

Building Childcare for All

Recommendations for Candidates for DC Mayor



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Executive Summary

The next mayor of the District of Columbia should announce Childcare for All at the start of the new administration, **setting a bold vision** that every family can access high-quality childcare and no family pays more than [7% of its household income for care](#).

District families have consistently identified childcare as a priority. In [2026 polling](#), 73% said maintaining childcare assistance was important in the DC budget, and 69% of parents said reducing childcare costs should be a major priority for the DC government. Support for early childhood investments crossed race, geography, and family status, but affordability also has clear racial equity implications. Childcare costs consume a larger share of income for families with fewer resources. In contrast, racial disparities in income and wealth leave Black and brown families especially exposed to high costs and disruptions in access.

The District should begin by ensuring that families who already qualify for childcare assistance can use it. That means eliminating the [childcare subsidy waitlist](#) and providing enough recurring funding to keep the program open as enrollment changes. Eligibility should then expand up the income ladder as DC increases childcare supply, strengthens the workforce, and builds the administrative capacity needed to serve more families. This sequencing gives families facing the greatest barriers a meaningful opportunity to benefit from existing public investments before the pool of eligible families grows substantially.

The recommendations that follow are the building blocks for achieving this bold vision. DC must stabilize existing providers, strengthen governance and administration, grow the childcare supply, invest in the early childhood workforce, and make programs easier for families to find and use. A four-year roadmap should connect these pieces through annual goals for access, affordability, supply, workforce growth, and public investment, with each phase of eligibility expansion tied to sufficient recurring funding and demonstrated capacity to serve additional families.

This approach would move DC toward universal affordability while protecting access for families who rely most heavily on public support. It would also give the District a more stable childcare system, clearer accountability for public investment, and programs that require less time and effort for families and providers to navigate.

Repair and stabilize the system

The mayor should first restore reliable access for families and financial stability for the providers and educators already participating in the system. Expanding eligibility while families

still can't access subsidies would increase demand without fixing the conditions that keep eligible families from receiving care.

- Reopen and eliminate the childcare subsidy waitlist, then establish a recurring funding floor that prevents future enrollment freezes.
- Stabilize childcare subsidy funding and align [reimbursement rates](#) with the [true cost of providing care](#).
- Fully fund the [Pay Equity Fund](#) across the financial plan, restore progress toward pay parity, and provide sustainable funding for [HealthCare4ChildCare](#).
- Restore and sustain [DC LEAD](#), [shared services](#), and other core early childhood investments.

Build a government capable of delivering Childcare for All

A larger public childcare system will require stronger leadership, clearer accountability, better coordination, and simpler administration. Families and providers with the least time, staffing, language access, or experience navigating government bear the greatest cost when systems are fragmented or unreliable. Improving governance before significant expansion will help ensure that increased eligibility produces broader access.

- Establish a permanent local Childcare for All Fund that works seamlessly with [federal Child Care and Development Fund](#) (CCDF) funding so that DC can have more autonomy in deciding which families to support and what conditions to place on that support. Families should experience one program and one application regardless of which funding source pays for their care.
- Consolidate local subsidy funding and administration within the Office of the State Superintendent of Education (OSSE) so that program and fiscal accountability sit together, rather than divided between OSSE and the Department of Human Services (DHS).
- Appoint a Division of Early Learning Deputy Superintendent with direct early childhood program experience, a State Superintendent who understands and prioritizes early childhood education, and a Deputy Mayor for Education (DME) who can lead cross-agency coordination and system implementation. Consider a Senior Early Childhood Advisor within the Executive Office of the Mayor.
- Replace or strengthen the [State Early Childhood Development Coordinating Council \(SECDCC\)](#), currently held at OSSE, as an effective coordinating body housed within the Executive Office of the Mayor, with decision-makers at the table, a qualified chair, dedicated staff and funding, standing committees, meaningful family and provider

representation, clear work plans, a racial equity orientation, and public reporting on progress.

- Make engagement with families, educators, center directors, and family childcare providers a routine part of policy development before making major decisions.
- Create a one-stop provider portal and establish strong data governance so providers spend less time entering the same information across disconnected systems and OSSE has reliable data for administration and planning.

Stabilize and grow the supply of childcare

Financial assistance only helps when families can find an available seat. Expanding eligibility while [infant and toddler care remains scarce](#) could give an advantage to families with more flexible schedules, transportation, information, or the ability to search widely for care. DC should preserve existing capacity and grow new seats in the communities where shortages are greatest.

- Establish annual infant and toddler seat goals and target new capacity to communities with the largest supply gaps.
- Set subsidy [reimbursement rates](#) based on the [true cost of care](#) and move toward [prospective payments](#) and contracts that give providers predictable revenue.
- Establish well-designed, tiered [shared services](#), especially for family childcare providers and small centers.
- Reform the quality approach so public resources support meaningful quality improvement without duplicative requirements or inadequate reimbursement.
- Create a childcare facilities fund for repairs, renovations, expansions, and new facilities.
- Include infant and toddler childcare in school modernization, public-space planning, and office conversion projects.
- Review licensing requirements with providers and remove unnecessary administrative barriers while maintaining strong health and safety protections.
- Strengthen Child Development Homes as a Core Part of DC's Early Childhood Education System.

Support and expand the early childhood education workforce.

More families cannot receive care unless DC has enough qualified educators to staff additional classrooms. Growing demand before stabilizing the workforce could deepen vacancies and turnover, particularly in programs already struggling to recruit staff. Workforce investment also addresses the longstanding undervaluing of the [predominantly Black and brown women](#) who provide much of DC's early childhood care and education.

- Stabilize and expand the [Pay Equity Fund](#), restore pay parity, and recognize educators' experience through predictable salary growth.
- Fully fund [HealthCare4ChildCare](#) and work toward retirement and [other benefits comparable to those available to public school teachers](#).
- Fully fund [DC LEAD](#) so educators can earn required and advanced credentials without taking on unaffordable costs.
- Build or adopt a career lattice that includes useful professional development, apprenticeships, fellowships, coaching, specialized roles, and opportunities for educators to advance while remaining in early childhood education.

Make the system easy for families to find and use

Eligibility alone does not ensure that a family receives care. Families also need to know what help is available, how to complete an application, and how to find a provider with an opening that meets their needs. [Families with fewer resources, limited English proficiency, disabilities, unstable housing, or less experience navigating government systems face greater barriers at each step](#). DC should improve family access before substantially expanding eligibility so current inequities impacting systems navigation do not determine who benefits first.

- Give families timely information about childcare and other early childhood supports through hospitals, pediatric practices, childcare programs, libraries, schools, and other trusted settings.
- Build robust family navigation staffing and support into a new [childcare resource and referral](#) (CCR&R) to help families understand their options, apply for a subsidy, find available care, and resolve problems.
- Improve and promote [MyChildCareDC](#) so families can search for providers based on their actual needs and see reliable vacancy information.
- Simplify the subsidy application, reduce duplicative documentation, provide clear application status information, expand [Level II](#) capacity, and establish a clear process for resolving stuck cases.
- Build a coordinated early intervention system so developmental concerns lead quickly to screening, evaluation, services, and other appropriate supports.

Launch Childcare for All as a Defining Commitment of the New Mayoral Administration

In the first 100 days, the mayor should announce Childcare for All, a commitment to build a childcare system where every family in the District of Columbia can find affordable, high-quality care that meets their needs.

By the end of the mayor's first term, the District should guarantee access to childcare assistance for families who are already eligible; expand initial income eligibility to 500% of the federal poverty level (FPL) (on a path to universal eligibility); strengthen the early childhood workforce and the supply of childcare; and put the financing and infrastructure in place so that no DC family should have to spend more than [7% of its household income on childcare](#).

The recommendations throughout this memo are the building blocks needed to achieve Childcare for All. They include stabilizing existing providers, ensuring subsidy reimbursement reflects the cost of providing care, sustaining and strengthening the [Pay Equity Fund](#) (PEF), growing the early childhood workforce, sustaining and expanding supply where it is needed, making assistance easier for families to access, improving family navigation, modernizing technology, strengthening governance, and creating a sustainable local funding structure.

The Case for Childcare for All

Childcare for All should be a defining commitment of the incoming mayoral administration because early childhood education affects children's development, families' economic security, and the strength of DC's economy. The [years from birth to age five lay the foundation](#) for lifelong health, learning, and well-being. During the first three years in particular, children experience [rapid brain development](#) and build the language, cognitive, social-emotional, and executive functioning skills that [form the foundation for later learning and health](#). [High-quality early childhood education can improve school readiness](#) and produce benefits that continue through [educational attainment, employment, health](#), and [economic mobility](#).

Affordable and reliable childcare is also essential economic infrastructure. Parents cannot work, attend school, advance their careers, or increase their earnings without dependable childcare. The consequences of inadequate childcare are substantial: [Under 3 DC estimates that childcare challenges cost DC approximately \\$395 million annually](#) through lost earnings for parents, lost productivity and revenue for employers, and lost tax revenue.

Childcare for All is an important racial equity strategy. [Access to publicly supported early education has never been distributed equally](#), and the childcare system has long depended on

the [underpaid labor of Black and brown women](#). [DC's early childhood workforce is predominantly Black and Latinx](#), and they continue to earn less than white educators in comparable roles. Early educators in DC are also [18 times more likely to live in poverty than elementary and middle school teachers](#). At the same time, families with low incomes, Black and brown families, immigrant families, families with children with disabilities, and families working nontraditional hours can face greater barriers to finding and affording care. Childcare for All should reduce these inequities by prioritizing public support to families facing the highest barriers and ensuring that the predominantly Black and Latinx early childhood workforce is fairly compensated and supported.

Childcare for All signals a shift in how the District understands childcare: as a public good, not a private expense or a work support tied to parents' employment. The benefits of early childhood education reach schools, employers, and the District as a whole, yet [most childcare funding comes from what families pay](#). The [U.S. Department of the Treasury](#) has concluded that relying on private money to fund childcare is "bound to come up short": families cannot afford the full cost of care, providers operate on thin margins, and educators are underpaid. Closing that gap requires sustained public investment.

DC has already demonstrated what sustained public investment can accomplish through [Universal Pre-K](#), the [Pay Equity Fund](#), and the [Child Care Subsidy Program](#). These investments have expanded access to high-quality early learning, [strengthened the workforce](#), and enabled thousands of families to work, pursue education, and support their children's development. Childcare for All should build on that foundation and extend the same public commitment to the years before pre-K, when [families face some of their highest childcare costs](#), and access remains far less certain.

Stabilize the system before expanding access

DC must sequence the work carefully. It should first repair and stabilize the system families and providers rely on today. Families already eligible for childcare subsidies should be able to access them, but the [child care subsidy waitlist](#) prevents many families from doing so.

Providers should have sufficient, predictable funding to remain open and operate sustainably. Early educators should be able to rely on competitive compensation and benefits.

Administrative systems should help families and providers access public programs without creating unnecessary barriers.

Stability before expansion: recommended sequencing of Childcare for All



This sequencing is also critical for racial equity. Families with the lowest incomes currently face the greatest barriers to accessing childcare assistance and have the least ability to afford the full market price of care. [Expanding eligibility before currently eligible families can reliably access care](#) could increase competition for a [limited number of affordable seats](#) and leave families with fewer resources at a continued disadvantage. Stabilizing access for currently eligible families must therefore come before broader expansion.

DC should establish a maximum childcare cost of no more than 7% of family income and, once the foundation is stronger, progressively expand income eligibility for childcare assistance. At the same time, the District should continue to grow provider capacity, strengthen the workforce, and increase public investment. The [Office of the State Superintendent of Education \(OSSE\)](#) should measure expansion by whether families can actually obtain care, whether disparities in access are declining, and whether providers and educators have the resources needed to serve additional children.

The Defining Components of Childcare for All

Phase in subsidy eligibility up the income ladder

Once the District has ensured that currently eligible families can access subsidized care, it should incrementally expand income eligibility so that more families can benefit from public support and DC can move toward universal affordability. Over four years, the District should increase initial income eligibility from 300% FPL to 500% FPL, while maintaining a progressive sliding fee scale.

The mayor should work with the council to update the [Birth-to-Three for All DC Act](#) to establish this revised eligibility timeline and direct OSSE to make the corresponding updates to [regulations](#), the [Child Care Subsidy Program Policy Manual](#), the [Child Care and Development](#)

[Fund \(CCDF\) State Plan](#), the [sliding fee scale](#), and other program guidance and systems needed to implement expanded eligibility.

Eligibility expansion should be paired with corresponding investments in the subsidy program so newly eligible families can actually access care. That means investing in the subsidy program and the childcare system so there is enough funding to serve all eligible families, enough providers and educators to meet demand, and adequate reimbursement rates to help providers stay open, serve families, and deliver high-quality care and education. OSSE should also make sure newly eligible families know about the eligibility expansion and have help applying, with targeted outreach and application assistance in wards and communities where families face the greatest barriers to accessing care.

