



**Caring For Maryland's Most
Important Natural Resource™**

Maryland State Child Care Association

2810 Carrollton Road
Annapolis, Md. 21403
Phone: (410) 820-9196
Email: info@mscca.org
www.mscca.org

The Maryland State Child Care Association (MSCCA) is a non-profit, statewide, professional association incorporated in 1984 to promote the growth and development of child care and learning centers in Maryland. MSCCA has over 5500 members working in the field of child care/early childhood education. We believe children are our most important natural resource and work hard to advocate for children, families and for professionalism within the early childhood community.

Testimony: HB 1441 Early Childhood Education – Publicly Funded Prekindergarten Programs– Alterations

Submitted to: Education, Energy, and Environment Committee

March 27, 2024

MSCCA enthusiastically supports HB 1441.

The *Blueprint for Maryland's Future* is investing in our youngest citizens. A Mixed-Delivery Pre-K system, involving both public schools and private community-based childcare providers, will be needed to accommodate the number of pre-kindergarten students. In order to attain the goals set by the *Blueprint* for mixed delivery, it is imperative that the state work to decrease the numerous barriers for private providers to achieve the current codified requirements, including the teacher qualifications of state prek-3 certification.

The Accountability and Implementation Board authored a report in December 2023 that offers recommendations related to Pillar 1 and acknowledges some of the barriers for a true mixed delivery system for prekindergarten in Maryland—requiring that all providers, both public and private, meet certain standards to receive public funding.

The AIB, MSDE and the sponsor understand and support the need to create alternative pathways to be inclusive of community-based providers/programs along with addressing the critical workforce shortages. HB1441 creates the necessary pathways and supports to achieve the goals of the Blueprint Pillar 1, mixed delivery of public Pre-K. The bill takes steps to overcome barriers and inequities without sacrificing quality or closing businesses to participate, which hurts parents who need care for birth to five in Maryland. Child care providers cannot afford to lose their three and four year olds to public schools without unintended consequences for families. Unfortunately, very few child care programs can equitably participate in the expansion of public Pre-K. Unintended consequences include less access and affordability for infant and toddler care, more child care providers closing businesses and more unlicensed/illegal child care, which leads to poor outcomes for children.

In order to offer a Pre-Kindergarten program currently in law, childcare providers must first be certified through the state of Maryland by a county board. Presently, both Teacher Preparation Programs and Alternative Teacher Preparation Programs require P-3 certification or a bachelor's degree and pursuing certification, which includes a teacher residency. The General Assembly passed HB 1219 last year that set the stage for the Department to create alternative pathways to certification. HB1441 is the logical next step to implementing Maryland Educator Shortage Act by creating a career ladder with numerous alternative pathways, competencies, professional development, and measurements of quality.

MSDE shows that the childcare sector already meets numerous requirements for Pillar 1. Maryland EXCELS reports there are more than 1,000 level 3,4, and 5 programs participating - plenty to meet the mixed delivery criteria necessary in many jurisdictions. Additionally, many child care/early childhood teachers have degrees, CDA, are climbing the state Credentialing ladder or are pursuing higher education and are still not eligible to teach the children they are already teaching. The structure of the Pre-K competitive grants does not allow the experienced, degreed, credentialed early childhood teachers in private settings to continue or compete. The diverse, primarily women of color child care providers need to compete for public prek to be the role models for the children they serve.

Additionally, the child care business model is not sustainable without preschoolers. Kindergarten Readiness data shows child care provides successful, quality, developmentally appropriate early childhood experiences and we want the opportunity to meet the mixed delivery goals in the *Blueprint*, however cannot if equitable bridges are not built.

HB 1441 is such a bridge and aligns with the AIB December report/recommendations for LEA's support and alternative pathways to reduce barriers to Pillar 1 mixed delivery:

1. Creates a career ladder for early childhood of teacher with numerous alternative pathways for an eligible pre-k provider. All careers, especially teaching, benefit from experience in the field and this bill supports experience and knowledge in early childhood specifically.
2. Sets state requirements that at least 50% of the pre-k slots provided in each county be provided by private providers by the 2028-2029 school year.
3. Requires MSDE to develop a model MOU for county boards to use with the department, each eligible private provider participating in publicly funded pre-k in the county, and other applicable government agencies. The model MOU must now include important components for success including:
A method for the county Board to distribute a list of eligible public and private providers in the area to interested parents and the facilitation of a peer-to-peer meetings for Pre-K providers to share best practices. Building a bridge for all Pre-K providers to engage in these communities of practices is also a critical component of success for mixed delivery.

Incorporates the Child Care Career and Professional Development Fund – Alterations language in HB 1441. Passage of this legislation will open necessary, equitable opportunities for early childhood educators. Increasing the service hours to work in an approved child care setting for at least 20 hours per week will make a positive impact on the qualified workforce and address some of the workforce shortages. The bill also ensures an equity lens in offering native language or bilingual coursework in early childhood education or a related field. Ensuring Maryland's educators can access education in their most confident language is a big step forward for equity, language justice, ensuring meaningful experiences for early childhood educators and families.

Alignment of AIB recommendations supports creating centralized and regional hub models to expand participation for the community based businesses, including child care centers and family child care in Maryland through hubs recommended by the AIB. This bill supports shared services and partnerships including, grant writing support, shared business functions, better information sharing and communication strategies, resources, templates for MOU's, business services, coordination of health department services, all the while reducing barriers and strengthening partnerships in concrete ways. The important representation on the Hub model will engage experts and partners necessary for successful collaboration to support the list of recommendations in the Accountability and Implementation Board (AIB) for improving implementation of the Blueprint Pillar 1.

4. HB 1441 also extends the Child Care Incentive Grant Program through 2032 and extends the Maryland Child Care Credential Program through 2026. All critical programs to support community-based child care programs in achieving the highest quality in professional development and Maryland EXCELS ratings.

We can achieve the ultimate goals of Pillar 1 and mixed delivery by supporting HB 1441. Parents do not work 6.5 hours per day. Early childhood programs have consistently and successfully provided full day care and education to young children preparing them for next steps. HB 1441 raises the bar and provides pathways, equity and support needed to ensure quality child care and early childhood education can be viable options for families.

MSCCA requests a favorable report.