#### DOCUMENT RESUME

PS 029 763 ED 456 920

AUTHOR Schock, Lisa; Daugherty, Jane

Rate Setting Policies: Ensuring Access and Improving TITLE

Quality. Issues Meeting Proceedings (Washington, D.C.,

November 28-29, 2000).

National Child Care Information Center, Vienna, VA. INSTITUTION SPONS AGENCY

Administration on Children, Youth, and Families (DHHS),

Washington, DC. Child Care Bureau.

2001-07-00 PUB DATE

157p.; For related document on rate setting policies, see PS NOTE

029 762.

AVAILABLE FROM National Child Care Information Center, 243 Church Street,

NW, 2nd Floor, Vienna, VA 22180. Tel: 800-616-2242 (Toll

Free); Fax: 800-716-2242 (Toll Free); e-mail: info@nccic.org; Web site: http://www.nccic.org.

PUB TYPE Collected Works - Proceedings (021)

EDRS PRICE MF01/PC07 Plus Postage.

Abstracts; Conference Proceedings; \*Day Care; Early DESCRIPTORS

Childhood Education; Evaluation Methods; \*Fees; Financial

Support; \*Marketing; \*Policy; \*Surveys

**IDENTIFIERS** \*Child Care Costs; Day Care Quality; Market Research;

Marketing Strategies

#### ABSTRACT

In November 2000, the Child Care Bureau, Administration for Children and Families, U.S. Department of Health and Human Services, convened an Issues Meeting focused on Rate-Setting Policies: Ensuring Access and Improving Quality. The meeting brought together state child care administrators and others for discussions on conducting effective market rate surveys, tiered reimbursement and special needs rates, and interpreting survey data to develop rate policies, reimbursement rates and parent fees, and other innovative subsidy strategies. This report provides an overview of each presentation conducted during the issues meeting. The overviews are organized in the following areas: (1) using market rate surveys to develop rate policies; (2) the survey sample; (3) the survey instrument; (4) using market rate surveys to collect additional data; (5) ensuring accurate data: the role of the provider; (6) cost studies; (7) interpreting and using survey data to develop rate policies; (8) tiered reimbursement and rates for special needs, school-age care, and informal care; and (9) relationship between rates, parent fees, and other innovative strategies. Four appendices include the agenda, presenter list, participant list, presenter handout list, and sample of state surveys. (KB)



## Rate Setting Policies: Ensuring Access and Improving Quality



U.S. DEPARTMENT OF EDUCATION Office of Educational Research and Improvement EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

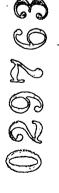
This document has been reproduced as eceived from the person or organization originating it.

Minor changes have been made to improve reproduction quality.

Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

#### **Issues Meeting Proceedings**

**July 2001** 





U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families Administration on Children, Youth and Families Child Care Bureau



Rate Setting Policies: Ensuring Access and Improving Quality was prepared for the Child Care Bureau, Administration for Children and Families, U.S. Department of Health and Human Services, under contract with the National Child Care Information Center (NCCIC), by Lisa Schock, Publications Manager, and Jane Daugherty, Consultant.

This document is for informational purposes only. No official endorsement of any practice, publication, program, or individual by the U.S. Department of Health and Human Services, the Administration for Children and Families, the Child Care Bureau, or the National Child Care Information Center is intended or is to be inferred.



#### National Child Care Information Center

243 Church Street, NW, 2<sup>nd</sup> Floor, Vienna, Virginia 22180 Phone: (800) 616-2242 Fax: (800) 716-2242 TTY: (800) 516-2242

E-mail: info@nccic.org World Wide Web: http://nccic.org



## Rate Setting Policies: Ensuring Access and Improving Quality

**Proceedings Prepared for** 

Child Care Bureau

Administration on Children, Youth and Families

Administration for Children and Youth

Department of Health and Human Services

**Proceedings Prepared by** 

Lisa Schock, Publications Manager Jane Daugherty, Consultant

**July 2001** 



#### **Table of Contents**

Table of Contents	1
Introduction	2
Proceedings Summaries	3
Introduction: Using Market Rate Surveys to Develop Rate Policies	5
The Survey Sample: Which Providers to Survey, How Many and Why?	6
The Survey Instrument	8
Using Market Rate Surveys to Collect Additional Data	9
Ensuring Accurate Data: The Role of The Provider	11
Cost Studies	13
Interpreting and Using Survey Data To Develop Rate Policies	15
Rate Adjustments: Tiered Reimbursement and Rates for Special Needs, School-Age Care, and Informal Care	17
The Relationship Between Rates, Parent Fees, and Other Innovative Strategies	19
List of Appendices	21



#### Introduction

On November 28-29, 2000, the Child Care Bureau, Administration for Children and Families, U.S. Department of Health and Human Services (HHS), convened an Issues Meeting focused on Rate-Setting Policies: Ensuring Access and Improving Quality. Held in Washington, DC, the two-day forum brought together State Child Care Administrators, federal agency staff, and representatives from national organizations, universities, research institutions, child care programs, and resource and referral agencies to examine different approaches to conducting market rate surveys and to learn more about how ratesetting policies impact access to and the quality of child care in communities throughout the United States.

The purpose of the Rate-Setting Policies meeting was to bring together State Child Care Administrators and others for in-depth discussions and sharing of best practices on:

- Conducting effective market rate surveys,
- Tiered reimbursement and special needs rates,
- Interpreting survey data to develop rate policies,
- Reimbursement rates and parent fees, and
- Other innovative subsidy strategies.

These topics were especially important as states prepared for their 2001 State Plan submissions. (New regulations issued by HHS in July 1998 require that states "conduct local market rate surveys no earlier than two years prior to the effective date of their current CCDF plan."1)

This document provides an overview of each presentation conducted during the Issues Meeting (brief summaries along with presenter names are also included in this introduction as a reference). Appendices include the Issues Meeting agenda, presenter list, participant list, presenter handout list, and a sample of state surveys.

A forthcoming companion document, Conducting Market Rate Surveys and Establishing Rate Policies<sup>2</sup>, provides a brief overview of the market-based approach and a discussion of the problems and possibilities in conducting market rate surveys and setting rate policies for the administration of the subsidized system.

<sup>2</sup> Conducting Market Rate Surveys and Establishing Rate Policies (forthcoming), Karolak, Collins, Stoney, National Child Care Information Center, May 2001.



<sup>1</sup> U.S. Department of Health and Human Services, Administration for Children and Families, 45 CFR Parts 98 and 99, Child Care and Development Fund; Final Rule, p. 39988, section 98.43(c).

#### **Proceedings Summaries**

#### Introduction: Using Market Rate Surveys to Develop Rate Policies

Louise Stoney, State Technical Assistance Specialist, National Child Care Information Center, Vienna, VA, and Early Childhood Policy Consultant

Stoney provides an overview of market rate surveys and of child care rate setting activities conducted by states.

#### The Survey Sample: Which Providers to Survey, How Many and Why?

Shelley Waters Boots, Research Director, California Child Care Resource and Referral Network, San Francisco, CA

David Dominguez, Postdoctoral Fellow, Ph.D., Center for Social Work Research, University of Texas School of Social Work, Austin, TX

The speakers explore such issues as who should conduct the market rate survey as well as exactly who should be surveyed. Several key points emerge during this discussion: one, states should draw samples using the smallest geographic boundaries possible; two, getting a high response rate is crucial; and three, if possible, when conducting a random sample, use a statistician to help draw the sample.

#### The Survey Instrument

Deborah Lyons, Ph. D., Director, Center on Applied Research and Urban Policy, University of the District of Columbia, Washington D.C.

Dr. Lyons discusses design and implementation of survey instruments in order to get optimal results, summarizing the survey's four main purposes. She also elaborates on types of questions, question formats, and issues related to leading or threatening/sensitive questions.

#### Using Market Rate Surveys to Collect Additional Data

Linda Mills, Consultant, Mills and Pardee, Concord, MA Eric Karolak, Ph.D., Budget/Policy Analyst, Ohio Legislative Budget Office, Columbus, OH

The speakers share the results of two different types of survey instruments and show how the data collected broadens their understanding of child care markets in their respective states.

#### **Ensuring Accurate Data: The Role of The Provider**

Susan Eckelt, President, National Association for Family Child Care, Tulsa, OK Lynn White, Executive Director, National Child Care Association, Conyers, GA Kerry Moser, Executive Director, Catholic Charities Office of Child Care, Providence, RI

This session looks at market rate surveys from the child care provider's perspective. To get accurate data and a high response rate, the speakers suggest reaching out to the leadership of



family child care associations, involving child care center directors in development of the survey, and being aware of appropriate times to call centers and family child care homes for survey input.

#### **Cost Studies**

Jana Fleming, Ph.D., Investigator, Frank Porter Graham Child Development Center, Chapel Hill, NC

Jason Sachs, Early Childhood Services, Massachusetts Department of Education, Malden, MA

Child care providers and state policymakers need to be able to measure the actual *cost*—not the price—of providing child care. Speakers in this workshop address this need, providing an overview of research underway at the Frank Porter Graham Child Development Center in Chapel Hill, NC, and of a cost quality study being conducted by the Massachusetts Department of Education.

#### **Interpreting and Using Survey Data To Develop Rate Policies**

Peggy Ball, Division of Child Development, North Carolina Department of Health and Human Services, Raleigh, NC

Barbara Ferguson Kamara, Executive Director, Office of Early Childhood Development, District of Columbia Department of Human Services, Washington DC

Market rate survey data can help state child care administrators accomplish any number of objectives, from setting rates to expanding access to supporting high-quality care. This session explores how to translate data into payment rates and looks at how specific market rate surveys have led to revised rate setting policies in North Carolina and the District of Columbia.

### Rate Adjustments: Tiered Reimbursement and Rates for Special Needs, School-Age Care, and Informal Care

Abby Cohen, State Technical Assistance Specialist, National Child Care Information Center, Vienna, VA

Pam Browning, Public Policy Liaison, National School-Age Child Care Alliance, Chevy Chase, MD

Speakers address rate adjustments, including special needs rates, tiered reimbursement for high quality, informal care, kith and kin, odd-hours care, and school-age care, explaining why such adjustments are necessary when costs for certain types of care cannot be addressed within the market rate structure.

