

DOCUMENT RESUME

ED 303 251

PS 017 754

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 TITLE Care and Resources for Employees and Their Dependents.
 INSTITUTION Boys and Girls Club of Escondido, CA.
 SPONS AGENCY Administration for Children, Youth, and Families (DHHS), Washington, D.C.
 PUB DATE 88
 NOTE 56p.
 AVAILABLE FROM Boys and Girls Club of Escondido, 115 West Woodward Avenue, Escondido, CA 92025 (\$19.95).
 PUB TYPE Reports - Descriptive (141)

EDRS PRICE MF01/PC03 Plus Postage.
 DESCRIPTORS *Child Caregivers; Children; Demonstration Programs; Disabilities; *Employer Supported Day Care; *Family Day Care; Fringe Benefits; *Linking Agents; *Marketing; Older Adults; Program Descriptions; *Public Relations; Recruitment; Social Networks; Surveys
 IDENTIFIERS *CARE Boosters Network

ABSTRACT

Through the professional expertise of the Boys and Girls Club of Escondido, California, CARE Boosters, a 3-year demonstration project, developed an employer-sponsored dependent day care system that provided small group care in home settings for children and the developmentally disabled. By linking family day care providers and other caregivers in the community with local businesses, the project demonstrated the feasibility of providing dependent care as a fringe benefit for employees. This document begins with an introduction that focuses on the background to the program, and the topics of employers as sponsors and CARE Boosters as a model. Issues discussed in the body of the work include: (1) the family day care provider's role in terms of licensing regulations, record keeping, taxes, insurance, quality resources, and food programs; (2) aspects of the CARE Boosters Network, including recruitment of CARE Boosters family day care providers, orientation, agreement between family day care home and CARE Boosters and between provider and parent, and resources for care of the elderly and the developmentally disabled; (3) public relations; and (4) promotional tools, surveys and other ways of marketing CARE Boosters to employers. Related materials, such as an employee survey, are included. (RH)

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75

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CARE AND RESOURCES FOR EMPLOYEES & THEIR DEPENDENTS

PS 017754



A national demonstration project promoting employer sponsored dependent care.

**CARE
AND RESOURCES
FOR EMPLOYEES &
THEIR DEPENDENTS**

MARY DELANEY and GLORIA KOMORI

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"Most of the tenants expressed enthusiasm that we're doing this. There are really no resources to direct you to child care in this area—it's really filling a void."

—Frank J. Daly, Center Manager
North County Fair

"The program appears to be suited to meeting the needs of the community and was well matched with our child care objectives. The survey portion is comprehensive and well written and we were impressed by the affiliation with Portland State University which ensures professional treatment of the data."

—Karen Foster, Records and Benefits
Manager
Hewlett Packard
Chairperson, Child Care Task Force

"The concept of CARE Boosters is such an important issue today with so many mothers in the work force. Banks typically have a high concentration of female workers and our bank is no different."

—Cathy Hughes
Vice President and Cashier
Escondido National Bank

"... The survey you did helped us pinpoint specific areas of concern to our employees. In addition, the list of resources you provide gives our employees options in finding reliable, quality, affordable day care. For those employees who have taken advantage of the service; they are pleased with the results and that's good news for us as their employer."

—Julie DeMeules, Vice President,
Human Resources
Signet Armorlite, Inc.

"My concern when looking for day care for my baby was finding a quality, safe environment. CARE Boosters provided me with the expertise and networking system which ensured that quality. They gave me a sense of comfort and security that I had made the right choice."

—Gail Davis
Bestronics of San Diego, Inc

"CARE Boosters provided advocacy and support by increasing the visibility of family day care and increased community awareness about providers as professionals. I feel CARE boosters was able to reach out to the community and really let them understand what family day care is."

—Marti Tucker
FDC Provider/Board Member FDC
Association

"The CARE Boosters project has been a great boost to community networking between family daycare providers, nonprofit social service agencies, the local school district, city officials and business people. This concept has proven to be a cost effective way to assure collaboration of efforts toward the common goal of more quality, affordable child care in Escondido."

—Karen Reed, Director
Escondido Child Care Development
Center

ACKNOWLEDGEMENTS

CARE Boosters was supported by a grant from the Administration for Children, Youth and Families, Office of Human Development Services. Our thanks to Project Officer, Patricia Divine-Hawkins. Additional support came from Art Emlen, Ph.D. and Paul Koren, Ph.D. of Portland State University, Regional Research Institute for Human Services. Special acknowledgement to Jane R. Goldschmidt, creative force and project director from November, 1985 through March, 1987.

Most of all, we wish to thank the many officers and staff of the companies who participated in the project through utilizing the CARE Boosters survey and/or the CARE Boosters Network. We are indebted to the Valley Providers of the San Diego Family Day Care Association for their contribution and to the CARE Boosters Advisory Council members: Chuck McGill, Flo Lindsey, Tom Applegate, Marvin Gilbert, Jane Paradowski, Vicki Ferraro, Timi Gleason, Paula Leard, Karen Reed and Janie Phillips who provided us with invaluable support. Thanks also to Bob Mattus for preparation of graphics for this publication.

Finally, a special thank you to the Boys and Girls Club of Escondido for support and management under the supervision of Danny Sherlock, Executive Director.

CONTENTS

ACKNOWLEDGEMENTS	VII
INTRODUCTION	1
Background	1
Employers as Sponsors	2
CARE Boosters as a Model	4
FAMILY DAY CARE	5
The Providers Role	8
Licensing Regulations	8
Record Keeping	8
Taxes	9
Deductible Expenses	10
Insurance	10
Quality Resources	11
Food Program	11
A CARING LINK: THE CARE BOOSTERS NETWORK	12
Family Day Care System	12
Recruitment of CARE Boosters Family Day Care System	12
Selection Process used for CARE Boosters Network	13
Orientation	13
Agreement Between Family Day Care Home and CARE Boosters	14
Agreement Between Provider and Parent	15
Elder Care Resources	15
Developmentally Disabled Resources	16
GIVING DEPENDENT CARE A BOOST THROUGH A PUBLIC RELATIONS PLAN	17
Networking	17
Presentations	18
Chamber of Commerce	18
MARKETING CARE BOOSTERS TO EMPLOYERS	19
Promotional Tools	21
Surveying	22
Recommendations	23
Servicing	26
The CARE Boosters/Employer Agreement	27
Liability	27
The CARE Boosters/Employee Agreement	28

CARE BOOSTERS SURVEY RESULTS.....	29
CONCLUSION.....	37
APPENDIX A— Fact Sheet.....	39
APPENDIX B — Survey.....	40
APPENDIX C — Parent Dependent Care Resource Manual-Sample Page .	44
RESOURCES.....	45

INTRODUCTION

Background

Since World War II the need by working parents for child care has steadily increased. In 1940 only 6.6% of mothers with children under the age of 18 were working.¹ Today, however, 60% of mothers with minor children are working, and this trend is expected to continue into the 1990's.² It is expected that by 1990 eighty percent of all working women will also be raising babies sometime during their work life.³

Several factors have contributed to this situation, including the increase of divorces leading to single parent families, the rising cost of living, leading to a necessity for both parents to work, and the changing work and lifestyles. The number of child care services for working parents is not keeping up with the need. There are more than 13 million children under 13 years of age whose parents work full-time. Yet there are less than one million slots available in licensed child care centers and family day care homes.⁴

Government agencies directly or indirectly have provided some support, but since 1980, funding for child care for low-income families and food subsidies for child care centers have decreased. The greatest amount of federal support is through the tax credit for child care expenses. Since 1982, the allowable tax credit has increased. Balancing work and family life has become increasingly difficult. Child care in the United States is in a crisis today. The majority of available child care is unlicensed. The greatest need, for infant and toddler care, is also the hardest to find. Little has been done, so far, to help working parents find quality care for their children.

To compound the situation of more women in the workforce, leaving less women to care for dependents at home, is the growing number of the elder population. Since 1900 the portion of the nation's population age 65 or older has tripled to 12% of the total, and more than half of those over 75 suffer from some kind of disability.⁵ As a result, it is predicted that elder care will soon match child care in importance as an employee concern.

People of all ages are raising kids, including workers in their 50's who are in second families. This presents a growing segment of the population who have been coined as the "sandwiched generation." Those workers in their 30's and 40's who are faced with balancing work and families consisting of children and elders are sandwiched between the demands of dependent children and dependent parents.

Employers as Sponsors

The benefit to employers providing day care as a fringe benefit to their employees has been substantiated by many studies which propound the effects to be: increased morale and productivity, reduced absenteeism and tardiness and an invaluable tool in retaining and recruiting their workforce. These effects on companies have been coined as "soft dollar benefits". However, if these "soft dollar benefits" affect employees' productivity then the result is "hard dollar benefits" and that has an affect on the company's **bottom line**.

Public image is one soft dollar benefit that has actually been valued in hard dollar terms. In a 1982 survey conducted by the National Employer Supported Child Care Project, the following results were reported from a survey of 415 industries, labor unions, public agencies, and health care providers throughout America.

85% reported positive effect. 39% reported child care as more effective than three quarters of other public image enhancement methods used. Nine companies estimated the value in terms of publicity child care received: \$13,000 was estimated average annual value per company. Different studies showed features in Industry Week, Business Week, U.S. News and World Report, Wall Street Journal, Washington Post, and segments on radio and television, due to child care programs helped shape a company's image as being innovative and concerned with human issues.

A "hard dollar" benefit which is easily identified is the tax benefit that companies who provide dependent care as a benefit can receive, both on the federal and state level.

The entire cost of subsidies to parents or providers, annual costs of operating a child care center, and costs of operating or contracting for information and referral services are generally deductible business expenses in the year they are incurred.

Employers who make gifts to qualified tax-exempt organizations, as long as there is no preferred admission status or reduced fee for employees' children, can deduct them as charitable contributions.

