

Wisconsin Infant Toddler Policy Project: State Collaborative Team

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Wisconsin Infant Toddler Policy Project Policy Agenda

Vision: Every low-income family with an infant and/or toddler will have equitable access to affordable, high quality, culturally and linguistically responsive early care and education that meets their family and employment needs and supports optimal child development and well-being. The early childhood education workforce will have the skills, training, and support to deliver high quality care and education with commensurate compensation.

Guiding Principles:

1. Within all guiding principles, be equitable, inclusive, and culturally and linguistically responsive.
2. All infants and toddlers experience nurturing and responsive relationships and thrive in emotionally, physically safe and engaging environments.
3. Families are aware of and have equitable access to comprehensive services and supports that are necessary for optimal child development and well-being.
4. Families have equitable access to and actively engage with a range of affordable and flexible high quality early care and education options that meet their family and employment needs.
5. The early childhood education workforce has the skills, training, and support to deliver high quality care while receiving commensurate compensation.
6. The early childhood care and education system is simple for families and providers to navigate.

To achieve this vision, the policy agenda focuses on the following goals with corresponding policy priorities.

1. All low-income families with young children, and others who touch the lives of infants and very young children, have equitable access to the information and supports they need to promote optimal early childhood development and well-being.
2. Every low-income family with an infant and/or toddler will have equitable access to a range of affordable, high quality, culturally and linguistically responsive child care options that meet their family and employment needs.
3. The early childhood workforce will have the skills, training, and support to deliver high quality care while receiving commensurate compensation.

Note: policy goals with an asterisk() are directly aligned with WI's PDG B-5 planning grant efforts.*

GOAL 1: All low-income families with young children, and others who touch the lives of infants and very young children, have equitable access to the information and supports they need to promote optimal early childhood development and well-being.

A. Develop a statewide system that gives people who touch the lives of infants and very young children access to high quality infant and early childhood mental health consultation to promote healthy social and emotional development, serving an additional 8,400 low-income infants and toddlers by 2023 and 14,800 by 2025.

1. Create a system for state-wide infant/early childhood mental health consultation available to professionals across all infant/young child and family serving disciplines including child care, home visiting, child welfare, Early Head Start, Birth to Three early intervention, and pediatricians, impacting an additional 8,400 low-income infants and toddlers by 2023 and 14,800 by 2025.*

B. Expand existing evidence-based programs that ensure parents have the supports they need to promote optimal health and development, serving an additional 15,210 low-income infants and toddlers by 2023 and 22,860 by 2025.

1. Expand Reach Out and Read Wisconsin to serve an additional 15,000 low-income children by 2023 and 22,500 by 2025, while maintaining program fidelity through a variety of potential revenue strategies such as PDG B-5 funding, state General Purpose Revenues, and Medicaid.*
2. Expand Wisconsin's Family Foundations Home Visiting Program (FFHV) and provide an additional 210 low-income infants and toddlers with evidence-based home visiting services by 2023 and 360 infants and toddlers by 2025.

3. Expand healthy eating and access to nutrition supports for low-income Wisconsin families and early care and education programs through Farm to ECE, SNAP-Ed, and other programs that help families make healthy choices.*

C. Develop a statewide system of information and referral for families and family-supporting programs that includes connections to services and programs that support optimal health, development, and care, impacting 11,000 low-income infants and toddlers by 2023 and 32,500 by 2025.

1. Expand supports to implement a statewide roll-out of a texting program for parents to help them with their infant/toddlers development and learn how to connect to necessary resources and services, impacting 10,000 low-income infants and toddlers by 2023 and 2025.*
2. Increase connections amongst and build on existing networks that provide information, referrals and navigation to high quality services and supports, impacting 1,000 low-income infants and toddlers by 2023 and 22,500 infants and toddlers by 2025.

GOAL 2: Every low-income family with an infant and/or toddler will have equitable access to a range of affordable, high quality, culturally and linguistically responsive child care options that meet their family and employment needs.

Ensure low-income families can access high quality, affordable child care they want and need.

D. Strengthen WI Shares by ensuring currently eligible low-income families can access Shares, eliminate parent copays, and expand eligibility up to 200% of the federal poverty level, serving an additional 3,000 infants and toddlers by 2023 and 6,400 infants and toddlers by 2025.

1. Increase eligibility for subsidy support from 185% to 200% of the federal poverty level (household income of \$51,500 for a family of four) to serve an additional 1,000 infants and toddlers by 2023, and 2,400 by 2025.
2. Eliminate parent copays, which is an amount deducted from a family's WI Shares reimbursement that DCF determines based on the family's income and number of children in subsidized care.
3. Simplify and streamline access to child care subsidy and other family support programs by expanding a system of community outreach subsidy authorization workers who support and authorize families onsite, at child care programs; simplifying the application process across various family support programs like Foodshare and BadgerCare; allowing for automatic subsidy eligibility for families receiving SNAP without additional verification; and implementing automatic eligibility determination at income maintenance offices. Also, provide guaranteed, short-term subsidy (presumptive eligibility) for when parents are waiting approval for Shares eligibility. This will reach an additional 2,000 infants and toddlers by 2023 and 4,000 by 2025.*

E. Develop and implement a refundable tax credit package available to families.

4. Develop a tiered refundable child care tax credit for parents/caregivers based on quality of program and family income.