#### The Relationship Between Rates, Parent Fees, and Other Innovative Strategies

Gina Adams, Senior Research Associate, Urban Institute, Washington D.C. Louise Stoney, State Technical Assistance Specialist, National Child Care Information Center, Vienna, VA, and Early Childhood Policy Consultant

This session explores how state policies and practices shape what providers receive in terms of reimbursement, discusses the impact on parents of fees and rates, and highlights several states with innovative rate-setting policies.



## **Introduction: Using Market Rate Surveys to Develop Rate Policies**

#### Speaker:

 Louise Stoney, State Technical Assistance Specialist, National Child Care Information Center, Vienna, VA, and Early Childhood Policy Consultant

**Stoney** provided an overview of market rate surveys and of child care rate setting, addressing the following questions:

- What is a market rate survey?
- When did states begin conducting market rate surveys, and why?
- What is the 75<sup>th</sup> percentile?
- What is the relationship between market rate surveys data and the rate policies established by states?

Stoney also stressed the importance of understanding the relationship between direct subsidies (grants or contracts to child care programs) and indirect subsidies (vouchers or certificates to help parents pay fees). According to Stoney, raising the reimbursement rate isn't the only way to make child care affordable. In some cases, raising public rates forces programs to raise private rates and, in the end, can make child care too expensive for moderate- and middle-income families. Stoney encouraged states to explore the feasibility of developing financing strategies that combine portable and direct subsidies in the same program.



## The Survey Sample: Which Providers to Survey, How Many and Why?

#### **Discussion Leaders:**

- Shelley Waters Boots, Research Director, California Child Care Resource and Referral Network, San Francisco, California
- David Dominguez, Postdoctoral Fellow, Ph.D., Center for Social Work Research, University of Texas School of Social Work, Austin, Texas.

Shelley Waters Boots stressed the importance of thinking carefully about who should conduct the market rate survey and allocating sufficient resources to get the job done. California surveys about 37 percent of the total population, or about 14,000 providers. The scope of this project, which requires the equivalent of two and a half full-time staff, includes conducting overall survey design, data analysis, and writing the report. In addition, the California Child Care Resource and Referral Network spends about \$250,000 to contract with a survey research firm to do data collection (about 30 staff do data collection.) The key issue is making sure that you have staff with the expertise and the credibility to do the job.

Ms. Boots also addressed the issue of thinking carefully about who you survey. For example, what types of care are included? Who is excluded, and why? California excludes child care programs that serve 100 percent subsidized children and that are under contract with the state to serve those children. They exclude these providers because their rate is not set by the market, but rather is negotiated by the state. California also excludes informal, unregulated child care providers and Head Start programs.

Ms. Boots explored the pros and cons of using administrative data to collect information on rates (e.g. using the rate data that child care resource and referral agencies (CCR&Rs) collect as they are building their referral databases). Even though the resource and referral agency does the market rate survey, they do not use administrative data to set rates. Instead, they use the list of providers that CCR&Rs compile in their databases to draw a sample of providers; they then hire a separate survey research firm to conduct telephone interviews with each of these programs. California does not use administrative data from the CCR&Rs because it could not ensure that the rate data was gathered in a consistent, uniform, nonbiased way, that each provider was asked exactly the same questions and that data were entered in exactly the same way. Ms. Boots stressed that the primary goal was to get a representative sample that accurately reflects the prices of child care in a given and defined market.

**Dr. Dominguez** provided information on the sampling strategy used by the Center for Social Work Research. The Center uses a telephone system called Computer Assisted Telephone Interview (CATI). Telephone operators ask each center or family child care provider to provide the rate for each segment of the population. Mr. Dominguez also explained the importance of understanding sampling error in order to ensure the accuracy of the rates used to set reimbursements.



#### Several key points were raised during this discussion:

- All child care is local, and prices can vary widely within a small geographic area, depending upon the type of neighborhood where the program is located. In general, the smaller a jurisdiction, the more likely one will be able to accurately reflect the price of care. To this end, states should draw samples using the smallest geographic boundaries they can realistically handle. Smaller areas can then be collapsed into larger areas for the purpose of setting rates. But by gathering data in small areas, the state is at least able to see how and where rates vary.
- Getting a high response rate is crucial. States must make every effort to get a large percentage of the programs they sample to respond. California has a 71 percent response rate. They work very hard, calling back programs that don't respond, oversampling by 15 percent to make sure they have a long enough list of potential providers, making appointments with providers to fill out the form and calling them in the evenings or on weekends if necessary.
- If you are doing a random sample rather than contacting all of the providers in an area, use a statistician to help draw the sample. Many universities have statisticians on staff who are willing to work with the state.



#### The Survey Instrument

#### Speaker:

• Deborah Lyons, Ph.D., Director, Center on Applied Research and Urban Policy, University of the District of Columbia, Washington DC

**Deborah Lyons** spoke about the purpose, objectives, and design of the survey instrument, summarizing its four main uses. One, the survey instrument is used to translate survey objectives—so you must know precisely why you're surveying before you design the instrument. Two, the survey instrument is used to ask pertinent questions. Three, the survey instrument is used to record the survey responses—so it's important to think of the instrument as a recording document. Finally, the instrument is also significant because it guides the data entry.

Dr. Lyons discussed the importance of thinking carefully about how you phrase questions, and of pretesting the instrument with different types of providers before beginning the survey. Information is gathered by telephone, so those individuals conducting the interviews need to be carefully trained to ensure uniformity.

One participant asked how states can be sure that responses to the survey are accurate. Dr. Lyons responded that one way to check reliability is to ask for information you already have and to see if the answer you get matches. For example, she will ask the provider to give her capacity data, hours of operation, and other information that has already been collected in a database. If these two sources don't match, she goes back and takes another look at all of the answers on the survey form. Shelley Waters Boots commented that one way they address this concern in California is to ask the same question several times, in different ways, and see if the answers they get are consistent. Another way to check the accuracy of data is to review the numbers as a whole during the analysis period. Rates generally cluster within a certain range. Rates that are significantly above or below this range are suspect, and might be excluded from the survey.



#### Using Market Rate Surveys to Collect Additional Data

#### **Discussion Leaders:**

- Linda Mills, Consultant, Mills and Pardee, Concord, MA
- Eric Karolak, Ph.D., Budget/Policy Analyst, Ohio Legislative Budget Office, Columbus, OH

Eric Karolak shared the results of a rate survey that included questions on payment procedures. The Ohio legislature asked the Legislative Budget Office to study the child care payment system (in other words, how the subsidy is delivered to providers), and to make recommendations specifically with regard to the feasibility of a prospective payment system. The Lead Agency in Ohio invited the non-partisan legislative research office to include its payment-system related questions in part of the state's market rate survey. Ohio surveys all licensed providers by mail and conducts a telephone survey of three percent of family child care providers. While both the agencies shared data, each was independently responsible for the development of specific questions for the mail survey of licensed providers. The result was a 62-question, 14-page survey instrument that yielded a response rate of only 51.6 percent.

Providers were asked not only to rate various alternative payment systems and methods, but also to relate their experience with existing payment procedures. Survey results showed 70 percent of invoices/vouchers were processed within 30 days, but 28.4 percent of providers participating in the subsidized child care system had experienced a "cash flow crisis" resulting from delayed or incomplete reimbursement from the county offices that administer the subsidy in Ohio. The budget office also arranged focus groups and elite interviews and learned that, despite testing questions in advance, the survey should have asked "What percentage of your invoices are paid in full in 30, 60, or 90 days?" The budget office learned that while invoices are processed quickly, they're subjected to a verification process that accounts for authorized hours, eligibility, and other items, which can reduce the invoiced amount and result in what amounts to delayed payment to the provider once all is said and done. In the case of one provider studied in detail, invoices for 123 service-weeks were finally approved as much as a year after service had been provided and the invoices initially submitted and subjected to review. Dr. Karolak observed that the "the rate itself is not the end-all and be-all in terms of the revenue side of the picture for providers," but is affected by payment procedures also.



Linda Mills, who conducted the market rate survey for Vermont, had a very different experience. She found that providers were very willing to respond to a broad array of questions on the child care market—resulting in 78 percent response rate. (It is important to note, however, that the survey conducted by Mills and Pardee included a number of incentives to respond promptly. For example, a reward of \$500 was offered to the three CCR&Rs that generated the highest percentage of survey responses. And providers who returned their survey instruments promptly were eligible to participate in a drawing for prizes such as 20 coupons for \$50 worth of child care materials and supplies and a free spa weekend.)

In addition to rate data, the Vermont market rate survey gathered information on:

- Qualifications, wages, benefits, and working conditions of child care providers.
- Characteristics of licensed child care centers and homes (e.g. hours, services, and accreditation status).
- Current enrollment and populations served.
- Some provider-subsidized costs.

By gathering such a broad array of data, the Vermont Child Care Services Division was able to understand the child care markets in the state in new ways. For example, the survey showed that centers accredited by the National Association for the Education of Young Children (NAEYC) were among the largest centers in the state, were the centers that paid the highest salaries, had more highly educated staff, and charged higher rates. When they looked at rates by county, they learned that market rates varied tremendously from one county to another. In some counties, the local market rate was as much as 34 percent higher than the state rate (Vermont sets a single, statewide rate ceiling), while in others it was up to 9 percent lower than the state rate. In sum, Vermont concluded that doing such a broad survey provided them with well-documented, credible information that can help with making decisions on a variety of child care policies.



#### **Ensuring Accurate Data: The Role of The Provider**

#### **Discussion Leaders:**

- Susan Eckelt, President, National Association for Family Child Care, Tulsa, OK
- Lynn White, Executive Director, National Child Care Association, Conyers, GA
- Kerry Moser, Executive Director, Catholic Charities Office of Child Care, Providence, RI.