Employers considering implementing a dependent care benefit or service should be aware of provisions of the Dependent Care Assistance Programs (DCAP) which establishes the mechanism through which an employer can offer dependent care as a tax-free benefit to employees. Under DCAP, the employer may actually provide child care, may contract with third parties for services for its employees, or may reimburse employees for dependent (child or elder) care expenses. Employers should consult their own tax attorneys with respect to involvement in any Dependent Care Assistance Program.⁶

- 1 Women's Bureau, Department of Labor, Working Mothers and Their Children, 1977.
- 2 U.S. Department of Labor, Bureau of Labor Statistics.
- 3 Friedman, Dana, Community Solutions for Childcare, Washington, D.C.: U.S. Department of Labor, Women's Bureau, 1979.
- 4 U.S. Department of Labor, Bureau of Labor Statistics.
- 5 Los Angeles Times, May 15, 1988.
- 6 Report compiled by the Mt. Diablo Community Child Advocate in Concord, CA.

CARE Boosters as a Model

CARE Boosters—Care And Resources for Employees and their Dependents was a three year demonstration project, funded by the Administration for Children, Youth, and Families, United States Department of Health and Human Services. Its purpose was to develop an employer sponsored dependent day care system which provides small group care for children and the developmentally disabled in home settings. By linking community family day care providers and other caregivers with local businesses, the project demonstrated the feasibility of providing dependent care as a fringe benefit for employees.

The project was designed to create solutions for businesses and working parents. It explored whether assistance plans for dependent care might be suitable for a particular company, and if so, what options would be most appropriate. The project conducted needs assessments among participating businesses and helped develop dependent care benefit packages based on survey findings. The project recruited qualified dependent care providers and developed a training curriculum based on Child Development Associate credential function areas. The expected result of the project included the development of a model to be used nationally.

Through the professional expertise of the Boys and Girls Club of Escondido, CARE Boosters increased the availability of trained providers who were both accessible and affordable. By using locally established family day care homes, the project benefited employment within the community, while providing a safe, warm and stable family environment for dependents of working parents.

This national demonstration project accomplished the following:

1. Studied the effects of dependent responsibilities with stress in the workplace.
2. Assessed the extent of need among workers for assistance with dependent care.
3. Worked with employers to establish Dependent Care Assistance Programs.
4. Planned, developed, implemented and marketed an employer sponsored network consisting of a day care system, plus developmentally disabled and elder care resources.

FAMILY DAY CARE

With the need for dependent care increasing rapidly, many employers are looking for innovative ways to meet their employees' dependent care needs.

One such option, family day care, is becoming increasingly popular. Family day care has developed rapidly over the past 10 years. Studies show that over 51 million children are cared for in over 2 million licensed homes. One study (National Day Care Home Study, U.S. Dept. of Health and Human Services, Publication # (OHDS) 80-30287, page 35) states that licensed homes account for 6% of such care, leaving 94% of the homes providing care as unlicensed or unregistered by states. More recent studies have increased the number of licensed homes by 10-20%.

There are several reasons for the increased utilization of home-based care.

Since family day care is small and home-based, children are given individualized attention. The program can be "flexible" and less formal. It is usually geared toward meeting individual needs with less emphasis on "rules" of larger centers.

Parents may prefer family day care for many reasons:

1. Infants and younger children need one consistent caregiver.
2. Handicapped or "special needs" children require special attention.
3. School-aged children require transportation to and from school.
4. Wide range of services—infants to school age serviced, allowing whole families to be together.
5. More convenient location—close to work or home.
6. Flexible hours—early or late shifts can be scheduled.

In 1987 there were approximately 8 employer supported family day care systems in the nation, (see resource section for listing). Many believe that as employers become familiar with the advantages of this option, its usage will increase. Family day care systems offer services to providers such as: training and workshops, business administration skills, substitute providers, equipment, toy and book lending libraries, subsidized food programs and insurance. There are four basic models, each with a wide range of employer control and involvement:

1. The employer hires family day care providers who in turn are restricted to caring for children of company employees exclusively.
2. The employer utilizes a voucher system for reimbursement to child care providers selected and used by employees.
3. The employer develops a system of local providers and provides support services. Parents pay the provider without financial assistance from the employer.
4. The employer contracts with a community agency to manage the program, including recruitment, ongoing support and follow up with employees. Occasionally employers can buy into a system.

There are advantages and disadvantages of family day care systems for both employers and providers.

EMPLOYERS

ADVANTAGES:

1. Family day care systems have a short start up period. They can be administered in-house and can be set up quicker than an on-site child care center. Even more time can be saved by buying into a pre-existing program. This will cut the start-up time to a few months.
2. Start-up cost for family day care systems is low since it often utilizes licensed homes already in business. Ongoing operation costs can vary depending on employer involvement.
3. One of the greatest advantages is flexibility. A family day care system can expand or contract depending on the need of the company.
4. The availability of parental choice. Family day care homes provide a wide range of philosophies and styles. Parents are encouraged to interview and choose a caregiver with philosophies similar to their own.

DISADVANTAGES:

1. From a public relations standpoint, the low visibility of a family day care system is a disadvantage. Unlike a child care center located on or near the company site, family day care homes are dispersed throughout the community. While some companies consider low visibility an advantage, others may want to develop a public relations program within their company and also the surrounding communities.

2. **Instability of the providers.** Larger child care centers often have several staff persons. However, most family day care homes are small with one licensed provider caring for six children. When the provider or one of her own children becomes ill, or if time off is needed for doctor appointments or vacations, it affects each family in her care. A possible solution is to recruit substitute providers to serve as a back-up to the system.
3. It is difficult to develop and maintain a system of providers. Many providers fear a loss of autonomy and resent the infringement on their time with the children. This is compounded by a high turnover rate. The system needs to maintain the providers interest and offer sufficient support services or incentives to members.
4. The range of quality in each home. There are no educational requirements for family day care in many states and licensing is based on health and safety codes. Therefore, the quality of services is dependent upon each individual provider. A possible solution is to develop recruitment and monitoring standards in addition to training opportunities for system providers.
5. **Incurred liability** is a consideration for employers exploring child care options. There are ways of reducing or minimizing these risks:
 - a. reduce the risk of injury by requiring providers to receive training in safety, CPR, first aid and emergency preparedness.
 - b. contract with the provider as an "independent contractor" rather than employer/employee.
 - c. require the provider to carry insurance.

PROVIDERS

ADVANTAGES:

1. A system is another source for referrals or even guaranteed payment to reserve spaces.
2. Professional trainings and workshops are often available to the provider at no cost.
3. Providers may receive possible benefits such as group insurance, vacation, sick pay, etc.
4. Free or low cost supplies, books, toys and other resources are often available to providers for their program.

DISADVANTAGES:

1. The biggest fear or obstacle for providers is the loss of autonomy. Depend-

ing on the design of the program, a provider may be locked into accepting designated children or charging a pre-set fee.

The Provider's Role

Child care is a profession and should not be referred to as just "baby sitting". A day care home should be set up and run as a small business.

The following are some of the major considerations providers should review prior to setting up a business. It is advisable to contact the chapter of the National Association for the Education of Young Children (NAEYC) or Family Day Care Association (FDCA) for more information and/or assistance.

Licensing Regulations

During this project there were no national requirements for licensing homes. Most states have their own formal rules and regulations governing family day care homes. These range from simply filling out an application to visitations from licensing agencies. It is the provider's responsibility to check with the local Department of Social Services for more information. Licensing regulations are health and safety codes enforceable by law.

Record Keeping

Every business keeps records of some type and family day care is no exception. Keeping timely and accurate records is an absolute must for providers! This facilitates the tracking of income and expenses, not to mention support for tax deductions. It is recommended that a system of files be kept on a daily basis.

Obviously, income is derived from parent fees. Expenses can include groceries, equipment, field trip expenses, insurance, advertising, professional fees, and repairs to day care equipment. Some partially deductible expenses include taxes on property, automobile, rent, utilities, supplies and repairs on equipment shared by both the family and business.

Files containing pertinent information on each child such as attendance records, emergency numbers, medical records and signed permission/authorization forms are strongly recommended. Most of this information can be combined to fit on a 3 X 5 file card.

Some other information to gather for the files may include:

1. Has the child had allergic reactions to food, medication or bee stings?
2. Previous illnesses information including chicken pox, mumps, or measles. What was the child's reaction to this illness? Does the child have a tendency to run high fevers?
3. Parental information such as emergency phone numbers of parents, guardians or others who may pick up child.

Another important record is the parent/provider contract. It should clearly state program information, expectations and parent fees, when fees are to be paid and in what manner. Any changes should be made in writing with a notice of an effective date. Both parents and the provider should sign the agreement and maintain a copy for later reference. A well written contract will help to alleviate potential conflicts.

Taxes

As with any business, taxes must be paid. It is advisable for providers to consult with a tax accountant or someone from the Internal Revenue Service (IRS). The following are three of the major taxes:

1. Federal Income Tax - caregivers are considered to be "self-employed" and must file if earnings exceed \$400.00 per year. Required forms are: 1040 (not 1040A); Schedule C - Profit or (Loss) from Business or Profession form for self-employed business; Schedule of Estimated Taxes - the self-employed do not withhold income taxes from paycheck, therefore they are required to pay these quarterly based on estimated income.
2. Social Security Tax - the law requires filing and paying of Social Security tax each year. Form 1040SE, Computation of Social Security Self Employment Tax, is available from the IRS or Social Security Administration. If there are assistants in the business, providers are also required to pay Social Security tax on income earned in excess of \$50.00 each quarter per year. Use form 941 to report. Unemployment tax for employees may also be required. Check with an accountant or IRS agent for more information.
3. State Taxes - These vary with each state but in most states it is similar to the Federal Income Tax. Check with the state tax office for proper procedures and forms. Also, providers should inquire about any other taxes or fees associated with running a family day care business.

Deductible Expenses

All receipts must be kept since it may be required to produce these when providers are deducting expenses. The primary reason for deducting business expenses associated with operating a day care business is to minimize taxes paid on income. Fully deductible expenses are those incurred by providing day care. Expenses shared by both family and business, such as utilities (electricity, phone, water) are partially deductible. Check with a tax accountant or the IRS for the allowable percentages of deduction. Insurance obtained for business is fully deductible unless it is part of a homeowners liability insurance policy, which then, is only partially deductible.

