

Increasing Access to High Quality Pre-K Programs

Presentation to the Vermont Senate Committee on Health and Welfare

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Goals for this Presentation

- What is high quality universal pre-K
- Where does Vermont stand, nationally, on providing high quality pre-K
- What is mixed delivery system of early care and education
- Reflections on S. 56 proposal to move pre-K into public schools

High-Quality pre-K has Many Benefits

- Increased readiness for kindergarten
- Reduced grade retention through elementary school
- Reduced identification for special needs
- Long-term benefits on:
 - Mental health (improved)
 - Incarceration rates (reduced)
 - Educational attainment and Socioeconomic status (increased)

NIEER's State of Preschool National Quality Standards

| Policy | Benchmark |
|--|--|
| Early learning & development standards | Comprehensive, aligned, supported, culturally sensitive |
| Curriculum supports | Approval process & supports |
| Teacher Degree | Bachelor's Degree |
| Teacher specialized training | Specializing in Pre-K |
| Assistant teacher degree | CDA or equivalent |
| Staff professional development | For teachers & assistants: At least 15 hours/year; Individual PD plans; Coaching |
| Maximum class size | 20 or lower |
| Staff-child ratio | 1:10 or better |
| Screening & referral | Vision, hearing, & health screenings; & referral |
| Continuous quality improvement system | Structured classroom observations; Data used for program improvement |

(Friedman-Krauss et al., 2022)

Vermont's UPK Program National Standing

- Enrollment in state-funded preschool in Vermont was 6,594, a decrease of 2,000;
- State spending for preschool programs in Vermont was \$52,259,825, a decrease of \$2,545,100 (inflation adjusted);
- Vermont spent \$7,925 per child but spending per child equaled \$6,081 for the program at full capacity;
- Vermont met 7 of 10 quality standards benchmarks;
- Vermont already serves 70% of 4-year-olds across state preschool, Head Start, and special education.

VERMONT: 2021 NATIONAL RANKINGS

- Enrollment at age 4: 5th (57%)
- Enrollment at age 3: 2nd (30%)
- State spending per child: 20th (\$6,081)
- All reported spending per child: 28th (\$6,761)

QUALITY STANDARDS CHECKLIST

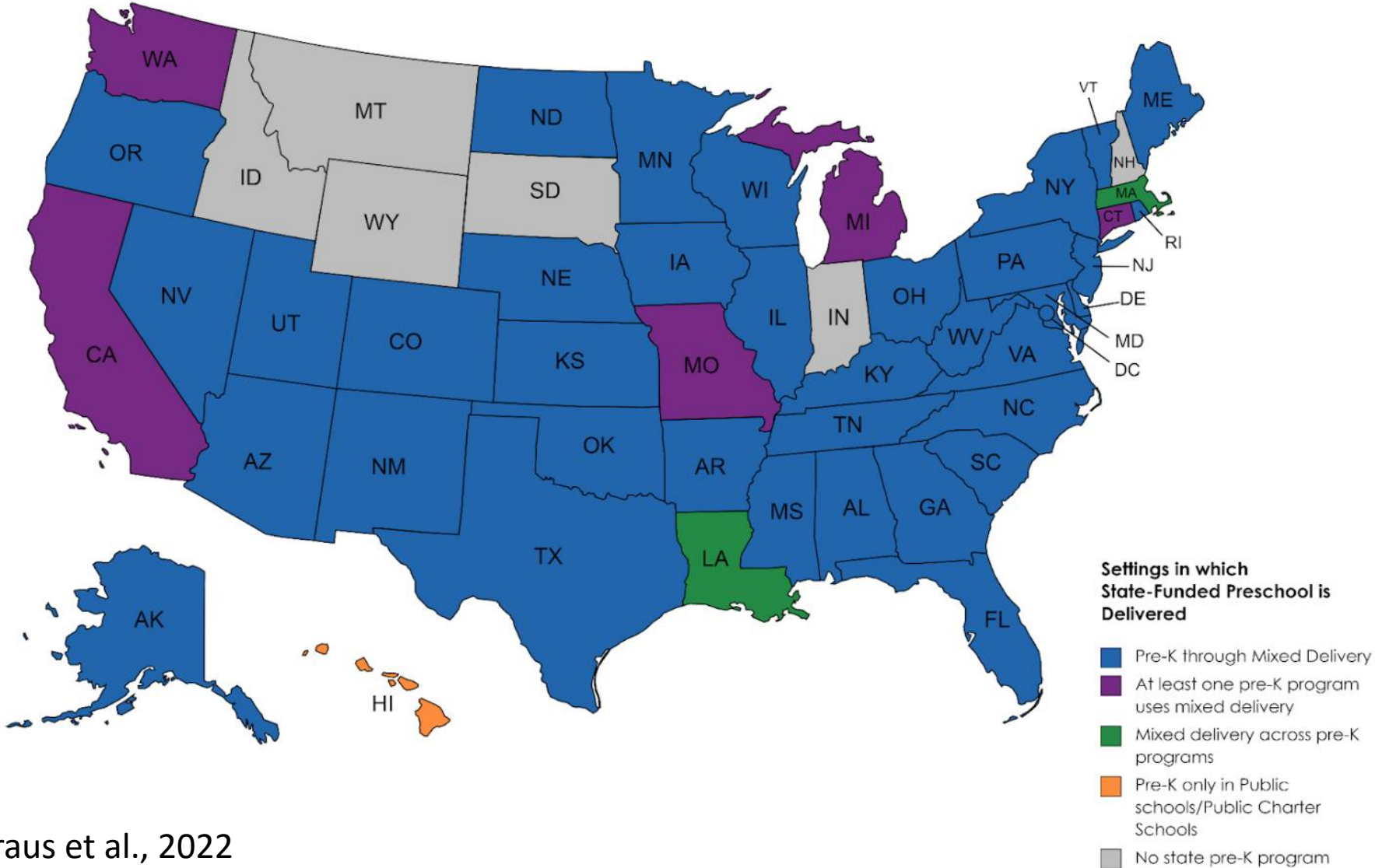
| POLICY | VT PRE-K REQUIREMENT | BENCHMARK | REQUIREMENT MEETS BENCHMARK? |
|--|---|---|-------------------------------------|
| Early learning & development standards | Comprehensive, aligned, supported, culturally sensitive | Comprehensive, aligned, supported, culturally sensitive | <input checked="" type="checkbox"/> |
| Curriculum supports | Approval process & supports | Approval process & supports | <input checked="" type="checkbox"/> |
| Teacher degree | BA (public); BA for lead teacher, AA for classroom teacher (nonpublic) | BA | <input type="checkbox"/> |
| Teacher specialized training | ECE, CD, Elem. Ed. with ECE, ECE SpEd (public); ECE, CD, ECE SpEd (nonpublic) | Specializing in pre-K | <input checked="" type="checkbox"/> |
| Assistant teacher degree | HSD | CDA or equivalent | <input type="checkbox"/> |
| Staff professional development | 9 credit hours/7 years (public teachers); 15 hours/year (assistants & nonpublic teachers); PD plans | For teachers & assistants: At least 15 hours/year; individual PD plans; coaching | <input type="checkbox"/> |
| Maximum class size | 20 (3- & 4-year-olds) | 20 or lower | <input checked="" type="checkbox"/> |
| Staff-child ratio | 1:10 (3- & 4-year-olds) | 1:10 or better | <input checked="" type="checkbox"/> |
| Screening & referral | Vision, hearing, health & more | Vision, hearing & health screenings; & referral | <input checked="" type="checkbox"/> |
| Continuous quality improvement system | Structured classroom observations; Data used for program improvement | Structured classroom observations; data used for program improvement | <input checked="" type="checkbox"/> |