Susan Eckelt began by giving the audience a sense of what it is like to be a family child care provider who receives a market rate survey in the mail:

I'm a family child care provider, so the only time I am not directly supervising kids is during naptime, which is when I try and get caught up on paperwork. During this time, I would be planning activities for the next day, planning curriculum, making sure I have the appropriate materials. I would be looking at my menus and writing out grocery lists. I would be writing daily notes to the parents of the children that I care for on how their day is going, how many times they've gone to the restroom, what they have eaten for the day ...

Then I update my child care food program data, making sure that I have accurate attendance records, and that I have recorded what I have fed the children, and how much. I record payments from the parents, the attendance records, I respond to phone calls from prospective clients. If there is time before the children wake up, I may pick up that survey to review those questions. Although I realize the information is a very important thing, the last thing I really need or want at this point is another 10 back-to-back page survey....

Ms. Eckelt told the group that she had sent out an e-mail to the NAFCC board, which represents family child care providers across the United States, and wasn't prepared for the overwhelming response she received (despite the fact that it was Thanksgiving and she gave them a one-week turnaround time). By a large margin, the family child care providers reported that they never really understood why their state was conducting a market rate survey or what the information was going to be used for. Family child care providers who did not care for subsidized children reported that they didn't respond to the survey because they thought it was irrelevant to them. ("What's in it for me? This is not going to make a difference to me in my daily life as a family child care provider.")

Providers in states that used CCR&R agencies to collect the data reported that they were hesitant to participate because they were afraid that the agencies would use this information to give to the parents calling in looking for child care. They therefore did not give accurate data. Others said that the survey was not user-friendly. They didn't understand exactly what the questions were asking or how rates would be converted.



Some of the providers admitted that they submitted lower fees than they actually charged, suspecting that the information was going to get back to the IRS.

To get accurate data from the providers, it's important to reach out to the leadership of family child care associations. Let them review the proposed surveys and the accompanying letters that are going to be sent out with these surveys. Be sensitive to the times when they are able to attend the meetings, and to the fact that they lose money when they leave their programs. Most importantly, try to answer the child care provider when she says, "What is this going to do for me?"

Lynn White also sent an e-mail to her membership asking for input, and also got a large response rate. Most of her members reported that they preferred a mail survey (although they admitted that they often do not respond to mail surveys in a timely fashion), and that the single largest barrier to completing the survey is time. They also stressed the importance of asking to speak with the right person—the director or the financial manager. They suggested calling during nap time, and never calling between 3:30 p.m. and 6 p.m. Ms. White agreed that involving child care center directors in development of the survey was an excellent idea. She also suggested developing tools and training to help providers calculate accurate rates, adapting state payment policies to reflect the way the market operates (for example, pay by enrollment not attendance).

**Kerry Moser** concurred with many of the comments made by Ms. Eckelt and Ms. White. She stressed the complexity of running a child care center and the difficulty of setting rates that accurately reflect the cost of care:

I've been in administration for a long time ... I've run nursing homes; I've run 24-hour facilities for fragile children ... and none of those are as complex as child care.



#### **Cost Studies**

#### **Discussion Leaders:**

- Jana Fleming, Ph.D., Investigator, Frank Porter Graham Child Development Center (FPG), Chapel Hill, NC
- Jason Sachs, Early Childhood Services, Massachusetts Department of Education, Malden, MA

Market rate surveys measure the *price*—not the cost—of child care. Increasingly, child care providers and state policymakers want to be able to measure the actual cost of providing child care. This workshop was intended to address that need.

Jana Fleming provided a brief presentation on research that she is currently conducting on the actual cost of producing child care. She began by stressing the importance of being clear about exactly what expenses—and what revenues—are included in calculating the cost of care. A summary of the expense and revenue information gathered as part of the FPG cost studies is included in this report.

A 40-page financial data form must be completed by each program that participates in the FPG cost study, a task that has proven to be very difficult. In most cases, FPG has had to send a staff person out to the center to explain how to fill out the form. Many of the child care programs that participated in the study did not have all of the necessary financial information needed, so FPG staff had to work with them to create the data, or they have had to use data of questionable validity.

Dr. Fleming noted, however, that FPG is doing a similar study with NAEYC-accredited child care centers in Chicago, and the process is running much more smoothly. The providers there are having an easier time completing the form and working with FPG staff.

The key issue in ensuring broad participation in cost studies is helping programs understand why they should fill out the form. How will it help them? FPG has learned that the process it developed for gathering budget information has helped programs to think critically about how to structure their budgets and maintain cost information. Several program participants, who were reluctant to participate at first, told FPG staff that in the end, the process was very helpful to them. Jana noted that a more effective way to do cost studies might be to develop a financial data collection form, then provide ongoing training and technical assistance with programs on records-management and bookkeeping, and then give the programs a year or so to implement the new financial procedures. After a year or 18 months, the research team could go back in and gather uniform data from all the programs, analyze it, and estimate an actual per-child cost.

Dr. Fleming also noted that she is currently working with child care center directors and owners to help streamline the financial instrument and focus on the most critical pieces so



that it is easier to complete. Additionally, she is working with a group in Chicago to adapt the form to collect costs in public prekindergarten programs.

Jason Sachs reported on a cost quality study that is currently being conducted by the Massachusetts Department of Education. The study includes five surveys, which focus on center-based child care (e.g. child care and Head Start centers), family child care providers, school-age child care programs, public school prekindergarten programs, and parents. The surveys—which are referred to as Community Profiles—are being conducted by 40 of the Community Partnership Councils (CPCs) in Massachusetts. (Participation has been very strong. The state only asked for 20 CPCs to participate and they got 40 volunteers.) The goal is to answer four key questions:

- What is the quality of community-based early care and education for preschoolers?
- What is the relationship between the family income of children served and the quality of care provided?
- What are the costs of community-based early care and education for preschoolers?
- What is the relationship between quality and cost?

Mr. Sachs shared a copy of the center-based child care survey, which gathers information on program characteristics, auspices, population served (including ages of children, child and family demographics), fees, facility costs, services provided to families (e.g. health and other comprehensive services, transportation, etc.), accreditation status, staffing, wages, turnover, curriculum, staff development, parental involvement, technology, budget, and revenues.

In addition to the paper surveys, the department is conducting program evaluations using the Infant Toddler Environmental Rating Scale (ITERS) and the Early Childhood Environmental Rating Scale (ECERS) and doing individual interviews with programs to gather cost data.

Although the data are still being analyzed, the study has already produced some interesting results. Parents are paying for most of the care, and they are paying a significant percentage of their income—27 percent if they are at the median income and using full-time center-based care. Turnover in center-based care is more than 40percent of teachers and 65 percent of assistants. And child care centers with large numbers of subsidized children are paying their teachers less than centers with fewer subsidized children.



#### **Interpreting and Using Survey Data To Develop Rate Policies**

#### **Discussion Leaders:**

- Peggy Ball, Division of Child Development, North Carolina Department of Health and Human Services, Raleigh, NC
- Barbara Ferguson Kamara, Executive Director, Office of Early Childhood Development, District of Columbia Department of Human Services, Washington DC

Peggy Ball began the discussion by stressing the importance of being clear about your goals when conducting a market rate survey. Do you want to set rates or do you want to expand access as well? Do you want to give incentives for higher-quality care? Do you want to support existing quality? Do you want to collapse rates? Simplify? Market rate survey data can help state child care administrators accomplish all of these objectives.

North Carolina conducts a census survey of all regulated child care, rather than drawing a sample. The state collects data by county and by level of license (North Carolina has a five-level licensing system), which allows policy staff to look carefully at the relationship between the price of care and the level of the license. The last time the state did a survey (which was in 1997 and had an 85 percent response rate) the licensing system had only two levels. But the survey showed a 35 percent to 40 percent difference in rates between the two levels. That was helpful information for budgeting and planning purposes. In short, North Carolina child care market rates are closely tied to the state's rated licensing system because that is the state's goal: to support higher quality care and make it accessible to low-income families.

Barbara Kamara explained that the District of Columbia funds child care in contracted child care centers and homes as well as through vouchers. Both groups of providers receive the same rate, based on the market rate survey, although contract centers do not have the parent fee portion subtracted from their rate. The District is currently in the process of conducting a new market rate survey.

The last market rate survey was completed in 1998. In addition to questions on the price of care, the survey included a number of other questions designed to help the Office of Early Childhood Development (OECD) make policy decisions. For example, OECD learned that 58 percent of infant slots and 60 percent of toddler slots were purchased through vouchers but that 75 percent of the preschool slots were in contracted care. They also learned that a majority of providers were willing to expand, but that they needed financial assistance for renovations and equipment. As a result, the District allocated funds for equipment and began to work more closely with banks to secure funds for facilities.

The 1998 survey also demonstrated a need not only to raise rates but also to restructure them. To respond to this need, OECD established a rate-setting task force, which included providers of all types as well as representatives from military child care and the

15



federal government centers. They prepared a series of recommendations, which included implementing a tiered reimbursement system; establishing rates for foster parents, children with disabilities, and Temporary Assistance to Needy Families (TANF) recipients; and revising co-payments. Deborah Lyons, who conducted the DC market rate survey, presented findings to the rate-setting task force. She also did a presentation for the OECD staff, because staff who administer child care subsidies often do not understand the child care market. These presentations were helpful in ensuring that everyone was on the same page and understood the data.

As a result of the survey, the rate-setting task force, and a lot of internal evaluation, DC has begun to revise its rate structure. A new tiered reimbursement system has been established, a new toddler rate was added to the reimbursement schedule, and DC has continued to work on other sources of revenue to subsidize costs like staff development, equipment, and facilities.



## Rate Adjustments: Tiered Reimbursement and Rates for Special Needs, School-Age Care, and Informal Care

#### **Discussion Leaders:**

- Abby Cohen, State Technical Assistance Specialist, National Child Care Information Center, Vienna, VA
- Pam Browning, Public Policy Liaison, National School-Age Child Care Alliance, Chevy Chase, MD

Abby Cohen gave a brief overview of rate adjustments, including special needs rates, tiered reimbursement for high quality, informal care (kith and kin), and odd-hours care. She explained that rate adjustments are necessary when you cannot address the costs for certain types of care within the market rate structure. Children who have special needs, and may require extra supervision or special equipment, are one example. It is not possible to rely on a market rate survey to gather information on the price of this type of care, since charging a higher price might be a violation of the Americans with Disabilities Act (ADA). States have developed several different ways to establish a rate adjustment for children with special needs. Some simply add a flat dollar amount onto the standard rate. Others base the adjustment on a percentage of the basic rate. Some have developed tiered systems with flat rates for various degrees of severity (mild, moderate, and severe). And some states determine the adjustment on a case-by-case basis and do an individualized assessment of the child's needs.