Recommended Phased Expansion of Childcare Subsidy Eligibility Toward Childcare for All

Year	Income Eligibility	Income for Family of 3	Estimated Current Annual Family Co-Payment (all below 7% of household income)*	Number of Children Income Eligible*** Under this Category (Based on 2024 ACS 5-year estimates)
Current	Up to 300% FPL	\$77,460	\$2,711.80 (for one child) \$3,679 (for two children)	41,201
FY 2029	Up to 350% FPL	\$90,370	\$3,689.40 (for one child) \$5,007.60 (for two children)	44,037 (+2,836 children)
FY 2030	Up to 400% FPL	\$103,280	\$4,217.20 (for one child) \$5,722.60 (for two children)	46,927 (+2,890 children)
FY 2031	Up to 500% FPL	\$129,100**	\$5,270.20 (for one child)** \$7,152.60 (for two children)**	52,268 (+5,341 children)

* Based on [OSSE's current sliding fee scale](#), which is from 2024 and should be updated as federal poverty guidelines change, so that families do not face higher co-payments than intended relative to their current income and economic need. The federal poverty guideline for a family of four [increased by about 5.8%](#) from 2024 to 2026; updating the fee scale to align with current federal guidelines would likely increase the cost of the child care subsidy program. Annual co-payment amounts are estimated by multiplying the daily co-payment rate by 5 days per week and 52 weeks per year (260 days annually).

** The FY 2031 (500% FPL) co-payments are estimated by extending the existing OSSE scale beyond its current 451-460% FPL limit. They are not official OSSE co-payment amounts. The FY 2031 income limit of \$129,100 is calculated using the same FPL basis as OSSE's current sliding fee scale.

*** Not every income-eligible child will participate in the child care subsidy program. Estimates reflect the number of children who fall within each income category, not projected program enrollment or demand.

Cap childcare costs for families at 7% of household income

The District should establish a clear long-term affordability standard, consistent with a widely used [affordability benchmark](#) grounded in national family expenditure data: no family should spend more than 7% of its household income on childcare.

DC should maintain and build on its [existing progressive sliding fee scale](#) so family co-payments increase with household income, and families at every income level remain protected from unaffordable costs. Families with the lowest incomes should receive the greatest public support. As the District expands eligibility, middle- and higher-income families would contribute a larger share of the cost of care while remaining protected from childcare expenses above the 7% standard.

Reaching this standard for all families will likely take longer than the four-year eligibility expansion described above. DC should therefore treat the expansion to 500% FPL as the first major phase of Childcare for All and continue extending assistance up the income ladder until all families whose childcare expenses would otherwise exceed 7% of household income can participate.

Funding and Implementation

Achieving Childcare for All will require recurring, multi-year funding commitments. The administration should incorporate the full four-year initiative into the District's Fiscal Year (FY) 2028-2031 Financial Plan and establish annual funding targets and progressive revenue plans that account for enrollment growth, expanded eligibility, reimbursement rates that reflect the cost of care, workforce compensation and benefits, provider capacity, technology and administrative infrastructure, family navigation, and the agency staff needed to administer the program.

The District should establish a fund to govern the local funds needed for Childcare for All. In FY 2027, DC already invests approximately \$134.2 million in local dollars in the child care subsidy program.¹ As currently structured, the full local appropriation operates within the eligibility and participation limitations of the federal CCDF program. Establishing a fund separate from [federal Child Care and Development Fund \(CCDF\)](#) gives the District substantial flexibility to redesign how it structures its local childcare dollars and who they serve, enabling the District to both reduce barriers for currently eligible families and to eventually expand access to subsidized childcare, while maintaining federal compliance to continue maximizing federal funds.

The financial plan should serve as the floor for childcare assistance funding, but that funding should grow with the program as enrollment, demand, provider costs, and family eligibility change to prevent an [enrollment freeze or waitlist](#). Annual eligibility targets should therefore be accompanied by estimates of the public investment, provider capacity, and workforce needed to achieve them.

Early Childhood Education in Context

While this memo focuses primarily on early childhood education for infants and toddlers, young children and their families rely on a much broader system of support that must work together to promote well-being and long-term success. This system includes health care, maternal and child health services, behavioral health services, paid family and medical leave, access to healthy food and nutrition assistance, stable housing, economic supports, developmental screening and early intervention, home visiting, and other family services.

The next mayor should advance a comprehensive vision for early childhood that reflects the full range of families' needs and ensures that the agencies responsible for meeting them are aligned and accountable. The State Early Childhood Development Coordinating Council (SECDCC) should be the central forum for this work because it coordinates the full early childhood system, including early childhood education. [Birth-to-Three and Beyond: Policy Recommendations to Strengthen Health, Mental Health and the Early Childhood System for DC's Infants, Toddlers, and their Families](#) highlights actions the mayor can take to strengthen the broader early childhood system.

¹ Council of the District of Columbia, Budget Office, email communication, October 1, 2026.

A Four-Year Path Toward Childcare for All

The mayor should launch Childcare for All with a public four-year roadmap that establishes annual targets for access, affordability, provider capacity, workforce stability, reimbursement, racial equity, and public investment. The roadmap should make clear what DC intends to achieve each year, what additional investments are needed to reach the next stage, and whether progress is reaching families and communities that have historically faced the greatest barriers to care.

The administration should publicly report each year on progress on the Childcare for All roadmap, including enrollment, access, affordability, provider capacity, workforce stability, provider reimbursements compared with the cost of care, and public investment. This reporting should allow the District to identify gaps early, adjust investments as necessary, and measure progress toward a childcare system in which every family can access affordable, high-quality care and education.

In the first 100 days, the mayor should announce Childcare for All, establish and codify the 7% affordability cap (either through regulations or by updating the Birth-to-Three law), publish the four-year roadmap, begin establishing a Childcare for All Fund, clear the childcare subsidy waitlist, move the SECDCC to the Executive Office of the Mayor, and initiate the repair and stabilization work necessary to support future expansion.

In FY 2028, the District should guarantee access for families already eligible for childcare subsidies by eliminating the Child Care Subsidy waitlist and establishing a recurring funding floor (in the FY 2028 budget and four-year fiscal plan) that prevents future enrollment freezes. DC should stabilize core workforce and provider investments, including the Pay Equity Fund and [HealthCare4ChildCare](#), begin consolidating the child care subsidy program at OSSE, and establish a new childcare resource and referral. The District should establish baseline measures of access and affordability by income, race, geography, language, disability, and child age so it can evaluate future expansion for its impact on existing disparities.

During FY 2029, DC should increase initial income eligibility to 350% of FPL. Expansion should be paired with additional investments in provider capacity, the workforce, subsidy reimbursement, family navigation, technology, and stronger systems for applying for and accessing assistance.

During FY 2030, DC should continue expanding eligibility to 400% of the FPL, pursue compensation parity for early childhood educators, and assess, strengthen, and deepen the strategies the mayor deployed in FY 2027, 2028, and 2029.

During FY 2031, DC should increase initial eligibility to 500% of the FPL. This should complete the first major phase of Childcare for All and leave the District with the financing, provider capacity, workforce, and administrative systems necessary to continue moving toward universal affordability.

The First Four Years of Childcare for All

Action	First 30 Days	First 100 Days	FY 2028	FY 2029	FY 2030	FY 2031
Cap out-of-pocket costs at 7% of household income		Codify cap on family out-of-pocket costs at 7% of household income				
Offer Childcare for All to more families		Clear all families off the child care subsidy waitlist	Eliminate the childcare subsidy waitlist (in FY 28 budget proposal) Establish a new childcare resource and referral (CCR&R)	Expand eligibility up to 350% FPL	Expand eligibility up to 400% FPL	Expand eligibility up to 500% FPL
Build and sustain the early childhood education workforce			Restore early educator minimum salaries to FY 2025 levels, using recurring funding Restore and fund DC LEAD Bring HealthCare4ChildCare funding in line with true costs	Add annual cost-of-living increase, using recurring funding in FY 29 budget	Align early childhood educator minimum salaries with DCPS teacher salaries	
Stabilize and grow the supply of childcare		Establish child care facilities fund	Allocate \$10 million to the facilities fund in FY 28 budget and select initial providers for participation by January 2028	Align subsidy reimbursement rates with the cost of high-quality care		
Build a government capable of delivering Childcare for All	Establish Childcare for All fund and announce roadmap	Move SECDCC to Executive Office of the Mayor		Modernize provider- and family-facing technology systems		

Repair and Stabilize the Early Childhood Education System

Before DC expands assistance to thousands of additional families, the mayor should strengthen the programs, providers, and workforce that families depend on today. The first phase of Childcare for All should focus on ensuring that currently eligible families can access the subsidy program, stabilizing the early childhood workforce, strengthening existing providers, and correcting immediate financing and administrative problems that threaten family access.

Eliminate the Childcare Subsidy Waitlist

When building a system that treats childcare as a public good, the priority should be ensuring that families already eligible for affordable childcare can access existing resources. Currently, [categories](#) of eligible families cannot receive childcare subsidy vouchers, which can significantly affect their ability to work or pursue education and their children's access to developmentally appropriate care. One parent shared:

"I had a job interview today, but I'm still on the childcare subsidy waitlist. Even if I get an offer, I don't know how I can accept it without childcare for my daughter."

- Zanyah Johnson, mother of two, Ward 5

The mayor should direct OSSE to clear the [childcare subsidy waitlist](#) by leveraging [available FY 2027 subsidy funding](#) and, as needed, reprogram funds from less urgent areas of the District's budget in the supplemental FY 2027 budget. Then, the mayor should prevent the recurrence of enrollment freezes and waitlists by establishing a funding floor in the FY 2028 budget. To fully repair the system, the mayor should also direct OSSE to assess the impact of the current waitlist on families, childcare providers, and the broader childcare system - including lost provider revenue, classroom closures, staffing impacts, and unmet family demand. The mayor should also direct OSSE to conduct cost analyses to inform recurring funding that accounts for enrollment growth, changes in family eligibility, and reimbursements at the true cost of care. OSSE should also strengthen outreach, application assistance, and enrollment support so eligible families know about the program and can access it successfully.

Strengthen the Pay Equity Fund

The mayor should commit to stabilizing and expanding the [Pay Equity Fund](#) as a key lever for growing the early educator workforce to meet increased demand as more families have access to affordable childcare options:

Stabilize the Pay Equity Fund by fully funding the program across all four years of the financial plan.

The current mayor spent the past three years trying to eliminate the Pay Equity Fund, creating deep uncertainty in the field about the program's longevity and, in turn, the security of educators' full salaries and healthcare. The council has been left to pick up the pieces and restore elements of the program. During that time, minimum salaries for early educators have fallen over 14% below the [minimum salaries for DC Public Schools \(DCPS\) teachers](#). Today, there is no funding for the salaries after FY 2027, and funding for the healthcare component is insufficient. To correct these threats to the Pay Equity Fund, the mayor should publicly commit to its long-term stability and growth and invest in its future by restoring minimum salaries from FY 2025, applying cost-of-living increases, securing recurring funding across the four-year financial plan, and eventually providing sufficient funding for pay parity between early educators and comparable DCPS teachers.

Repair and stabilize HealthCare4ChildCare

The mayor should fully fund and stabilize [HealthCare4ChildCare \(HC4CC\)](#), so eligible early childhood educators and their families can reliably access affordable health coverage. HC4CC is a critical part of the Pay Equity Fund, providing low-cost healthcare to more than [2,300 childcare employees and their families](#), many of whom received employment-based health coverage for the first time through the program.

Recent funding shortfalls have weakened that promise. The Health Benefit Exchange Authority instituted a [waitlist for HC4CC](#) in January 2025, and rising program costs have prompted consideration of structural changes that could further limit access. The mayor should provide sufficient recurring funding to eliminate the waitlist, restore access for eligible educators, and ensure the program can continue without enrollment restrictions or benefit reductions.

Build a Government Capable of Delivering Childcare for All

Childcare for All will require the DC government to manage funding, eligibility policies and determinations, technology, cross-agency coordination, and community engagement effectively. Today, agencies divide responsibility for childcare assistance; subsidy funding moves through unnecessary administrative layers; providers navigate disconnected, duplicative technology systems; and existing governance structures do not coordinate effectively or give families, educators, and providers meaningful opportunities to shape the policies that affect their lives.

To implement Childcare for All effectively, the mayor should strengthen the government infrastructure responsible for childcare by improving accountability and capacity. DC should

establish a sustainable local financing structure, consolidate responsibility for childcare funding and administration, appoint skilled leaders with early childhood expertise, strengthen cross-agency governance and accountability, build meaningful, routine avenues for community participation, and modernize agency technology OSSE uses to administer childcare programs.

Childcare in DC exists within a broader birth-to-five system that includes the child care subsidy program, [universal public pre-K delivered through DCPS](#), public charter schools, and community-based organizations participating in the [Pre-K Enhancement and Expansion Program \(PKEEP\)](#), as well as early intervention supports such as [Strong Start](#) and [Early Stages](#), and many other programs and services. Policies affecting childcare should therefore be developed and implemented in coordination with the full birth-to-five system so that funding, workforce, quality, enrollment, facilities, and family access strategies reinforce one another.

This coordination should be a core responsibility of the District's early childhood education governance structure. It should inform decisions across OSSE, the Deputy Mayor for Education (DME), DCPS, public charter schools, PKEEP providers, and other agencies serving young children and families.

Establish a Childcare for All Fund

The District should establish a Childcare for All Fund by separating local dollars currently allocated to the child care subsidy program that are not needed to satisfy federal maintenance-of-effort, matching, or other requirements necessary to draw down the District's full federal CCDF funding. The funds constitute the majority of DC's child care subsidy program funding. The Fund should be established in law as an ongoing, nonlapsing fund so that it does not need reauthorization or reestablishment each year, and unspent balances remain available for childcare in future fiscal years. This structure would provide a stable source of local funding that can grow over time and support the continued expansion of Childcare for All.