For more information about the benchmarks, see the Executive Summary and Roadmap to State Profile Pages.

What is a Mixed-Delivery System?

A mixed delivery system is a combination of programs, providers, and settings—such as Head Start, family and center-based child care programs, public schools, and other community-based organizations—supported by a combination of public and private funds. (Every Student Succeeds Act, 2015)

Snapshot of mixed-delivery pre-K today



Quick Facts: Mixed Delivery in State Pre-K

- All but 1 state allows for mixed delivery in public pre-K
- Some states are required to operate a mixed delivery program
- Flow of funding from the state to the program varies
- Policies may vary between public and nonpublic settings
- Funding levels may vary between public and nonpublic settings
- Approximately 40% of children in state-funded pre-K are served outside of public settings
- Not all programs can report enrollment by location

Mixed Delivery Programs *May* Offer Families More Choices

- Nationally data indicates that mixed delivery programs prioritize family choice and increase the likelihood of a cultural, racial/ethnic and/or language match between the family and program staff (Chaudry, Morrissey, Weiland & Yoshikawa, 2021)
- A 2018-2019 study of Vermont's UPK program found the following:
 - Program quality is similar across local education agencies with different population sizes and poverty rates, suggesting that Act 166 allows for an equitable preK system in terms of program quality for families in rural and low-income areas of the state.
 - The findings also suggest that continuing to allow families to access preK in locations other than their local education agency of residence might maximize preK availability for families in local education agencies with few--sometimes only one--preK programs.
 - Private programs reported being open for more hours per day and for more weeks per year than public school programs were, which might reduce the need for transitions throughout the day and year for children in private programs who need additional child care beyond the 10 hours per week funded by the state. (Waterman and Gallo, 2019)

Reflections on the Implications of S.56

- There is no research that definitively says one setting is "better" (for children, or families) than another.
- Vermont's program is good in that it serves almost 60% of 4 year old's and 30% of 3 year old's, which is more than many states.
- But it does not meet the quality standards that are shown in the research to improve outcomes for young children, especially vulnerable children. *It might be a better investment to increase quality standards.*
- We find better quality in school-based programs, except in states that have high standards for both settings and invest sufficiently in supporting community-based providers to meet quality.
- Many families prefer a choice of community-based settings, meeting needs for wrap around care and care for other children in the family.

The bill would need to address the following:

- It is not certain that all public schools, especially those in low-income communities, have the “right space” for 4 year olds, including outdoor space. Funds would need to be set aside for facilities and renovations.
- Most importantly, there is a significant teacher shortage in both ECE and K-12. Significant efforts to prepare and recruit well-qualified staff for the pre-K program and ensure salary parity. Pre-K teachers working in a public school building should be on par professionally with K-12 teachers both in qualifications and compensation.
- At the same time, attention to the child care and Head Start sectors needs to be considered, and care taken to ensure that they can provide high quality ECE.
- To do this well, significant effort and time to plan to build the capacity of local school districts and to engage and inform parents about the program is needed.
- The Agency of Education would need significant time to put in place a robust monitoring system and continuous quality improvement, or you wont get the results for children that you want.

To Get Results for Children, States Must ...



Parting Thought: Expand quality preK and ensure equity

- See preK as a strategy to lift the birth to 5 system.
- Support a high-quality workforce.
- Provide start-up and planning costs.
- Assess facilities and address supply building.
- Intentionally include children with disabilities and dual language learners.
- Build out data systems to collect data on race, ethnicity, quality, and setting of ECCE access.

Thank you for listening!

For more information see our website and
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