Grants to buy age-appropriate materials and to reconfigure facilities for either younger or older children.
- c. Professional development to support working with new age groups.
- d. Higher reimbursement rates for serving younger children.
- e. Marketing strategies to help providers promote their programs given the shift in the market/competition with TK.
- f. Communications campaign for families - to tell families about their child care options and right to choose what works best for them.
- g. Information/training for providers - to help providers educate families about their child care options and right to choose what works best for them.

⁴ Note that Spanish-speaking FCC providers did not share how they have adapted to TK. When asked, these providers focused on sharing additional challenges they have faced during the TK rollout.



The list below includes strategies that providers found most promising. It includes strategies from the Committee, along with additional ideas brainstormed during discussions. Strategies are listed roughly in order of popularity.

- **Support for building partnerships with school districts to provide wrap-around care.**
Some FCC and center-based providers were interested in working with schools to offer care at times when TK is unavailable, such as before/after school, holidays, and seasonal breaks. A few noted that transporting young children to/from TK and their program sites would pose a challenge and potential liability, and they could use support with transportation.
- **Facilitate a communications campaign to inform families about their child care options and right to choose what works best for them. In addition, develop and execute an approach to educate providers on how to help inform families of their options.**
Many FCC and center-based providers highlighted how families need to better understand the early learning options available to them, including how options differ from one another. Some providers also noted that it would be helpful to receive more information about TK and other early care and education settings, so they can help families understand their options and make the best choices for their children.
- **Subsidize the cost of other early learning options for low and middle-income families.**
Many providers noted that the significant cost difference between TK and other programs does not present families with a fair choice. They wished that lower and middle-income families could receive vouchers to attend other program options. As a Mandarin-speaking FCC provider said: “We cannot care for children for free, so how can we compete?”
- **Grants to buy age-appropriate materials and to reconfigure facilities for either younger or older children.**
Several center-based providers said that receiving grants for materials and facilities would be helpful. However, a center-based provider noted that state grant application processes currently take a long time and can deter providers from applying. As she elaborated: “all the state grants that we’ve applied for...are so onerous that we question sometimes whether they’re worthwhile.”
- **Advocate for higher reimbursement rates for serving young children.**
Several providers noted that serving more infants and toddlers is challenging, given the low teacher-child ratios and current reimbursement rates. To sustainably serve younger children, they need financial support.
- **Professional development to support providers who want to work with infants and toddlers.**
Several center-based providers noted that learning how to best care for infants and toddlers would be helpful. One provider noted that free training is available online, such as



the Program for Infant/Toddler Care (PITC)⁵ offered by WestEd. However, several other center-based providers said that they would not be interested in working with infants.

→ **Help programs pay their staff a living wage.**

Several providers highlighted how their staff is underpaid, and they would like support increasing their wages.

It is important to note that there were providers in almost every focus group who did not support any of the strategies proposed by the UPK Mixed Delivery Planning Committee.⁶ These FCC and center-based providers expressed frustration at feeling left out of the TK rollout, and then being presented with strategies that would require them to adapt their programs in response. As an English-speaking FCC provider stated: “We should be included [in discussions] without changing our program model.” These providers viewed nearly all of the proposed strategies as essentially placing the burden of adapting to TK on providers. They would prefer that San Mateo County focus on making changes at the systems level rather than asking FCC and center-based providers to spend extra time on activities that are primarily meant to support their adaptation to TK (e.g., professional development courses and applying for grants).

Perspectives on Family Child Care Home Education Networks (FCCHENs)

FCC providers were asked to share their perspectives on implementing a Family Child Care Home Education Network (FCCHEN) in San Mateo County. The UPK Mixed Delivery Planning Committee is considering implementing a FCCHEN, which would offer subsidized care for families and support for FCC providers. After learning about FCCHEN services and requirements (see *Appendix III - Protocol for FCCs*), providers shared their concerns and reflected on potential benefits.

Concerns

Across all three FCC focus groups, providers expressed a desire for more specific information about how FCCHEN requirements would impact their program operations. Many felt that they needed more detailed information in order to decide whether they would want to participate in a FCCHEN in San Mateo County. Questions raised by providers included:

- I currently fulfill QRIS and/or Title 22 requirements. How much additional time and effort would I need to spend fulfilling FCCHEN requirements, including Title 5?
- How would the way in which I engage with 4Cs compare to how I would engage with a FCCHEN?

⁵ Note that PITC training is not offered free of charge to all participants. Scholarships are available for some offerings.

⁶ Some of these providers supported the idea of a communications campaign.



- Exactly how would being part of a FCCHEN impact my wages and what I am able to pay my staff?