Insurance

Media coverage of child abuse in day care has fueled an insurance crisis. Although these incidents are isolated, many insurance companies re-examined their policies. The result was cancellation of existing policies, increased cost (sometimes 100%) of premiums, or decisions not to underwrite child care at all.

Many national organizations such as National Association for the Education of Young Children have formed task forces to work with the insurance companies and legislators on this issue. In California, one project, Insurance for Child Care, has successfully lobbied legislators and the insurance commissioner to intervene and set up guidelines. But there is still much more to be accomplished.

Even in a safe home an accident is possible. Prevention is the best form of insurance. Each state has its own requirements. For example, in California, providers are not required to carry liability insurance and can have parents sign a waiver stating they understand the provider is uninsured. However, this waiver does not relinquish the parent's right to sue. It is advisable to obtain a policy to cover yourself in the event of an accident. Each insurance company sets its own underwriting guidelines to determine policy. Providers should do some research before purchasing a policy. There are many things to consider before investing such as:

1. Is coverage in effect while the child(ren) is in the home?
2. Does the policy cover everything including the yard, home and automobile?

3. Are there restrictions on the number of children or hours of business?
4. Research group rates available through national associations or child care agencies.
5. Read the policy carefully, especially the fine print. There may be limitations on numbers or hours the policy is in effect.
6. Explore the possibility of riders on an existing homeowners policy. See resource section for information on insurance.

Quality Resources

The quality of care depends on many factors. These include: 1) the relationships between the parent, provider and child, 2) the variety of program activities offered, 3) the maintenance of a safe, healthy home, and 4) most importantly, the provider's training, experience and resources.

Resources for family day care providers are available from many sources. Most states have chapters of the National Association for Family Day Care. Your community may have a local chapter to join. Other community providers are the best form of support you can have. Some community agencies offer umbrella sponsorship* for providers. Some typical services include toy/equipment lending libraries, workshops, training and technical assistance. Local hospitals or the Red Cross offer courses in first aid and CPR. Community colleges may offer courses on child care issues. Most can be taken for credit and applied toward a degree.

Food Program

The federal government offers a reimbursement program which helps to pay for nutritional, balanced meals served to children in day care. This program also offers training in nutrition and meal planning. Local resource and referral agencies can also provide additional information. The more resources available to the provider, the better the quality of child care.

**umbrella sponsorship - some communities offer task forces or other types of umbrella groups for providers.*

A CARING LINK: THE CARE BOOSTERS NETWORK

The CARE boosters network consists of three components, child care and resources for elder care and for the developmentally disabled. The child care component includes the CARE Boosters family day care system comprised of 38 homes, twelve child care centers, after school and summer camp listings, and in-home sick care for the mildly ill child. Elder care resources include listings of center based care, transportation, nutrition and other information and referral agencies interested in the well-being of seniors. Listings of several community agencies equipped to handle "special needs" are included in the developmentally disabled component.

Family Day Care System

There are several options that may be chosen when setting up a family day care system. Define the desired objectives and develop an action plan to achieve them. The following are guidelines the CARE Boosters project established in the formation of its network. CARE Boosters found it advisable to maintain an "independent contractor" relationship with its providers for liability reasons. Research the implications of both "independent contractor" and "employee" relations to determine your options.

Recruitment of CARE Boosters Family Day Care System

1. The following are forms of publicity that can aid in the recruitment of family day care home providers:
 - a. Inform the local Family Day Care Association of your program.
 - b. Advertise in the classified section of local newspapers and magazines.
 - c. Develop marketing materials and distribute to licensing agencies for family day care providers.
 - d. Distribute marketing materials to local service clubs, libraries, and other interested parties to promote the network throughout the community.
2. Mail an introductory packet, including a provider profile to prospective providers and follow up with a phone call to set up an appointment for visitation. CARE Boosters utilizes the provider profile to collect background and philosophy information on each family day care provider. It includes questions on areas such as:
 1. Previous experience working with children.
 2. Education, trainings and seminars in early childhood education, family day care, and/or curriculum development.

3. Home environment: describing a typical day and focus of program (school-like, extended family, play place).
4. Business background: hours of service, parent/provider contract and type of care available (part-time, full-time, overnight, weekends).

Selection Process used for CARE Boosters System

Interview and Selection

- a. After the provider profile is submitted, an interview should be scheduled at the provider's home. CARE Boosters utilized the Provider Interview Form. The Provider Interview form is a check list developed to gather additional information and facilitate a safety check of site. Questions included provider/child ratios, license limitations and capacity, health and safety, daily program issues including activities, discipline policies, nutrition and provisions for special needs children.
- b. During the interview, determine whether the following criteria has been met:
 - 1) Provider is licensed by the state and is in compliance.
 - 2) Provider has proof of liability with a certificate of insurance.
 - 3) Provider meets additional standards established by CARE Boosters. (CARE Boosters guidelines are based on the Child Development Associate, a national credentialing program.)
- c. If a provider does not meet the standards s/he will receive written notice indicating why provider was not accepted. The provider is then given the option of rescheduling another interview after 30 days.
- d. Once an agreement is reached, CARE Boosters is available to assist providers in meeting system standards by providing resources and information.

Orientation

Upon selection to participate in the CARE Boosters System, an orientation in the provider's home is conducted. The purpose of this orientation is to:

1. Outline the project and discuss the concept of employer supported dependent care.
2. Provide guidance and assistance in establishing and maintaining a high quality day care home environment.

3. Provide technical assistance and resources to the provider, which aids in the development of policies, rules and regulations, to establish a professional day care environment.
4. Complete a one year participation agreement with the provider.
5. Instruct the provider on the procedure for keeping the program informed of available slots. (The provider will telephone the program as vacancies or changes occur.)
6. Make available for the provider information and telephone numbers should they require assistance.
7. Inform the provider of monthly visitations and curriculum packets.

Agreement Between Family Day Care Home and CARE Boosters

1. Training on child care related topics will be provided by the project to the provider. This training will be:
 - a. held at a date and time that is convenient for the providers
 - b. not mandatory, but providers are highly encouraged to attend
 - c. available free of charge to participating providers
2. Support
 - a. Curriculum information is delivered monthly to the provider's home. Examples include:
 1. arts/crafts ideas
 2. special events
 3. health and safety information
 - b. Monthly newsletter is distributed to providers. Included in the newsletter:
 1. announcements of upcoming workshops and related extension courses at local colleges
 2. update of community activities
 3. information regarding day care related concerns of providers, e.g. liability insurance, etc.
 4. legislative and advocacy updates
 - c. Providers are visited monthly. Visits are documented in the provider's file.
 - d. Department of Social Services is contacted on a regular basis to ensure that provider's license has not come under investigation.

3. Evaluation - This is an informal process and forms the basis for assistance and training opportunities. The providers understand that they are not being visited for the sole purpose of evaluation. Indeed, some providers welcome the opportunity to talk with another adult. During these monthly home visits providers are able to discuss concerns or ask for assistance in areas of difficulty. CARE Boosters staff kept the following points in mind when visiting:
 - a. Supervision/evaluation is limited due to the fact that providers are independent contractors.
 - b. If substandard site or care is observed, a walk through evaluation will be requested. Results of this evaluation include:
 1. written notice of observed discrepancies will be given
 2. any problems noted are expected to be corrected immediately
 - c. Failure to comply with the project standards will result in immediate termination of the agreement.

Agreement Between Provider and Parent

1. Referrals were provided to employees of CARE Boosters companies.
2. Placement of a child in the CARE Boosters System is contingent upon agreement between the provider and the parent.
3. CARE Boosters maintained an "independent contractor" relationship with its providers. This operating decision is based on the issue of incurred liability. As an "independent contractor", the provider is responsible for setting and collecting fees, establishing and maintaining the site and obtaining insurance. (Refer to section on "Family Day Care - The Providers Role" for more detail.)

Elder Care Resources

Originally, CARE Booster intended to develop a family day care home which could care for the elderly. The philosophy was that many of the same benefits which children enjoy in home based care could also be shared by elders. However, it was found that licensing made the cost of family day care homes for elders prohibitive. CARE Boosters did find a couple who were willing to license their home but, when they applied to the Department of Social Services, they found there were no licensing regulations governing senior day care. The Department of Social Services requested the home meet both the licensing regulations of Family Day

Care and a Board and Care facility. Unfortunately, meeting both of these regulations required major site modifications such as the installation of ramps, additional toilets and widening of doorways. Because of the prohibitive cost of these modifications the application was withdrawn.

Subsequently, through CARE Boosters surveys it was found that most seniors preferred independent living and actually needed services which would compliment these arrangements. So in addition to senior centers, CARE Boosters researched existing community resources in the areas of transportation, nutrition and social clubs. Information and Referral programs were also listed since they keep an updated listing of legal services, tax assistance programs and other information on issues for the elderly.

Developmentally Disabled Resources

When developing or locating resources to serve "special needs" children, there are many considerations. Parents often find there are limited options available and that their needs are very different from other families in day care. Often they are looking for a combination of services such as special education programs, day care and transportation.

"Family day care probably serves more handicapped children than any other arrangement. Contributing to the popularity of this model are the flexibility of hours, the cost and convenience of these arrangements, and the home-like atmosphere parents often look for when they select a site for their young child."¹

CARE Boosters recruited community resources which served this population through center based educational programs and parent support groups. These complimented the CARE Boosters Network.

¹*Group Care for Young Children: Considerations for Child Care and Health Professionals, Public Policy Makers, and Parents; Johnson & Johnson, 1986.*

GIVING DEPENDENT CARE A BOOST THROUGH A PUBLIC RELATIONS PLAN

The success of a project is dependent upon the quality of the provider network, its utilization by employers, and the support of the community. Networking, community presentations and linkages to local groups are the basis of your Public Relations Plan. The Public Relations Plan will assist in the marketing process and, more importantly, cultivate advocacy and support for your efforts.