Ms. Cohen spoke in more detail about what is required under the ADA and the importance of breaking the link between the cost of providing care to children with special needs and what private, fee-paying families can afford to spend on child care.

Twenty-four states and the District of Columbia currently have some form of tiered reimbursement rate for higher quality. Most states rely on national accrediting bodies to assess and monitor compliance, although a few have their own systems. Most typically, tiered reimbursement mechanisms include paying higher quality programs a percentage, or a flat dollar amount, over the standard rate. A number of issues were discussed, including establishing effective standards or measures of quality, determining the amount of the bonus, monitoring quality, and ensuring that accreditation support is available.

Many states have established a lower rate for informal, unregulated child care. In most cases, states pay these providers a percentage of the regulated family child care rate.

One participant also noted that states are experimenting with tiered reimbursement rates in a variety of ways. Some states, for example, are paying a higher rate for infant care to providers who agree to serve fewer children or who attend a special infant care training program. Others are paying higher rates to centers with directors that have a director's credential or other staff with higher qualifications.



Pam Browning led a discussion of school-age child care. She stressed that most school-age child care programs cannot collect fees high enough to cover their costs, so some form of subsidy is necessary. Many families will not apply for individual subsidies (vouchers or certificates) for school-age child care because the co-payments are so high that the amount they receive in subsidy isn't large enough to make it worth the time and paperwork. Market rate surveys also frequently misrepresent costs in school-age child care because the programs themselves don't report the real costs. Ms. Browning further noted that the National School Age Child Care Alliance has a new accreditation system, and that state support for achieving accreditation is important.



## The Relationship Between Rates, Parent Fees, and Other Innovative Strategies

#### **Discussion Leaders:**

- Gina Adams, Senior Research Associate, Urban Institute, Washington D.C.
- Louise Stoney, State Technical Assistance Specialist, National Child Care Information Center, Vienna, VA, and Early Childhood Policy Consultant

Gina Adams reported on the Urban Institute's Assessing the New Federalism Project and the lessons that have been learned about child care subsidies. She focused her remarks on two key points:

Implementation Matters – The way that states implement policies can have a profound impact on the outcome. For example, the rate might be \$100 per week per child, but that doesn't mean that the provider actually gets this amount if they don't comply with all of the other rules and regulations, such as parent fees. Most states subtract parent fees from the rate before they reimburse the provider. But what if the provider can't collect that fee from the parent? Quite a few of the providers the Institute spoke with said that they had just given up on trying to collect fees from low-income parents. Other issues are absence policies and "units of service"—that is, how the day is defined. Low-income parents often have transient work environments, so they move in and out of jobs a lot. That makes reimbursement for the provider even more difficult.

In seeking to address these issues, key questions to ask include: At what point is the family authorized for care? How does the provider know? Is there clarity about that communication? And communication flows two ways. Are the providers reading the paperwork they are sent? Is the state getting the paperwork out on a timely basis? Things often fall apart, and the bottom line is that the provider doesn't get paid. Often, it has nothing to do with the rate.

**Provider Fees Matter** – Many states allow providers to charge parents the difference between the rate ceiling and the amount the provider actually charges. This is done to ensure that parents have maximum choice, but the net result is that parents can get hit with double fees—the state portion and the provider portion.

Ms. Adams also talked about the importance of staff training, caseloads, and the idea of "billing collaboratives," through which providers could come together so that they could have more efficient billing and paperwork transactions with the state.

Louise Stoney concluded the conference by reminding the group that establishing a market rate ceiling is only one part of the picture. The bottom line, for all child care providers, is how much money they receive each month. The per-child rate shapes this reimbursement, but there are many other factors that influence it as well, including additional provider fees, rate differentials, units of service, absence policies, etc. Ms.



Stoney also mentioned examples of states that pay for child care through a combination of portable and direct subsidies. These include Wisconsin's Quality Improvement Grants Program, Vermont's Quality Bonuses, the Washington State Wage Ladder, North Carolina's WAGES initiative, and New York State's campus-based child care program. She also spoke briefly about the Comprehensive Child Development Program, which Texas developed several years ago but has since discontinued.



#### **List of Appendices**

Appendix 1. Presenter Handouts List and Handouts

Appendix 2. Agenda

Appendix 3. Presenter List and Final Participant List

Appendix 4. Sample of State Survey Materials



#### **Presenter Handouts List and Handouts**

(in order of appearance on meeting agenda)

#### **David Dominguez**

• "Market Rate Survey Methods: Sampling Issues"

#### **Shelley Waters Boots**

- "Regional Market Rate Studies: The Survey Sample: Who to Survey, How Many and Why?"
- "RMR Survey Methodology"
- "California Childcare Resource and Referral Network Regional Market Rate Survey Population"
- "CCCRRN RMR2001 Tasks"

#### **Deborah Lyons**

- "The Survey Instrument"
- "2000 Market Rate and Expansion Capacity Survey: Child Care Providers in the District of Columbia"
- "Housing Status of Family Child Care Providers in the District of Columbia"

#### Linda Mills

"Beyond a Market Rate Study: How we can learn more about our child care system"

#### Eric Karolak

• "Ohio Legislative Budget Office: Child Care Payment System Report Summary"

#### Lynn White

• "Rate Setting Policies: The Role of the Provider in Partnership with State Administrators"

#### Jana Fleming

• "Rate Setting Policies Presentation: Cost Studies: Financial & Program Characteristics Data"

#### **Jason Sachs**

"Center & Head Start Survey"

#### Peggy Ball

"Interpreting and Using Survey Data to Develop Rate Policies"

#### Barbara Ferguson Kamara

 "Rate Setting Policies: Interpreting and Using Survey Data to Develop Rate Policies in the District of Columbia"

#### **Abby Cohen**

• "Rate Adjustments"



## "Market Rate Survey Methods: Sampling Issues" David Dominguez, Ph.D., Center for Social Research, University of Texas at Austin

Slide 1	Market Rate Survey Methods: Sampling Issues  Centre for Social Work Research David Demangers: Lawa Levis Card Levis Overview of the Texas Experience	Slide 5	Sampling: A Texas Example  Large State  Within each region different types of care:  Type of facility  Age of child  Part-time/Full-time
Slide 2	Presented by David Dominguez, Ph.D.  B Post-Doctoral Fellow The Center for Social Work Research The University of Texas at Austin Phone: 512-471-7596 E-Mail: drdominguez@mail.utexas.edu	Slide 6	Sampling: Types of Care  Type of Care Definition Number of Children Licensed Day Care Licensed by the Center state to care for: Group Day Home Registered by the State to care for: Family Day Home Registered by the State go care for:
Slide 3	Other contacts for information:  13 Laura Lein, Ph.D.	Slide 7	Sampling: Ages of Children  Infants: 0-17 months Toddlers: 18-35 months Pre-School: 3 through 5 years School-Age: 6 years and older
Slide 4	A Report in Four Sections  Sampling Strategy Survey Methodology Problems that Emerge Concluding Comments	Slide 8	Sampling: Hours of Care  Full-Time Care: More than 6 hours daily  Part-Time Care: Six hours and under daily



#### Sampling: Listing of Cells

Sampling Framework for each of the 2% areas

Lean and Day Con-Cusin Paguatesed Crosp Rems to Mark Conpage 1 Mark Conpage 1 Mark Conpage 1 Mark Conpage 1 Mark Conpage 2 Mark Conpage 2 Mark Conpage 2 Mark Conpage 3 Mark Conpage 4 Mark Conpage 3 Mark Conpage 4 Mark Conpage

#### Slide 13

#### Methodology: Sample Identification

- Draw sample from entire population: Draw randomly.
- Check sample for "stable" number.

  Allow for non-respondents:
  - Unreachables Refusals "Duds"

#### Slide 10

#### Sampling: Drawing the Sample

- B Representative sample of each type of care
- E Difficulties with scarce types of care
- Sampling related to percentile rates most likely to be used
- Use of sampling consultant
- n Draw on your common sense

#### Slide 14

#### Methodology: Sample Inclusion

- a Include:
  - All licensed/registered care except --
- Tax Exclude or do analyses with these excluded:
  Head starts

Heavily subsidized care Short day educational programs

#### Slide 11

#### Sampling: Scarce Types of Care

- Most facilities deliver several types of care.
- a In our survey we ask each facility about each kind of care they deliver.
- Some kinds of care are extremely scarce:
   Part-time infant care
   In some areas, all part-time care

#### Slide 15

#### Methodology: Contacting the Sample I

B Letter First:

Establish sponsorship.
Outline project.
Create expectation of o

Create expectation of call.

Refer to letter:
Explain again.

#### Slide 12

#### Survey Methodology

- # Identifying the sample
- # Contacting the sample
- a Interview instrument
- Telephone survey
- Data recording
- m Analysis

#### Slide 16

#### Methodology: Contacting the Sample II

- a Try to reach all respondents: Day-time, Evenings, Weekends Be willing to set appointments
- Fincourage all respondents to reply:
   Answer questions
   Be prepared to send letter again or FAX letter
   Allow doubtful respondents to talk to supervisor

#### Singe 12



#### Methodology:

Interview Instrument 1: Rates

- # Ask about rates for each category.
- Ask about extra fees.
- # Ask number of children in each category.
- Prepare to deal with exceptions:
  - Discounts

Family sibling rates

#### Slide 21

#### Methodology: Data Recording

a Reminder: Only with complete and accurate data recorded has a facility been sampled: Trained interviewers/data entry Mechanized data entry system Check for accuracy in data system

#### Slide 18

#### Methodology:

Interview Instrument II: Extras

- B Extra questions of interest:
  - After hours care
  - Sick care
  - Care for children with disabilities
  - Facility accreditation
  - Extra services offered
  - Staff status

#### Slide 22

#### Methodology: Analysis

- a Reminder: In the analysis, relevance of sample is important --
  - Who is absent from sample?
  - Who is excluded?
  - Who has incomplete or divergent data?

