

113TH CONGRESS
1ST SESSION

S. 1065

To amend the Child Care and Development Block Grant Act of 1990 to
improve the quality of infant and toddler care.

IN THE SENATE OF THE UNITED STATES

MAY 23, 2013

Mr. FRANKEN (for himself and Mrs. MURRAY) introduced the following bill;
which was read twice and referred to the Committee on Health, Edu-
cation, Labor, and Pensions

A BILL

To amend the Child Care and Development Block Grant
Act of 1990 to improve the quality of infant and toddler
care.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Infant and Toddler
5 Care Improvement Act”.

6 **SEC. 2. FINDINGS AND PURPOSES.**

7 (a) FINDINGS.—Congress finds the following:

8 (1) The brain undergoes its most dramatic de-
9 velopment during a child’s first 3 years of life, with

1 700 new neurological connections being formed every
2 second based on early experience. During this time,
3 the brain's foundational capacities for thinking, lan-
4 guage, emotion, and self-regulation are formed.

5 (2) Economic deprivation can also affect the de-
6 velopment of the brain and impair all aspects of de-
7 velopment. Children in families below the poverty
8 line are at risk for prolonged "toxic" stress, which
9 can change the shape of the brain's structure. Twen-
10 ty-five percent of children younger than 3 years of
11 age live in families with incomes below the poverty
12 level.

13 (3) Child care is second only to the family set-
14 ting as the place in which early development takes
15 place for many infants and toddlers. Sixty-one per-
16 cent of mothers with children younger than 3 years
17 of age are in the labor force and over 6,000,000
18 children younger than 3 years of age are cared for
19 by someone other than their parents for some part
20 or all of the day. Therefore, the relationship between
21 the child and the child care provider often plays a
22 significant role in child development.

23 (4) Research shows that high-quality child care
24 can mitigate some of the effects of adverse experi-
25 ences caused by poverty and that low-income chil-

1 dren can benefit particularly well from high-quality
2 child care. Yet, at-risk children younger than 3 years
3 of age often receive low-quality child care that can
4 lead to poor developmental outcomes.

5 (5) High-quality child care has been shown to
6 promote positive cognitive, language, and social and
7 emotional development, and contribute to academic
8 success. High-quality child care can also help im-
9 prove a child's communication skills, cognitive skills,
10 behavioral skills, math and language assessment
11 scores, and verbal intelligence.

12 (6) Providing training and technical assistance
13 to family child care providers who are infant and
14 toddler care providers, through family child care net-
15 works, has been shown to improve the quality of
16 caregivers.

17 (7) Twenty-seven States use infant and toddler
18 specialist networks as the structure for providing
19 training and technical assistance, using research-
20 based training and techniques such as mentoring
21 and on-site coaching, to all types of providers of
22 child care for infants or toddlers.

23 (8) Preparation for early childhood educators
24 often does not include training specific to infants
25 and toddlers. Only 21 States have infant and toddler

1 credential requirements that define the particular
 2 knowledge and skills needed to work with children
 3 younger than 3 years of age.

4 (9) Infants and toddlers have unique needs that
 5 differ from those of older children in areas such as
 6 health and safety, interaction with teachers and
 7 caregivers, and learning, yet not all States recognize
 8 those differences in licensing regulations or in their
 9 Quality Rating and Improvement Systems. Just 20
 10 States have infant and toddler quality indicators in
 11 their Quality Rating and Improvement Systems and
 12 only 3 States have separate categories of child care
 13 regulations related to infants and toddlers.

14 (b) PURPOSE.—The purpose of this Act is to improve
 15 the overall quality of child care programs serving infants
 16 or toddlers.

17 **SEC. 3. HIGH-QUALITY INFANT AND TODDLER CARE PRO-**
 18 **GRAM.**

19 The Child Care and Development Block Grant Act
 20 of 1990 is amended by inserting after section 658G (42
 21 U.S.C. 9858e) the following:

22 **“SEC. 658H. HIGH-QUALITY INFANT AND TODDLER CARE**
 23 **PROGRAM.**

24 “(a) DEFINITIONS.—In this section:

1 “(1) ELIGIBLE INFANT OR TODDLER CARE PRO-
2 VIDER.—The term ‘eligible infant or toddler care
3 provider’ means an eligible child care provider, con-
4 sistent with section 658P, who provides care to an
5 infant or toddler.

6 “(2) INFANT OR TODDLER.—The term ‘infant
7 or toddler’ means an individual under 3 years of
8 age.

9 “(3) INFANT OR TODDLER WITH A DEVELOP-
10 MENTAL DELAY OR DISABILITY.—

11 “(A) IN GENERAL.—The term ‘infant or
12 toddler with a developmental delay or disability’
13 has the meaning given the term ‘infant or tod-
14 dler with a disability’ in section 632 of the Indi-
15 viduals with Disabilities Education Act (20
16 U.S.C. 1432).

17 “(B) PLURAL FORM.—The term ‘infants
18 and toddlers with developmental delays or dis-
19 abilities’ means more than 1 infant or toddler
20 with a developmental delay or disability.