Networking

The first step is to identify resources in the community. The child care field has historically been fragmented. However, with the current attention focusing on child care, groups are forming to provide advocacy and support. Many communities have formed child care task forces to study the impact and provide recommendations. These task forces can be either appointed by the city council or comprised of volunteers and advocates recognizing the advantages of a united front. City council appointed task forces usually have a time restriction placed on them and are able to move naturally to implementing recommendations. Voluntary task forces can be as successful if well organized, community represented and goal oriented.

Other local chapters such as the Family Day Care Association (FDCA), the National Association for the Education of Young Children (NAEYC), the Childcare Coordinating Council, Commission on Youth, Women and Families, groups formed under umbrella sponsorship from United Way or resource and referral agencies are often available. If no such group exists in the community, explore avenues for forming one.

Membership to these advocacy groups will afford many opportunities. Identify others with similar concerns for possible joint ventures. Combined efforts are often more successful, not to mention timesaving. "Piggybacking" on training, workshops or other events is also effective. Active participation provides updated information of national and local concerns, events and trends via meetings, newsletters, minutes and publications. Get on as many mailing lists as possible. These can be excellent sources for information. These groups are also forums to publicize the project's concerns and successes. Cultivate others to provide information and advocacy. This support insures the success of a project.

Presentations

Presentations are an effective technique to establish and publicize a project. Most communities have clubs and groups which meet regularly. Rotary Clubs, Kiwanis, professional women's networks, and employer/human resources associations are often looking for speakers. Some communities publish an annual directory. Call or write to schedule a presentation but keep in mind that often these groups plan far in advance so it may be months before a time can be scheduled.

Presentations can also be scheduled at seminars or conferences both locally or nationally. Organizations such as NAEYC hold annual national, statewide and local conferences. Universities and community colleges often sponsor forums or seminars. Write or call to find out their application process.

While this process can be overwhelming at times, the benefits are quickly realized. You will gain invaluable information of local and national concerns, issues and trends in addition to establishing the project as innovative and viable.

CHAMBER OF COMMERCE

Your local chamber of commerce can also be a resource or liaison to the business community. As the dependent care issue escalates, chambers are becoming involved, not only in response to employees' needs and heightened awareness, but also the fear that the federal government will mandate employee benefits.

In February 1988, the Board of Directors of the United States Chamber of Commerce adopted unanimously a position paper on balancing work and family responsibilities. Recognizing the changing demography of dual working couples and increases in single head of households, it was voted to encourage employers to assess and accommodate its changing labor force. As employers recognize the correlation of dependent care to productivity, recruitment and retention of employees, they are exploring available options. Some chambers have taken the initiative by funding studies, training programs or task forces. Contact your local chamber of commerce as it may already be involved through local programs. Cultivate a working relationship by volunteering to write an article for their newsletter or speak at one of their events. They may also be able to endorse the project to employers or provide you with leads of interested persons.

MARKETING CARE BOOSTERS TO EMPLOYERS

Marketing, by definition, is finding a need and filling it with a product, service or idea that results in a satisfactory exchange between the producer and the consumer. Employers have a need but do not always recognize it. The task of CARE Boosters then became one of educating the employer as to the benefits of assisting their employees' day care needs. Marketing employer-sponsored day care to companies is unique in that they are receiving the benefit of the product indirectly through their employees. This marketing situation is likened to sweetened cereal where the cereal manufacturer must appeal to both the child as the consumer and the parent as the buyer. In both cases (cereal and employer-sponsored day care), the buyer has total control over the product's purchase. Therefore, it is necessary to convince the buyer (the company) of the features and advantages of the purchase while meeting the needs of the consumer (the employees/parents).

This is accomplished first by understanding the product—CARE Boosters Network. What are the features and benefits that will appeal to a buyer and consumer (employer and employee)? The employer as the buyer must be convinced that a network will satisfy the needs of their employees.

The development of a CARE Boosters Network is the basis of success or failure. The CARE Boosters Network is the product. Image is very important to success. Both the providers chosen and the umbrella agency's image in the community is a consideration prior to establishing the network. After laying this groundwork, the next challenge is how to communicate to an employer the advantages of a network. The following are several practical steps CARE Boosters found necessary to the process:

- Step One: Identify the target market. This means look at the whole community and look at the competition (What is going on in employer sponsored day care in the community?). After making this assessment, decide which group of companies would most benefit from a network.
- Step Two: Obtain a list of companies from the local chamber of commerce. Based on the assessment of the target market (e.g. companies with a high percentage of women and companies with 100 or less employees) write a letter addressed to the President or CEO. The letter should have an introductory tone—explaining the advantages of employer sponsored day care as well as the benefits of a network. Enclose a brochure or fact sheet on the project. (See Appendix A, p. 39, fact sheet)

Step Three: Two weeks, later, place a call to the President or CEO of the company. This call serves the following purposes:

1. to qualify interest
2. to set up a time that is convenient for an appointment—let them know that it won't take more than 15 minutes
3. to establish the contact person (nine times out of ten the President or CEO will delegate either his secretary, or in large companies, the personnel or human resource manager to meet with you).

Step Four: Go to the company prepared, presenting in a professional manner. The slide show or presentation should not be more than ten minutes. The more concise, the more receptive the contact person will be. Be very clear, recognize how busy they are and be prepared to take just fifteen minutes. However, it is up to the employer if they would like more time. Be prepared to stay as long as questions continue.

Step Five: If the person has the authority and wants to move ahead immediately, arrange a survey (See Appendix B, p. 40) to determine the need. Often, this is not the case and the contact person will need additional time to discuss with their supervisors. Two weeks follow-up is a good rule of thumb.

Step Six: Set up a survey schedule with the contact person. The schedule should consist of:

1. a notice to the employees concerning the survey. This notice should go out two weeks prior to the survey date. (This can be done with a poster or memo).
2. delivery and distribution information for the employees. The survey should always include a cover letter and return envelope. The cover letter should include instructions as to the person to whom the survey should be returned. (CARE Boosters most successful return rates were when companies had a central location for employees to return the survey or in large companies, returned to the supervisor.)
3. a date for pick-up of the completed surveys.

Step Seven: The time given to the employees to fill out the survey should be no less than two days nor more than four. A more effective option is to have the surveys completed during an employee meeting on company time. Remember, be flexible with guidelines. The employer may desire other timelines or format.

Step Eight: After the survey results have been compiled, a written Survey Report should be presented to the contact person. Recommendations based on the survey data should be included.

Step Nine: This step will vary depending on the survey results. If the results show a definite need, then the Survey Report and subsequent recommendations (e.g. CARE Boosters Network) follow. If the survey results are not significant, then the approach can be an introductory one to employer sponsored dependent care through the IRS Code Section 129. Section 129, Dependent Care Assistance Program, is an effective introductory step for employers. This plan is beneficial to employers and employees from a tax perspective.

Step Ten: Follow-up! Follow-up! Follow-up! Your relationship with the company through the contact person is crucial. You should assist your contact in establishing with the employees the new benefit. Employee meetings or "Brown Bag Workshops" are a good way to disseminate information and establish the rapport necessary to a successful program. Posters with a phone number should be posted in employee lunch rooms. **Parent Dependent Care Resource Manuals** should be available to the employees through the personnel or human resource department or in small companies at your contact person's office.

Marketing does not stop after the sale is completed. We cannot say enough about follow-up. Follow-up is important to the success of a program and should be done not only with the companies being serviced but also those contacted but who were not interested. Situations change and so do people. Check back every six months with a phone call. Just call to say "hello" and check on whether there has been a change in their situation. Remember, the Employer Benefits Research Institute, predicts, "Child care will be the fringe benefit of the 1990's". So it's not a matter of if, but when!

PROMOTIONAL TOOLS

The promotional tools developed to support CARE Boosters marketing effort were an important component to the overall marketing plan. These tools consisted of:

1. A brochure, describing the service and cost.
2. A fact sheet which presents statistics on child care and elder care needs and the benefits of providing employer supported day care.
3. A slide show which consists of slides of homes and elder care resources in the CARE Boosters Network. A slide show tells the story in 10 minutes (CARE Boosters solicited the media department of the local community college in North San Diego County to assist in the

design and development). The slide show was shown on a portable piece of equipment. (i.e., Singer Caramate) This provided flexibility and easy viewing. (The slide show can be purchased by writing the Boys and Girls Club of Escondido, 115 West Woodward Avenue, Escondido, CA 92025; ATTN: CARE Boosters).

4. A poster which was placed in the employee's lunch room or company personnel department.

SURVEYING

CARE Boosters survey was designed in collaboration with the Regional Research Institute for Human Services, Portland State University. Arthur C. Emlen, Ph.D., Director and Paul Koren, Ph. D., Research Associate, have been surveying employees from a variety of companies about their dependent care needs since 1982. The association with Dr. Emlen and Dr. Koren greatly enhanced CARE Boosters success in providing a professional needs assessment process. (See Appendix B, p. 40 for copy of survey):

The following, written by Dr. Emlen and Dr. Koren, describes the survey method used and why.

"The survey method used takes a hard-nosed approach to needs assessment by examining what employees are currently doing for dependent care and what difficulties they are experiencing at home and at work. Questions about preferences or ideals are generally avoided in favor of more behaviorally-grounded items in order to obtain information that has inherent face validity and that provides a more reliable basis for making decisions. This information is collected through a standard survey questionnaire which is given to all employees regardless of the extent or nature of their dependent care responsibilities. In this way, the resultant data allows comparisons of all sectors of the workforce on key indicators such as absenteeism and stress. In particular, employees with various dependent care responsibilities can be contrasted with those who do not have such responsibilities.

The use of a standardized questionnaire in this type of survey has several advantages: (1) development of questionnaire items for each organization or worksite is avoided or minimized, (2) experience with these questionnaire items allows more accurate and efficient data analysis without the need for lengthy examination of item

characteristics for each job, (3) data from other companies organization, or geographic locations are comparable and therefore can be used for selective comparisons, and (4) the data can be pooled across many sites to provide a general picture of dependent care issues and their impact on the workplace. In practice, this standardization has taken the form of a core group of items that have been used in every survey, supplemented by additional items that address particular needs or interests of a company, organization, or research group. Thus one version of the questionnaire added a large group of items concerned with employees' interest in an on-site child care center. The result of this approach is a low-cost flexible method of needs assessment that provides practical information useful for a range of purposes."