Housing these dollars in a separate local fund would let DC use its own resources without automatically subjecting every family and provider to [federal CCDF eligibility rules](#), particularly requirements related to work, education, and documentation. Families whose circumstances meet federal CCDF requirements should continue to receive subsidies funded by federal dollars wherever possible so DC can maximize available federal funding. Families who meet [DC's locally established eligibility requirements](#), but do not qualify under federal rules, could instead be supported through the Childcare for All Fund. The locally funded portion of the program should preserve strong family protections established through CCDF, including 12-month eligibility periods and continuity of care when family circumstances change, without importing federal restrictions that are unnecessary for the use of local funds.

DC should combine federal CCDF and local Childcare for All Fund dollars into a single Childcare for All program for families while maintaining the separate accounting and requirements associated with each funding stream. Families should complete one application that collects the information needed to determine eligibility for both federal and local assistance. They should experience the same application process, support, and provider network regardless of which funding source ultimately pays for their care. OSSE and its eligibility determination partners should determine on the back end whether a family qualifies for federal CCDF funding and use federal dollars when available; when a family qualifies for Childcare for All under DC's local eligibility rules but does not meet federal requirements, local funds should support that family's care.

This financing structure should be largely invisible to families and providers. Families should not be expected to understand, select, or navigate different funding streams to receive assistance. The District should keep distinction between federal and local funding as an administrative responsibility.

Consolidate the Child Care Subsidy Program Under OSSE

House all subsidy administration within OSSE

Move childcare subsidy application and eligibility functions from the [Department of Human Services \(DHS\)](#) to OSSE. Currently, OSSE administers the subsidy program and sets policy, while DHS and [Level II providers](#) split family eligibility determination. This creates unnecessary complexity, inconsistent communication and implementation, inefficiencies in quality assurance, and difficulty ensuring accountability across the program. [Families describe the DHS eligibility determination](#) process as slow, difficult to navigate, and inconsistently implemented, citing challenges submitting required documentation, unclear communication, and difficulty getting timely help from caseworkers. Conversely, they have [positive experiences with Level II providers](#), citing hands-on application support and help navigating the process as crucial components of the experience.

Consolidating the subsidy program within OSSE would create clearer program ownership while maintaining multiple ways for families to apply. Expanding the Level II model can help ensure families keep access to trusted, hands-on, provider-based navigation and application support. Consolidating responsibility under OSSE should include clear staffing, technology, case-transfer, performance, and continuity plans so families and providers do not experience new delays or disruption during the change.

OSSE already has both the authority and responsibility to determine eligibility for the child care subsidy program and currently delegates that function to DHS through [a memorandum of](#)

[understanding \(MOU\)](#). Consolidating eligibility determination within OSSE would therefore primarily require terminating or revising that MOU and transitioning the function back to OSSE; new legislation or an executive order should not be necessary. OSSE will also need to update its CCDF State Plan to communicate that it will determine eligibility.

OSSE [transfers \\$1.97 million](#) to DHS primarily to fund 20 staff conducting child care subsidy eligibility determinations. The mayor should return the funds to OSSE for in-house eligibility determinations through the [Child Care Resource and Referral \(CCR&R\)](#), OSSE, and Level II childcare providers. Additional funding may be needed to adequately staff the eligibility determination process, including fairly compensating Level II providers for staff and resources needed to conduct eligibility determinations, start-up costs for the CCR&R, and an eligibility determination team at OSSE.

Allocate all subsidy funding directly to OSSE

In FY 2027, DHS will transfer about \$24.28 million in funding to OSSE to administer the child care subsidy program through an MOU.² This annual transfer of almost entirely local funds (\$24.04 million in FY 27) adds an unnecessary layer to the funding structure and obscures where responsibility for subsidy resources ultimately lies. Budgeting all local subsidy dollars directly within OSSE would create a clearer, more transparent funding structure; strengthen program spending and performance accountability; simplify financial administration; and better align fiscal responsibility with OSSE's role in administering the child care subsidy program. This could happen through the mayor's authority to propose a budget and could occur in the first 100 days of the new administration, when the mayor will need to propose the FY 2028 budget.

Strengthen Early Childhood Education Leadership

The mayor will need leaders who understand early childhood education, know how District government works, and can turn policy commitments into effective implementation. Key appointments should combine early childhood expertise with strong management, political judgment, and direct knowledge of the families, educators, and providers affected by District policy. Across these positions, the mayor should prioritize leaders who can manage complex systems, work effectively with families and providers, use data and budgets to guide decisions, and engage the early childhood community early enough for that input to shape policy and implementation.

² Council of the District of Columbia, Budget Office, email communication, September 6, 2026.

- Hire a Deputy Superintendent for the Division of Early Learning with direct experience in early childhood programs, including as an administrator, educator, or in another hands-on role. The Deputy Superintendent should understand the day-to-day realities of operating childcare programs and have experience managing complex programs, policy and research, regulatory and funding systems, stakeholder engagement, and agency operations.
- Appoint a State Superintendent of Education who understands the distinct role and needs of early childhood education within DC's education system. The Superintendent should have the political judgment and relationships to work effectively with the Council, agencies, and community, and should be prepared to advocate for the resources and policy changes needed to carry out the mayor's early childhood agenda.
- Appoint a Deputy Mayor for Education (DME) who treats early childhood as a cross-agency responsibility. The DME should be able to convene agency leaders, resolve interagency barriers, coordinate work across education, health, behavioral health, human services, and other systems serving young children, and hold agencies accountable for the administration's commitments.

The mayor should also consider designating a senior early childhood advisor within the Executive Office of the Mayor to coordinate implementation across agencies, manage the early childhood coordinating council ([see more below](#)), track progress on major commitments, and elevate barriers that require mayoral attention.

Finally, as OSSE begins to plan this transformative work, these leaders must work together to ensure that the agency's budget includes adequate funding to hire enough skilled, effective staff to implement these recommendations well.

Move and Strengthen the State Early Childhood Development Coordinating Council

A strong early childhood system requires ongoing coordination, accountability, evaluation, refinement, and avenues for community participation in system governance. Currently, OSSE primarily handles these activities with limited public input and coordination, or none at all. The [State Early Childhood Development Coordinating Council](#) (SECDCC) is a legislatively mandated body tasked with coordinating the early childhood system and recommending improvements to policies, quality, child participation, and the implementation of early childhood programs. In its present form, however, the [SECDCC](#) is poorly attended, meetings are not well-designed for member or public input, and work plans and working committees no

longer exist. In practice, the SECDCC's primary function is to sign off on major OSSE decisions, usually with limited time to review them. The mayor should reform this coordinating council to be an active and effective systems coordination forum via their existing authority and an update to its authorizing legislation in the following ways:

1. Elevate the SECDCC to be administered by the Executive Office of the Mayor.
2. Appoint a chair with extensive experience in early childhood systems, including in program operations and classroom roles, in multi-sector advancement of health and mental well-being of young children and caregivers, and in coordinating complex systems. The chair should have the authority to convene agency leadership, place issues on the agenda, request information, request staffing capacity from member agencies, and elevate unresolved interagency issues to the mayor/DME.
3. Require that individuals with decision-making authority represent agency and executive leadership.
4. Mandate representation from currently underrepresented parts of the early childhood system, including child development homes, programs that prioritize serving children with disabilities, programs operated by or serving families whose primary language is not English, and early childhood health and behavioral health organizations and experts. This representation should add to, not replace, current membership categories.
5. Require accessible public-comment mechanisms, family/provider participation in committees, language interpretation, and other support to facilitate participation by families, educators, and providers.
6. Establish a SECDCC three-year work plan based on recommendations from system implementers, ECE providers, pediatric healthcare providers, programs that provide a wide variety of other early childhood services and supports, and families. Work plans should include timelines, deliverables, and project owners.
7. Require the SECDCC chair to report on work plan progress through an annual report and quarterly updates to the mayor and deputy mayors for education and health and human services, copying the DC Council.
8. Restore standing committees and establish ad hoc committees based on the priorities identified by members and early childhood system leaders. Include an educator advisory committee, a committee on family, friend, and neighbor (FFN) care, a committee on child development homes, and committees addressing health, developmental, and behavioral health services, including early intervention, and

cross-system coordination and collaboration. Use these committees to identify ways to improve support for these groups.

9. Allocate funding to support necessary staffing, research, and other activities critical to SECDCC success.
10. Direct the SECDCC to partner with the Office of Racial Equity to coordinate the inclusion of early childhood education goals and measures in agency racial equity action plans. These measures should track whether racial disparities are narrowing in access to affordable, high-quality care and in children's learning and development. The SECDCC should review race- and ethnicity-disaggregated data annually and recommend specific policy and budget changes to address persistent disparities.
11. Rename the SECDCC to clarify its role and focus, and to make the name more accessible.

Meaningfully Engage the Early Care and Education Community

Currently, early childhood policymaking at OSSE rarely includes adequate direct input from childcare providers, educators, and families. Opportunities for community input often occur only after groups like Under 3 DC or childcare associations request or organize forums, or after decisions have already been made. At the same time, agency-led engagement can be difficult to access, overly formal, or structured in ways that limit meaningful participation. Policies and regulations are more likely to be effective, equitable, and workable when the people who implement and experience them are involved early in their development.

The mayor should make meaningful community engagement a routine part of early childhood policymaking by directing OSSE to:

- Engage providers, educators, and families before major policy, program, or regulatory changes are developed or finalized, using multiple methods such as advisory bodies, town halls, listening sessions, surveys, focus groups, and direct meetings. Reduce barriers to participation by offering virtual and in-person options, scheduling meetings outside traditional work hours, and providing interpretation and accessibility support.
- Establish permanent advisory councils or other standing structures for educators, providers, and parents, with clear opportunities to shape OSSE early childhood education priorities and provide feedback on implementation. Ensure representation across the early childhood education community, including center-based providers, child development homes, frontline educators, families receiving subsidy, families with

children with disabilities, and families and educators for whom English is not the primary language.

- Create a clear feedback loop so participants understand how their input was considered, what changes resulted, and why recommendations were or were not adopted.

Modernize Technology for the Administration of Early Care and Education

Today, childcare providers must interact with multiple systems to participate in District programs and meet OSSE requirements. These include, at minimum, Subsidy Eligibility & Assignment (SEA) for subsidy eligibility and provider assignment, the OSSE Attendance Tracking System (OATS) for attendance and payment-related reporting, the Division of Early Learning Licensing Tool (DELLT) for licensing, compliance, provider and workforce records, staff qualifications and credentials, and supporting documentation, and the District Integrated Financial System (DIFS) for payments.

This fragmentation creates a [significant administrative burden](#). Providers are often required to enter the same information in multiple places, upload the same documentation repeatedly, move between systems to understand the status of a single child or payment, and reconcile information when records do not align. It takes staff time away from operating programs and supporting children and families, increases administrative costs, creates more opportunities for error, and can contribute to delayed approvals, inaccurate records, and delayed subsidy payments. Fragmentation also makes it harder for OSSE to maintain a complete and current picture of providers, the workforce, enrollment, and public investments.

DELLT limitations compound these problems. Every licensed childcare provider relies on DELLT to maintain facility and staff records, document qualifications and credentials, and submit information required for licensing and ongoing compliance. DELLT data are also used to administer the child care subsidy program and determine Pay Equity Fund awards. Yet the system is antiquated, slow, difficult to navigate, and poorly designed for routine provider use. Providers have reported difficulty seeing what they have already submitted, whether OSSE received their information, and updating records without repeatedly uploading the same documentation. One director described their experience:

“Right now, we’re entering the same information over and over into separate systems for licensing, subsidy payments, training records, and grants. One centralized place to manage it all would give providers time back—time we could put toward better care for children.”

- *Mrs. Angelique Speight-Marshall, Founder and Executive Director of Ms. P's Child & Family Services*

Because DELLT contains information that affects licensing, subsidy participation, and Pay Equity Fund payments, poor usability and outdated or incomplete records are not simply inconveniences; they can directly affect a provider's ability to remain in compliance, receive public funding, maintain accurate workforce records, and operate its program.

Create a single, comprehensive provider portal that centralizes all provider-facing early childhood functions and replaces antiquated systems such as DELLT.

The District should develop a one-stop, user-centered childcare provider portal through which providers can conduct all routine business with OSSE. Providers should be able to maintain facility and workforce records, submit and track licensing and compliance documentation, manage subsidy enrollment and attendance, view payment information, respond to agency requests, and monitor outstanding requirements without navigating multiple disconnected systems. Information already submitted to the District within OSSE or via other agencies (in coordination with the Office of the Chief Technology Officer) should populate across functions in the unified portal wherever appropriate.

A unified portal should give providers one seamless point of access, reduce administrative burden, and give OSSE more timely, accurate, and consistent data across licensing, subsidy, workforce programs, and the Pay Equity Fund.

To succeed, modernization should include:

- One provider profile across licensing, subsidy, workforce, and other early childhood programs, so providers do not have to submit the same information repeatedly and OSSE can keep records consistent.
- An archive or document repository where providers can see what they have submitted and reuse those documents across applicable requirements.
- Clear status tracking and notifications showing outstanding requirements, pending submissions, deadlines, approvals, payment status, and actions needed.
- Role-based access so directors, administrative staff, educators, OSSE staff, and other authorized users can access the information appropriate to their responsibilities.