#### Slide 19

#### Methodology:

Interview Instrument III: Comments

- □ Allow for unusual information:
  - Create comment fields.
- Encourage entry of comments.
- B Enter additional detail:
  - Unusual fees

Unusual discount structures

#### Slide 23

#### Methodology: Scarce Care

- □ Scarce Care Formula
  - >The ratio of local part-time infant care to local full-time pre-school care Is equal to The ratio of statewide part-time infant care to Statewide full-time pre-school

#### Slide 20

#### Methodology: Telephone Survey

- # REASONS TO ENCLUDE:
- No langer doing child care
- # Refuses
- Repeatedly breaks appointments for interview
- n Cannot be reached by telephone
  - Phope distantantal
  - Answering meeting always on Kings name than 15 times

#### Slide 24

#### Problems: Foreign Language

- a Interviewers must speak languages reasonably fluently.
- a Interviewers must record misunderstandings in detail.
- n Differences among language groups must be noted.



#### Problems: No-Fee Providers

- # Note providers who charge no fees.
- 13 Use comment section to record reasons.

#### Slide 29

#### **Problems: Different Groupings**

- Children may be grouped differently:
   Different ages
  - By toilet training In family groups

#### Slide 26

#### Problems: After-School Care

- After-school care is part-time, but morning and afternoon care costs more than just afternoon care.
- Heavily subsidized care often dominates a community's after-school care market.
- Use comment section to record variations in type of care and subsidy.

#### Slide 30

Problems: Head Start as an Anomaly

- Some communities have many Head Starts.
- # Head Starts charge high rates.
- Parents don't pay head start rates directly.

#### Slide 27

#### Problems: Scarce Care

- Some kinds of care are scarce:
  Infant care
  Part-time care
- m Rates for scarce care are not so reliable

#### Slide 31

#### Concluding Comments I

- # Use common sense:
  - Population of care facilities Sampling
    - Attempts to reach sample

#### Slide 28

#### **Problems: Summer Camps**

- Summer camps are used for school-age care.
- B Summer camps are not licensed as child care facilities, so rates are not included.

#### Slide 32

#### Concluding Comments II

- **u** Communicate regularly with contractor: Problems will come up.
  - Data collection is related to policy decisions. Decisions about sampling and data collection are made on an on-going basis.



#### Concluding Comments III

Ask for help when needed:
 Look to consultants.

 Talk with representatives of the child care community.
 Talk with policy experts.

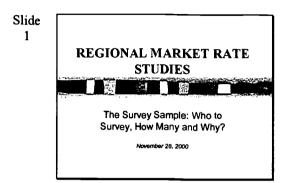
#### Slide 34

Please feel free to call for any additional information.

Center for Social Work Research 512-471-9219



"Regional Market Rate Studies: The Survey Sample: Who to Survey, How Many and Why?" Shelley Waters Boots, Research Director, California Child Care Resource and Referral Network

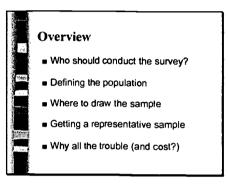


Where to Draw the Sample

What source can give you (more or less) a complete list of individuals in the population to be studied?

What are the drawbacks or each list?

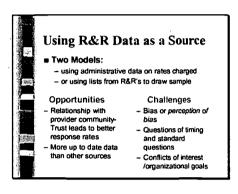
Slide 2



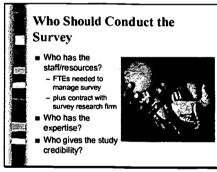
Slide

Slide

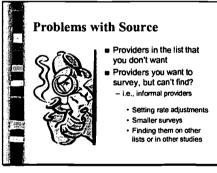
5



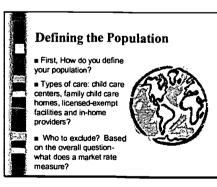
Slide 3



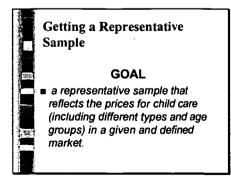
Slide



Slide



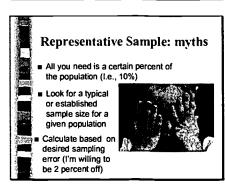
Slide



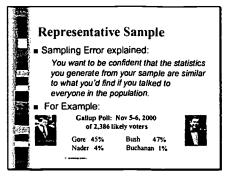


# Representative Sample First, need to define the child care market. Is it a county, a zip code, a census block, a city, region or grouping of counties? Should reflect similar geographic, economic or demographic conditions. Then, think about how many people in each of these areas you need to talk to.

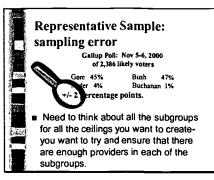
#### Slide 10



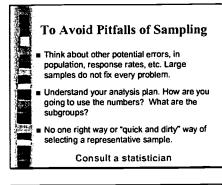
#### Slide 11



Slide 12



#### Slide 13



Slide 14

## Why All the Trouble and Cost? Market Rate Surveys can help: Ensure accuracy of rates used to set reimbursements Create an accepted method of determining rates outside of the political or budgetary climate Ensure that low income families have access to a sizable portion of the market

■ Decrease the influence of subsidies on the

larger child care "market"



#### RMR Survey Methodology

#### A Brief History

For the last 13 years, the California Child Care Resource and Referral Network has been the contractor responsible for conducting the Regional Market Rate Survey (RMR), first under the Department of Social Services, and since 1989 under the Department of Education. A market rate survey, mandated in federal law, is a study designed to gather information from providers about what they currently charge parents for child care and what the "going rate" for child care is in their community. The State then uses this information to determine a *ceiling*, or a top price at which they will reimburse eligible families for their child care costs. Prior to conducting the survey, reimbursement rates were established through income disregards for welfare participants—which were significantly lower than the rates for child care across the state. Since providers and families had no guarantee that the ceiling the State set for families' child care costs would reflect the actual rates for care or the fluctuations within the market for child care, the Network and the Child Care Law Center lobbied both in Sacramento and Washington DC for the use of a market rate study. This study would guarantee that families needing assistance with child care had the chance to buy into most of the child care market in their community.

#### The Way the Survey is Conducted

The Network begins its work on the market rate survey in the fall by collecting the names of all the licensed family child care homes and centers from each of the 61 local resource and referral agencies. From that list of active providers, a *sample* of family child care homes and centers within each county is selected randomly.

A sample is a group of providers which, if chosen randomly, tends to be representative of the whole population. For this survey, we have a target sample for both family child care providers and centers.

After the names are chosen, the list is sent to a research polling firm that makes telephone calls to all of the selected providers. Those providers then answer the questionnaire and their responses are tallied with others within their county and region. If, for whatever reason, a provider on the list does not answer the survey<sup>1</sup>, then another provider is randomly chosen to replace her or him.

After all the responses are gathered, the data are sent back to the Network to be double checked for accuracy and analyzed. A few things to note in the analysis of the data:

1. Rates charged by providers are calculated by gathering the rates, and then sorting them into a number of different categories or groupings of similar respondents.

In California, the categories are:

Type of Facility:

either Centers or Homes

Schedule:

either Full-Time or Part-Time

Age Group:

either Infant, Preschool, or School age

Rate Unit:

either, hourly, daily, weekly or monthly.

<sup>&</sup>lt;sup>1</sup> There are several reasons why providers might be replaced. A provider on the list might refuse to answer the survey, the phone number may be wrong or disconnected, or providers on the list may have recently gone out of business or are no longer providing care.



Each rate is calculated separately within these categories. Think of each of these categories as individual boxes that hold the information from providers. When a provider is called, their information is then put into the appropriate box. Market rates are calculated using the information found within each separate box. For this survey there are 48 different boxes or categories in which providers can be placed. (see attached).

For each of these categories, providers are asked to report rate information, and each of these boxes will have a different number of responses. Even within the same rate (such as center-based full-time, infant care) the hourly box will have different providers and a different number of responses than those in the daily box. Therefore, rates will not necessarily relate to each other (for example, in a county, you can not multiply the daily rate by five and get the weekly rate, or calculate the weekly rate using the reported hourly rates because different providers answered in the different boxes).

- 2. Within each category, the rates for care are calculated taking into consideration the enrollment of the home or center. Rates for larger homes and centers carry more weight than those for smaller homes and centers, because they make up a larger part of the child care market in that community. This means that if there's a large center that charges higher rates than average, they will influence the average and ceiling rates more than a smaller center with the same rates.
- 3. Ceiling rates are calculated for each county in the state, but the state has also grouped counties into 6 regions. This is done because in some categories within some counties, there are very few providers responding -- not enough to be confident that the rates represent the market. So when there are fewer than 10 providers responding in any category, a regional ceiling replaces the county ceiling. This means that in a particular category with fewer than 10 responses, all the providers charging that rate within the *region* are averaged together, and the ceiling for that county is calculated from those providers.

For example, in Sacramento, only 3 center providers responded that they charged full time school age children at an hourly rate. Therefore, when calculating the ceiling rate for that category, all of the providers in Sacramento's region who charge in that rate category were used to calculate the rate ceiling. Within the region, there were 15 centers charging rates in this category. Performing this replacement ensures that the ceilings are not based on only one or two providers, but is calculated from a group of providers large enough to represent the whole market for child care.

- 4. Several factors are calculated in the RMR survey:
  - Special Needs Adjustment: Every year, CDE applies an adjustment factor of 1.5 for special needs; this means that the state reimburses at 1.5 times that of standard care reimbursement.
  - Exempt Care Adjustment: Every year an in-home/license exempt care adjustment factor of 0.90 is applied. Thus, the state will reimburse an in-home/license exempt provider serving children full-time a maximum of .90 times the full-time, family child care home ceiling for that age group.