In the English-speaking FCC focus groups, providers were strongly opposed to a FCCHEN, since it could lead to reduced pay. As one provider stated: “If it means taking a cut in pay, it would not be a program for me.” In the Mandarin and English-speaking FCC focus groups, providers highlighted how the increased requirements are not worth the lower pay. In one provider’s words: “They are asking for too much but giving too little.” For example, completing DRDP assessments for every child seemed especially unrealistic for small FCCs, and obtaining required permits did not feel feasible. While these providers did not fundamentally disagree with FCCHEN standards as measures of quality (see box below), the requirements to fulfill them seemed unrealistically high. To illustrate, one provider mentioned using DRDP as a tool for thinking about the quality of her program, but felt she did not have the capacity to regularly complete it for every child.

QUALITY REQUIREMENTS OF FCCHENS

- a. Activities that are age and developmentally appropriate
- b. Care for and supervise children
- c. Care that meets each child’s language and culture needs
- d. Connect children and families to social and health services that they need
- e. Food that is nutritious (meets Child and Adult Care Food Program or National School Lunch Program Requirements)
- f. Providers participate in training and support
- g. Complete Desired Results Developmental Profile (DRDP) assessments for each child
- h. Periodic assessments to make sure services are high-quality
- i. Providers meet educational requirements (Program Director Level Permit for director, Associate Teacher Permit for someone supervising an assistant)

Benefits

In the Spanish language FCC focus group, VIVA facilitators shared general information and services offered by FCCHENs, before outlining all the requirements. Before hearing all the requirements, many of the Spanish-speaking providers viewed FCCHENs as potentially beneficial, although they still desired more detailed information before making a decision. They liked the idea of organizing together as a network. One provider mentioned how in the past she participated in a FCC network in San Mateo County, and appreciated how it offered health insurance and other benefits. If a FCCHEN were implemented, a provider noted that more education opportunities would need to be offered in Spanish.



Barriers to Accepting Vouchers

Many FCC providers said that they had not cared for children who have vouchers.⁷ Others shared that they did not understand the process for accepting a child with vouchers, or asked clarification questions to understand what was meant by a voucher or subsidy. Several FCC providers suggested that it would be helpful for them to know how to support families with obtaining vouchers. In the Mandarin-speaking focus group, a provider mentioned that not many Chinese-identifying families have subsidies, and expressed that this would be a barrier to Mandarin-speaking providers accepting children with vouchers.

Center-based providers⁸ were generally more informed about vouchers and had specific suggestions for streamlining the process:

- A few providers mentioned a publicly available list of eligible programs and explained that they did not see their programs included on the list; however, the list that was referenced was not clearly named during the session. Thus, it is unclear if providers are referring to the 4Cs list for program vacancies in the County or the 4Cs list of subsidized programs offered to families who may not qualify for the California Alternative Payment Program.
- In one focus group, a provider suggested shifting the voucher application process to be provider-led, so that programs can plan based on the anticipated number of children they will serve and their reimbursement rates. It is important to note that while such a shift may address the provider's concerns, state mandates would not allow for such a change.
- Several providers shared that they wanted 4Cs to help set families' expectations by letting them know that there is a waitlist with a limited number of spots that become available periodically. It is important to note that as the Alternative Payment Program administrator, 4Cs maintains an eligibility list that is not first-come, first-serve. Families are admitted to the Alternative Payment Program based on the program's requirements mandated by the state related to income, family size, and other circumstances (i.e, children at risk for neglect or abuse and children who are recipients of child protective services).
- A provider noted that they would still like to receive compensation even if a child does not show up.

Provider Engagement

Overall, providers expressed gratitude for the opportunity to share their perspectives through the focus groups. As one Mandarin-speaking FCC provider remarked, "It feels like you are the bridge between us and the government." Yet across all five focus groups, providers expressed a strong

⁷ Overall, 39% of the FCC providers who participated said that they serve children through a subsidy program, compared to 80% of center-based providers (see *Appendix I - Provider Demographics*).

⁸ Note that not all center-based providers consistently cared for children with vouchers. For example, one provider mentioned that it has been several years since they last had a child with vouchers, and at least two center-based providers were not familiar with vouchers.



desire to continue making their voices heard and engage with elected officials tasked with strengthening the mixed delivery system. Several providers expressed interest in not only sharing input, but also becoming involved in decision-making conversations. For example, one provider shared how they would like to attend Committee meetings, and others mentioned wanting to be involved in shaping communications campaigns targeted at families. Several Mandarin-speaking FCC providers mentioned how video calls were a helpful format for their participation. Others described wanting to stay in the loop regarding how their input shapes the Committee's decisions.

Across many focus groups, providers desired more detailed information about potential changes that the UPK Mixed Delivery Planning Committee is considering rolling out. The information would help providers know how to best advocate for themselves and the families whom they serve.