- Strong data governance, including clear ownership of data elements, common definitions, standards for updating records, and accountability for resolving conflicting or inaccurate information.
- Extensive provider and OSSE staff testing before launch, particularly with child development home providers, centers of different sizes, and users with different levels of technological capacity.
- Data cleanup and migration so a new system does not simply carry forward duplicate, incomplete, or inaccurate records from existing platforms.
- Ongoing language-accessible technical support, training, and maintenance, including a phased migration with a clear onboarding timeline that prioritizes smooth user experience and does not interfere with critical early childhood education system timelines. Staff adequately to be responsive to providers' requests for support.

Stabilize and Grow the Supply of Childcare

DC must stabilize and expand the childcare supply to meet demand and ensure families can access the care and education their children need. DC has made significant strides in making [pre-K available to all 3- and 4-year-olds](#), but infant and toddler care still lags far behind demand. Nearly 24,000 children ages 0-2 live in DC, but only 12,246 infant and toddler seats are available in licensed District childcare facilities (based on an updated analysis of population and utilization data by DC Action and DCFPI).

Demand for infant and toddler childcare is projected to increase between 2023 and 2030, then decrease slightly from 2030 to 2035, according to a supply and demand [study conducted by Low Income Investment Fund](#) (LIIF) in 2023. Overall, LIIF found that demand for infant and toddler care will increase by 5.1% by 2035, before accounting for demand from non-DC residents who commute into the District for work and use District childcare. LIIF projects that Ward 8 will see the greatest increase in demand for infant and toddler care and need the most new seats over the next nine years to keep up.

The mayor must commit to providing sufficient childcare seats to meet existing and growing demand, especially once DC recommits to expanding subsidy eligibility up the income ladder to more families. The mayor should commit to replacing and creating 965 infant and toddler seats annually to shrink the supply-and-demand gap with investments focused on Wards 5, 7, and 8. Wards 5 and 7 currently have the largest shortfalls in infant and toddler seats, and Ward 8 is projected to see the greatest growth in demand and need the most new seats by 2035. These [Wards are also home to primarily Black and brown residents](#) who are often

overlooked when new investments are made in the District. This number reflects the need to replace seats lost when facilities close, plus new seats needed to meet demand. It should be paired with an assessment of the specific types of seats needed, such as seats available during nontraditional hours or care offered in languages other than English.

The [study conducted by LIIF](#) recommended a range of infant and toddler seats needed annually to close the supply gap by 2035 - the low end of the range, 965 seats, represents the number needed if market churn is at its lowest (i.e., fewer facilities close each year, so fewer seats need to be replaced), which can be achieved if lawmakers assess the sustainability of providers and implement the stabilization recommendations within this memo.

Stabilize Existing Providers

To expand the supply of childcare, lawmakers must first invest resources into stabilizing current providers, helping them stay in business by offering more robust and responsive resources and funding:

Provide more timely and predictable payments to childcare subsidy providers

The District should implement [prospective payments](#) and expand contract use. Currently, subsidy providers are paid retrospectively, through [reimbursements](#), usually weeks after they provide care. This contrasts with private-pay families, [who mostly pay in advance](#) for services, allowing providers operating on [tight profit margins](#) to pay their staff, rent, and supplies before providing care. When OSSE takes weeks to reimburse subsidy providers for services, those providers may be forced to run their businesses at a loss, which, in turn, [discourages them from accepting families using subsidies](#). Paying providers prospectively, based on their enrollment from the previous month, will allow them to budget accurately, pay their bills, and ensure seats are available to the families who need them. Any changes to provider payments for care would require a change to the CCDF State Plan.

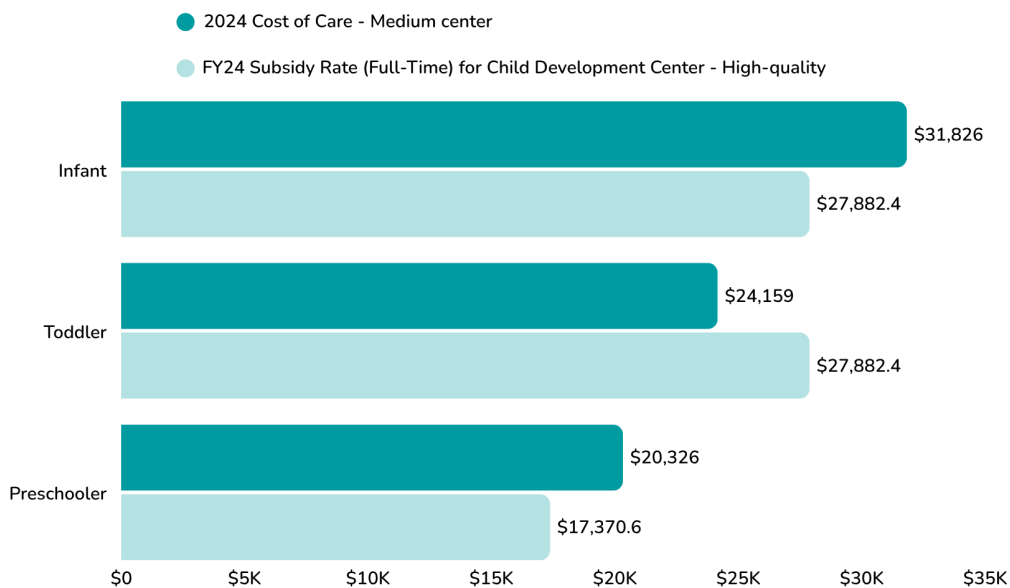
The mayor should also encourage OSSE to expand the use of contracts to pay facilities to serve a specific number of children each month. [DC currently uses contracts](#) to ensure that a small number of infants and toddlers with disabilities have access to childcare seats. OSSE should expand this approach to facilities where the supply of infant and toddler seats is not keeping up with demand, such as [in Wards 5 and 7](#). Contracts can also increase the supply of childcare during nontraditional hours and in languages other than English, where supply deficits are also [major](#). Contracts can stabilize subsidy payments and provider revenue, helping providers plan for a certain number of seats and budget accordingly. The certainty of contracted seats could also encourage new providers to accept subsidies.

Increase childcare subsidy reimbursement rates to align with the [true cost of care](#).

[Reimbursement rates to many childcare providers participating in the subsidy program fall below the cost of providing care](#). [Educators'](#) wages and benefits drive DC's cost model along with adult-to-child ratios, the cost of supplies and supplemental services, rent, and other expenses associated with licensing and compliance with local and federal laws. OSSE is currently updating its cost model and should verify that the results reflect the realities facing providers' budgets by soliciting meaningful feedback on the design of the cost model, inputs, and findings. Creating avenues for providers to shape the model and its results can strengthen the accuracy of its findings, which, in turn, helps ensure reimbursement rates meet providers' actual needs if set at the true cost of care.

Because reimbursement rates do not currently cover the full expense of providing care, subsidy providers often operate at a loss, and many providers who do not accept subsidies [cite this as a reason for not accepting families with vouchers into their programs](#). Additionally, for most providers, OSSE [deducts the assigned family co-payment](#) for each enrolled child, further chipping away at providers' reimbursement rates when they cannot collect this income from families.

[Revenue vs Costs for Child Development Centers](#)



The mayor should work with OSSE to develop a plan to increase reimbursement rates across all providers, without deducting family co-payments, so they meet the true cost of providing care. The priority should be infant and toddler care, where higher costs and limited supply

make adequate reimbursement especially important. Increasing rates for these age groups would help stabilize providers currently serving families who use subsidies and encourage more providers to accept subsidies for infant and toddler care. This will require changes to [DC's CCDF State Plan](#) and robust, predictable, recurring funding for the subsidy program.

More information about how reimbursement rates for home-based providers are calculated and recommendations for determining the true cost of care for homes are provided [below](#).

Create and sustain shared services support

Childcare facilities operate on [extremely tight margins](#), which can make it difficult to hire staff to support administrative tasks related to licensing, monitoring, collecting and submitting attendance and enrollment data, marketing, and maintenance. In response, OSSE developed the [Shared Services Business Alliance](#) (SSBA) to provide this support to select providers; however, it was eliminated in the FY 2027 budget. Still, those [participants valued the opportunity](#) to access free resources to help run their businesses, such as training on human resources management, accounting, and financial planning. SSBA coaches also helped participants navigate tax requirements and complete childcare subsidy documentation, making it easier to become a subsidy provider.

The mayor should commit to evaluating lessons learned from that program and creating and funding a program that meets providers' needs, with special attention to small centers and home-based providers. A well-designed shared services platform should include: Level II-style subsidy intake specialists for families so they can go through the application and enrollment process with a trusted childcare provider, early intervention specialists, classroom materials and curricula, and for small centers and homes, access to discounted retirement benefits for their staff, joint trainings, back-end support, and executive coaching for new directors. Childcare providers are asked to do a lot with very limited resources. Access to shared services can ease some of that burden and build a community of support.

Rethink how OSSE supports quality

OSSE uses the [Capital Quality program](#) to assess, measure, and support facility quality in participating childcare centers and homes (all providers participating in the child care subsidy program are required to participate in Capital Quality). Providers are assessed annually and assigned a score that is included on OSSE's parent search tool, MyChildCareDC. The score is used, in part, to determine the [reimbursement rates subsidy providers receive](#) – facilities with lower scores receive lower rates, and those with higher scores receive higher rates. Supporting continuous quality improvement and ensuring facilities uphold a certain standard of safety and

quality are essential, but Capital Quality has flaws in how it works and how it uses those scores.

OSSE commissions cost models every three years to help determine provider subsidy reimbursement rates.³ In the [2023 cost-of-care analysis](#), the agency found no cost drivers associated with the attributes measured for quality determinations. Therefore, OSSE should eliminate tiers based on quality ratings and set one subsidy rate for each age group and care setting, with differentiation for serving children with special needs, regardless of a provider's quality designation. OSSE should implement this change without reducing any provider's reimbursement rate.

Additionally, many facilities throughout the District have achieved accreditation through industry standards, such as the [National Association for the Education of Young Children \(NAEYC\)](#) and the [National Association for Family Child Care \(NAFCC\)](#). For those facilities, being subject to OSSE quality assessments feels duplicative and onerous when they already undergo assessments to achieve and maintain national accreditation, which is often a higher industry standard and a deeper point of pride for providers.

Instead of investing District resources into a separate quality scoring system, OSSE should use that funding to help facilities achieve and maintain accreditation through their industry standards. Connecticut offers [an example](#) of funding accreditation for facilities while supporting continuous quality improvement and providing year-round coaching resources. Importantly, it does not use state-based ratings; instead, it [incentivizes participation](#) in quality improvement activities and fully covers the costs of achieving and maintaining national accreditation. Connecticut spends just over \$2 million annually to help its 100 home-based facilities and 550 center-based facilities achieve and maintain accreditation, making it a more cost-effective program than a traditional quality rating and improvement system (QRIS).

OSSE should continue to fund coaching for educators because accreditation observations and feedback occur only once every five years, and many educators want to receive coaching more frequently, especially if they are new to the field. Coaching should be led by individuals with teaching experience and be offered without an assessment component that impacts the rates at which facilities are reimbursed. In general, childcare providers prefer OSSE to take a “resources before requirements” approach to quality improvement. Any major changes in quality requirements should include provider input before implementation and sufficient lead

³OSSE published cost modeling analyses in both 2023 and 2024 because [DC Code § 4-410.01](#) required analyses by March 1, 2023, and February 1, 2024, and every three years after that; the 2024 analysis used the same methodology as the 2023 analysis but updated its data and inputs.

time, training, coaching, technical assistance, infrastructure support, and funding so they can successfully meet the new expectations.

Encourage Existing Providers to Expand and New Providers to Open Facilities

Once DC has stabilized its current childcare providers, the next step is to support the expansion of the number of infant and toddler seats, especially in predominantly Black neighborhoods where the [supply gap is most prominent](#):

Develop a facilities fund to support repairs, renovations, and expansions of existing childcare facilities, and the creation of new facilities

Past programs like [Access to Quality Child Care](#) helped increase the supply of infant and toddler seats in DC. By providing grants to childcare program owners to improve and expand their facilities, the program helped create over [1,200 infant and toddler seats](#) in childcare centers and homes with \$9 million in the first round of funding. This was particularly valuable to home-based providers who must add commercial sprinkler systems to their homes to remain compliant with Fire and Emergency Medical Services Department (FEMS) regulations. This costs home-based providers [\\$25,000-\\$50,000](#) and could be the deciding factor in whether they remain open. Access to Quality grants have also supported maintenance and repairs that represent [a cost burden for providers](#) and can prevent them from investing in more staff and classroom capacity. A facilities fund can support necessary renovations for both home-based and center-based facilities and make a tremendous difference in maintaining and growing seats and parent choice, especially for home-based providers heavily concentrated in Wards 4, 5, 7, and 8.

Incorporate childcare in school modernization and office conversion initiatives

As DC continues to co-locate pre-K classrooms in public schools, modernization plans should also include creating infant and toddler spaces in underutilized DCPS and charter school classrooms when it is financially viable for providers. Concentrate this effort in wards and neighborhoods that have the largest gaps in infant and toddler care – [Wards 5 and 7](#) - and investigate what operational and administrative burdens DCPS, the Department of Buildings, and other relevant agencies may be able to coordinate better, streamline, or fix to strengthen this strategy.