• Weekend/Evening Adjustment: Unlike the special needs and exempt care adjustment, which are set by the state, the weekend/evening factor is recalculated every year. The ratio between the weekend/evening and weekday rates for full and part-time care is calculated using data gathered from providers. An average ratio across counties and age groups is calculated and applied as a statewide adjustment factor. This year, that adjustment was 1.24; that is 1.24 times that of the standard care reimbursement.

#### **Reasons Ceilings May Change**

Small Sample Size. Because California captures information on so many categories of the child care market, often the resulting sample size in one particular rate category may not capture the market rate for that rate category. Again, any rate with less than 10 providers automatically gets recalculated using all the providers within that region. Rates with responses with more than 10 are used to figure the ceiling in that community. Sometimes, these rates might not be large enough to "look" like the whole population. For example, in Los Angeles the part-time 2-5 daily reimbursement ceilings and mean rates for child care centers were calculated based on the responses of 17 providers. If there are thousands of providers in the area charging full-time school age weekly rates, then 17 might be too small to accurately portray the average rates for all the providers.

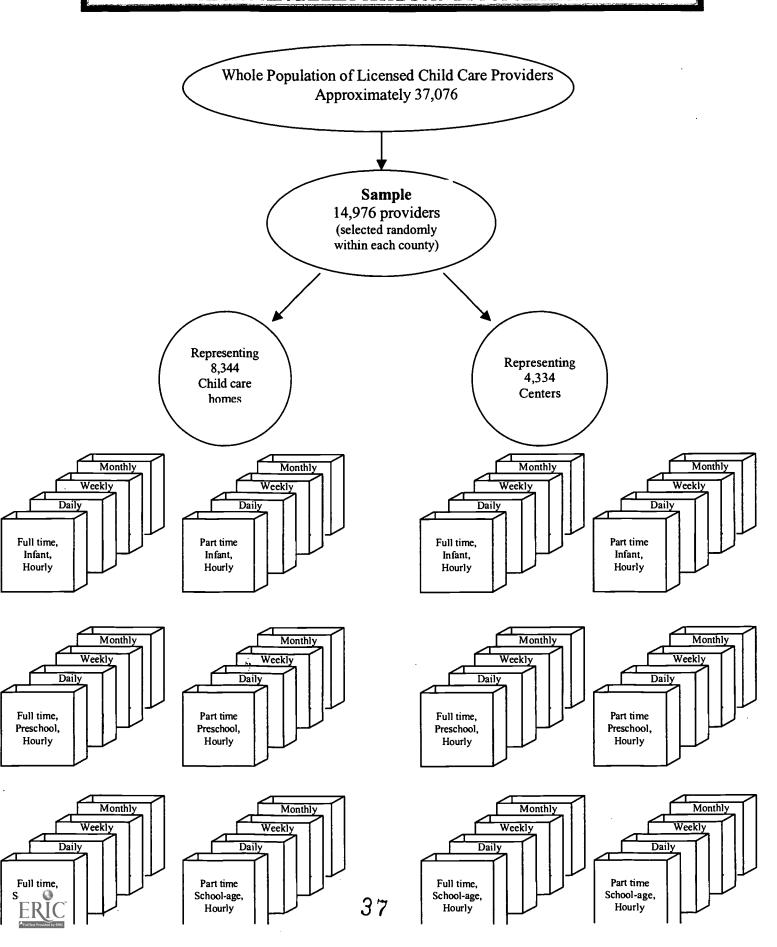
Uncontrolled Factors. There are a number of uncontrolled factors that might cause the rates to drop. Many of these include the number of providers who choose to respond, the size of the sample within each particular category, and how widely rates vary (i.e. a group of providers with a low of \$10.00 and a high of \$20.00 produces a different ceiling than a group of providers with a low rate of \$10.00 and a high of \$60.00.)

And finally, the average rate (and therefore the ceiling) within your community may have dropped. Perhaps several new providers began to work in your county and charge lower rates than others. Or several providers with higher rates retired or moved to another county. For a number of uncontrolled reasons, the rates reported are not the same from year to year, regardless of individual providers raising, lowering, or maintaining the rates they charge for care.

<sup>&</sup>lt;sup>2</sup> Defining a small sample: For the market rate survey, the state has determined that a small sample is anything less than 10 providers. So, in any rate category, if fewer than 10 providers respond, then the regional ceiling is applied to that county's rate. For example, in Alameda county, for full time center-based preschool care at a daily rate, only 4 providers responded, with an average rate of \$26.69, and a ceiling of \$31.18, if we used only those 4 providers. But to calculate the ceiling for Alameda County, all the provider responses in the region were averaged. The resulting ceiling rate is \$38.06 per day in 2000-2001.



# CALIFORNIA CHILDCARE RESOURCE AND REFERRAL NETWORK REGIONAL MARKET RATE SURVEY POPULATION



# 39

Date
August 1 – September 11

**Tasks**The Network and the Firm prepare the survey interviewer training materials and curriculum.

# **CCCRRN RMR2001 Tasks**

Tasks	Date
DEVELOPMENT	
Task 1. Finalize the survey methodology	JULY I – SEPTEMBER I
Network begins procurement for survey research firm (Firm)	JULY 1-AUGUST 15
The Firm and the Network finalize all the survey procedures and technical issues.	AUGUST15-SEPTEMBER 1
Task 2. Develop the survey sample	JUNE 9 – SEPTEMBER 18
The Network prepares instructions for the R&Rs to compile their provider lists and mails instructions to the R&Rs	June 1 - June 9
The R&Rs prepare their provider lists according to Network's instructions.	June 9 - July 14
The Network receives the R&R provider lists.	June 09 - July 14
The Network cleans, verifies, and compiles all the provider files into one file, stratifies the file by provider	June 9 – September 15
type and county, and randomizes.	
The Network delivers the randomized provider file to the Firm.	September 15
The R&Rs prepare their mailing to providers. The provider letter explains the purpose of the survey, and	September 1 – September 18
COLLECTING, ANALYZING AND REPORTING THE FIGURES	
	August 18 – December 18
The Network delivers the final questionnaire to the Firm.	August 18
The Firm loads and pretests the questionnaire, with assistance from the Network.	August 18 – September 8
The Firm loads the survey sample into the database and programs the database to manage the survey sampling plan.	September 11 – September 15
The R&Rs mail the provider letters.	September 11





The Network and the Firm train survey interviewers.	September 4 & 5
The Firm conducts the provider interviews and the Network and the Firm closely monitor the progress and	September 18 – December 1
The Firm delivers a subset of data to the Network for statistical analysis testing.	October 6
The Firm cleans the survey data according to the Network's instructions.	October 18 – December 15
The Firm delivers the final data to the Network.	December 18
Task 4. Program SAS for rate analysis	September 18 – December 18
The Network programs and tests SAS to:	September 18 – December 18
1) import the survey data,	
2) conduct the data analysis,	
Task 5. Analyze the rate data and prepare the rate reports and survey narrative	December 18 - March 30
The Network cleans and verifies the survey data, contacting the Firm and other staff as needed	December 18 – February 2
The Network conducts the rate analysis on cleaned, weighted data	February 5 – February 28
and prepares the final ceiling report.	
The Network delivers the ceiling report to CDE and CDSS for duplication and delivery to the County Welfare March 16	March 16
The Network produces a written narrative, documenting the survey methodology and findings and produces	March 3 – March 16
the average rate report.	
The Network delivers the 1.5 standard deviations above the mean reimbursement ceilings to SAWS.	March 30
The Network delivers the narrative and average rate report to CDSS and CDE.	March 16
The Network reproduces the reports for the Resource and Referral	per CDE approval
agencies.	
The Network distributes the reports to the Resource and Referral	per CDE approval
Agencies and members of the public upon request.	

Date	
1-4	Lask

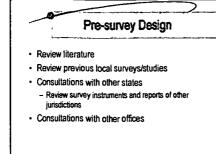
ESTABLISHING NEXT YEAR'S REGIONAL MARKET RATE SURVEY	
Task 6. Prepare for Year 2002 Survey	APRIL I, 2001 – JUNE 30, 2001
Finalize the Survey Methodology	April 1 – June 30
The Network works with CDE to finalize the survey methodology. This includes finalizing the sampling plan, April 1 - May 1	April 1 – May 1
questionnaire, and rate analysis.	
The survey research firm (Firm) and the Network finalize all the survey procedures and technical issues.	May 1 – June 30
GATHER R&R DATA FOR SURVEY SAMPLE	April 1 – June 30
The Network prepares the instructions for the R&Rs to compile their provider lists and mails the instructions   May 1 - May 31	May 1 - May 31
to the R&Rs	
The R&Rs prepare their provider lists according to the Network's instructions.	May 31 – June 30
The Network receives the R&R provider lists.	June 5 - June 30

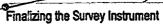


# "The Survey Instrument" Deborah Lyons, Center for Applied Research and Urban Policy, University of the District of Columbia

Slide 1 Slide 5 **Decision Framework** · Survey type · Questions to be asked THE SURVEY INSTRUMENT **Definitions** Instructions Sequence of questions Layout of questionnaire Deborah L. Lyons, Ph.D reresty of the District of Colum Center for Applied Research and Urban Policy Slide 2 Slide 6 What Purpose Does the Survey Questions to Be Asked Instrument Serve? Question format To translate the survey objectives Content - Factual questions - Check or circle To ask the pertinent questions - Subjective questions - Rating scale To record the survey responses Types of questions - Matrix To guide the data entry - Fill-in blank - Open-ended Sequence of questions - Closed-ended - Put respondent at ease - Contingency - Open with easy to Slide 7 Slide 3 Avoid Pitfalls in Objectives of the Survey Survey Instrument Design Wording Why am I doing this · Double-barreled questions survey? - Must be clear - Easy to understand Cluttered form Who am I surveying? - Aided by definitions - Should be easy to read What data do I need? - Provide unambiguous - Appropriately spaced What units of instructions - Use additional pages if measurement should i Leading questions needed Threatening or · Lack of units of sensitive questions measurement Slide 8







- · Develop draft survey instrument
- · Get feedback from staff, other offices and members of the child development community
- · Pre-test the survey instrument
- · Revise and pre-test again if necessary
- · Develop final survey instrument
- · Develop cover letter explaining purpose, importance of participation and process