A number of providers wanted to be involved in advocacy efforts to encourage elected officials to listen to their perspectives. These providers felt left out from prior conversations surrounding the TK rollout, or exhausted from advocating for their needs without experiencing any changes in return. There was a particularly strong sense of urgency among several providers in the Spanish language FCC focus group, who shared cell phone numbers with each other in the Zoom chat and mentioned wanting to protest their exclusion from TK at city hall or the state capital. One of these providers mentioned the importance of organizing across language barriers, alongside fellow Mandarin and English-speaking providers. Note that when sharing their desire to participate in advocacy work, providers did not mention any existing groups, such as the Child Care Providers' Union or CCPC general meetings.

Recommendations

Based on insights from 38 FCC and 20 center-based providers, VIVA developed the following list of recommendations for the UPK Mixed Delivery Planning Committee. Recommendations include direct suggestions from providers, as well as suggestions that VIVA developed by considering focus group learnings in the context of the Committee's work. Note that recommendations are not listed in any particular order.

- 1. Create clear pathways for provider engagement in the UPK planning process.**

Determine components of the UPK planning process that would especially benefit from providers' input and decision-making. To best leverage providers' perspectives, VIVA recommends that the Committee identify specific, actionable areas for provider engagement, such as planning an approach for partnering with school districts.

- 2. Regularly communicate with FCC and center-based providers regarding the evolution of UPK in San Mateo County and how they can participate.**



Many providers wished to better understand how their input is shaping countywide plans. VIVA suggests following up with all focus group participants to share this report and the ideas that the UPK Mixed Delivery Planning Committee is considering. Consider also reaching out to all FCC and center-based providers in San Mateo County to share the context of the UPK planning goal and process and how they can get involved. Additionally, to support providers' desire to advocate for their needs, share information about existing channels, such as the Child Care Providers' Union and CCPC general meetings. It may also help to understand whether there are barriers to participation in these groups for FCC providers, who are more likely to work nontraditional hours and have primary languages other than English.

3. Develop partnerships between school districts and other early learning programs.

Support FCC and center-based providers in building partnerships with local school districts to provide care at times when TK is unavailable, such as before/after school, holidays, and seasonal breaks. Partnerships should include determining how school districts can support and/or lead the transportation of children to FCC and center-based provider sites. 4Cs and their partners can consider encouraging school districts and other Local Educational Agencies (LEAs) serving TK and Kindergarten students to utilize the Expanded Learning Opportunities Program (ELO-P) as the funding mechanism to support partnerships with early care and education programs. ELO-P funds are highly flexible and could be used to pay for transportation to community care programs, among other initiatives. Since LEAs that receive funds for classroom-based instructional programs serving TK through 6th grade cannot opt out of ELO-P funding, it is advantageous to use the available funding. Per the *February 2024 ELO-P TK and K Legislative Report* provided by CDE, Redwood City Elementary and San Bruno Park Elementary school districts are already utilizing ELO-P dollars for TK and K students in the 2023-24 school year. Capturing approaches and lessons learned from these LEAs can support the exploration of structured partnership agreements between districts, early learning agencies, and providers.

4. Launch a communications campaign on family choice that includes educating providers as trusted messengers.

Launch a countywide communications campaign to inform families about their child care options and right to choose what works best for them. As part of the campaign, educate providers on available options and share guidance on how providers can support families in making the best decision for their children. Include multiple forms of outreach, including Zoom Q&A sessions and written communications. Include outreach to Mandarin-speaking providers, who seemed least knowledgeable about TK. In communications to FCC and center-based providers, share how the county is working to support their programs and empathize with the challenges they have been facing.



5. Advocate for higher reimbursement rates for serving young children.

Higher reimbursement rates would help make serving infants and toddlers financially viable for providers. Include providers in leading and advancing advocacy efforts, with options to participate in English, Spanish or Mandarin.

6. Offer professional development to support providers who want to work with infants and toddlers.

Some center-based providers would appreciate training on how best to care for infants and toddlers. One option is the Program for Infant/Toddler Care (PITC) offered by WestEd. When communicating about professional development offerings, keep in mind that some providers will not be interested in training to work with infants and toddlers.

7. Make grants available to providers needing to buy age-appropriate materials or reconfigure facilities for younger or older children.

Develop straightforward, time-efficient application processes to make it easy for providers to apply to grants. VIVA recommends coupling a streamlined application process with individual or group technical assistance sessions.

8. Model how implementing a FCCHEN would impact family child care providers' time and income.

FCC providers were concerned that it would take significant time to fulfill FCCHEN requirements, and their income would also decrease. Before deciding whether to implement a FCCHEN, it would help to model predicted impacts on different types of FCC providers. If the Committee does decide to create a FCCHEN, it would be important to communicate how joining would impact providers' time, income, and program operations, and how a FCCHEN differs from their involvement with 4Cs.

