

**National Association for the Education of Young Children**

1313 L Street NW, Suite 500, Washington, DC 20005-4101

202-232-8777 800-424-2460

Fax 202-328-1846

[www.naeyc.org](http://www.naeyc.org)

Comments on Child Care and Development Fund (CCDF) Program Notice of Proposed Rulemaking (NPRM)

Office of Child Care  
Administration for Children and Families  
330 C Street SW  
Washington DC 20201  
Attention: Office of Child Care Policy Division

Agency/Docket Number:  
Docket Number: ACF-2015-0011  
RIN: 0970-AC67

The National Association for the Education of Young Children (NAEYC), along with the undersigned Affiliates and members, are grateful for the opportunity to elevate the voices of early childhood professionals in our comments on the proposed regulations to implement the Child Care and Development Block Grant (CCDBG) Act of 2014.

These comments reflect the collective experience and expertise of over 1,500 NAEYC members, including early childhood advocates, educators and directors across all settings and all states, two territories and the District of Columbia, who shared their gratitude, comments and concerns in a survey developed and distributed by NAEYC in January 2016. NAEYC has also signed on to and supports the comprehensive recommendations authored by the National Women's Law Center (NWLC) and the Center for Law and Social Policy (CLASP). We emphasize and reiterate some shared priorities in these comments, but also want to highlight key recommendations with which we strongly agree but do not elaborate upon here, including: commendations for the commitment to a minimum of twelve-month eligibility; comments on the consumer education website and consumer statement; and comments on background checks related both to process and affordability. We appreciate ACF's consideration of these additional comments, which extend our organizational, Affiliate and member focus on elevating and advancing the early childhood profession.

We deeply appreciate this Administration's commitment to ensuring that children have equitable access to high-quality, developmentally-appropriate early learning and to promoting the critical role of early education professionals – two strategic priorities shared by NAEYC. We particularly appreciate the ways in which this NPRM furthers and clarifies the goals of the law, improving the health, safety and quality of child care, while making child care assistance more accessible and stable for families.

We are also very pleased by the increased focus on the most important driver of quality – early childhood educators and the relationships they have with the children in their care – reflected in many elements of the regulations that we strongly support, from graduated phase-out to new requirements for Lead Agencies to describe their policies on suspensions and expulsions. Where we suggest revisions to the proposed rules below, it is in the spirit of achieving our shared priorities.

## PROMOTING INTEGRATED AND ALIGNED TRAINING AND PROFESSIONAL DEVELOPMENT

NAEYC is gratified by and grateful for the inclusion of the six components of a professional development framework that align with those that our organization has identified and supported. We believe it is critical that, over the coming years, each state will be addressing the same six components and, as such, we have only a few recommendations to enhance and strengthen this important section:

- As part of the definition under “Core Knowledge and Competencies,” we recommend that ACF add language explicitly encouraging states to *ensure their core knowledge and competencies are aligned with the national standards of the profession in order to promote cross-state reciprocity and portability.* (Page 80509, column 2, section 98.44 (a)(3))
- As part of the definition under “Career Pathways,” we recommend adding "portable" to the description of a pathway that is “transparent and efficient” so that the relevant sentence reads: “Although we do not propose that States set any particular credential as a licensing qualification or point on the career pathway, the pathway should form a transparent, efficient sequence of stackable, *portable* credentials from entry level that can build to more advanced professional competency recognition.” (Page 80509, column 2, section 98.44 (a)(3))
- As part of the definition under “Articulation,” we believe that the data and description of states as having articulation agreements in place applies to general education, but not to early childhood degree programs in particular. We recommend that ACF ask States and Territories to encourage articulation and transfer agreements between 2- and 4- year higher education degree programs, as well as articulation with other credentials and demonstrated competencies *specifically as it pertains to early childhood education degree programs.* (Page 80509, column 3, section 98.44 (a)(3))