When considering demand from non-DC residents who commute into DC for work, the [greatest shortfall in infant and toddler seats is in Ward 2](#). To close that gap, DC should invest resources to convert unused office space into childcare centers, designed to serve our youngest

children. DC already invests considerably in school modernization and office conversions, so lawmakers would simply need to allocate more of those resources to create childcare seats rather than find new funding to support it.

Review and refine childcare licensing regulations

Childcare providers often cite the [complex web of licensing regulations](#) as a barrier to operating a childcare facility in the District. Many regulations, such as teacher-child ratios and other safety guidelines, are essential; however, others may be duplicative and unnecessarily burdensome. The mayor should form an advisory group of childcare providers and experts to carefully review licensing guidelines and make recommendations - without reducing child safety - to replace language, eliminate rules that no one has ever violated, and use technology to reduce the burden of compliance. This will empower existing providers and may encourage new providers to open and expand.

Restore a dedicated early childhood facilities coordinator at the Department of Buildings

The District should restore an early childhood facilities coordinator within the Department of Buildings (DOB) to help childcare providers navigate permitting, zoning, certificates of occupancy, inspections, and other facility-related requirements. The Birth-to-Three for All DC Act [established](#) this type of cross-agency support, and the position was [funded](#) and implemented previously, but is no longer in place.

The DOB coordinator should serve as a clear point of contact for childcare providers and help resolve issues requiring coordination across agencies, including FEMS and other agencies involved in facility approvals. The coordinator should also work closely with OSSE, so providers do not have to navigate licensing and facility requirements separately without support. Restoring this role would give providers dedicated assistance with complex facility processes and help reduce delays that can prevent programs from opening, expanding, or maintaining licensed capacity.

Strengthen Child Development Homes as a Core Part of DC's Early Childhood Education System

Child development homes are an important part of DC's mixed-delivery early childhood education system. [Home-based programs offer families](#) smaller groups, consistent caregivers, opportunities for siblings to receive care together, and potentially more flexible hours. Family child care providers also operate under a distinct business model, often serving as educator, administrator, and small-business owner while running their programs from their own homes.

According to [OSSE's August 7, 2026, facility listing](#), DC has 37 child development homes and 54 expanded child development homes, for a total of 91 family child care facilities out of 454 licensed facilities citywide, approximately 20%. This represents 11 fewer child development homes and 2 more expanded child development homes than December 2023, when DC had a total of 100 child development homes and expanded homes. Child development homes also play a particularly important role in some parts of the District: In June 2026, [46 of 49 homes participating in the subsidy program were located in Wards 4, 5, 7, and 8](#).

Many of the challenges facing child development homes are shared by other child development facilities, including child development centers, and are addressed elsewhere in this memo. We repeat and build on some of those recommendations here through a child development homes lens because the sector's declining supply, relatively small share of DC's early childhood system, and distinct operating model create needs and vulnerabilities that policies designed for providers as a whole can be overlooked in policies designed for providers as a whole. The recommendations below focus on removing barriers, tailoring support to the realities of home-based care, and ensuring child development home providers have a meaningful role in policies that affect them. The goal is to sustain and grow this part of the sector as a viable part of DC's mixed-delivery system so families can continue to choose the setting that best meets their child's needs.

Remove regulatory and cross-agency barriers to child development homes

The mayor should direct OSSE and other relevant agencies to review the licensing, zoning, building, subsidy, quality, and administrative requirements that apply to child development homes and expanded child development homes, as a distinct component of [a broader review](#) of barriers for all child development facilities. The review should identify requirements that make it harder for a child development home to open, operate, or expand while preserving strong health and safety standards. This work should occur alongside child development home providers as they navigate the day-to-day impact of these policies.

DC should also simplify processes that require providers to work across multiple agencies. This includes [establishing](#) a single point of contact to help providers navigate the licensing and permitting process.

Build dedicated supports for child development home providers

DC should build support specifically for people who want to open, sustain, or expand child development homes. These should include individualized licensing assistance, business and financial coaching, shared administrative services, grants or affordable financing for start-up costs and home improvements, substitute and backup-care supports, and professional learning

and peer networks designed for home-based educators. This could occur as part of the shared services described [above](#) or as a distinct child development home network.

The District should also build a pipeline of new child development home providers by exploring models such as Montgomery County's successful [Growing Opportunities for Family Child Care](#) program. Prospective providers should understand licensing, permitting, facility, and start-up costs before making major financial commitments and receive hands-on assistance throughout the process.

Strengthen the cost model and rate-setting process for child development homes

OSSE's triennial [cost-of-care analysis](#) underpins subsidy reimbursement rates, but most providers have little opportunity to shape it after submitting data via a survey. For the 2023 model, OSSE surveyed providers and engaged the SECDCC and select provider groups, then used that input to develop its estimates. The report does not describe any step to return to providers to test whether the resulting assumptions and estimates reflect their actual costs.

This matters for child development homes. The 2023 report acknowledges that actual per-child costs in homes may vary with enrollment. Because homes serve so few children, one empty slot, a different age mix, or an inaccurate assumption about the provider's labor, occupancy, food, or administrative time can significantly change per-child costs. The 2023 model found that homes generally had a more sustainable financial picture than centers, but that homes serving only children receiving subsidies may operate at a loss.

OSSE should clarify the rationale for the scenarios and assumptions it makes in the model, check that rationale with providers, and revise the model as needed. Some examples of choices needing clarification or revision include:

- OSSE bases its estimates for homes on 95 percent enrollment. [Federal cost modeling guidance](#) treats 95 percent as the highest enrollment for a high-demand provider with a waiting list, and recommends 75% as the base assumption for child development homes. If a child development home has just one vacancy, its enrollment drops to 83 percent.⁴
- While the cost model assesses equal costs for all ages in a child development home, revenue from child care subsidy reimbursement rates varies by child age. As a result, a home's revenue depends heavily on the ages of the children it serves, even though its modeled costs do not.

⁴ Child development homes have a maximum capacity of [6 children](#). One vacant seat would leave 5 out of 6 seats enrolled, or 83%.

[Federal rules](#) already require OSSE to consult provider organizations before developing its cost model and to publish its response to stakeholder views and comments. The mayor should direct OSSE to go further in 2027 in building provider partnership and transparency by adding steps not described in either of the most recent models, including reviewing preliminary estimates and draft rates with providers in small-group sessions after initial analysis and modeling is complete, identifying where modeled costs differ from their experience, modeling the range of ways homes operate, including homes serving mostly children receiving subsidies, and updating the model based on these findings.

Before finalizing rates based on the updated model, OSSE should publish the model's assumptions and findings, and show how proposed rates compare to modeled costs. Once rates are final, OSSE should share results with survey participants and the broader provider community, explain what provider feedback changed, and how final rates relate to modeled costs.

Establish a special needs subsidy reimbursement rate for child development homes

OSSE's [subsidy reimbursement rates](#) include a higher rate for centers serving children with special needs, but there is no comparable rate for child development homes. Homes caring for children with disabilities or developmental delays receive the standard rate, even though serving these children often requires [additional resources](#), including individualized planning, adapted materials and routines, and coordination with families and early intervention providers.

Child development homes are well positioned to support children with special needs. Small groups and low ratios allow for more one-on-one attention. Children often stay with the same caregiver for years, which builds the consistent, trusting relationships that especially benefit children who need additional support. Providers tend to build [close partnerships with families](#), and homes are recognized as [natural environments](#) for delivering early intervention services within daily routines.

Child development home providers in DC, including those in the Under 3 DC coalition, are already serving children with special needs. A dedicated rate would fairly compensate them for this work and increase the resources they have to meet each child's unique needs. It could also encourage more homes to serve these children, expanding options for families who [often struggle to find care](#).

The mayor should direct OSSE to update child care subsidy regulations, the [Childcare Subsidy Program Policy Manual](#), and the [reimbursement rate schedule](#) to establish a special needs rate

for child development homes and expanded homes, and allow these providers to apply for and receive it through a process comparable to the one used for centers.

Give child development home providers a formal role in policy development

Child development home providers should have a formal role in developing the policies that govern their work. DC should ensure meaningful representation for providers on the reformed SECDCC and its relevant committees and create additional opportunities for providers who cannot participate in standing bodies to inform policy and implementation.

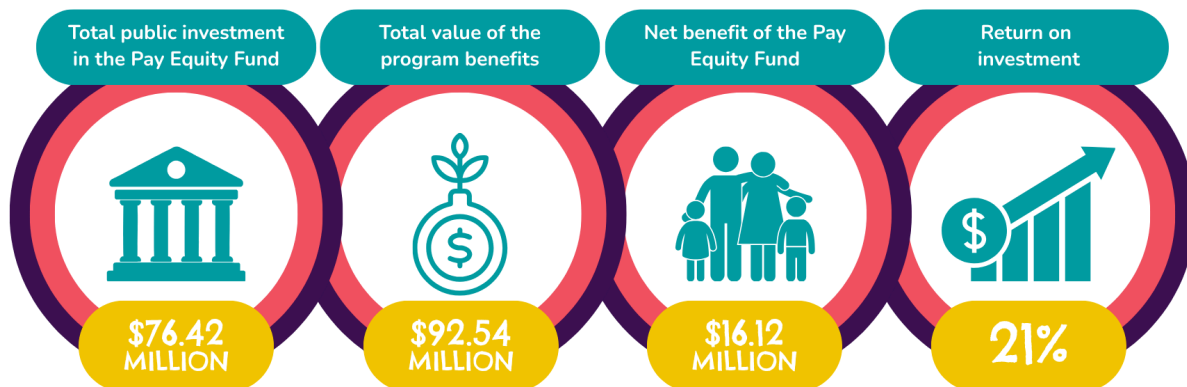
OSSE should also routinely monitor the health of child development homes, including licensed capacity, new openings, closures, licensing timelines, subsidy participation, and other indicators that can identify emerging barriers. OSSE already publishes a [monthly list of licensed child development facilities](#); the District should use this and other administrative data to identify declines or bottlenecks and respond before they cause significant capacity losses.

Support and Expand the Early Childhood Workforce

A critical component to expanding childcare to more District families and improving childcare quality is ensuring every classroom has qualified teachers. In recognition of this, DC introduced the [Pay Equity Fund](#) (PEF) to support fair compensation for early educators, [defined as](#) compensation equivalent to the average base salary and fringe benefits of an elementary school teacher employed by DC Public Schools (DCPS) in an equivalent role, with equivalent credentials and experience. DC's investment in the early childhood workforce reflects a commitment to addressing centuries of racist and sexist policies that have led to the [undervaluing of childcare educators](#)—who are predominantly Black and brown women—by establishing fair compensation and parity with public school teachers.

The PEF currently provides [salary supplements](#) to more than 3,300 educators across 337 childcare facilities in DC and [healthcare](#) to over 2,300 employees and their dependents across 215 facilities. Since its creation in 2022, the PEF has [delivered on its promise](#) to attract new educators to the field, encourage them to pursue more advanced degrees, and keep them in their jobs by offering competitive pay and benefits. Investments in the PEF have increased the workforce by [11 percent](#) and yielded a [21 percent](#) return on investment. While many states across the country continue to struggle with [high turnover and fewer total educators](#) than before the pandemic, DC has been able to grow its childcare workforce largely because of the PEF.

The Return on Investment from the Pay Equity Fund, FY 2024



Strengthen the Pay Equity Fund to Achieve True Pay Parity

The Pay Equity Fund has made important progress toward growing the early childhood educator workforce and closing the compensation gap between early childhood educators and DCPS teachers, but true pay parity requires more than establishing a minimum salary. The next phase of the program should make compensation more competitive and predictable over an educator's career and expand access to benefits that support long-term retention in the field.

Make early childhood educator compensation more competitive and predictable

Early childhood educator compensation should include annual salary adjustments to keep up with inflation and the cost of living, with salary increases based on years of experience, on par with comparable DCPS teachers. Failing to achieve true pay parity could lead our [most highly qualified early educators to leave the field](#) for better, more predictable pay in public schools, creating instability for the children served in early childhood settings. [Educator retention is critical in child development](#) because strong relationships and high-quality interactions with educators lead to better social and emotional outcomes for the children in their care. The mayor should restore early educator minimum salaries to FY 2025 levels with recurring funding in the FY 2028 budget, add an annual cost-of-living adjustment beginning in FY 2029, and align minimum salaries with comparable DCPS teacher salaries in FY 2030.

While the Washington Teachers Union (WTU) negotiates annual salary adjustments that [average a 3 percent](#) increase, the Pay Equity Fund has not been funded to provide early educators cost-of-living adjustments. To make matters worse, the DC Council lowered the minimum salaries in FY 2026 for early educators to keep PEF costs in line with funding allocated to the program, moving the goalpost for pay parity further away.

Additionally, under the current PEF design, the highest salary an educator can achieve is the entry-level salary of a new teacher with a bachelor's degree at DCPS. Many early educators have taught for decades, and their salaries should reflect that [depth of experience](#), not just their degree. Pay parity with DCPS teachers means providing annual cost-of-living adjustments and salary increases based on years of experience and should be included in future iterations of the program.

Increasing educator pay is also causing wage compression between childcare educators and directors, so future iterations of the program should supplement facility directors' wages to ensure that DC continues to attract and retain talented, experienced childcare leaders.

Expand benefits for early childhood educators

Competitive compensation should include benefits that reflect early childhood educators' value and professional status. After HealthCare4ChildCare is stabilized, the District should expand the benefits available to early educators to bring them closer to [those available to DCPS teachers](#).