Ensure child care businesses/providers have the supports they need to provide culturally and linguistically responsive, high-quality, affordable child care to low-income families.

F. Provide supports to help family child care providers enter into the regulated system and build quality while also developing sustainable businesses that serve priority populations, impacting an additional 1,000 infants and toddlers by 2023 and 1,450 infants and toddlers by 2025.

1. Develop pathways to bring unregulated child care programs into the regulated system through incentives and consultation, including pre-service start up grants which will be provided to 150 new family child care homes who will serve priority geographies/populations to ensure equitable access to regulated care for low-income families, serving an additional 500 infants and toddlers by 2023 and 750 infants and toddlers by 2025.*
2. Develop/expand and fund 6 shared services networks that will improve quality, create access to substitute teacher pools, and lead to full program enrollment, supporting 500 low-income infants and toddlers by 2023 and 700 infants and toddlers by 2025.*

3. Develop a refundable child care tax credit for child care businesses/programs based on quality of program and number of low-income families they serve.

G. Research and implement ways to more accurately finance high-quality infant and toddler care using differential subsidy reimbursement rates, cost-modeling, and contract methods, impacting an additional 4,750 infants and toddlers by 2023 and 9,350 infants and toddlers by 2025.

4. Recalculate the reimbursement rate for infant toddler care by using cost modeling instead of market rates. This will increase rates and serve an additional 4,500 infants and toddlers by 2023 and 9,000 infants and toddlers by 2025.
5. Expand Early Head Start by 250 infants and toddlers by 2023 and 350 infants and toddlers by 2025 by adding child care rooms in Head Start/Early Head Start programs providing wrap around or extended day child care by reallocating federal and state Head Starts funds and increasing Early Head Start state funding.
6. Develop and implement a financing model that utilizes contracts for high quality care instead of reimbursements with a focus on priority populations. Target contracts based on geography/poverty density/deserts to ensure equity. Require programs receiving contracts to use an approved salary scale for infant and toddler teachers.
7. Provide a differential reimbursement rate for priority populations and geographies, including infants and toddlers.

GOAL 3: The early childhood workforce will have the skills, training, and support to deliver high quality care while receiving commensurate compensation.

H. Develop and fund recruitment and retention activities, including a robust compensation strategy, for the early childhood workforce that will impact 2,250 infant and toddler teachers and subsequently 4,500 infants and toddlers by 2023 and 8,000 infants and toddlers by 2025 in Wisconsin.

1. Offer signing bonuses for 1500 new infant and toddler teachers working in priority communities, impacting 2,500 infants and toddlers by 2023 and 5,000 infants and toddlers by 2025.
2. Retain 750 infant and toddler teachers, impacting 2,000 infants and toddlers by 2023 and 3,000 infants and toddlers by 2025, by implementing higher and more frequent wage supplements through REWARD.
3. Develop a loan forgiveness program for teachers who have completed educational degree programs and spend at least 3 years working with infants and toddlers in regulated programs; develop differential (shorter) loan forgiveness timelines for teachers working in priority geographies or with priority populations.
4. Increase T.E.A.C.H. funding. Wrap teacher's child care cost or partial cost into scholarship model; more release time for centers.*
5. Make Registry membership and renewal free and required for all regulated programs and Head Start/Early Head Start allowing for better data collection on recruitment and retention.*
6. Create a sustainable plan to substantially increase compensation for the early childhood workforce and explore additional recruitment and retention strategies for the workforce: *
 - a. Create a bipartisan, public-private early childhood workforce commission to identify a strategy to address early childhood workforce challenges.
 - b. Offer significant quality bonuses to 3, 4, and 5 Star programs that allow for compensation that is commensurate with education.
 - c. Incentivize a diverse workforce, particularly focusing on men of color and parents of young children.*
 - d. Develop apprenticeship programs/Grow Your Own/On the Job Training for high schoolers.
 - e. Develop refundable tax credits for early childhood teachers, aligned with the 2018 ECAC recommendations.

I. Develop and expand professional development supports to improve the quality of child care, particularly for priority populations and communities, impacting 900 infants and toddlers by 2023 and 1,200 infants and toddlers by 2025.

1. Develop a network of infant and toddler specialists, coaches, and/or mentors that will reach 300 infant and toddler teachers; impacting a minimum of 900 infants and toddlers by 2023 and 1,200 infants and toddlers by 2025.*
2. Expand Infant-Toddler Pyramid Model training and consultation to 300 teachers; impacting a minimum of 600 infants and toddlers by 2023 and 1,200 infants and toddlers by 2025. (Note: these numbers are not counted in the total as we anticipate there may be some duplication/overlap in the counts.)
3. Develop trainings and a consultation system for infant and toddler teachers around health care topics in partnership with the Wisconsin Chapter of the American Academy of Pediatrics.*
4. Pilot a system of enhanced regulation consultation inclusive of licensing and YoungStar requirements that provides coaching and support for unregulated providers to enter into the regulated system and 2 Star rated programs to increase their quality rating for 100 programs who care for infants and toddlers.*
5. Incentivize completion of existing, infant-toddler specific credit-based coursework for all coming into the field.

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