In the introduction to the *Framework and Progression of Professional Development*, we recommend that ACF explicitly include early childhood teacher certification so that the relevant sentence reads “We encourage the participation of the full range of training and professional development providers, including higher education and entities that grant *teacher certification*, certificates and credentials in early childhood education, to align with the framework.” (Page 80508, column 3, section 98.44 (a)(1))

In the *Quality, Diversity, Stability and Retention of the Workforce* section, we strongly support requirements dedicated to improving the diversity of caregivers, teachers and directors, and recommend that ACF explicitly address compensation as a core driver of quality, diversity, stability and retention by changing the language to read “...such requirements improve the retention (*including through higher compensation*) of caregivers, teachers and directors within the child care workforce.” (Page 80510, column 2, section 98.44(a)(7))

### **Keep a 3-month period in place to complete orientation or pre-service training.**

Within the context of the section on pre-service or orientation health and safety training, although some respondents felt strongly that three months was either too short or too long, fully two-thirds of survey respondents agreed that three months is a reasonable time frame for orientation or pre-service training, balancing multiple and occasionally competing needs, including:

- Families, whose access to care must sometimes begin immediately
- Children, who require trained and qualified staff

- Providers, who often confront barriers to accessing training, particularly family child care providers and those who live in rural areas; and
- Directors, who must balance the costs of training and investments in staff with the costs of frequent staff turnover. (Page 80510, column 3, Section 98.41(a)(1))

**Clarify or remove the reference to a “demonstration of competence.”**

Finally, we recommend that ACF either remove the phrase "demonstration of competence" or provide additional guidance around what that means in relation to using certificates and credentials to fulfill these training requirements. As it stands, we believe it could create confusion regarding whether the attainment of a certificate or degree is in and of itself demonstrating competence, or whether something additional is required. (Page 80510, column 3, Section 98.41(a)(1))

**ADVANCING THE EARLY CHILDHOOD EDUCATION PROFESSION**

**Explicitly name “increasing compensation and benefits” instead of or in addition to “financial incentives,” particularly within the framework for training and professional development and the list of allowable uses of quality funds.**

Predicated upon the research-based connection between quality and compensation, ACF should be explicitly and abundantly clear about states’ ability to use quality dollars to directly support increased compensation for early childhood educators. (Sections 98.44(a) and 98.53(a)(1)(vii) and (vi))

**Include proposed benchmarks for provider payment practices.**

Survey respondents were strongly in favor of the proposed changes to provider payment practices, which enhance stability and make it easier for high-quality providers to accept subsidy and remain part of the system caring for children from low-income families. Reimbursements based on child attendance rather than enrollment, in particular, have long presented a challenge and disincentive to child care providers. These regulations provide clear solutions and examples for delinking provider payment rates from child absences, and allowing states to exercise additional flexibility to support providers and continuity of care, especially in cases where children have long-term or chronic medical conditions that require them to miss additional days over and above the 85%. (Page 80516, column 2, Section 98.45 (m))

**Include family child care providers in the definition of teacher and director**

Because NAEYC believes it is critical for children to have access to high-quality education and care across all settings and sectors, we support revisions to the definition of teacher and director that explicitly include family child care providers. (Section 98.2)

**SUPPORTING AND INCREASING EQUITABLE ACCESS TO QUALITY CHILD CARE**

**Use and integrate existing research-based, nationally-recognized accreditation as a way to support and increase the availability of higher-quality care**

Because consumer demand can serve as a significant driver of quality in any system, we appreciate states’ efforts to promote policies that support and incentivize parents in choosing providers that offer

higher-quality care. We believe accreditation plays an important role in setting a clear marker for parents and providers regarding what a high standard of quality looks like, while NAEYC accreditation in particular serves as a tested system that supports continuous quality improvement and offers important implications for an expanded monitoring and inspection system informed by lessons learned over the course of thirty years of implementation. For these reasons, we encourage ACF to incorporate research-based, nationally-recognized accreditation into the following provisions:

- Parent choice provisions related to allowances for Lead Agencies to require providers of child care services to meet higher standards – in other words, “As long as provisions at paragraph (f) of this section are met, parental choice provisions shall not be construed as prohibiting a Lead Agency from establishing policies that require providers of child care services for which assistance is provided under this part to meet higher standards of quality, such as those identified in a quality improvement system; *a research-based, nationally-recognized accreditation*; or other transparent system of quality indicators.” (Page 80490, column 2, Section 98.30 (g))
- Consumer education website provisions related to posted information should require that states post information about the “quality of a provider as determined by the Lead Agency through a quality rating and improvement system; *a research-based, nationally-recognized accreditation*; or other transparent system of quality indicators, to collect the quality of information” (Page 8093, column 1, Section 98.33 (a)(2)(ii))
- Allowable use provisions related to quality set-aside dollars, where states should be allowed and encouraged to use existing standards as markers of quality such that they can: (b) Build on licensing standards and other regulatory standards for such providers. We encourage Lead Agencies to incorporate their licensing standards and other regulatory standards as the first level or tier in their QRIS and to *incorporate research-based, national accreditation in one or more of the higher tiers*. Making licensing the first tier facilitates incorporating all licensed providers into the QRIS and *embedding accreditation supports a continuous quality improvement process and facilitates incorporating more and higher-quality providers into the QRIS.*” (Page 80520, column 2, Section 98.53(a)(3)(b))
- In order to assess the comparability of child care quality accessed by families receiving CCDF and that available to families above 85 percent of SMI, we recommend that ACF include access to accredited providers for each group as a required data point for states. (Page 80514, column 2, Section 98.45(f)(2)(iii))

**Do not prohibit providers from charging families fees above co-pays.**

Early childhood educators who accept subsidy would prefer that the cost of quality care be funded by sufficient reimbursement rates paid by the state, and not by additional fees paid by families. Yet there are too many providers, in too many states, for whom this is simply not the case. We asked about the implications of a blanket prohibition and found that while people recognized that families might indeed be able to afford more high-quality care, such increased affordability would come at the high cost of accessibility. Of respondents who live in a state that allows this practice, 67% reported that if a prohibition were to exist, they think providers in their state would have to stop accepting subsidies; compromise the quality of their care; or close. While it is possible that a prohibition on family fees would put pressure on states to raise rates, there are already other pressure points focused on achieving that goal – and yet there is still no guarantee that states will be able to do so. Meanwhile, we

do know that putting this prohibition into place would be a major disincentive for high-quality providers to participate in the subsidy system. Given that a significant goal of the law and these regulations is to make high-quality child care more accessible and stable for families, the risk and repercussions of this prohibition are too great.

Further, changes that would be required in order to make this prohibition palatable are not, in fact, only a matter of time. A phase-in period of any set length would not necessarily be sufficient to allow for the kind of rate increase that would offset the need for additional family fees in states where this practice is part of the system. Assuming that we all share the ultimate goal of not charging families additional fees, the decisions about when and under what conditions such a prohibition could be put into place should be left to each state to determine with input and advice from both families and providers. (Page 80515, column 3, Section 98.45(1))

**Support, encourage and convene states to find solutions that would allow all licensed providers to be included in the monitoring system.**

NAEYC believes that all licensed providers should be part of a monitoring system. We share ACF's concerns that a bifurcated monitoring and inspection system in which only some providers participate fundamentally interferes with the law's goals of creating a subsidy system in which children and families have equal access to safe, quality child care. ACF identifies the problem of having families restricted from accessing a portion of providers – and this portion is likely to include those who provide the highest-quality care and are most in demand from private pay families.

Educators who provide high-quality care need to participate in the subsidy system so that this care can be made available and accessible to children from low-income families, who are typically the least likely to receive it and the most likely to benefit from it. Yet not requiring all licensed providers to be regularly inspected creates a disincentive for these high-quality providers to participate in the subsidy system, since they can often sustain themselves with private pay families and avoid the additional burden and accountability that comes with being part of a monitoring system. It is important to remove the barriers preventing providers from participating in the subsidy system; requiring all licensed providers to be monitored begins to level the playing field, promotes children's safety and supports low-income families' opportunity to choose quality care.