21 “(4) LIMITED ENGLISH PROFICIENT.—The
22 term ‘limited English proficient’ has the meaning
23 given the term in section 637 of the Head Start Act
24 (42 U.S.C. 9832).

1 “(5) LOW-INCOME COMMUNITY.—The term
2 ‘low-income community’ shall be defined by the Sec-
3 retary.

4 “(6) LOW-INCOME FAMILY.—The term ‘low-in-
5 come family’ means a family with a family income
6 described in section 658P(4)(B).

7 “(b) GRANTS.—

8 “(1) IN GENERAL.—The Secretary shall make
9 grants to eligible States, from allotments described
10 in paragraph (2), to enable the States to improve
11 the quality of care for infants and toddlers.

12 “(2) ALLOTMENTS.—

13 “(A) AMOUNTS RESERVED.—

14 “(i) TERRITORIES AND POSSES-
15 SIONS.—The Secretary shall reserve an
16 amount not to exceed 0.5 percent of the
17 amount appropriated under this section for
18 each fiscal year for payments to Guam,
19 American Samoa, the United States Virgin
20 Islands, and the Commonwealth of the
21 Northern Mariana Islands, to be allotted in
22 accordance with their respective needs.

23 “(ii) INDIAN TRIBES.—The Secretary
24 shall reserve not less than 1 percent, and
25 not more than 2 percent, of the amount

1 appropriated under this section for each
2 fiscal year for payments to Indian tribes
3 and tribal organizations with applications
4 approved under section 658O(c).

5 “(B) ALLOTMENTS TO STATES.—After
6 making reservations under subparagraph (A),
7 the Secretary shall use the remainder of the
8 amount appropriated under this section for a
9 fiscal year to allot to each State an amount
10 that bears the same relationship to that remain-
11 der as the amount allotted to the State under
12 section 658O for that fiscal year bears to the
13 amount allotted to all States under section
14 658O for that fiscal year.

15 “(C) STATE.—In this paragraph, the term
16 ‘State’ does not include Guam, American
17 Samoa, the United States Virgin Islands, or the
18 Commonwealth of the Northern Mariana Is-
19 lands.

20 “(c) AMENDMENT TO STATE PLANS.—A State that
21 receives a grant under this section shall include in the
22 State’s plan under section 658E, a description of how the
23 State will use funds provided under this section to improve
24 the quality of infant and toddler care.

25 “(d) USE OF FUNDS.—

1 “(1) IN GENERAL.—A State that receives a
2 grant under this section shall use the funds made
3 available through the grant to carry out 1 or more
4 of the activities described in paragraphs (2) through
5 (7).

6 “(2) INCREASING HIGH-QUALITY INFANT AND
7 TODDLER CARE.—

8 “(A) IN GENERAL.—A State may use the
9 funds described in paragraph (1) to make
10 grants to eligible entities to be resources for eli-
11 gible infant and toddler care providers, to im-
12 prove the quality of early care and development
13 services provided to infants and toddlers in the
14 community from low-income families and to
15 help such providers serving low-income families
16 improve their capacity to offer high-quality care
17 to such families.

18 “(B) ELIGIBLE ENTITY.—To be eligible to
19 receive a grant under this paragraph, an entity
20 shall be an eligible child care provider that—

21 “(i) serves infants and toddlers from
22 low-income families; and

23 “(ii)(I) is ranked at the top level of
24 the State’s Quality Rating and Improve-
25 ment System or similar rating system or

1 accredited by a national accrediting body
2 recognized, before the date of enactment of
3 the Infant and Toddler Care Improvement
4 Act, for high-quality program standards
5 that are valid and reliable; or

6 “(II) is an Early Head Start agency
7 under section 645A of the Head Start Act
8 (42 U.S.C. 9840a) that is in full compli-
9 ance with the performance standards appli-
10 cable to such an agency under the Head
11 Start Act (42 U.S.C. 9831 et seq.).

12 “(C) PRIORITY.—In making grants under
13 this paragraph, a State—

14 “(i) shall give priority to entities that
15 will serve significant populations of low-in-
16 come families; and

17 “(ii) may give priority to entities
18 that—

19 “(I) are located in low-income
20 communities;

21 “(II) will serve communities with
22 significant populations of families
23 with limited English proficiency; or

24 “(III) will increase the ability of
25 caregivers to provide appropriate serv-

1 ices and coordinate activities with
 2 State and local systems providing
 3 services under part C of the Individ-
 4 uals with Disabilities Education Act
 5 (20 U.S.C. 1431 et seq.) for children
 6 with developmental delays or disabil-
 7 ities, including such children in the
 8 child welfare system of the State.

9 “(3) STAFFED FAMILY CHILD CARE NETWORKS
 10 OR SYSTEMS.—

11 “(A) IN GENERAL.—A State may use the
 12 funds described in paragraph (1) to make
 13 grants to organizations with expertise in pro-
 14 viding child care and related technical assist-
 15 ance, to establish new staffed family child care
 16 networks (new as of the date of amendment of
 17 the State plan under subsection (c)) or to oper-
 18 ate existing staffed family child care networks
 19 or systems that offer, to family child care pro-
 20 viders who are eligible infant and toddler care
 21 providers, technical assistance, training, admin-
 22 istrative support, or direct services including
 23 monitoring visits to providers.