The mayor should assess options for providing retirement benefits, wellness and mental health support, paid leave, and other benefits that help educators stay in the field throughout their careers. The District should also assess whether shared services alliances, a dedicated program, or another model can deliver these supports equitably and efficiently. Where benefits allow educators to take time away from the classroom, the District should also consider funding for substitute or staffing coverage so providers can offer those benefits without reducing care for children or creating additional financial strain.

Strengthen District Support for Early Childhood Education Professional Development and Career Growth

Supporting the early childhood workforce goes beyond pay and benefits. Early educators are more likely to remain in the field when they have professional development opportunities and clear career pathways for advancement within their field:

Fully fund DC Leading Educators toward Advanced Degrees (DC LEAD)

The [DC LEAD program](#) works to guarantee equitable access to higher education for early educators. DC has some of the highest [degree requirements](#) for early educators in the country, which helps us deliver high-quality childcare. By providing scholarships to early educators to pursue associate's and bachelor's degrees in early childhood education, DC LEAD ensures money is not a barrier to those who want a career teaching our youngest learners. Fully funding DC LEAD also requires investment beyond scholarships, including advising and

scholar support, program administration, data and reporting, outreach, and the infrastructure needed to successfully support educators through degree completion. This support works hand in hand with the salary increases provided through the Pay Equity Fund to encourage early educators to achieve and surpass the credential requirements for their roles. Further, OSSE should provide clear steps and individualized support to educators with credentials gained in other countries so those educators are not forced out of the field entirely.

Currently, 210 individuals [receive scholarships through DC LEAD](#) and another 200 educators are on a waiting list, but the FY 2027 budget eliminated funding for this program. To maintain equity in DC's degree requirements and reopen the pipeline of degreed educators into childcare classrooms, the mayor must fund this program robustly and consistently across the financial plan so no scholar is left without the funding needed to support and complete their degree program. Once the DC LEAD program is re-established and currently enrolled students are stabilized, the mayor should also consider expanding it to support educators seeking a master's degree in Early Childhood Education so early educators can continue their education, deepen their expertise, and strengthen instructional practice within their classrooms.

Support professional development and career growth

Educators value regular professional development and find that it is most effective when it is practical, in-person, and led by trainers with teaching experience. Early educators are more likely to stay in a field where they can grow and develop professionally. That stability also improves quality for children by [supporting consistent, trusting relationships](#) with the educators who know them and their families over time.

Developing a career lattice with clear pathways for growth, including apprenticeships, fellowships, instructional coaches, and specialized support positions, will allow educators to see themselves staying and growing in the field for the length of their careers and not as a launching pad to teaching older children. The mayor should work with OSSE to develop an educator advisory committee within the refreshed SECDCC to recommend improvements to professional development offerings and a full career lattice.

Make Early Childhood Education and Supports Easy for Families to Find and Use

Every family in DC should be able to easily find, understand, and access the early childhood services that best meet their needs from pregnancy through school entry. The early childhood system should be easy to access, coordinated across DC government agencies, and centered on family choice. Families should have access to trusted navigators, clear information, and

coordinated support to connect them to childcare, home visiting, health services, developmental screening, early intervention, economic supports, and parenting resources. Families should not have to navigate a maze of agencies, eligibility rules, applications, websites, and disconnected points of contact to find childcare, apply for a subsidy, connect to early intervention services, or get help when something goes wrong.

The District already has many of the pieces of a strong family-facing system: [childcare resource and referral \(CCR&R\)](#), [MyChildCareDC](#), the [child care subsidy program](#), [home visiting](#), [Help Me Grow](#), [Strong Start](#), health providers, and over 400 licensed childcare providers. The problem is that these services do not operate as a coherent system. Today, [families struggle](#) to know what programs are available, complete applications and required paperwork, communicate with government agencies, and locate a provider that meets their needs and has an available slot.

The mayor should make family navigation a core function of the District's early childhood system. A family-centered system should make accessing services simple, coordinated, transparent, and equitable - with information reaching families before and as they need it, trusted people available to help them when they do, and technology that makes it easy to find and access available care. At the same time, the mayor should pursue short- and long-term strategies across the full spectrum of early childhood services (as discussed throughout this memo) to improve affordability, increase timely access, and reduce wait times, so families are not simply better connected to services they cannot access.

Navigation is an equity strategy. Families experiencing the greatest barriers often have the greatest need for personalized support. [Current navigation challenges disproportionately affect](#) Black families, immigrant families, families with limited English proficiency, families experiencing homelessness, young parents, and parents with disabilities. A system that assumes families have the time, technology, English proficiency, knowledge, and capacity to navigate multiple government programs and agencies independently will inevitably leave families behind.

Build a Trusted, Community-Based Childcare Navigation System For Families in Every Ward

In FY 2028, the mayor should direct OSSE, in collaboration with sister agencies and community partners, to establish a coordinated, community-based family navigation system that provides families with personalized support to understand their childcare options and available resources; determine their eligibility for the subsidy program; complete applications; connect with available early childhood education and care and health services; and troubleshoot problems along the way. Programs like [Illinois Action for Children](#) and [North Carolina's](#)

[Childcare Navigators](#) provide strong examples of models that provide these services and support for families.

Build on existing infrastructure and trusted community partners

Through a contracted partner, the District should expand on the existing child care resource and referral (CCR&R) ([DC Childcare Connections](#)) infrastructure by partnering with other agencies and trusted community-based organizations, libraries, health providers, childcare programs, schools, faith-based organizations, housing and family-serving programs, and other settings where families already seek assistance. The mayor should establish clear roles and referral pathways across agencies so that families can receive coordinated support regardless of where they enter the system. OSSE should work with families to determine what services, supports, and other features to incorporate beyond the base recommendations outlined here.

Bring family navigators into communities

Family navigators should be available in every ward and located where families already go, rather than the current approach (phone, and one physical location closing October 1, 2026). Instead, trained family navigators should be available in the community and regularly co-locate at libraries, housing and family-serving programs, faith-based organizations, schools, and other community settings to provide one-on-one assistance, presentations, and subsidy application support. Navigators should work closely with neighborhood providers to understand real-time local vacancies so that they can help families find childcare that meets their needs. OSSE should consider developing a [vacancy dashboard](#) and including real-time vacancy data in the revamped [MyChildCareDC](#) (see below) to help navigators do so.

OSSE should proactively promote and market all of these services to families across all eight wards, using trusted community partners and multilingual outreach to ensure families know the services exist and how to access them.

Navigators should be able to:

- Help families understand their childcare options.
- Help families complete and submit subsidy applications, including all required documentation.
- Determine family subsidy eligibility (similar to the way in which Level II providers do so).
- Partner with OSSE to understand where families are in the subsidy application process (via the family subsidy portal described below).

- Partner with licensed childcare providers in the ward to understand real-time vacancies and help families find available slots that meet their needs.
- Connect families to developmental screenings and early intervention services.
- Connect families with home visiting, health, mental health, nutrition, housing, and other economic supports through coordinated referral pathways.
- Help families understand their rights and options when they encounter a problem.
- Escalate unresolved issues to the appropriate government agency.

Explore the family resource center model

To further support families, the District should explore establishing free, welcoming, community-based family resource centers, drawing on existing national models such as [Family Resource Centers](#) and local models such as Montgomery County, Maryland's [Family Involvement Centers](#). These centers provide spaces where parents and young children can learn and play together, connect with other families, and get support from trained parent educators. DC could co-locate centers in existing government and community spaces, including under-enrolled schools, recreation centers, and libraries. These centers can also serve as a bridge to early intervention and other services, particularly for families whose children need additional support but may not qualify for formal services. The mayor should direct OSSE, in coordination with other relevant agencies and community partners, to assess how to establish this model across all eight wards.

Make the Child Care Subsidy Program Simple to Access and Navigate

The District should make the Child Care Subsidy Program as simple, transparent, and accessible as possible, building on recent progress to reduce unnecessary administrative burdens that can delay or prevent eligible families from participating.

Separate from the current childcare subsidy waitlist, [families can face significant barriers to accessing the subsidy program](#), including limited awareness of the program, complex applications, burdensome documentation requirements, unclear communication about application status, and difficulty navigating agency processes. These barriers can be especially challenging for parents experiencing homelessness, single parents, parents with disabilities, and families whose employment does not fit traditional documentation systems, including self-employed people, those who work in the gig economy, those with variable schedules, or those looking for work. [OSSE has taken important steps to improve the process for families](#), but it still needs to do more.

Simplify the application and documentation process

In FY 2028, the mayor should direct OSSE to review the subsidy application and enrollment process from a family's perspective and eliminate requirements that create unnecessary burdens without serving a clear program-integrity purpose. The application should ask only for information needed to determine eligibility, and families should not be required to submit information the District already has or can verify through existing government systems. OSSE should also create a streamlined process for families with nontraditional income, including self-employed, freelance, contract, and gig-economy workers, so they can establish income and eligibility without documentation requirements that do not reflect how they are paid.

Explore presumptive eligibility

As part of this review, OSSE should explore whether [presumptive eligibility](#) could allow families who appear likely to qualify for assistance to begin receiving childcare subsidies while final eligibility verification is completed. Any presumptive eligibility process should include clear standards for which families qualify, the length of the provisional eligibility period, and the documentation needed to complete a final determination. The goal should be to prevent administrative delays from leaving otherwise eligible families without care while preserving appropriate program safeguards and minimizing care disruptions.

Create a transparent, family-friendly subsidy portal

Families should also have a single, easy-to-use online portal where they can see their application status, which documents have been received, what information is still missing, what comes next, and when to expect a decision. Families should receive clear notifications when information or action is required, when an application is delayed, and when a decision has been made. If an application is denied, the family should receive a clear explanation of the reason and information about available next steps. [Maryland's Family Portal](#) provides a useful example for the District to consider. Communications should be available in families' preferred languages and through multiple channels, including text, email, mail, and phone. OSSE should conduct usability testing with parents and caregivers from across all eight wards and across commonly used mobile and computer operating systems before finalizing major technology changes.

Expand Level II provider capacity

The District should also expand Level II provider capacity so more families can receive hands-on assistance with subsidy applications and enrollment from trusted childcare providers. [Families report valuing this kind of in-person, provider-based support](#) because it makes the subsidy process easier to navigate and helps them get the assistance they need. This should include increasing the number and geographic distribution of Level II providers and

ensuring they have the staffing, training, technology, and funding needed to perform eligibility-related work effectively.

Establish a clear process for resolving delayed or stuck cases

Finally, families need a clear process for resolving cases that become delayed or stuck due to missing or incomplete paperwork, verification issues, system or processing errors, and other administrative barriers. OSSE should establish an escalation pathway that allows families and the staff assisting them to identify the problem, reach staff who can resolve it, and elevate unresolved issues when necessary. OSSE should also ensure that complete subsidy applications are processed within the 10-business-day timeframe established in the [DC Child Care Subsidy Program Manual](#), with clear accountability when applications are not processed within that timeframe. Families should not have to repeatedly follow up to receive a timely eligibility determination. The [DC Child Care Subsidy Program Manual](#) should reflect all changes to application, eligibility, enrollment, and case-resolution procedures and be widely communicated to families, providers, and community partners.

Build a Coordinated, Family-Centered Early Intervention System

Families and providers should not have to navigate disconnected systems to get children the early intervention support that they need. The District has many of the components of a strong early intervention system, including [pediatric providers](#), programs such as [Strong Start](#), [Early Stages](#), [Healthy Futures](#), and early educators, behavioral health providers, and other community-based services - [but these entities do not consistently operate as one cohesive system](#). Families have shared that they get lost navigating the processes, and early educators have shared that they are identifying more and more developmental concerns, but lack the resources, specialists, or guidance to support children in their classrooms.

The mayor should prioritize early identification and connection to early intervention services. The goal should be to ensure that when a concern is identified, families know what happens next; children are screened and evaluated quickly; families are connected to appropriate services and supports; and educators have the partnerships they need to support children while they learn and develop. This will require the mayor to use their power to align the agencies and systems that serve young children - including OSSE, DHS, DC Health, Department of Health Care Finance, DBH, DCPS, pediatric providers, early educators, and community-based organizations - around a shared vision and set of outcomes for early intervention.

Strengthen family awareness and evaluate the current system

The administration should work with the revamped CCR&R, SECDCC, OSSE, childcare providers, pediatricians, health insurance plans (including Medicaid and commercial insurers), and community-based organizations to strengthen family awareness of developmental screening and available supports so families know where to turn when they have concerns. This work should include an independent implementation evaluation of the District's early intervention programs to identify what is working, where families and providers encounter barriers, and whether programs are achieving their intended outcomes.

Create a shared referral and communication process

The District should create a shared referral and communication process across pediatricians, early educators, Strong Start, Early Stages, and other providers involved in identifying and serving children with developmental needs. The process should establish clear protocols for referrals, information sharing, communication with families, and communication with a child's educators so families do not have to coordinate disconnected systems on their own.

Establish clear timelines and responsibilities

The District should establish clear timelines and agency responsibilities for requesting developmental screenings, completing evaluations, communicating results to families, and connecting children to appropriate services. Families and providers should understand who is responsible for each step, how long the process should take, and where to turn when delays occur.

Ensure support for children who do not qualify for formal early intervention

Children who do not meet eligibility thresholds for Strong Start, Early Stages, or other formal early intervention services may still need developmental, behavioral health, or other supports. The District should ensure these children can access appropriate services quickly, including by using the Family Resource Centers described above, and provide families with navigation support to help them connect to available resources.