A full 90% of respondents to our survey believe, strongly, and for a variety of important reasons, that all licensed providers should be required to undergo inspections. Yet we are extremely concerned about the cost implications of this inclusive requirement, particularly the potential impact on the usage of quality set-aside dollars and the value of utilizing limited CCDBG dollars to accomplish the worthwhile goal of universal monitoring. We do not want to create a system that is set up to undermine the very goals it is attempting to achieve, and therefore, we are recommending that ACF encourage States to devote additional state funding to cover additional costs of any monitoring requirement; that ACF work with States to limit the amount of quality set-aside funds used for monitoring; and further, that ACF convene a group of states to find solutions that would allow universal monitoring to become a funded reality, including leveraging other monitoring systems (such as Head Start, CACFP, state-funded PreK and QRIS), and identifying additional investments alongside innovative monitoring and inspection strategies that rely on differential monitoring, technology, and other opportunities. (Page 80501, column 3, preamble)

## **ENSURING CHILDREN ARE SAFE, HAPPY, HEALTHY AND LEARNING**

**Do not provide Lead Agencies with the option to end assistance after the second year following redetermination within the category of graduated phase out.**

Eighty-four percent of respondents prioritized the importance of continuity of care and its positive effects on children, families and providers in their recommendation to require states to allow a child to retain eligibility until the family's income exceeds 85% of SMI, as long as they otherwise retain eligibility. A cliff effect that cuts low-income families off from support as their income rises forces those families into making rational economic decisions that instead keep their wages low; requiring only one additional year of graduated phase-out would simply delay this effect, where eliminating it is and should be the goal. As part of this income-based graduated phase-out period, we also support the proposal to allow Lead Agencies to gradually and proportionally increase family co-payments after the initial 12-month period. (Page 80486, column 3, Section 98.21(b)(1))

**Require unannounced inspections in response to complaints about health and safety and apply this requirement to all providers.**

When a parent (or provider) reports a concern about an issue affecting a child's health or safety, he or she should be able to trust that an actionable follow-up system exists, because if it does not, then the opportunity to register a concern or complaint is rendered essentially meaningless. For that reason, we recommend that ACF require unannounced inspections in response to complaints about health and safety, and, in order to safeguard children's health and well-being to the extent possible, that this requirement include all providers, regardless of their status within the subsidy system. (Page 80502, column 1, Section 98.32)

**Explicitly support cultural and linguistic diversity and competency in the monitoring and inspection system.**

We encourage ACF to add a phrase "encourage lead agencies to consider the cultural and linguistic diversity of caregivers *in the recruitment and retention of inspectors, as well as* when addressing inspector competencies and training." (Page 80503, column 1, Section 98.42 (b)(1))

**Require all adults over the age of 18 in a family child care home to be subject to background check requirements.**

When background check requirements for family child care providers collide with the systemic racial disparities embedded within the criminal justice system, the results could impact the availability of licensed, high-quality, culturally-responsive care in communities of color. This is of grave concern, and ensuring a robust waiver and appeals process that includes individualized assessments is critical. However, NAEYC, backed by 75% of respondents, recommends that ACF require all adults over the age of 18 in a family child care provider home to be subject to the same background check requirements and disqualifying crimes as the primary provider. Given the law's specificity around disqualifying crimes, we also encourage ACF to limit states' ability to impose additional disqualifying crimes. (Page 80504, column 2, Section 98.43(a)(2)(ii))

Thank you again for your commitment to children, families and educators, and for the opportunity to offer comments on these thoughtfully constructed and proposed regulations.