# Slide 9

# Make Sure Surveyors Understand the Instrument

- Should know terms, definitions, acronyms
- Must understand the importance of asking the questions as written
- Must be consistent in how information is recorded





# "Beyond a Market Rate Study: How we can learn more about our child care system" Linda Mills, Mills & Pardee, Inc.

Slide 1	Beyond a Market Rate Study  How we can learn more about our child care system  November 28, 2000 Mills & Pardee, Inc.	Slide 5	Market Rates  Rate structures  Market rates by county or region  Market rates vs. subsidy rates  Costs subsidized by providers  Rates in relation to staff education
Slide 2	Beyond a Market Rate Study  , Leam the strengths and resources of your system  :: Leam the challenges and opportunities	Slide 6	Profile of Programs  Enrolled children  When care is offered  Staff recruitment issues  NAEYC Accreditation
Slide 3	Methodology  Survey every provider — plan follow-up to increase response rate Conduct focus groups and telephone interviews Conduct research	Slide 7	Profile of Center Staff  Education levels/professional development Salary & wages Benefits
Slide 4	Areas of Study  Market rates Profile of child care centers Profile of family child care homes Profile of center staff Profile of family child care providers Estimate future need for child care	Slide 8	Profile of Family Providers  Education/professional development  Experience/intent to continue providing care  Income from providing care / family income / additional income  Health & other insurance



# Ohio Legislative Budget Office (LBO) Child Care Payment System Report Summary

# Legislative Mandate

In Am. Sub. H.B. 283, the General Assembly required the Legislative Budget Office (LBO) of the Legislative Service Commission to "undertake a study of publicly funded child care payment procedures and make recommendations regarding the feasibility and the potential for development of a cost-based prospective payment system." The act further specified, "Any prospective system should provide for predictability and stability of payment and should take into consideration facility costs and training costs."

# **Study Methods**

In fulfilling this charge, we sought the input of both the county departments of Job and Family Services (CDJFS) and the child care provider industry. We obtained this input in three basic ways:

- <u>Survey of County Agencies</u>. As part of our research we surveyed all 88 county agencies, which are responsible for administering the payment system. Response rate: 95%.
- Survey of Licensed Providers. In collaboration with the Ohio Department of Job and Family Services (ODJFS), we also surveyed all 3,366 licensed child care providers; our survey, with more than 1,700 respondents (51.6% response rate) is one of the largest surveys of child care providers ever completed and perhaps the first to examine payment procedures.
- Focus Groups. We also conducted focus groups with family day care providers from nine counties, arranged through the Ohio Child Care Resource and Referral Association.

With each group, we sought to understand how the current system operated (and how various parties evaluated its effectiveness) and we asked both county administrators and child care providers to evaluate five models of a prospective payment system and three alternative payment arrangements. These options, identified by national and state experts in publicly-funded child care, were described generally and we asked whether they would significantly/minimally improve or worsen the predictability and stability of subsidy payments. The prospective payment plans included:

- 1. Cost Center Model (as specified in the legislative mandate)
- 2. Historical Projection
- 3. Annual Contracts
- 4. Mixed Prospective and Reimbursement System
- 5. Private Pay Model

The alternative arrangements included:

- 1. Electronic Funds Transfer
- 2. Electronic Benefit Transfer
- 3. Automated Eligibility

In virtually every case, the provider and county responses were diametrically opposed. As a general rule, counties felt that any of the prospective payment systems would worsen the predictability and stability of payment, while providers felt each would improve predictability and stability of payment. Providers most strongly favored the annual contract and private pay model payment systems. Providers and counties similarly diverged on whether an automated eligibility system; more than half of providers felt it would improve and more than half of counties felt it would worsen the predictability and stability of payment. With regard to the other alternative payment arrangements, responses were more muted.



# Findings in Brief

- At least 70 percent of child care invoices/vouchers were processed within 30 days and counties reported an average turnaround time of 18.3 days.
- On average, county officials gave the current system a grade of "B" while licensed providers on average rated the existing reimbursement process with a grade of "C".
- For providers whose invoices are not processed within 30 days, delay can have dire consequences; 290 (28.4 percent) of the 1,074 providers participating in the publicly-funded child care program have experienced a "cash flow crisis" resulting from delayed or incomplete reimbursement from the county.
- The current payment system is so designed that child care invoices may be adjusted downward or upward by the Ohio Department of Job and Family Services during the verification process, even when there is no question as to whether or not the vendor provided the services for which reimbursement was sought, and often without explanation.
- Our research suggests a fundamental difference in assumptions about the child care subsidy program separates the counties and providers:

<u>Counties</u>: Generally speaking, child care is first and foremost a workforce development program whose primary beneficiaries are adults; to assure that parents are working or attending school, child care must be accounted for in hourly units of service.

<u>Providers</u>: Generally speaking, child care is first and foremost an early childhood development program whose primary beneficiaries are children; to assure a quality experience and conform to staff-to-child ratio regulations, providers manage child care slots.

#### Recommendation

LBO cannot comfortably recommend a prospective payment system as described in Am. Sub. H.B. 283 for the following organizational, structural and procedural reasons:

- The level and extent of opposition to prospective payment expressed by county officials in survey responses and in conversations with LBO suggests that full and effective implementation of such a system would face significant barriers.
- The lack of a uniform, statewide payment process is likely to pose a barrier to smooth implementation and easy reconciliation of payments in a prospective system.
- In addition, federal regulations prohibit the use of Child Care and Development Fund monies for most facility costs.
- Lastly, prospective payment that is payment in advance of service is not likely to address the chief payment-related concerns of licensed providers as long as counties make adjustments to invoices that reflect counties' and providers' differing assumptions concerning the purpose, the unit of service, and the principal beneficiary of the child care subsidy.

Note: The full report, A Study of the Child Care Payment System in Ohio, is available on the Web at http://www.lbo.state.oh.us/123ga/publications/special/childcarereport.pdf



# "Rate Setting Policies: The Role of the Provider in Partnership with State Administrators" Lynn White, Executive Director, National Child Care Association

#### Slide 1

#### **RATE SETTING POLICIES**

The Role of the Provider in Partnership with State Administrators



#### Slide 5

#### What Field Specific Issues Contribute to Low Response Rates and Inaccurate Surveys?

- 2 TIME, TIME, TIME, TIME, TIME, TIME
- § TIME, TIME, TIME, TIME, TIME, TIME,
- # TIME, TIME, TIME, TIME, AND TIME!
- # No "Buy-In" because of no involvement
- Non-subsidized centers that do not participate
- The "market" makes it difficult for some programs to determine true market rate.

#### Slide 2

#### **FUZZY Market Rate**

- Different Perspectives Workforce Issue and Children's Issue
- Market Rate measures the PRICE of child care, not the true cost of quality child care

#### Slide 6

#### What Would Help the Process and Ultimately The Children

- # Higher completion rates
- § Annual surveys
- a Assigning full "value" to the service provided including in kind and additional subsidy or use providers that are sustained by fees
- Market friendly State Payment Policies
- Educating the field on the complexities of accurately calculating market rate
- 1 The Leadership Government Can Provide!

#### Slide 3

# Getting the Surveys to the Right People

- Mail, Fax, Phone, E Mail?
- I Getting to the Right Person is DIFFICULT
- NEVER, NEVER call between 3:30 and 6 PM

#### Slide 7

#### What Can We Do Together?

- 1 Involve Providers in Developing Surveys
- # Engage provider groups in your states to encourage providers to complete the surveys
- Develop tools and training which help for profit and not for profit providers calculate accurate market rates which include the full cost of doing business
- 3 Adapt state payment policies to reflect the way the market operates, for example...
  - 1 Pay on the basis of enrollment, not attendance
  - Don't leave the provider at risk during authorization and eligibility determination

#### Slide 4

# Maximizing the Timing of the Survey

- 3 August or September maximizes the survey because rates would then include rate adjustments for the new enrollment year
- When Market Rate Surveys are tied to state/federal fiscal years, subsidy adjustments need to be implemented immediately.

#### Slide 8

#### Market Driven Subsidy Rates are One of the Keys to High Quality Child Care

- 2 "...If the market rate is \$100 per week and the state pays \$75 (including parent co-pay), a center with 100 children enrolled of which 10% are subsidized children, will lose \$250 per week or \$13,000 per year. \$13,000 per year will fully equip a children's classroom and pay for one year's consumable supplies.
- ...If 50 parents fall to pay the \$7.00 co-pay per week (which is part of the 75%), seven teachers will not have a \$50.00 per week raise."
- & In general, YOU GET WHAT YOU PAY FOR!



# Child Care Bureau Issues Meeting November 28, 2000

Rate Setting Policies Presentation: Cost Studies

# Financial & Program Characteristics Data

Prepared By:

Jana Fleming
Frank Porter Graham Child Development Center
University of North Carolina at Chapel Hill
137 East Franklin Street, Suite 300
Chapel Hill, NC 27514
919-962-7322

jana@unc.edu



# 

# Financial Data Collected as Part of the Child Care Cost Interview

Revenues	Fees Paid by Parents	Reimbursements from State/City	USDA Child Care Food Program	Federal Payments	Other Public Contributions Grants	Private Contributions/Donations	Fund Raising Efforts	Investment Income	Other				
In-Kind Donations	Volunteer Services Administrative/Profession	al Teaching Food Service/Preparation	Other Program Assistance Transportation	Repair & Maintenance Other	Facility-Related Rent/Mortgage	Repair & Maintenance	Insurance	Program-Related Supplies & Materials	Equipment Staff Training/Education	Use of Equipment Advertising/Public	Relations Insurance Transportation		
Program Costs	Supplies and Materials	Children's Supplies/Toys Photocopying	rostage Bank Charges Dues & Publications Gifts to Staff and Families	Other	Purchase/Rental Purchase/Rental Depreciation Repair & Maintenance	Staff Education/Training	Supplies Travel	Food Service	Food Supplies Equipment	General Operating Costs Advertising	Accreditation Fees Bad Debts Licensing Fees Business Taxes/Costs	Insurance Transportation/Travel Other	
Facility Costs	Rent/Mortgage	Utilities Gas	Electric Water/Sewer Trash	Business Telephone Other	Repair & Maintenance	Carpentry Electrical/Plumbi	ng Janitorial Yard Care	Painting Other	Overhead	Real Property Taxes	Insurance Owner's/renter's Liability	Other	
Labor Costs	Salaries	Owner/Operator Other Staff	Nonwage Benefits FICA/Medicare Unemployment	Insurance Worker's Compensation Disability Insurance	Health/Dental Insurance Life Insurance Retirement	Other	Professional Services Accounting	Clerical Substitutes	Other				



# Program Characteristics Data Collected as Part of the Child Care Cost Interview

Program Information	Staff Characteristics
Age of Program  Services Provided  Hours of Operation  Accreditation Status  Profit Status  Licensed Capacity  Enrollment  Race/Ethnicity of Children  Program Support for	Age Gender Race/Ethnicity of Staff Training/Education Experience Working in Child Care Hours Worked Per Week Wage/Salary
Program Support for Training/Education	
Training/Education	
Fees Charged Reimbursements/Subsidies	
Other Financial Assistance Available	



DRAFT

# Center & Head Start Survey

Thank you for taking time to complete this survey. Your input will greatly assist us in getting a better picture of the selections child care programs provided in your community. All information requested is optional and confidential.