Expand classroom-based consultation and specialist support

The District should expand Healthy Futures and other early childhood behavioral health consultation models that help early educators support children with developmental and behavioral needs in their classrooms. Early educators should have timely access to specialists who can observe children, offer strategies, support families and educators, and help determine whether additional evaluation or services are necessary.

Address shortages in the early intervention workforce

The administration should develop workforce and financing strategies to address shortages of developmental, behavioral health, and other specialists that delay evaluation and services. These strategies should identify where shortages are greatest and ensure sufficient funding, recruitment, retention, and provider capacity to meet the needs of young children and families.

Modernize and Publicize DC's Childcare Information and Matching System

The mayor should direct OSSE to transform [MyChildCareDC](#) into a useful, centralized, family-facing childcare search and find tool, and ensure families actually know it exists, beginning in FY 2028. [Many families do not know about MyChildCareDC](#) as a childcare search tool, and those who do use it have identified outdated information, particularly about vacancies; a slow and unintuitive user experience; difficulty determining whether providers accept childcare subsidies; and no clear pathway from finding a provider to contacting or applying to the program.

A stronger public tool should do more than provide a directory of licensed providers. It should help families identify and connect with providers that have an available slot and meet their needs. Because families will likely continue to find childcare through trusted personal recommendations, community organizations, social media, and other websites, MyChildCareDC should serve as a [trusted public source that families and the people who help them navigate childcare search actually use to verify information and connect with providers](#). Examples of strong government-run search tools include [Mesa County's tool through BridgeCare](#) and [Find Childcare North Carolina](#).

Make search results reflect what families actually need

Families should be able to search for licensed childcare based on the factors that determine whether a program will work for them, including location, ages served, hours of operation, language, cost, subsidy participation, accessibility, accreditation, and current vacancies. MyChildCareDC already includes some of these search features, and OSSE should build on that existing functionality rather than starting from scratch. OSSE should conduct usability testing with parents and caregivers across all eight wards and with families with different childcare needs to ensure the search experience reflects how families actually make decisions. The site should be designed first for mobile use and make key information available in multiple languages.

Make vacancy and provider information reliable and current

MyChildCareDC should distinguish licensed capacity from actual available capacity and clearly show the date of the most recent update. OSSE should establish clear standards for how frequently providers update their vacancy information, hours, contact information, and other key information, while making the update process simple enough for providers to maintain. The District should use convenient update tools, automated reminders, incentives where appropriate, and staff follow-up when provider information becomes outdated. The goal should be to give families enough confidence in the information to know whether contacting a provider is likely to lead to an available placement.

Better integrate subsidy and affordability information into the search process

While MyChildCareDC currently uses a symbol to indicate whether a provider participates in the Child Care Subsidy Program, the site should indicate more clearly whether each provider participates in the child care subsidy program and provide families with relevant information about eligibility and how to apply. MyChildCareDC should also include or link to a simple cost calculator so families can better understand what care may cost and what public assistance may be available. Families should not have to leave the search process to determine whether they may qualify for assistance.

Create a direct pathway from search to connection

Finding a provider should lead directly to the next step. Families should be able to contact providers through MyChildCareDC or access a direct link to the provider's website, application, touring scheduler, enrollment form, or preferred contact process. Search results should clearly show how families can inquire about a vacancy, join a waitlist, or begin enrollment so the site helps families move from identifying potential providers to securing care. OSSE or the CCR&R should have adequate staffing to ensure this information is continuously updated.

Ensure families know about and use MyChildCareDC

OSSE should develop and implement a public communications and marketing strategy so families know MyChildCareDC exists and understand how to use it. Outreach should include partnerships with pediatricians, community-based organizations, neighborhood groups, schools, social media channels, listservs, and other trusted messengers that regularly interact with families of young children. The District should treat awareness and use of the tool as part of its implementation strategy, not assume families will find it on their own.

Make Families Aware of Resources and Supports

Families should not have to know which agency administers a program or search across multiple websites to learn what services are available. The District should create a coordinated communications and navigation strategy that provides families with information about early childhood resources at the ages and milestones when they are most likely to need them:

Create a universal early childhood resource package

The administration should develop a universal early childhood resource package, co-created with families and informed by childcare providers, healthcare providers, and other trusted partners. Introduce information in stages from pregnancy through school entry and tailored to children's ages and developmental milestones. Materials should include childcare options, subsidy eligibility, health and developmental services such as Strong Start, home visiting, nutrition assistance, parenting resources, and other available government and community supports. Materials should be available in multiple languages and designed to complement information families already receive.

Distribute information through trusted community partners

The District should distribute information through places families already use and trust, including birthing hospitals, pediatric practices, childcare programs, schools, libraries, faith-based organizations, and community-based organizations. These partners should have clear, current information about available services and how to connect families to them.

Strengthen and coordinate family navigation

The administration should review and better coordinate the District's existing referral and family-navigation systems, including [Help Me Grow](#). The review should examine referral processes, data systems, and existing points of entry to identify gaps, duplication, and opportunities for better coordination. OSSE, DHS, DC Health, the Department of Health Care Finance, DCPS, and other agencies serving young children should provide families with consistent information and clear pathways to services regardless of where a family first seeks help.

Establish standards for communicating major policy changes

The District should establish a standard process for communicating major policy and program changes that affect families' access to childcare and other early childhood services. The

subsidy waitlist demonstrated the need for clearer communication. In interviews with subsidy providers, many shared that families did not know there was a waitlist for childcare assistance and kept calling and visiting their programs seeking subsidized care without understanding that enrollment was restricted.

For major changes, agencies should clearly explain who is affected, when the change takes effect, what it means for families, and where families can get help. Whenever possible, OSSE should provide information before a change takes effect, make it available in multiple languages, and distribute it through childcare providers, healthcare providers, community-based organizations, schools, and other trusted messengers. Families should not have to learn about a major change only after trying to access a service.

Explore Dedicated Support for Family, Friend, and Neighbor (FFN) Care

[Family, friend, and neighbor \(FFN\) care is a major source of childcare](#), particularly for single parents, working families, families of children with disabilities, immigrant families, and families seeking culturally or linguistically appropriate care, with grandparents among the most common caregivers. [A 2022 Urban Institute study](#) found that nearly 11,000 children under age six in DC have parents working nontraditional hours, a group more likely to prefer in-home care from relatives or friends. FFN caregivers often operate outside the formal childcare system and receive little or no support. Although DC offers some assistance through [OSSE's in-home subsidy option](#) and [CFSA's kinship caregiver support](#), implementation challenges and gaps remain.

The mayor should explore ways to create and improve support for FFN caregivers by establishing a committee or advisory group within the SECDCC focused on FFN care to coordinate agency efforts, identify policy and implementation gaps, and develop recommendations to strengthen FFN care across the District. This committee should include FFN caregivers, conduct analysis, and make recommendations about critical FFN issues, including:

- Strengthening CFSA's kinship care supports for grandparents and close-relative caregivers, including examining [reported delays](#) in initial subsidy payments and identifying opportunities to make financial assistance more timely and predictable.
- Coaching, technical assistance, and professional development specifically designed for FFN caregivers.
- Financial supports for FFN caregivers that account for the benefits cliff and caregivers' cash-flow needs, including evaluating options such as waivers or exemptions and

disbursement practices that are responsive to FFN needs.

- Communications strategies to reach historically underserved caregivers and families and to ensure that they can readily understand and access the option to use the childcare subsidy for FFN care.
- Establishing a reliable estimate of the number of DC children and families who rely on FFN care, including analysis of who provides this care, the circumstances in which families use it, and gaps in access to other childcare options.

###

Appendices

Appendix I: Definitions

1. **Accreditation:** A formal process through which childcare programs demonstrate that they meet industry-established standards for quality and practice
2. **Birth-to-Three for All DC Act:** DC law passed in 2018 that establishes a framework for expanding access to affordable, high-quality early childhood care and education
3. **Capital Quality:** OSSE's system for assessing, measuring, and supporting quality in participating child care programs
4. **Center-Based Child Care:** Childcare provided in a licensed facility outside a caregiver's home that serves more than 12 children
5. **Child Care and Development Fund (CCDF):** Largest federal funding source for childcare - funds are distributed to states, tribes, and territories to help them administer child care assistance programs for working families with low incomes
6. **CCDF Matching Funds / Match Requirement:** Local spending DC must contribute to draw down certain federal Child Care and Development Fund funds
7. **CCDF State Plan:** States, including DC, are required (by the federal government) to submit a detailed state plan every three years that explains how the state will use its CCDF dollars
8. **Child Care Resource and Referral (CCR&R):** Organization or network that acts as a community hub to help families find child care, support childcare providers, and build the supply of quality child care
9. **Child Care Subsidy Program:** DC's program that helps eligible families pay for childcare
10. **Child Development Home (CDH):** Childcare provided in a private residence where the operator lives. Standard child development homes are licensed for up to 6 children, and expanded child development homes are licensed for 6 to 12 children
11. **Cost Model / Cost-of-Care Model:** An analytic model used to estimate the cost of providing childcare based on assumptions about staffing, compensation, enrollment, ratios, facilities, supplies, and other operating expenses
12. **Cost of Care:** The full cost of providing childcare, including educator wages and benefits, rent/mortgage, insurance, utilities, supplies, and other operating expenses
13. **DC Health:** The DC government agency responsible for protecting and promoting the health of District residents
14. **DC Leading Educators toward Advanced Degrees (DC LEAD):** A DC program funded by OSSE that provides scholarships and incentives to eligible early educators to earn associate's degrees and bachelor's degrees

15. **DC Public Schools (DCPS):** DC's traditional public school system
16. **Department of Behavioral Health (DBH):** DC government agency responsible for behavioral health services and supports
17. **Department of Buildings (DOB):** DC government agency responsible for building safety, construction, and related regulatory requirements
18. **Department of Health Care Finance (DHCF):** DC government agency that administers Medicaid and oversees healthcare financing
19. **Department of Human Services (DHS):** DC government agency that administers programs and services supporting economic security and families, including eligibility determination for the Child Care Subsidy Program
20. **Deputy Mayor for Education (DME):** The DC official responsible for coordinating education policy across agencies and sectors on behalf of the mayor.
21. **District Integrated Financial System (DIFS):** DC's government-wide financial management system, including the system used to process payments to childcare providers.
22. **Division of Early Learning Licensing Tool (DELLT):** An online tool created by OSSE to serve as a comprehensive licensing system for all licensed childcare providers, staff, and facility data
23. **Division of Early Learning (DEL):** Division within OSSE responsible for administering and supporting DC's early childhood system
24. **Early Childhood Education (ECE):** The teaching and care of young children - for this memo - from birth to age five
25. **Early Intervention:** Services and supports for young children with developmental, behavioral, or other needs that affect their learning and development
26. **Early Stages:** A free, DCPS program/evaluation center for children aged 2 years 8 months to 5 years 10 months that identifies delays and disabilities that may impact a child's education
27. **Family Navigators:** Dedicated specialists within the CCR&R whose primary role is to help families find, afford, and access high-quality early childhood education, childcare, and essential community services
28. **Family, Friend, and Neighbor (FFN) Care:** Childcare provided by relatives, friends, or other trusted people rather than through a formal, licensed child care program
29. **Federal Poverty Level (FPL):** A federal income measure used to determine eligibility for certain public programs, including DC's child care subsidy program
30. **Fire and Emergency Medical Services Department (FEMS):** DC agency responsible for fire protection and emergency medical services, including requirements that affect child care facilities

31. **Fiscal Year (FY):** The 12-month period from October 1 - September 30 used by DC government for budgeting and financial planning
32. **Grants and Contracts (Access to Quality Childcare):** Formal agreements between government agencies and licensed childcare providers to fund childcare slots for certain families. In DC, the Access to Quality Child Care for Children With Disabilities grant program provides funds to four grantees to create and operate child care slots designed and equipped to meet the needs of infants and toddlers with disabilities at no cost to the enrolled families.
33. **Head Start:** A federally funded program that provides free early childhood education and wraparound services to children from birth to age five from families with low income
34. **HealthCare4ChildCare (HC4CC):** DC program providing free or low-cost health insurance through DC Health Link for early educators and staff at licensed childcare programs that participate in the Pay Equity Fund
35. **Healthy Futures:** A DC program administered by DBH that pairs early childhood mental health consultants with childcare programs across the District that participate in the child care subsidy program
36. **Help Me Grow:** A DC program that connects expecting parents and families to resources they need to encourage positive parental and child health
37. **Home-Based / Family Child Care:** (See Child Development Home)
38. **Level II Provider:** A licensed childcare program that OSSE authorizes to conduct on-site childcare subsidy intake and determine family eligibility directly. There are currently 46 providers operating 100 facilities that are approved Level II intake sites (there are an additional 31 Level II providers, operating 47 facilities, that are authorized to conduct redeterminations for children currently enrolled in the subsidy program)
39. **Maintenance of Effort (MOE):** The minimum level of state or local spending DC must maintain to meet federal Child Care and Development Fund funding requirements.
40. **Memorandum of Understanding (MOU):** A formal agreement between government agencies describing how they will work together
41. **MyChildCareDC:** DC's online system for helping families search for and find childcare
42. **National Association for the Education of Young Children (NAEYC):** A nationwide nonprofit organization that establishes professional standards and offers accreditation for early childhood programs
43. **National Association of Family Child Care (NAFCC):** A nationwide nonprofit organization dedicated to promoting high-quality early childhood education in home-based settings and offers accreditation for home-based childcare providers