National Association for the Education of Young Children (NAEYC)

**Members and Affiliates:**

Katherine Abba, TX	Donna Brady-Lawler, CO	Paula Clark, TX
Deborah Abelman, MA	Tracy Breimo, AK	Jill Claxton, MI
Mary Airy, IA	Barbara Brewer, NY	James Clay, DC
Alaska AEYC, AK	Joyce Bridges, TN	Lisbeth Clinton, MI
Teresa Albohn, CO	Bertha Brooks, TX	Patrick Clow, CT
Rhian Allvin, VA	Donna Brown, MO	Janet Cockbill, TX
Mary Anderson, WI	Doritha Brown, NJ	Donna Cohn, AZ
Sheila Anderson, UT	Gail Brown, MA	Michelle Cole, IA
Karen Anthony, MI	Jane Brown, NY	Laura Conley, TX
Deborah Arcaro, ME	Patricia Browning, MI	Cathy Cook, VA
Arizona AEYC, AZ	Eric Bucher, AZ	Andie Costas, IA
Jane Arold, NY	Annie Burden, OH	Andrea Cox, CT
Berna Artis, DC	Sharon Burdick, CT	Marcia Cox, IL
Anne Atkinson, DE	Kathy Burke, NJ	Catherine Craddock, MA
Emily Bacon, GA	Melissa Burnham, NV	Diane Craft, NY
Adria Bader, VA	MaryBeth Bush, OH	Anne Cude, TX
Eileen Badolato, PA	Cabarrus, Rowan, Stanly (CRS) AEYC, NC	Jacquelyn Curington, IL
Marty Baker, MO	Toni Cacace-Beshears, VA	Alice Daikh, OR
Joni Baldwin, OH	Leah Caldwell, IL	Anita Dailey, GA
Jan Barbieri, NY	Tami Callister, NY	Dallas AEYC, TX
Carol Barbierri, VT	Dawn Campbell, TN	Tammy Dant, IN
Dianne Bardsley, MA	Karen Campbell-Sawyer, ME	Beth Davis, MI
Janna Barnhart, TX	Susan Cannon, OH	Sara Davis, AR
Nancy Beaver, TX	Patricia Cantor, NH	Mary Ann Demaree, NM
Lynn Bell, IL	Tammie Cartwright, CO	Renee DeMars-Johnson, MI
Wendy Bell, MI	Heather Case, VT	Mary Derricks, TN
Lisa Belliston, GA	Christiane Casserly, NH	Tabitha Desplaines, MA
SueEllen Bennett, FL	Stephanie Catlett, NC	lourdes Diaz, FL
Binghamton AEYC, NY	Central Michigan AEYC	Yvonne Drakes, CA
Jamie Bitton, UT	Chooi Chan, MD	Karen Drolet, RI
Pamela Blankenship, VA	Fran Chasen, CA	Christyn Dundorf, WA
Carmela Bosko, CA	Chataqua County AEYC, NY	Chad Dunkley, MN
Marquette Bowman, OH	Julia Childs, CA	Sharon Dunlevy, IN
Bruce Boyden, CA	Jason Clark, AZ	Anthony Durborow, MD

Stephanie Eddleman, IN  
Kerry Eldred, FL  
Patricia Diana Embrey, AR  
Susan Enamorado, IN  
Arlene Ennis, MD  
Abigail Enz-Doerschner, PA  
Patricia Eshleman, CA  
Consuelo Espinosa , CA  
Ann Esposito, NY  
Ida Estrada, NJ  
Faith Fabian, OH  
Fairfield AEYC, NY  
Linda Feller, MA  
Terri Fernandez, FL  
Jodi Fishman, MD  
Kristi Fiske, ME  
Shannon Fitch, MN  
Karen Flanders, KS  
Caroline Flores, AK  
Ida Rose Florez, CA  
Cheryl Foster, AZ  
Stephanie Frantz, IA  
Joan Freeman, VA  
Setsuko Furuike, CA  
Janet Gagliano, NM  
Valerie Gallacci, WA  
Kathleen Gallagher, NC  
Becky Garske, MI  
Yvonne Gelbman, CA  
Eric Gidseg, NY  
Gold Country AEYC, CA  
Earlene Gonzales, TX  
Gloria Gonzales, TX  
Cathy Grace, MS  
Carole Grates, MI  
Carolyn Graves, MI  
Debra Green, PA  
Chris Greenawalt, OH