RECOMMENDATIONS

Recommendations should be based on the total employee population's needs. But more importantly, it is imperative to note that employees' needs change daily. Therefore, the recommendation should not just address today's needs but, rather, the recommendation should be a part of a long range plan. The Section 129, Dependent Care Assistant Program (DCAP) is an excellent first step for employers.

Utilizing a long range plan starting with a DCAP addresses employees' needs for dependent care support and addresses the monetary issue. It is a statement that a company makes to its employees which says "we care about you as a whole person". We recognize that to be a productive employee you must be a healthy employee. To be healthy you must have minimal stress in your life and while a company does not want to play a family counselor role toward employees, there is a growing trend among progressive companies to look at the entire health of the employee and provide support through information on diet, exercise, alcohol, drugs, and dependent care.

This first step then sets the stage for further involvement and provides employees the financial relief so needed when caring for dependents (child and elders). Also, this first step represents a minimal financial obligation and involvement for employers. The following section written by Garth O. Reid, Tax Attorney, describes the advantages of Dependent Care Assistance Programs.

ADVANTAGES OF DEPENDENT CARE ASSISTANCE PROGRAMS

A Tax Benefit Provided by Internal Revenue Code Section 129

"Since 1981, the Internal Revenue Code has allowed employers to provide Dependent Care Assistance Programs to their employees as a tax-free fringe benefit. Such programs are designed to pay or reimburse the employee for dependent care expenses that the employee incurs for his or her dependents. Such dependent care expenses are those expenses which would otherwise be deductible by the employee under Internal Revenue Code Section 21. Specifically, such expenses include employment related expenses of dependent day care centers, either on the employer's premises or operated by third parties. However, such expenses can be incurred only for the care of a dependent who has not reached his or her 15th birthday, or for a dependent who is physically or mentally incapable of caring for himself or herself regardless of age.

A Dependent Care Assistance Program, or DCAP, is relatively easy to implement. In order to have a qualified DCAP, the employer must establish a written plan specifying that DCAP benefits or allowances are non-discriminatory, both as to eligibility and amount. Further, the employees must be notified of the availability and terms of the dependent care benefits or allowances. At the end of each calendar year, each employee must receive a statement from the employer setting forth the amounts paid or expenses incurred by the employer for such employee's dependent care assistance during the previous calendar year.

ADVANTAGES OF DCAPs:

Since the DCAP benefit is not considered part of an employee's salary, the employee is not required to pay federal income taxes or social security taxes on the DCAP benefit. In some states, DCAP benefits are also exempt from state and city income taxes.

On the other hand, amount paid for DCAP benefits or allowances are deductible by the employer.

The employer has two basic options in regard to financing DCAP benefits. Such options may be used separately by the employee, or may be combined.

The first option is that the amounts paid for the DCAP benefits or allowances may be underwritten by the employer as an additional fringe benefit over and above the employee's current pay and benefits.

Alternatively, the employer may elect to have DCAP benefits provided in the form of reductions from the employee's salary payments. For example, the employees would have the option of receiving their full salary, or electing to forego part of the salary in return for the payment of DCAP benefits by the employer. Since the employees do not pay income tax on the DCAP benefits (provided the plan is maintained in accordance with the Internal Revenue Code), such DCAP benefits actually represent an increase in spendable income for the employees, as compared to an equivalent amount of straight pay.

The employee is not allowed any deduction or credit under any other section of the Internal Revenue Code for any amount excluded from the employee's income as a Dependent Care Assistance Program allowance or benefit. Thus, the employee cannot obtain a double-tax benefit. On the other hand, qualifying expenses of the employee which are not paid or reimbursed by the employer as a DCAP benefit may qualify as a deduction and/or credit to the employee under other sections of the Internal Revenue Code.

The amount of the DCAP benefit that the employee can exclude from income each year is limited to the employee's earned income, or in the case of a married couple, the earned income of the lower earning spouse. In any event, the total amount the employee can exclude from income may not exceed \$5,000.00 per year, or \$2,500.00 in the case of married individuals filing separately.

Thus, an employee with a nonworking spouse may not be able to exclude any Dependent Care Assistance Program payments from his income. However, if the employee has a spouse who is a full-time student for at least five months during the year, or if the employee has a spouse who is disabled, then the spouse will be assumed to have earned \$200.00 per month if there is one child, or \$400.00 per month if there are two or more children.

In order for a Dependent Care Assistance Program to qualify under the Internal Revenue Code, the program must benefit employees under a non-discriminatory classification. Specifically, it must not favor employees who are officers, owners, or highly compensated employees or their dependents. In this regard, not more than 25% of the amount paid by an employer under a DCAP may be for the benefit of employees who own more than 5% of the company.

Also, the benefits provided to employees who are non-highly compensated employees must be at least 55% of the average benefits provided to highly compensated employees unless the employer elects to qualify the plan as a "statutory employee benefit plan," in which case different requirements would apply.

All in all, Dependent Care Assistance Programs are a valuable fringe benefit that may prove attractive to many employees and employers. However, such a plan should be installed only with the assistance and guidance of your attorney and accountant."

The second step would be the linking up with valuable dependent care resources through the CARE Boosters Network model.

CARE Boosters was designed to assist employees in searching out needed services for all dependents (children, elderly or developmentally disabled). The CARE Boosters **Parent Dependent Care Resource Manual** was compiled to address all these needs for employees. As a complement to DCAP, CARE Boosters effects employees' lives by enabling them to find care when the need arises without the frustrating hours normally connected with finding quality care.

SERVICING

The success of the program depends on the acceptance by the actual users; the company employees, of the service. Because the employees did not personally make the decision to contract with the program and the decision came from the employer, there may be some hesitation to utilize the service. The employee must now be sold on the program. Some of the ways you can encourage their participation are:

1. The **Parent Dependent Care Resource Manual**
2. Flyers introducing the service

3. "Brown Bag" Workshops on parenting tips and understanding changes related to aging.
4. A newsletter focusing on how to balance work and family life responsibilities
5. Posters indicating availability for special needs or problems
6. Special notices indicating holiday or vacation child care information

Communication is crucial to success. It is imperative that the employees achieve a level of confidence so that they will feel comfortable in utilizing the resources. This will result in repeat business with the employer.

THE CARE BOOSTERS/EMPLOYER AGREEMENT

The Agreement between the Employer and the Program should be drawn up by an attorney. It should spell out the services provided, the amount to be charged, and the length of the contract. The contract should have a **hold harmless** clause. A **hold harmless** clause will aid in protecting your entity. Also, include a sentence that explains that the providers will accept responsibility for the care and safety of dependents in their facility.

Also, be sure to include a **30 day voidable at option of either party** clause. But most important, be sure the agreement is reviewed by an attorney prior to its use to minimize liabilities.

LIABILITY

Liability is an employer's concern, a provider's concern and an agency's concern. The agreement is a deterrent that will minimize the concern. It is also imperative to consider liability insurance. Contact an insurance agent to determine the need and consult an attorney for specific advice as it relates to the project and its structure. (e.g., the relationship consideration when structuring the family day care system; and "independent contractor" vs. "employee" relationship has implications that affect an agency's/project's liability concerns.)

THE CARE BOOSTERS/EMPLOYEE AGREEMENT

The Agreement between Employee and CARE Boosters was necessary to further hold the program harmless. In addition, the **Parent Dependent Care Resource Manual** was held confidential and the agreement was necessary to insure that it remained so. As with the other agreements, it is always advisable to consult with an attorney when developing the agreement to be used.

CARE BOOSTERS SURVEY RESULTS

Ten companies were surveyed during the project. Six thousand three hundred eighty six (6,386) surveys were distributed to employees in companies of varying size and type in North San Diego County.

The following are the companies who participated:

COMPANY	TYPE OF COMPANY	# OF EMPLOYEES
Escondido National Bank*	Bank	53
North County Fair*	Shopping Center	2556
Pacific Bell, No. S.D. County Division	Phone Company	550
Escondido Police Department	Municipality	147
•Signet Armorlite*	Manufacturing Plant	650
Times Advocate	Newspaper	250
Fluid Components	Manufacturing Plant	125
Teledyne Aero-Cal	Manufacturing Plant	100
City of Escondido	Municipality	450
Hewlett Packard*	Manufacturing Plant	1500
NAPP Systems**	Manufacturing Plant	350
•Bestronics**	Manufacturers Representative	9
•Trust Deed Counselors**	Mortgage Broker	25

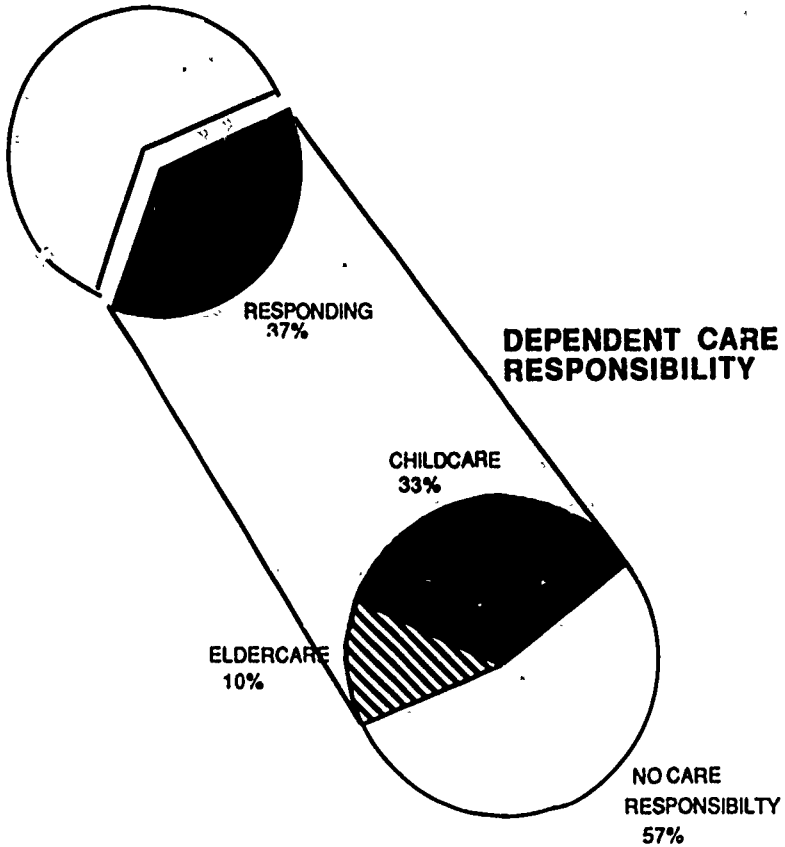
The seven companies who contracted with the network had 70 employees who signed agreements and received the CARE Boosters **Parent Dependent Care Resource Manual**. As a result, 53 inquiries were made and twenty-two children were placed in the network. No record of elder care resource placements were kept.