44. **Office of the State Superintendent of Education (OSSE):** DC's state education agency - responsible for overseeing federal and local education and early learning programs and related grants, including universal pre-K, the child care subsidy program, and the Pay Equity Fund
45. **OSSE Attendance Tracking System (OATS):** An OSSE online portal used by childcare providers to submit monthly attendance records for the DC Child Care Subsidy Program
46. **Pay Equity Fund (PEF):** The PEF seeks to close the compensation gap between early childhood educators and elementary school educators through payments to child development facilities to increase early educator salaries.
47. **Pre-K Enhancement and Expansion Program (PKEEP):** DC program that provides financial support for pre-K seats for 3- and 4-year-olds at community-based organizations outside of DC Public Schools and DC public charter schools, ensuring more access and options for families across all eight wards
48. **Presumptive Eligibility:** A policy that allows families to receive temporary, immediate financial assistance to pay for child care while their official application is reviewed and verified
49. **Prospective Pay:** A policy in which the local agency sends funds to childcare providers at the start of the billing cycle or month, rather than reimbursing them weeks later after the service is provided
50. **Quality Rating and Improvement System (QRIS):** Measures the quality of licensed childcare programs in areas that are known to make a difference in early learning quality, including the environment, program structure, and teacher-child interactions
51. **Reimbursement Rates:** The monetary value of childcare subsidy vouchers that facilities receive from the state agency after providing services. Rates vary based on the child's age, whether they attend a facility part- or full-time, the type of facility (center or home), and the facility's quality rating.
52. **Shared Service Business Alliance (SSBA):** A free OSSE program that provided administrative and business support to licensed child care providers in DC
53. **Sliding Fee Scale:** An income-based co-payment system where family contributions for subsidized child care rise incrementally as household income increases
54. **State Early Childhood Development Coordinating Council (SECDCC):** A DC advisory body that brings stakeholders together to identify collaboration opportunities, streamline early childhood education services, and reduce duplication across health and education sectors
55. **Subsidy Eligibility and Assignment (SEA):** DC system that supports Level II Providers, DHS, and OSSE staff in subsidy eligibility intake and assignment of children to facilities

- 56. **Strong Start:** OSSE program that provides free early intervention services and supports for eligible children from birth to age 3
- 57. **Universal Pre-K (UPK):** DC offers free universal pre-Kindergarten for all resident children who turn 3 or 4 years old by September 30 of the school year
- 58. **Washington Teachers Union (WTU):** The labor organization and exclusive collective bargaining representative for thousands of active and retired educators and school staff within the District of Columbia Public Schools (DCPS)

Appendix II: Racial Justice Context

The History of Early Education is Fraught for Non-White Americans

When the [first kindergartens were established in the mid-1800s](#), they typically served children ages two to six years old and were largely privately financed by families and charitable donations. Kindergarten did not spread through [public school systems until the 1890s](#), and over the next three decades, a growing number of white children gained access to free early care and education.

For [Native American children](#), federally supported early education was intertwined with the government's broader campaign of forced assimilation. Beginning in the late 19th century, some young Native children attended [kindergartens operated by churches and missionaries](#) on reservations or as part of boarding schools. In these settings, children could be separated from their families at very young ages and were pressured or forced to abandon their languages, cultural practices, and traditional dress in favor of white Christian norms. Children also experienced physical and psychological abuse, and [some died while attending these institutions](#).

At the turn of the 20th century, as white children across the country gained access to free or low-cost early education, nine in ten Black Americans lived in the South, where most communities offered [no kindergarten, public or private, for Black children](#). Black women stepped in to create educational opportunities that public systems failed to provide, often operating free or inexpensive kindergartens without government support. By 1931, nearly 30 percent of white children under age five attended kindergarten, compared with [only 8.2% of Black children](#), despite Black workers powering the country's economy and paying into the tax system that supported early education.

Black women were also leaders in the movement to expand kindergarten and strengthen training opportunities for Black educators. Through organizations including the [National Association of Colored Women](#), Black women raised money, organized and supported day nurseries and kindergartens, and trained educators. They pressed public systems to extend educational opportunities to Black children.

[Anna E. Murray](#), a Black educator and advocate in the late 1800s and early 1900s, played an important role in expanding access to kindergarten for Black children in DC. She helped secure public support for kindergarten and later advanced teacher-training efforts that expanded opportunities for Black women to enter early childhood education.

Racial Inequities in Access to Early Childhood Education

Racial inequities in early childhood education affect both the educators who provide care and the children and families seeking it. [Access to publicly supported early education has never been distributed equally](#). Today, Black and brown families, families with low incomes, immigrant families, families of children with disabilities, and families working nontraditional hours can face barriers to finding care that is affordable and meets their needs. These barriers include the [high price of care](#), [shortages of infant and toddler seats and uneven supply across DC](#), [limited care during nontraditional hours](#), and [difficulty navigating the child care subsidy program](#).

Public childcare assistance has also been shaped by racialized welfare policies that tied child and family supports to paid employment and sought to move low-income mothers, particularly Black mothers targeted by racist narratives about public assistance, into the workforce. This approach has treated early childhood education and care primarily as a work support rather than a public good or benefit to which children are entitled, resulting in limited access to public child care assistance hinged on parents' ability to demonstrate workforce participation or enrollment in an educational program (to presumably usher the parent into the workforce).

When families cannot find affordable and reliable childcare, parents may reduce their work hours, leave employment or education, lose income, or rely on unstable care arrangements. [Under 3 DC estimates that childcare challenges cost DC families approximately \\$252 million in lost earnings each year](#). Families with limited income, savings, paid leave, or workplace flexibility have fewer resources to absorb these consequences, which can reinforce existing racial and economic disparities.

Early Educator Pay is a Racial Justice Issue

Raising pay for early educators is central to undoing the racial harm built into DC's child care system. Teaching and caring for young children is skilled, demanding work, yet early educators are among the lowest-paid workers in the District. As the [DC Fiscal Policy Institute has documented](#), this undervaluing grows out of long-standing racism and sexism.

Those roots reach back to slavery, when [the law compelled](#) enslaved Black women to care for white families' children. After emancipation, domestic work came to be treated as the proper role for Black women, and later for brown and immigrant women. Before and after emancipation, DC's Black Codes pushed Black residents into unpaid or poorly paid labor, and [some Black Codes in the United States](#) required Black people to sign labor contracts or risk jail and being leased out to white landowners. These codes helped [confine Black women largely](#)

[to domestic work](#) and kept Black labor inexpensive. [Schooling steered Black women toward domestic work](#) as well: around 1900, [roughly nine in ten Black women working in DC](#) were domestic workers. The New Deal entrenched the exploitation of Black and brown women's work when Congress left domestic and farm workers out of the Social Security Act and other labor protections. Occupational segregation has persisted ever since, and work done mostly by women, particularly Black and brown women, [still pays less](#) regardless of workers' education, skills, or experience.

How child care is financed also [holds wages down](#). After decades of limited public investment, programs rely heavily on what parents can afford to pay, while the low child-to-teacher ratios young children need keep fixed costs high, leaving little room for better wages. The squeeze is tightest in infant and toddler care, the most expensive care to provide. In DC, early educators are [18 times more likely](#) than elementary and middle school teachers to live in poverty. Nationally, Black and brown educators [are more likely than white educators to work with infants and toddlers](#), so they bear the brunt of these low wages.

Appendix III: Metrics for Measuring Progress

The next administration should use clear, publicly reported metrics to track implementation of the recommendations in this memo and determine whether conditions are improving for families, educators, and childcare providers. The measures in this appendix address the memo's primary goals: making childcare more affordable and accessible, stabilizing and expanding the supply of care, supporting and growing the early childhood workforce, improving government administration, and making services easier for families to find and use.

During its first year, the administration should establish a baseline for each measure, confirm that the required data are available and reliable, and set annual targets aligned with the four-year Childcare for All roadmap. Results should be reported at least annually and disaggregated by race and ethnicity, income, ward, language, disability status, child age, subsidy participation, and care setting wherever the data allow. The administration should use the results to identify disparities, determine where implementation is falling short, and adjust policies, funding, and agency practices accordingly.

These measures are intended to provide a high-level picture of whether the early childhood system is moving toward the outcomes described in this memo. Agencies should continue to track more detailed program-level performance measures needed for day-to-day management and continuous improvement.

Repair and Stabilize the Early Childhood Education System

1. Number of children on the childcare subsidy waitlist, including average and maximum time spent waiting.
2. Number and percentage of currently eligible children enrolled in the Child Care Subsidy Program.
3. Monthly subsidy spending compared with available recurring funding, including whether appropriated funding is sufficient to serve projected enrollment throughout the fiscal year.

Build a Government Capable of Delivering Childcare for All

1. Percentage of Childcare for All commitments supported by recurring funding across the four-year financial plan.
2. Percentage of annual Childcare for All implementation milestones completed on schedule.
3. Amount and percentage of local childcare assistance funding administered through the Childcare for All Fund, once established.

4. Completion of the consolidation of subsidy funding and eligibility administration within OSSE, including key transition milestones.
5. Percentage of subsidy eligibility determinations completed within established processing-time standards, including comparison before and after administrative consolidation.
6. Number and percentage of SECDCC work-plan recommendations receiving a documented agency response and implementation decision.
7. Percentage of SECDCC work-plan milestones completed on schedule.
8. Reduction in the number of systems, duplicate submissions, and staff hours providers need to complete routine business with OSSE.
9. Error rates and unresolved discrepancies in provider, workforce, enrollment, attendance, eligibility, and payment records.
10. Provider and family satisfaction with interactions with early childhood agencies and administrative systems.

Stabilize and Grow the Supply of Childcare

1. Total number of licensed childcare facilities and licensed seats, by provider type, age group, and ward.
2. Number and percentage of licensed providers remaining open year over year, by provider type and ward.
3. Number of provider closures and seats lost, by provider type, age group, and ward.
4. Number of new childcare facilities and seats opened each year, by provider type, age group, and ward.
5. Net annual change in infant and toddler seats, accounting for both new seats and seats lost through closures.
6. Progress toward the annual infant and toddler seat target identified in the Childcare for All roadmap.
7. Number and percentage of new seats created in neighborhoods and wards with the greatest documented supply gaps.
8. Number and percentage of providers participating in the Child Care Subsidy Program, including child development homes.
9. Subsidy reimbursement rates as a percentage of the estimated cost of providing care, by age and setting.
10. Percentage of subsidy payments made prospectively and percentage paid accurately and on time.
11. Number of providers and seats supported through contracts, facilities funding, shared services, or other stabilization and expansion investments, by type of investment.

12. Net annual change in the number and licensed capacity of child development homes and expanded child development homes.
13. Number and percentage of providers and licensed seats offering care during nontraditional hours, care in languages other than English, or care designed to serve children with disabilities or developmental delays.
14. Provider-reported financial stability, including the percentage of providers reporting difficulty meeting payroll, rent, debt, or other core operating expenses.

Support and Expand the Early Childhood Workforce

1. Total number of early educators in DC's licensed childcare workforce and annual workforce growth.
2. Number and rate of vacant educator positions, by role and care setting.
3. Annual educator turnover and retention rates, including one-, three-, and five-year retention where data are available.
4. Early educator minimum and median salaries compared with comparable DCPS teacher salaries, by credential level.
5. Number and percentage of educators and licensed facilities participating in the Pay Equity Fund.
6. Racial and ethnic wage disparities within the early childhood workforce, controlling for role and credential level where possible.
7. Number and percentage of early educators with access to affordable healthcare coverage, including the number and percentage of eligible employees and dependents enrolled in HealthCare4ChildCare and any enrollment restrictions or waitlists.
8. Number and percentage of educators with access to retirement, paid leave, and other employment benefits.
9. Number of educators receiving DC LEAD scholarships or other financial support for required and advanced credentials, and enrolled educators' degree progress.
10. Number of educators completing DC LEAD-supported degrees and credentials.
11. Number and percentage of educators advancing along an established career lattice or into higher-skilled or higher-paid roles.
12. Educator-reported job satisfaction, financial stability, and intent to remain in the early childhood field.

Make Early Childhood Education and Supports Easy for Families to Find and Use

1. Percentage of families with newborns who receive the universal early childhood resource package.

2. Percentage of families who report knowing where to go for help finding childcare, applying for assistance, or accessing early childhood services.
3. Number and percentage of applicants determined eligible who successfully receive childcare assistance.
4. Number of family navigators available citywide and by ward, including navigator caseloads.
5. Number and percentage of families seeking navigation assistance who are successfully connected to the childcare, benefit, or service they need.
6. Average response and resolution time for families seeking navigation assistance, including barriers to resolution.
7. Number and percentage of childcare providers with current and accurate vacancy information available through MyChildCareDC.
8. Percentage of families using MyChildCareDC who are able to identify a provider that meets their stated needs, including location, hours, language, age group, and disability-related needs.
9. Average time and number of steps required to complete a childcare subsidy application, including the number of documents and separate submissions required.
10. Average time from completed subsidy application to eligibility determination and from eligibility determination to enrollment.
11. Percentage of subsidy applications requiring escalation to resolve.
12. Average time from identification of a developmental concern to screening or evaluation and, when appropriate, initiation of services.
13. Percentage of children who are successfully connected to an appropriate service or support following screening or evaluation, including children who do not qualify for formal early intervention and receive a warm handoff to another resource.