9. Consider other options for family child care networks without FCCHEN requirements.

Some FCC providers liked the idea of organizing together with other FCC programs and having available supports. It could be worth investigating network options that do not entail fulfilling as many additional requirements. FCC providers could be encouraged to become involved in an association that provides peer support, learning, and advocacy, which was of interest to focus group participants. Examples of this type of group include the San Mateo County Family Childcare Organization (for FCCs only) and the Directors' Support Network (includes all provider types).

10. Educate FCC providers about child care vouchers and other subsidized care options so they are informed and know how to direct lower-income families to 4Cs.



Many FCC providers did not understand the Alternative Payment Program voucher process, what the vouchers were, and how they are used. Providers could benefit from more information. Given the complexity of subsidy options, it would also be helpful for providers to learn how to redirect subsidy-related inquiries from families to 4Cs.

11. Connect with school districts to understand whether they are prioritizing kindergarten spaces at home schools for current TK students.

Two providers mentioned how schools are telling families that they must enroll in TK at their home school in order to save a spot for kindergarten. Providers suggested that this disincentivizes families from choosing other options. It would be worth corroborating with schools and TK teachers whether this is occurring, and if so, find a path forward that promotes family choice.

12. Connect with school districts to understand their safety policies and practices for TK students.

Several center-based providers mentioned hearing stories regarding safety issues at TK programs. For example, they mentioned schools not checking whether authorized adults are picking up children after school and children walking to the bathroom unattended. It would be worth corroborating with school districts whether this is occurring, and if so, develop solutions to promote safety, along with clear communications about TK policies and standards to families and providers.

13. Subsidize FCC and center-based care for middle-income families.

Consider creating a sliding-scale scholarship program to make other early care and education options financially viable for middle-income families in San Mateo County. Note that creating a sliding-scale scholarship program would be a multi-year effort involving creating a child care burden index and securing a funding source. Another possible strategy would be to advocate for publicly subsidized family eligibility requirements to be reflective of the regional cost of living rather than state median income.



Appendices

Appendix I – Provider Demographics

Family Child Care Homes

In total, 38 Family Child Care Home providers participated in focus groups. Their demographic characteristics are reported below.

Characteristic	Percent
License Size	<ul style="list-style-type: none">• Large License, up to 14 children (61%)• Small License, up to 8 children (32%) <p>* Note that licensing data was not collected for three FCC providers, so percentages do not sum to 100%.</p>
Primary Language	<ul style="list-style-type: none">• Spanish (42%)• English (39%)• Mandarin (18%)• Cantonese (3%) <p>* Note that three providers indicated more than one primary language.</p>
Region	<ul style="list-style-type: none">• Central (39%)• South (26%)• North (18%)• Coast (8%) <p>* Note that region data was not collected for three FCC providers, so percentages do not sum to 100%.</p>
City	<ul style="list-style-type: none">• San Mateo (26%)• Redwood City (16%)• South San Francisco (13%)• East Palo Alto (8%)• Burlingame (5%)• Daly City (5%)• Foster City (5%)• Millbrae (5%)• San Bruno (5%)• San Carlos (5%)• Belmont (3%)



	* Note that city data was not collected for one FCC provider, so percentages do not sum to 100%.
Hours	<ul style="list-style-type: none"> • Traditional, 7am-6pm (82%) • Drop-in (26%) • After school (24%) • Non-traditional (18%) • Before school (13%) • Rotating Schedule (11%) • Overnight (8%) <p>* Note that providers could select all options that apply.</p>
Serve Children through Subsidy Program?	<ul style="list-style-type: none"> • Yes (39%) • No (53%) <p>* Note that subsidy data was not collected for three FCC providers, so percentages do not sum to 100%.</p>

Private Centers

In total, 20 private center-based providers participated in focus groups. Their demographic characteristics are reported below.

Characteristic	Percent
Primary Language	<ul style="list-style-type: none"> • English (80%) • Spanish (10%) • Mandarin (10%)
Region	<ul style="list-style-type: none"> • North (50%) • South (30%) • Central (15%) • Coast (5%)
City	<ul style="list-style-type: none"> • Daly City (20%) • Redwood City (15%) • San Mateo (15%) • Pacifica (10%) • East Palo Alto (5%) • Belmont (5%) • Brisbane (5%) • Menlo Park (5%) • Multiple (5%) • Portola Valley (5%) • San Carlos (5%) • South San Francisco (5%)



Hours	<ul style="list-style-type: none">● Traditional, 7am-6pm (80%)● Before school (20%)● After school (20%)● Drop-in (10%)● Non-traditional (10%)● Overnight (0%)● Rotating Schedule (0%) <p>* Note that providers could select all options that apply.</p>
Serve Children through Subsidy Program?	<ul style="list-style-type: none">● Yes (80%)● No (20%)



Appendix II – Learning Questions

TOPIC: Experiences, challenges, and recommendations for UPK implementation considering the current mixed-delivery system.