Cathy B Griffin, NJ  
Joy Griffith, SC  
Connie Griffore, MI  
Ann Gruenberg, CT  
Joanna Grymes, AR  
Pam Hagberg, MA  
Hawaii AEYC, HI  
Evelyn Hale, TN  
Patricia Hall, CA  
Phyllis Hammonds, AR  
Stanley Harris, CA  
Suellen Hasper, CA  
Stacey Haust, NY  
Ronda Hawkins, NC  
Suzette Hechst, MO  
Teri Henke, UT  
Deborah Hoglund, NC  
Shari Hollander, NJ  
Luz Horta, NJ  
Elizabeth Hostetler, IN  
Shirley Hough, PA  
Deborah Hourcade, CA  
Elisa Huss-Hage, OH  
Iowa AEYC, IA  
Zeynep Isik-Ercan, NJ  
Gera Jacobs, SD  
Mary Jamsa, AZ  
Susan Jindrich, IN  
Alice Johnson, TX  
Lee Johnson III, AL  
DeAnn Jones, MT  
Margaret Jones, SC  
Victoria Jones, MS  
Linda Kaercher, CA  
Bilkis Karim, FL  
Diane Karther, OH  
Carol Kautz, IL  
Karri Kerns, MN

Rosemary Kesse, IL  
Marie Kielty, IL  
Amanda King, IL  
Holly King, AZ  
Lydia Kramer, CA  
Kelly Kreider, MI  
Sue Krishna, CA  
LeAnn Kruckenberg, KS  
Joan Kuehn, MT  
Darlene Kurtz, AR  
Silvia La Villa, FL  
Carol LaLiberte, MA  
Laren Lang, IL  
Karen Larson, AK  
Jan Lawrence, WY  
Sandra Lawson, TN  
Libby Leibowitz, NJ  
Jim Lesko, DE  
ReBecca Lewis-Clifton, WI  
Wei Li-Chen, CA  
Karen Lin, ME  
Jill Lindeman, CA  
Lisa Lockwood, NJ  
Annette Lopez de Mendez, PR  
Robyn Lopez Melton, OR  
Chuck Loudin, WV  
Jeanne Loysen, NY  
Pam Mahoney, IA  
Barbara Malaspina, CA  
Daisy Mante, CA  
Jane Marquis, NH  
Heather Marshall, TN  
Patricia Martin, NY  
Veronica Martin-catey, MD  
Tanya Mayhew, FL  
Felicia Mcbratney, SC  
Jerletha McDonald, TX  
Rhonda McDowall, OR



Jeanne McGuire, MN  
Patricia McIlveen, OR  
Patricia J McIlveen, OR  
Tricia McKay, MI  
Jayna Mcqueen, TX  
Tavia Mead, MA  
Leigh Ann Meinecke, OH  
Judy Metzger, NY  
Sarah Meytin, DC  
Michigan AEYC, MI  
Beth Mindes, NY  
Minnesota AEYC, MN  
Donna Minster, NJ  
Christine Mirov, CA  
Missouri AEYC, MO  
Christina Moore, CA  
Joseph Moye, CA  
Patricia Mucci Tayco, VA  
Beth Mulkin, NY  
Fleeta Mulvey, CA  
Sheril Napier, NY  
Nassau County AEYC, NY  
Connie Nelson, MT  
Jessica Nettles, VA  
Nevada AEYC, NV  
Sandra Nevius, NY  
New Hampshire AEYC, NH  
New Mexico AEYC  
(NMAEYC), NM  
Kristina Nielsen, ME  
Dr. Ruena Noveno, DC  
Ohio AEYC, OH  
Marji O'Leary, IL  
Karen Oliver, NJ  
Olufunnke Olugboji , MD  
Oregon AEYC, OR  
Lynette Pannell, SC  
Annie Parrish, NC  
Emilie Pechuzal, AZ