The graphics on the following pages depict the compilation of the survey results.

- * Contracted with CARE Boosters Network subsequent to survey.
- ** Contracted with CARE Boosters but did not choose to survey employees.
- Implemented DCAP.

RESPONSE TO SURVEY

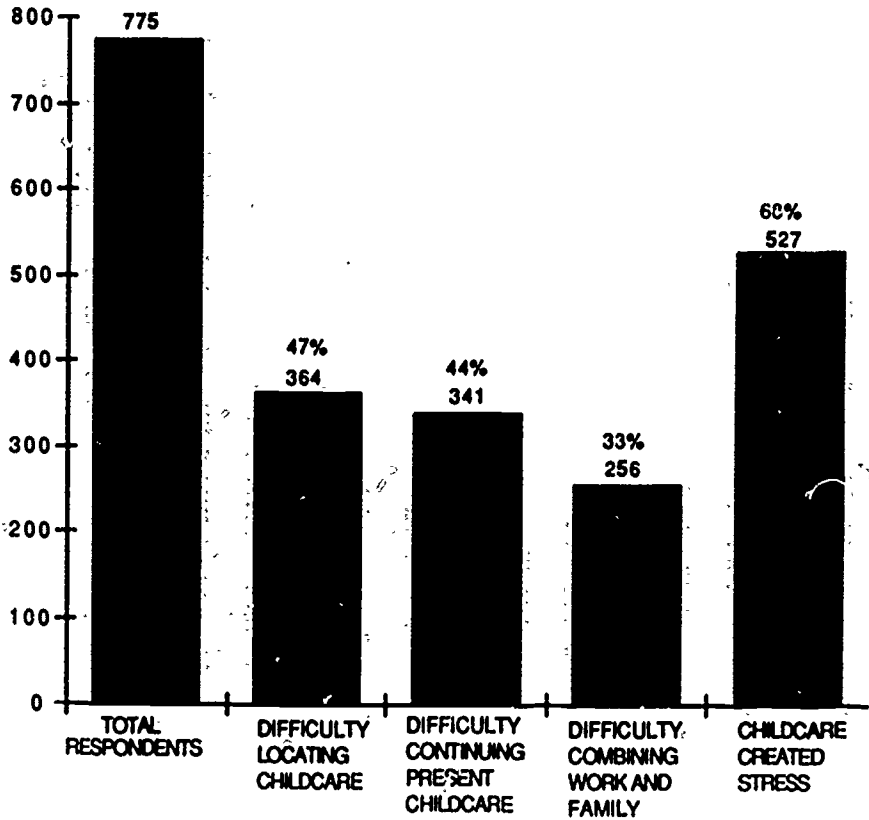
DID NOT
RESPOND
63%



OVERALL RESPONSE RATE: 2,370 employees responded to the survey, for a response rate of 37%. (A total of 6,386 surveys were distributed to employees in 10 different companies of varying size and type in North San Diego County, California.)

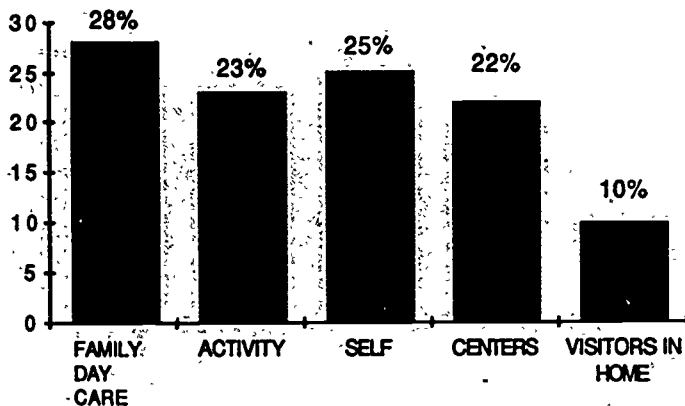
PERCENT HAVING DEPENDENT CARE RESPONSIBILITY: 43% (n=1,025) of all respondents had the responsibility of caring for either a child or an elder. 33% had child care responsibilities and 10% had elder care responsibilities.

CHILD CARE GROUP



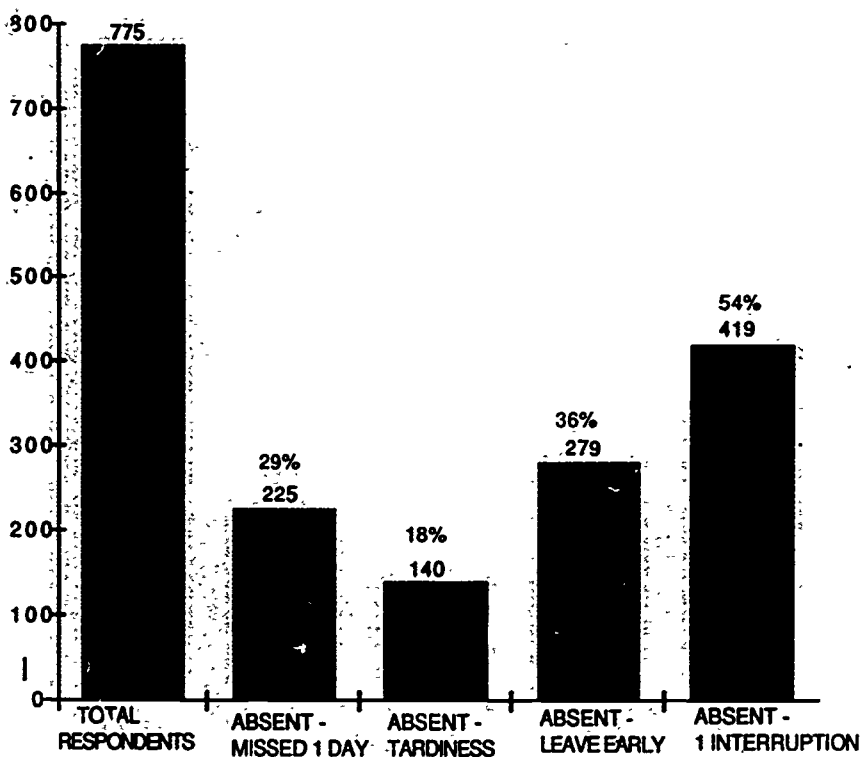
TYPES OF CHILD CARE USED

PERCENT

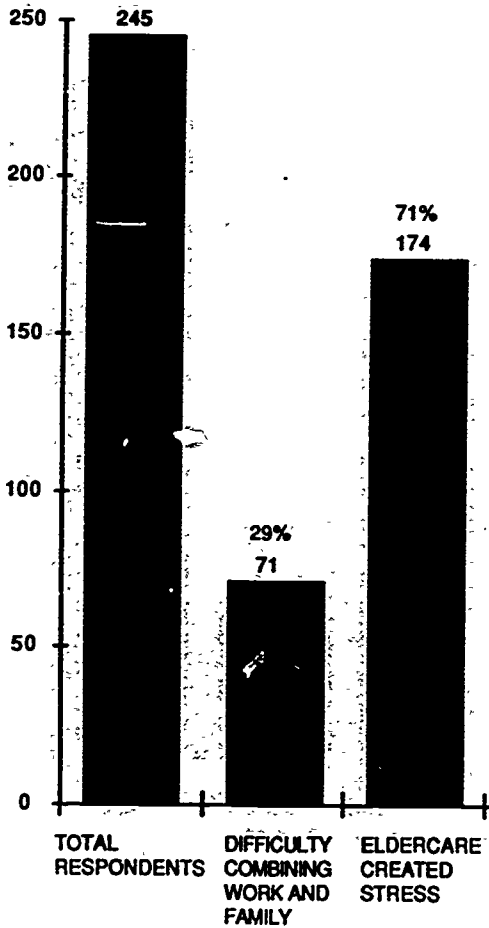


TYPES OF CARE USED: 28% of those who responded used family day care. Other types of care used were: activity (23%), self (25%), centers (22%), and visitors in the home (10%).