LEARNING QUESTIONS:

1. What capacity do providers have to pivot to serving more infants and toddlers and/or before/after school for children in TK and above? What supports do they need to make these pivots?
 - o Potential solutions to vet with providers include:
 - i. Support for building partnerships with school districts to provide before/after school wrap around care.
 - ii. Grants to buy age-appropriate materials and to reconfigure facilities for either younger or older children
 - iii. Professional development to support working with new age groups
 - iv. Higher reimbursement rates for serving younger children
2. What support do FCC providers and private center-based providers need to increase their subsidized capacity?
3. What type of investments or supports are needed to provide and maintain a high-quality curriculum? (Maybe group this with Q2)
4. What information, training or support do FCC providers and private center-based providers need to be able to communicate one integrated system to families and help promote family choice?
5. To what extent are FCC providers and private center-based providers interested in becoming TK teachers? If interested, what barriers do they face to becoming TK teachers? What type of support do providers need in their current roles (e.g., compensation and benefits)?
6. How would FCC providers and private center-based providers like to continue to be involved as the UPK mixed delivery plan continues to be refined?
7. What additional recommendations do FCC providers and private center-based providers have for the UPK Planning Committee?
8. What capacity do providers have to increase non-traditional hours of care?



TOPIC: Understanding of pros and cons to establishing a Family Child Care Home Education Network (FCCHEN) and gauge provider level of interest in becoming a Title 5 provider.

LEARNING QUESTIONS:

1. What do FCC providers view as the benefits of a Family Child Care Home Education Network (FCCHEN)?
 - Potential benefits to vet with providers include:
 - Assistance with quality improvement, including professional development
 - Support full enrolment in participating FCCs
 - Manage subsidy payments allowing for consistency and timeliness of payments.
 - Support business acumen, which includes workshops on budget development, liability insurance record keeping ect.
 - Support hiring and retaining assistants/staff
 - Participation in UPK as a Title 5 provider
2. What do FCC providers view as the downsides of establishing a Family Child Care Home Education Network (FCCHEN)? What support can be offered to mitigate some of the potential challenges?
 - Potential cons to vet with providers include:
 - Difficulty recruiting qualified providers due to education requirements
 - Providers may be reluctant to meet requirements because they can receive the same or, in some cases, a higher rate of compensation if they serve children whose families have AP program vouchers. The AP program also has fewer requirements.
 - Must follow quality standards of Title 5 financed programs.
 - Must complete DRDP for children under their care for at least 10 hours a week.
 - Observations of their childcare site, some providers may not want oversight.
3. To what extent are Family Child Care Home providers and private center-based providers in San Mateo County interested in becoming Title 5 providers? How can we make it work for you?
4. What other supports are necessary? Communications Campaign? Marketing Strategies given the shift in the market/competition?
5. What does quality look like for you? For parents? Does that align with the FCCHEN requirements?



Appendix III – Protocol for FCC Providers

Family Child Care Provider Focus Group Protocol

Part 1: TK Considerations

Context

- A. A group of local organizations, county government agencies, and community members in San Mateo County are trying to figure out how to make sure that 3 and 4 year olds have access to learning programs that are high quality and meet their families' needs. This group is called the UPK Mixed Delivery Planning Committee. By June this group will develop some initial recommendations for San Mateo County that will be refined and tested in future school years.
- B. First I have some questions for you about how you have been impacted by Transitional Kindergarten (TK) and what supports you and your program need to survive and thrive. TK is one way that the county (and the state) are trying to make sure that 3 and 4 year olds have access to learning programs. It is one of many early learning options. State preschool, Headstart, center-based care, and family child care homes are other examples. TK is part of the K-12 public school system and is the first year of a two-year kindergarten program that uses a modified kindergarten curriculum that is age and developmentally appropriate. It is free and by SY 2025-2026 it will be universally available to all 4 year olds in California. Again, TK is one of many programs. So families can choose to place their child in TK, or another option like California State Preschool (CSPP), Head Start or private care, or no program at all.
- C. Before we move to a discussion, are there any clarification questions about what TK is or how it relates to Universal Pre-Kindergarten (UPK)?

Discussion

- A. * Here are a few things we've heard from providers like yourself about the challenges and impact of TK implementation. *[Show a slide with the following list. Read through it and ask the participants if anything else should be captured. If there are other challenges/impacts they share, type them on the slide.]*
 - 1. Program enrollment could decrease.
 - 2. Ages served in early learning programs have changed.
 - 3. Desire to inform families of their right to choose and the options available outside of Transitional Kindergarten.
 - 4. Local Education Agencies, such as school districts, are not communicating nor collaborating with early learning and care programs.
 - 5. Concern for young children's development. Will they receive developmentally appropriate care and education in Transitional Kindergarten?
 - 6. Other?
- B. Now we have some questions for you about how your program has changed since TK began. We will now launch three Mentimeter polls and have a quick discussion after each one. For context, Transitional Kindergarten for four-year olds began in 2022-23 and will be fully implemented by 2025-26.
 - 1. Poll Question 2: Have you been serving more infants and toddlers?