Christine Pedersen, CA  
Karla Pedue, IN  
Pennsylvania AEYC  
(PennAEYC), PA  
Cheryl Perlberg Horn, MD  
Misty Perry-Pifer, OH  
Fahemeh Pirzadeh , VA  
Benjamin Planton, IN  
Annette Porter, VA  
Laurie Potts , OR  
Pamela Prevost, ME  
Puerto Rico AEYC, PR  
Monica Pujol-Nassif, FL  
Maria Ramos, TX  
Elizabeth Reed, VT  
Sandra Rego, MA  
John Rich, NJ  
Julia Richardson, MD  
Katherine Rickin, OH  
Hannah Riddle, MN  
Shirley Ritter, CO  
Flora Rivera, NJ  
RP Rivera, NY  
Rachel Robertson, CA  
Edward Rodriguez, NY  
Patricia Roiger, NY  
Gail Rose, NY  
Rachel Rose, CA  
Tina Rose-Turrioglio, NY  
Dawn Rouse, WI  
Sierra Roussos, IN  
Emily Rupchock, IN  
Rutherford AEYC, TN  
Joy Rutkowski, MI  
Mary Ryan, CA  
Tricia Ryan, MI  
Jazmine Salem, NY  
San Antonio AEYC, TX  
Linda Sands, OK

Clare Sanford, MN  
Crystal Sanford-Brown, MI  
Debbie Schierbeck, MN  
Beth Schilling, WA  
Joanne Schoen, MN  
Claire Schonaerts, AZ  
Angela Schrodtt, IA  
Theresia Schulz, FL  
Lois Scott, IL  
Erin Semple, IL  
Louise Sentes, HI  
Leah Shapiro, IL  
Denise Shelton, MD  
Norma Shelton, AK  
Sandy Show, FL  
Catherine Shultz, SD  
Jennifer Sikes, MO  
Marybeth Simoneit, NY  
Jodi Sims, IN  
James Sinnamon, MI  
Nancy Siracusa, NJ  
Stacey Skversky , PA  
Jamie Sloth, MN  
Pat Smart, IL  
Amy Smith, NC  
Angela Smith, WI  
Linda L Smith, UT  
Yvonne Smith, PA  
Christina Smith Klahn, WA  
South Carolina AEYC, SC  
Southeastern AEYC, VA  
Southern California AEYC  
(SCAEYC), SC  
Joan Spoerl, OH  
Charlotte Stewart, CO  
Jill Stribling, CA  
Sharon Stuhldreher, IN  
Toni Sturdivant, TX  
John Surr, MD

Kim Swaffield, IN  
Lashay Swain, FL  
Kathryn Sweeny, OH  
Sherry Sweet, VA  
Carole Tadavich, IL  
Christina Taharally, NY  
Penni Taketa, HI  
Elizabeth Taylor, AZ  
Linda R. Taylor, IN  
Jill Telford, DC  
Barb Tengesdal, WI  
Lisa Thompson, MO  
Kimberly Tice, OH  
Lucy Torrech, PR  
Lisa Trautwein, CO  
Jpyce Trigger, TX

Dawn Try, PA  
Patricia Tubin, NY  
Lisa Uyehara, HI  
Donna Veater, PA  
Chona Veluz, NJ  
Christie Verarde, CA  
Indira Vilathgamuwa, CA  
Mary Von Doeren, CA  
Lora Walton, OK  
Dan Ward, MI  
Lesley Washington, CA  
Kimberly Watkins, NJ  
Patrick Webster, PA  
Susan Weir, PA  
Rebecca West, MO  
Carrie Whaley, TN

Lisa White, GA  
Sandra White, TX  
Laura Wilhelm, OK  
Barbara Willer, VA  
Dorothy Willis, PA  
Allison Wingerson, NC  
Wisconsin Early Childhood  
Association, WI  
Joanne Wisniewski, PA  
Justine Wong, CA  
Susan Wrobel, WI  
Barbara Yates, MN  
Grace Yee, CA  
Laura Ynclan, MI  
Yuma County AEYC, AZ  
Claudia Zatorski, CT