REPORTED ABSENTEEISM WITH CHILD CARE GROUP DURING A ONE MONTH PERIOD

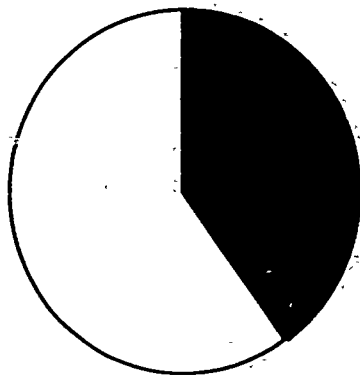


ELDER CARE GROUP



DIFFICULTY WITH ELDER CARE ARRANGEMENTS

NO DIFFICULTY IN
LOCATING
ELDER CARE
60%

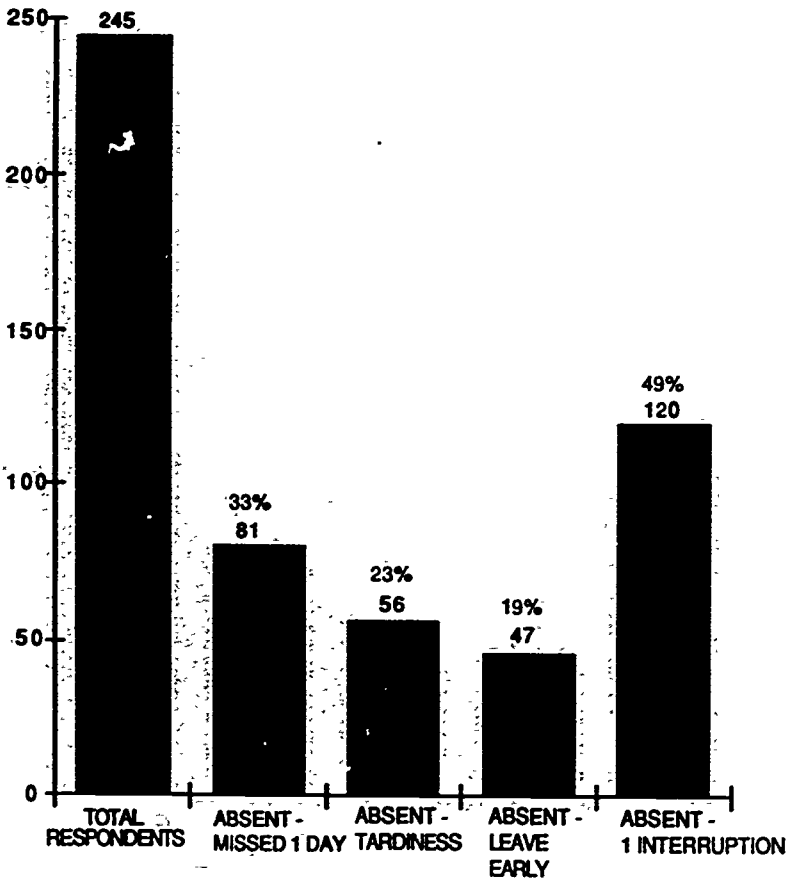


DIFFICULTY IN
LOCATING
ELDER CARE
40%

DIFFICULTY WITH ELDER CARE ARRANGEMENTS: An average of 40% of the respondents expressed concern in locating the necessary resources.

TYPES OF ELDER CARE: 100% of the employees indicating they required elder care, responded that self-care was most frequently used.

REPORTED ABSENTEEISM WITH ELDER CARE GROUP DURING A ONE MONTH PERIOD



CONCLUSION

The CARE Boosters model presented in this handbook provides you with the tools which can be used to emulate or adapt CARE Boosters in other communities.

When establishing the CARE Boosters model the business and network components were formulated simultaneously. CARE Boosters administrative structure included a Director of Business Development and Director of Network Development. The directors had strengths in each respective field prior to becoming associated with CARE Boosters. Each director strategized and developed an action plan to accomplish the ultimately successful result.

The following steps outline the action plans:

Business

- *Public Relations Plan
(Allow approximately 1 year to implement)
- *Marketing
- *Presentations
- *Survey
- *Recommendations
- *Agreement
- *Service

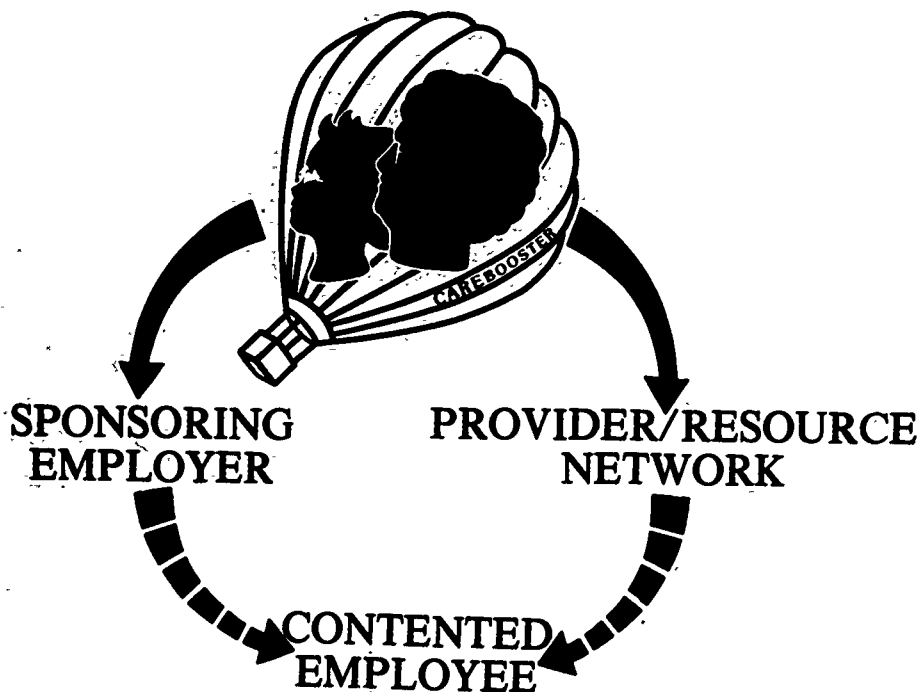
CARE Boosters Network

- *Determine Resources
- *Solicit Family Day Care Providers
- *Evaluate Providers & Facilities
- *Select Network Members
- *Establish Network Resources
- *Follow-up Visits to Distribute Curriculum Packets
- *Networking to Maintain Relationships
- *Ongoing Support
- *Ongoing Recruitment

The Business and Network Action Steps must be implemented concurrently to ensure success.

The results have been a project that assisted and produced a strong system of family day care providers who maintained quality homes for the employees of the companies contracted. In addition, elder care and developmentally disabled care resources were compiled in the **Parent Dependent Care Resource Manual** to form the CARE Boosters Network.

The goal was to produce employees who were more contented while at work and, subsequently, more productive.



APPENDIX A

Care and Resources for Employees and their Dependents

The Project and its Purpose:

CARE Boosters - Care and Resources for Employees and their Dependents is a three year demonstration project, federally funded by the Administration for Children, Youth, and Families, Department of Health and Human Services. Its purpose is to develop employer sponsored dependent day care networks which will provide small group care for children, elderly and the developmentally disabled in home settings. By linking community family day care providers and other caregivers with local businesses, through the development of Dependent Care Assistance Programs, the project demonstrates the feasibility of providing cost effective dependent care as a fringe benefit for employees.

The project is designed to create solutions for business and the working parent. It explores whether assistance plans for dependent care might be suitable for a particular company, and if so, what options would be most appropriate. The project conducts needs assessments among participating businesses and helps develop dependent care benefit packages based on survey findings. The project recruits qualified dependent care providers and develops a training curriculum based on Child Development Associate credential function areas. The expected results of this project include the development of models to be used nationally. In addition, the data collected from the needs assessment will contribute to the formulation of a national data bank.

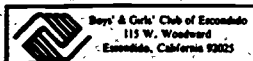
Through the professional expertise of the Boys and Girls Club of Escondido, CARE Boosters will increase the availability of trained providers who are both accessible and affordable. By using locally established family day care homes, the project will benefit employment within the community, while providing a safe, warm and stable family environment for dependents of working parents.

This national demonstration project will do the following:

1. Study the effects of dependent responsibilities with stress in the workplace.
2. Assess the extent of need among workers for assistance with dependent care.
3. Work with employers to establish Dependent Care Assistance Programs.
4. Plan, develop, implement and market employer sponsored family day care and adult day care networks.

APPENDIX B

Survey



CARE BOOSTERS, CARE AND RESOURCES FOR EMPLOYEES AND THEIR DEPENDENTS
A Demonstration Project of the Department of Health & Human Services

0219

Core U. 9

Employee Survey

INSTRUCTIONS: Thank you for participating in our survey. Please enter your answer (number or letter) to the right of each question in THE BOX provided. All responses are anonymous and will not be seen by your employer. We appreciate your frank answers.

1. Your age and sex? M = Male F = Female

2. Your ethnic background?
 1. White
 2. Black
 3. Hispanic
 4. Asian or Pacific Islander
 5. American Indian or Alaskan Native
 6. Other:

3. Your occupation?
 1. Professional or technical
 2. Managerial or administrative
 3. Sales
 4. Clerical
 5. Crafts
 6. Service (food, health, personal cleaning)
 7. Machine operator
 8. Transport operator
 9. Non-farm labor
 10. Other:

4. Your job status?
 1. Full-time
 2. Part-time
 3. On call

5. Your job shift?
 1. Days 4. Rotating
 2. Nights 5. Other
 3. Swing

6. The number of hours per week you usually work?

7. The number of days per week you usually work?

8. The amount of time it usually takes you to travel one way from home to work?

9. The zip code of your home address?

10. Other than yourself, what are the ages (years) and sex ("M" = Male, "F" = Female) of the people who live in your household? To indicate ages of children under 1 year, put "B" for Baby.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<small>years sex</small>	<small>years sex</small>	<small>years sex</small>	<small>years sex</small>	<small>years sex</small>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<small>years sex</small>	<small>years sex</small>	<small>years sex</small>	<small>years sex</small>	<small>years sex</small>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<small>years sex</small>	<small>years sex</small>	<small>years sex</small>	<small>years sex</small>	<small>years sex</small>

11. How many of the adults in your household, including yourself, work outside the home?

12. Is one of the other adults in your household your spouse or partner?
 1. Yes
 2. No

13. Does he or she work outside the home?
 1. Yes
 2. No
 3. Not applicable

14. What is the approximate annual gross income of your household?
 1. Under \$10,000 7. \$40,000-\$49,999
 2. \$10,000-\$14,999 8. \$50,000-\$59,999
 3. \$15,000-\$19,999 9. \$60,000-\$69,999
 4. \$20,000-\$24,999 10. \$70,000 or more
 5. \$25,000-\$29,999
 6. \$30,000-\$39,999

15. What is your own personal annual gross income?
 1. Under \$10,000 7. \$40,000-\$49,999
 2. \$10,000-\$14,999 8. \$50,000-\$59,999
 3. \$15,000-\$19,999 9. \$60,000-\$69,999
 4. \$20,000-\$24,999 10. \$70,000 or more
 5. \$25,000-\$29,999
 6. \$30,000-\$39,999

16. Other than yourself and your spouse are you eligible to claim any of the following persons as a dependent or exemption on your federal or state income tax return?
 Children?
 1. Yes
 2. No
 3. Don't Know
 Person(s) 65 or older?
 1. Yes
 2. No
 3. Don't Know
 Disabled adults?
 1. Yes
 2. No
 3. Don't Know

17. In the past four weeks, how many days have you missed work?

 How many times have you been late to work?