2. Poll Question 3: * Have you offered before or after-school care for TK students?
 3. Poll Question 4: * Have you tried offering care before 7 am, after 6 pm, or on weekends?
- C. Now we have a question about what could help your program adapt to TK.
1. Poll Question 5:* We have some ideas for how to help providers adapt to Transitional Kindergarten (TK). To what extent do you think each of these would be helpful to you?
 - Support for building partnerships with school districts to provide before/after school wrap-around care.
 - Grants to buy age-appropriate materials and to reconfigure facilities for either younger or older children
 - Professional development to support working with new age groups
 - Higher reimbursement rates for serving younger children
 - Marketing strategies to help providers promote their programs given the shift in the market/competition with TK
 2. *Follow-up questions for a few providers to answer:*
 - i. *Why do you view ___ as a more helpful option?*
 - ii. *Why do you view ___ as a less helpful option?*
 - iii. *Do you have other ideas for how to help your program adapt to TK?*

Part 2: FCCHEN Context

Context

- A. Now I want to share with you a specific idea that the UPK Planning Committee has been thinking about to help family child care homes like yourselves who are impacted by TK and doing your best to serve families. The idea is a family child care home education network, or FCCHEN. It is when family child care homes like yourselves come together in a network to offer subsidized (or reduced cost) care for young children. The state funds FCCHENs in different counties, and currently, San Mateo does not have one. Creating a FCCHEN is one idea to help San Mateo family child care homes adapt to TK and help all families have access to pre-kindergarten.
- B. Context on family child care home education networks (FCCHENs):
- a. What is it?
 - i. Network of individual family child care homes that offer reduced cost child care
 - ii. Help family child care homes recruit and enroll kids who are eligible for subsidies. Other benefits for providers include mentoring on professional development and business skills
 - iii. To participate, providers must meet certain requirements, including Title 5 licensing
 - iv. San Mateo County is thinking about starting one of these networks, which almost all counties in California already have
 - b. What services would I get as a provider?
 - i. Help recruiting and enrolling subsidy-eligible families
 - ii. Coaching and materials on educational activities to improve quality
 - iii. Learn business skills (e.g., record keeping, budget development, taxes, and liability insurance)



- iv. Purchase or loan equipment (e.g., chairs, tables, toys, bikes, books, washing stations outside homes)
 - v. Lists of substitutes and assistants
 - vi. Help applying for grants to improve facilities
 - vii. Help completing Desired Results Developmental Profiles (DRDP) and preparing for licensing inspections
- c. What is required to participate?
- i. Must be a Title 5 provider. This most importantly includes:
 1. Meet certain education requirements (Program Director Level Permit for director, Associate Teacher Permit for someone supervising an assistant)
 2. Receive a background check, CPR, First Aid, and Preventative Health Practices certification
 3. Planned and unplanned site inspections from Community Care Licensing.
 4. Use the following ratios:
 - a. Infants 0-18 months
 - i. 1:3 adult-child ratio
 - ii. 1:18 teacher-child ratio
 - b. Toddlers 18-36 months
 - i. 1:4 adult-child ratio
 - ii. 1:16 teacher-child ratio
 - c. Preschool 36 - Kinder
 - i. 1:8 adult-child ratio
 - ii. 1:24 teacher-child ratio
 - ii. Must complete Desired Results Developmental Profiles (DRDP) for each child within 60 calendar days of enrollment and at least once every 6 months thereafter
 - iii. Each year receive an assessment using the Family Child Care Environmental Rating Scale
- C. Any clarification questions about FCCHENs before we discuss your thoughts on the pros and cons of having a network like this in San Mateo County?

Discussion

- A. **FCCHEN Benefits & Concerns:** First, we'll discuss what you see as the benefits or positive aspects of having and participating in a family child care home network (FCCHEN). After a discussion about its benefits, we will move on to discuss any concerns or challenges you foresee.
1. * **How do you think you would benefit from having a FCCHEN in San Mateo County?**
 1. Ask for initial reactions about benefits.

Poll Question 6: We want to know how you think a family child care home network (FCCHEN) would be **helpful** to you. Please rate each of the following on a scale of 1-5, with 1 being not helpful at all and 5 being very helpful.

- Help with quality improvement, including professional development.
- Help with enrolling children in my program.