24 “(B) PRIORITY.—In making grants under
 25 this paragraph, a State—

1 “(i) shall give priority to organizations
2 described in paragraph (2)(C)(i); and

3 “(ii) may give priority to organiza-
4 tions that have 1 or more of the 3 charac-
5 teristics described in paragraph (2)(C)(ii).

6 “(4) STATEWIDE NETWORK OF INFANT AND
7 TODDLER SPECIALISTS.—

8 “(A) IN GENERAL.—A State may use the
9 funds described in paragraph (1) to support, or
10 to make a grant to an organization with exper-
11 tise in providing child care technical assistance
12 to support, a statewide network of specialists
13 who are eligible infant and toddler care pro-
14 viders, that shall—

15 “(i) provide individual or group train-
16 ing and intensive consultation services to
17 eligible infant and toddler care providers,
18 including relative caregivers, on strategies
19 to improve the quality of care for infants
20 and toddlers; and

21 “(ii) assist eligible infant and toddler
22 care providers in coordinating activities
23 with other offices responsible for child
24 care, including Early Head Start programs
25 and Head Start programs carried out

1 under the Head Start Act (42 U.S.C. 9831
2 et seq.).

3 “(B) PRIORITY.—In delivering services or
4 making grants under this paragraph, a State—

5 “(i) shall give priority to networks
6 that deliver support to providers described
7 in paragraph (2)(C)(i); and

8 “(ii) may give priority to networks
9 that deliver support to providers that have
10 1 or more of the 3 characteristics de-
11 scribed in paragraph (2)(C)(ii).

12 “(5) STATE WORKFORCE QUALITY INITIA-
13 TIVES.—

14 “(A) IN GENERAL.—A State may use the
15 funds described in paragraph (1) to support ini-
16 tiatives to improve the quality of the workforce
17 of eligible infant and toddler care providers,
18 such as—

19 “(i) providing relevant training, pro-
20 fessional development, or mentoring to eli-
21 gible infant and toddler care providers, in-
22 cluding linking the training, development,
23 or mentoring to career pathways for eligi-
24 ble infant and toddler care providers;

1 “(ii) providing scholarships or other
 2 financial support to eligible infant and tod-
 3 dler care providers to advance their edu-
 4 cation and training;

5 “(iii) coordinating activities with the
 6 State’s higher education system to expand
 7 the availability and quality of coursework
 8 for infant and toddler care providers, in-
 9 cluding developing career pathways for eli-
 10 gible infant and toddler care providers; or

11 “(iv) improving the State
 12 credentialing of eligible infant and toddler
 13 care providers.

14 “(6) SYSTEMS QUALITY.—A State may use the
 15 funds described in paragraph (1) to—

16 “(A) develop infant and toddler compo-
 17 nents for the State’s Quality Rating and Im-
 18 provement System or similar rating system,
 19 child care licensing regulations, or voluntary
 20 early learning guidelines;

21 “(B) improve the ability of parents to ob-
 22 tain information about high-quality infant and
 23 toddler care; or

24 “(C) assist eligible infant and toddler care
 25 providers seeking to improve the quality of their

1 infant and toddler care by increasing their
2 ranking on the State's Quality Rating and Im-
3 provement System or similar rating system,
4 meeting performance standards applicable to an
5 Early Head Start agency under the Head Start
6 Act (42 U.S.C. 9831 et seq.), or becoming ac-
7 credited by a national accrediting body de-
8 scribed in paragraph (2)(B)(ii).

9 “(7) OTHER HIGH-QUALITY INITIATIVES.—A

10 State may use the funds described in paragraph (1)
11 to carry out other activities determined by the State
12 to improve the quality of infant and toddler care
13 provided in the State and for which there is evidence
14 that the activities will lead to improved infant and
15 toddler safety, infant and toddler development, or in-
16 fant and toddler well-being.

17 “(e) REPORTING.—A State that receives a grant
18 under subsection (b) shall submit in the State's annual
19 reports required under section 658K(a)(2), information on
20 how the State is using the funding provided under sub-
21 section (b) to improve the quality of infant and toddler
22 care and the effect such funding is having on the quality
23 of infant and toddler care in the State.

24 “(f) AUTHORIZATION OF APPROPRIATIONS.—There
25 are authorized to be appropriated to carry out this section

1 such sums as may be necessary for fiscal year 2014 and
2 each subsequent fiscal year.”.

3 **SEC. 4. CONFORMING AMENDMENTS.**

4 (a) AUTHORIZATION.—Section 658B of the Child
5 Care and Development Block Grant Act of 1990 (42
6 U.S.C. 9858) is amended by inserting “(other than section
7 658H)” after “subchapter”.

8 (b) ALLOTMENT.—Section 658O(a)(1) of such Act
9 (42 U.S.C. 9858m(a)(1)) is amended by striking “this
10 subchapter” and inserting “section 658B”.

○