 How many times have you left work early or left during the day?

 While at work, how many times have you been interrupted (including telephone calls) to deal with family-related matters?

18. How much flexibility do you have in your work schedule to handle family responsibilities?
 1. A lot of flexibility
 2. Some flexibility
 3. Hardly any flexibility
 4. No flexibility at all

19. How long have you worked for this employer?

20. Circumstances differ and so do people find it easier than others to combine working with family responsibilities. In general, how easy or difficult is it for you?
 1. Very easy 4. Somewhat difficult
 2. Easy 5. Difficult
 3. Somewhat easy 6. Very difficult

21. We would like to know which areas of life are creating difficulty, worry, and stress for people. In the past 4 weeks, to what extent have any of the following areas of life been a source of stress to you?
 Your health:
 1. No stress at all
 2. Hardly any stress
 3. Some stress
 4. A lot of stress
 Health of other family members:
 1. No stress at all
 2. Hardly any stress
 3. Some stress
 4. A lot of stress
 Child care:
 0. Not applicable
 1. No stress at all
 2. Hardly any stress
 3. Some stress
 4. A lot of stress
 Care for elderly or disabled adult family members:
 0. Not applicable
 1. No stress at all
 2. Hardly any stress
 3. Some stress
 4. A lot of stress
 Personal or family finances:
 1. No stress at all
 2. Hardly any stress
 3. Some stress
 4. A lot of stress
 Your job:
 1. No stress at all
 2. Hardly any stress
 3. Some stress
 4. A lot of stress
 Family relationships, including extended family:
 1. No stress at all
 2. Hardly any stress
 3. Some stress
 4. A lot of stress

PLEASE CONTINUE

38. Do you have responsibilities for helping out adult relatives or friends who are elderly or disabled? By "disabled" we mean physically handicapped, frail, chronically ill, developmentally handicapped, or seriously emotionally handicapped. By "helping out," we mean help with shopping, home maintenance or transportation, checking on by phone, providing care, making arrangements for care, etc. This includes persons who live with you or who live somewhere else.

1 Yes 2 No

IF YES, please answer all of the questions in the box below. IF NO, skip this box.

How often are you helping? 19

For each person, tell us his or her age and relationship to you, as well as whether or not he or she lives with you. Use the list below to indicate relationship. For example, put a "1" in the relationship box to indicate spouse, a "5" to indicate spouse's mother or stepmother, etc.

Relationship to you

1. spouse
2. father or stepfather
3. mother or stepmother
4. spouse's father or stepfather
5. spouse's mother or stepmother
6. disabled child 18 or over
7. other

Age Relationship Lives with you? 1 Yes 2 No

Age Relationship Lives with you? 1 Yes 2 No

Age Relationship Lives with you? 1 Yes 2 No

Age Relationship Lives with you? 1 Yes 2 No

Do you claim an income tax credit for any of the persons listed? In other words, on your federal tax return, do you claim any expenses that you pay for care such as nursing services or adult daycare? 1 Yes 2 No

While you are at work, who provides care for or helps this person or persons? Check as many arrangements as applicable. Also, rate your satisfaction with these arrangements using the scale below.

- | | |
|------------------|---------------------|
| 1 Very satisfied | 4 Dissatisfied |
| 2 Satisfied | 5 Very dissatisfied |
| 3 Mixed feelings | |

	Arrangements <input type="checkbox"/>	Satisfaction <input type="checkbox"/>
Looks after self	<input type="checkbox"/>	<input type="checkbox"/>
Adult relative or family member	<input type="checkbox"/>	<input type="checkbox"/>
Someone who was hired	<input type="checkbox"/>	<input type="checkbox"/>
Volunteer or unpaid visitor	<input type="checkbox"/>	<input type="checkbox"/>
Adult day care	<input type="checkbox"/>	<input type="checkbox"/>
Nursing home or care facility	<input type="checkbox"/>	<input type="checkbox"/>

Box continued in next column

When the person you are caring for needs assistance and you take time off from work, which one of the following is most likely to make this possible?

1. I use sick leave.
2. I have flexible hours.
3. I use emergency leave.
4. I take a day off without pay.
5. I use vacation or personal leave.
6. I do my work at home.
7. Other _____
8. I am not able to take time off work.
9. I never need to take time off for this reason.

Have you reduced the number of hours you work per week at your job in order to care for this person or persons?

1. Yes
 2. No
- IF YES, how many hours per week?

How often have you worked less effectively at your job because you are worried or upset about this person or persons?

1. Never
2. Seldom
3. Sometimes
4. Frequently
5. Most or all of the time

In the past year, when this person or persons has needed help, who has usually been the one who has given it or seen that it was given?

1. I have been the only one
2. I have been the main one, with some help from others
3. I have shared equally with one or more others
4. Others, with my help

In the past year, how often has this person or persons helped you by doing each of the following

1. Never
2. Seldom
3. Sometimes
4. Frequently
5. Most or all of the time

caring for children

preparing meals or cleaning

caring for disabled adult family members

helping out financially

other _____

How easy or difficult has it been for you to provide care to this person or persons?

1. Very easy
2. Easy
3. Somewhat easy
4. Somewhat difficult
5. Difficult
6. Very difficult

To what extent do personnel practices in your department make it easy or difficult to provide care for this person or persons?

1. Very easy
2. Easy
3. Somewhat easy
4. Somewhat difficult
5. Difficult
6. Very difficult

People who have responsibilities for providing adult care often have difficulty knowing where to turn to get help. How easy or difficult has it been for you?

1. Very easy
2. Easy
3. Somewhat easy
4. Somewhat difficult
5. Difficult
6. Very difficult

Any comments? Please attach additional sheets if necessary

Thank you for your participation. Please return this questionnaire in the envelope provided.

APPENDIX C

Parent Dependent Care Resource Manual — Sample

The CARE Boosters Employee Resource Manual contains listings of network resources. Each listing includes name, address, phone number and a brief description of program. This saves time and aids parents with their decision to place their child.

The following are examples:

FDC: Jane Doe Phone: xxx-xxxx
1234 5th Street
Escondido, CA 92025

Licensed for large family day care home capacity of 12, Jane has been licensed for 8 years and has formal child development training from Palomar College and various seminars and workshops. Her business is a combination of school, extended family and play place. She feels young children need the security of an extended home while older children are ready for socialization and structured training. She participates in the Child Care Food Program and serves breakfast, lunch and 2 snacks daily.

Susie Smith: Phone: xxx-xxxx
1567 N. A Street
Escondido, CA 92026

Licensed for 6, Susie has her ROP certificate and a Palomar College certificate in child development. Her home is run as an extended family with play time focusing on activities and friends. She participates in the Child Care Food Program and serves breakfast, lunch and 2 snacks daily.

Center Based Care - City

Pre-School Express Director:
xxx Care Booster Way Phone: xxx-xxxx

Ages: 2-6 yrs. Before and after school care for kindergartners.

Program: "I can do it" philosophy - relaxed and loving environment in which children feel free to experience, explore and create through play.

Insurance

It has been CARE Boosters experience that not all insurance agents are fully informed of their companies underwriting policies in day care. Therefore, when researching insurance options be aware that all the following insurance companies provide day care insurance:

BMF Marketing

Allstate Insurance

State Farm Insurance

Insurance for Child Care Project

P.O. Box 880433

San Diego, CA 92108

Phone: (619) 283-3002

Director: Sharon Kalemkarian

This project provides advocacy, support to legislative representatives on insurance issues, insurance, resource and referral information and also a quarterly newsletter.

IRS Instruction Publications that may be helpful:

1040 Instructions - Instructions for Form 1040

Publication 587 - Business use of your home

Publication 534 - Depreciation

Publication 533 - Information on Self-Employment Tax

The following are additional sources of information on employer sponsored family day care systems.

Business and Child Care Handbook. Minneapolis, Minn: Greater Minneapolis Day Care Assoc., 1982

Encouraging Employer Support to Working Parents: Community Strategies for Change. Dana Friedman, New York: Carnegie Corp., 1983

Employers and Childcare: Establishing Services through the Workplace. U.S. Dept. of Labor, Office of the Secretary, Women's Bureau, Washington, D.C., U.S. Government Printing Office, 1982

Employer-Supported Child Care: Investing in Human Resources. Sandra Burud, Auburn House Publishing Co., Dover, Mass.

Family Day Care in the United States: Executive Summary. Final Report of the National Day Care Home Study, Patricia Divine-Hawkins, DHHS Publication, #80-30287, Washington, D.C., 1981

Legal Aspects of Child Care as an Employee Benefit. Child Care Law Center, 625 Market St., Suite 816, San Francisco, CA 94105

Other Employer Supported Family Day Care Systems

America West Airlines
Phoenix, Arizona

Child Care Dallas
Dallas, Texas

MIT - Massachusetts Institute of Technology
Boston, Massachusetts

Montefiore Hospital
Bronx, New York

St. Luke's Rush - Presbyterian Medical Center
Chicago, Illinois

Navy Family Home Care Program
Naval Station, Code 10
Box 15
San Diego, CA 92136-5000



**BOYS & GIRLS CLUB
OF ESCONDIDO
CARE BOOSTERS**

A demonstration project of the
Administration for Children, Youth and Families
U.S. Department of Health & Human Services



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