- Help managing subsidy payments, so payments are received regularly and on time.
 - Learn business skills (e.g., record keeping, budget development, taxes, and liability insurance)
 - Receive lists of substitute teachers and assistants (note that the network will not screen them)
 - Participation in UPK as a Title 5 provider, with quality standards that exceed licensing requirements.
 - Help with buying or loaning equipment (e.g., chairs, tables, toys, bikes, books, washing stations outside homes)
 - Help applying for grants to improve facilities
2. * **What are your concerns about participating in a family child care home network (FCCHEN)?**
- i. Ask for initial reactions about concerns.

Poll Question 7: We want to know what would **concern you about being part of a family child care home network (FCCHEN)**. Please rate each of the following on a scale of 1-5, with 1 being “not a concern” and 5 being “would keep me from participating”

- Education requirements for Title 5 providers could keep me from participating. (Program Director Level Permit for director, Associate Teacher Permit for someone supervising an assistant)
- Not high enough compensation compared to Alternative Payment (AP) vouchers, and the AP program also has fewer requirements.
- Must follow quality standards for Title 5 funded programs.
- Would need to complete Desired Results Developmental Profile (DRDP) child assessments, which takes time and sometimes more training.
- Less independence, because my program would be monitored by FCCHEN staff.

Follow-up questions for providers to answer:

- Why do you view ___ as especially concerning?
- Why do you view ___ as not much of a concern?
- Do you have other concerns not shown in the poll that you want to raise?
- Follow-up question: What ideas do you have to make ___ less of a concern?
- What support would you need from agencies like 4Cs to help you become a Title 5 provider?

3. **To participate in a family child care home network (FCCHEN), you need to meet certain quality requirements. We want to know what you think about these requirements.**

Poll Question 8: The options below are **how** family child care home networks (FCCHENs) **define** quality care. Please select all the options that you and/or the families you serve think are important for a quality program.

- Activities that are age and developmentally appropriate
- Care for and supervise children
- Care that meets each child’s language and culture needs



- Offer parenting education to families
- Connect children and families to social and health services that they need
- Food that is nutritious (meets Child and Adult Care Food Program or National School Lunch Program Requirements)
- Providers participate in training and support
- Complete Desired Results Developmental Profile (DRDP) assessments for each child
- Periodic assessments to make sure services are high-quality
- Providers meet educational requirements (Program Director Level Permit for director, Associate Teacher Permit for someone supervising an assistant)

Follow-up questions for providers to answer:

- *Why do you view ___ as especially important for a quality program?*
- *Why do you view ___ as not describing a quality program?*
- *When you think about how you and your families think about quality care, is there anything missing from this list?*

B. Subsidized Capacity

1. As part of Universal Pre-Kindergarten (UPK), increasing the number of subsidized (or reduced cost) spaces in San Mateo County is a priority for the Planning Committee. This is one way to make care more affordable for families.
2. * Are there challenges you face to accept kids who have vouchers (examples of subsidies are CalWORKS, AP, and Migrant AP)?
 - i. Ask for initial reactions
 - ii. Challenge to vet: Families have trouble finding providers to accept their vouchers based on their rates. But at the same time, providers are under enrolled and want to serve more children from 4Cs. This may be because:
 1. Based on the reimbursement rates, it can be more cost-effective to take private pay families who can afford to pay more for care.
 2. May not be able to waive the family co-pay for those who use subsidy vouchers (i.e, CalWORKs S1, CalWORKs S2, CalWORKs S3, Alternative Payment, Migrant AP).
3. What could help you serve more kids who have subsidies?

Part 3: Other Ideas

- A. Creating a FCCHEN and having more subsidized spaces are both ideas about how providers in San Mateo County can serve all 3 and 4 year olds who need care. As family child care providers, what else do you think would help you serve families and adapt to the implementation of UPK during this time?
 1. Ask for initial reactions about ideas for support.
 2. * Ask to what extent they see each of the following as helpful, if not already discussed.
 - i. Communications Campaign for families - to tell families about their child care options and right to choose what works best for them
 - ii. Information/Trainings for providers - to help providers educate families about their child care options and right to choose what works best for them



- iii. [only mention if providers seem uninterested in a FCCHEN] Advocate to the state that a FCCHEN is not the right solution for San Mateo
- B. * The UPK Planning Committee will hear your feedback and use it to create a plan. Are there ways that you want to continue to be involved and make your voice heard?

Part 4: Wrap Up

- C. We are nearing the end of our time together. Thank you for participating! All of these great insights will be shared with San Mateo's UPK Planning Committee to make sure Universal Pre-Kindergarten is inclusive of FCC providers.
- D. To thank you for your time and contributions, 4Cs will send each of you a \$100 stipend. You should receive the check in the mail within two weeks. Please contact Gladys with any questions about your stipend payment.
- E. Do you have any final questions to ask or thoughts you would like to share?

Notes: (1) The modality used to capture responses varied between focus groups. Some sessions utilized the Zoom poll function, while other sessions utilized Powerpoint slides to relay questions to attendees. (2) Asterisks indicate priority questions.



Appendix IV – Protocol for Center-based Providers

Private Centers Focus Group Protocol

Part 1: TK Considerations

Context

- D. A group of local organizations, county government agencies, and community members in San Mateo County are trying to figure out how to make sure that 3 and 4 year olds have access to learning programs that are high quality and meet their families' needs. This group is called the UPK Mixed Delivery Planning Committee. By June this group will develop some initial recommendations for San Mateo County that will be refined and tested in future school years.
- E. First I have some questions for you about how you have been impacted by Transitional Kindergarten (TK) and what supports you and your program need to survive and thrive. TK is one way that the county (and the state) are trying to make sure that 3 and 4 year olds have access to learning programs. It is one of many early learning options. State preschool, Headstart, center-based care, and family child care homes are other examples. TK is part of the K-12 public school system and is the first year of a two-year kindergarten program that uses a modified kindergarten curriculum that is age and developmentally appropriate. It is free and by SY 2025-2026 it will be universally available to all 4 year olds in California. Again, TK is one of many programs. So families can choose to place their child in TK, or another option like California State Preschool (CSPP), Head Start or private care, or no program at all.
- F. Before we move to a discussion, are there any clarification questions about what TK is or how it relates to Universal Pre-Kindergarten (UPK)?

Discussion

- D. * Here are a few things we've heard from providers like yourself about the challenges and impact of TK implementation. *[Show a slide with the following list. Read through it and ask the participants if anything else should be captured. If there are other challenges/impacts they share, type them on the slide.]*
 - 1. Program enrollment could decrease.
 - 2. Ages served in early learning programs have changed.
 - 3. Desire to inform families of their right to choose and the options available outside of Transitional Kindergarten.
 - 4. Local Education Agencies, such as school districts, are not communicating nor collaborating with early learning and care programs.
 - 5. Concern for young children's development. Will they receive developmentally appropriate care and education in Transitional Kindergarten?
 - 6. Other?
- E. Now we have some questions for you about how your program has changed since TK began. We will now launch three Mentimeter polls and have a quick discussion after each



one. For context, Transitional Kindergarten for four-year olds began in 2022-23 and will be fully implemented by 2025-26.

1. Poll Question 2: Have you been serving more infants and toddlers?
 2. Poll Question 3: * Have you offered before or after-school care for TK students?
 3. Poll Question 4: * Have you tried offering care before 7 am, after 6 pm, or on weekends?
- F. Now we have a question about what could help your program adapt to TK.
1. Poll Question 5:* We have some ideas for how to help providers adapt to Transitional Kindergarten (TK). To what extent do you think each of these would be helpful to you?
 - Support for building partnerships with school districts to provide before/after school wrap-around care.
 - Grants to buy age-appropriate materials and to reconfigure facilities for either younger or older children
 - Professional development to support working with new age groups
 - Higher reimbursement rates for serving younger children
 - Marketing strategies to help providers promote their programs given the shift in the market/competition with TK
 2. *Follow-up questions for a few providers to answer:*
 - i. *Why do you view ___ as a more helpful option?*
 - ii. *Why do you view ___ as a less helpful option?*
 - iii. *Do you have other ideas for how to help your program adapt to TK?*

Part 2: Subsidized Capacity

- A. As part of Universal Pre-Kindergarten (UPK), increasing the number of subsidized (or reduced cost) spaces in San Mateo County is a priority for the Planning Committee. This is one way to make care more affordable for families.
- B. * Are there challenges you face to accept kids who have vouchers (examples of subsidies are CalWORKS, AP, and Migrant AP)?
 1. Ask for initial reactions
 2. Challenge to vet: Families have trouble finding providers to accept their vouchers based on their rates. But at the same time, providers are under enrolled and want to serve more children from 4Cs. This may be because:
 - i. Based on the reimbursement rates, it can be more cost-effective to take private pay families who can afford to pay more for care.
 - ii. May not be able to waive the family co-pay for those who use subsidy vouchers (i.e, CalWORKs S1, CalWORKs S2, CalWORKs S3, Alternative Payment, Migrant AP).
- B. What could help you serve more kids who have subsidies?

Part 3: Other Ideas

- A. * The UPK Planning Committee will hear your feedback and use it to create a plan. Are there ways that you want to continue to be involved and make your voice heard?



Part 4: Wrap Up

- A. We are nearing the end of our time together. Thank you for participating! All of these great insights will be shared with San Mateo's UPK Planning Committee to make sure Universal Pre-Kindergarten is inclusive of FCC providers.
- B. To thank you for your time and contributions, 4Cs will send each of you a \$100 stipend. You should receive the check in the mail within two weeks. Please contact Gladys with any questions about your stipend payment.
- C. Do you have any final questions to ask or thoughts you would like to share?

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