Data in **Bold** are from Community Profiles in Spring and Fall 1999. This sample consists of 688 centers representing 30% of all centers in urban, suburban and rural communities statewide. Data in *italics* are from Community Profiles in Fall 1999 representing 324 centers (14% statewide). See Community Profiles list for participating communities.

# PROGRAM INFORMATION

1.	Is your	organization: (Check all that apply)
	7%	☐ for profit ☐ not for profit ☐ not for profit & religiously-affiliated ☐ Head Start ☐ Other
2.	Is your	program (please check only one answer)
	63%	a single site
	19%	part of a larger agency that delivers child care in more than one site
	18%	part of multi service agency that delivers services other than child care
3.	How lo	ng has your program been in operation?
	Numbe	r of years: 20 years
4.	What me	onths are you open?
	63%	□ 11+ months
		☐ School year
	7%	☐ Other:



1 DEAFT

5. Please provide the information below on licensed capacity, current enrollment, and program's wait list as of <u>December 1. 1999</u>. If you do not maintain a wait list in a category listed enter n/a. If you have no families on the wait list, enter 0.

Age group category		eAge chi gory, he look and	Current & Likensed & Capacity as a Likensed & Likensed		n plinent 17 1990 de	AVAIGU P	1 as of se	Amilies Amilies Ao sub	roles alling idies
nfant (0 up to 15 months)	28%	196	8	6	4	67%	18	20%	16
foddler (15 months through 2.8 yrs.)	39%	269	16	12	7	62%	19	24%	14
Pre-school (2.9 up to 4.11 years)	90%	617	41	29	32	47%	19	20%	15
Kindergarten (5 and 6 year olds)	24%	170	17	12	9	18%	13	12%	16
School Age (7 to 14 years)	19%	128	26	25	19	30%	23	15%	21
Total		688	59	44	38	49%	36	25%	26

<sup>\*</sup>Full-time denotes 25 hours or more, part-time denotes under 25 hours

# 6. How many children attend for:

		1 day/wks	2 days/wk	3 days/mk	a days/ wk	35 days / wko	-6-7-day./w
N	umber of	< 1%	13%	18%	7%	61%	< 1%
C	hildren						

# 7. How many children do you serve per day for:

Number of	LUD (0.3 ± hours	ZE5thours	=58 hories	8 hours N/AC
Infants & Toddlers	5%	6%	24%	65%
Preschool	24%	24%	18%	34%
Kindergarten	13%	24%	35%	28%
School-Age	29%	29%	22%	20%

# 8. Please indicate the average number of children you serve, by subsidy type as of December 1, 1999.

	Mean	Percent of Programs
<u> </u>	number	Serving Type of Subsidy
# of Contracts (Basic and Supportive)	27	25%
# of Vouchers (Basic and TANF)	14	51%
# of Community Partnerships for Children slots	8	57%
# Other	16	26%

# 9. What is the weekly fee, (your published rate) during the regular school year? (Enter "0" if none)

I'ull-time	i ai t-time
weekly fee: \$181.70	weekly fee: \$128.70
weekly fee: \$165.00	weekly fee: \$117.39
weekly fee: \$125.00	weekly fee: \$79.46
weekly fee: \$115.00	weekly fee: \$86.53
weekly fee: \$81.00	weekly fee: \$60.62
	weekly fee: \$181.70 weekly fee: \$165.00 weekly fee: \$125.00 weekly fee: \$115.00

<sup>\*</sup>Full-time denotes 25 hours or more, part-time denotes under 25 hours



# DACTEURIOS

- 10. What are the licensed characteristics of your center:
  - A. Number of Classrooms: 4
  - B. Licensed capacity: 51
  - C. Total (net) square footage of Child Activity Space: 2365
- 11. How many years has your center been located at its current site? 15 years
- 12. Select only one from the following list of 10 choices. Is your center located in:

Type of Building	√Check
A. Residential Type Buildings	
1. A public housing authority apartment (not an administrative)	3%
building	
2. A non-housing authority residential building of masonry (brick or	5%
concrete block) construction	
3. A wood-frame residential structure such as a single family house	20%
or triple-decker	
B. Public Facility Type Buildings (designed for child care)	
4. A public school building	8%
5. A community center (including a YMCA-type facility)	10%
6. A church, parochial school, or other religious building	24%
C. Commercial Type Structures	
7. A storefront	3%
8. A factory or warehouse type building	2%
9. An office building	8%
D. Other Type of Structure	
10. Please Specify:	17%

- 13. Was your space originally designed and built to serve as a child care facility?
  - 37% □ Yes
  - 63% D No
- 14. Does your program primarily operate out of a basement (i.e. the floor level is lower than the ground outside the building)?

  - 81% □ No
- 15. How many times in the past year have you had to close or partially close your program for any part of the day due to building problems (i.e. water, heating, or other problems)?
  - 80% □ Never
  - 14% □ 1 time
  - 7% □ 2-4 times
  - 0.3%  $\square$  5 or more times

5.6

**BEST COPY AVAILABLE** 



16. Regarding your space, do you: □ Rent: 52% □ Own: 31% □ Other: 17%
<ul><li>17. If you rent, do you have a signed lease agreement with your landlord?</li><li>☐ Yes: 73% ☐ No: 27%</li></ul>
If YES,  A. What is the total length of your current lease agreement in years? 5 years
B. What is your current monthly rent? \$2362.86 (enter "0" if none)
<ul> <li>C. Is your landlord (Check one): <ul> <li>14% □ a governmental agency (circle type)</li> <li>47% □ a religious or other nonprofit organization</li> <li>39% □ an individual or private business enterprise</li> </ul> </li> <li>18. How much have you invested in permanent capital improvements (e.g. plumbing, etc.) to your child care center in the last year? Please exclude repairs (such as painting or replacing</li> </ul>
carpeting) and equipment and supply purchases (such as tables and crayons). \$30,827  19. In your center's annual budget, do you specifically budget funds for either permanent capital improvements to your facility or for debt payments on a loan previously secured to pay for capital improvements you've already made?   Yes: 43%  No: 57%
<ul> <li>20. Have you ever spent more than \$5,000 per classroom in your center?</li> <li>☐ Yes: 42% ☐ No: 58%</li> <li>If yes, how many years ago did you make the most recent investment of this magnitude.</li> <li>4 years ago.</li> </ul>
21. We are interested in your desire and ability to expand.

reguld expand my program it.	PYDS:	ENO	How many more children could you
			SERGE LESS CONTROL
More subsidies were made available	46%	54%	14
Resources were available to increase staff	62%	38%	19
Resources were available for facility repairs or	47%	53%	23
improvements			
Resources were available to change locations	57%	43%	24
Resources for facilities were coupled with	68%	32%	22
resources for subsidies and staff	ı		

A.	There is not enough der	and for me to expand	I my program? 🗖	Yes: 28%	☐ No: 72%
----	-------------------------	----------------------	-----------------	----------	-----------

B. I am not interested in changing or expanding my program? 

Yes: 38% 

No: 62%



# SERVIOESUIOTEXVILLIES

	s are not expected to provide all of them. Do not include	referrals.
25%	☐ Vision screening	
28%	☐ Hearing screening	
15%	☐ Dental screening	
32%	☐ Measurement of height and weight annually	
25%	☐ Speech and language services	
62%	☐ Developmental assessments	
32%	☐ Counseling services for children and parents	
63%	☐ Assistance in attaining child care subsidies	
44%	☐ Parent Advocacy	
29%	☐ Home Visits	
45%	☐ Provision of Meals	
76%	☐ Parent Education	
25%	☐ Social services to parents such as obtaining food star	mps, housing, medical
	care/insurance	
11%	Other, please specify	
<i>2</i> 8		racted buses crvised walks
	transportation services that currently exist meet the need 77.4%   No: 22.6%	s of your families?
25. If you	do not provide transportation services, the reasons are (C	heck all that apply):
59%	☐ Service is not needed 2% ☐ Limited range	of delivery
10%	☐ Parents can not afford 51% ☐ Too costly for	r program
14%	□ Other	
Process of the Park Court		
1157ATTP	YDEVOERSTRIES	
26. Numb	er of families you serve: 61	
as app 33%	give the approximate number of your families that meet ropriate): Single parent families	
17%	Families with English as a second language	BEST COPY AVAILABLE



23% Families living outside of your city/town

28. Please estimate the number of families in your program whose annual income is:

37% Below \$15,000

29% Between \$15,001 and \$35,000

16% Between \$35,001 and \$50,000

18% More than \$50,000

Unable to determine

# CHIEDDEY/OCRAPH(6S-

29. Please indicate the number of children in your program who use the following language as their primary language of communication:

in the cl	assroom:	<u>at home</u> :	
92%	English	81%	English
5%	Spanish	8%	Spanish
1%	Haitian-Creole	2%	Haitian-Creole
0.3%	Portuguese	1%	Portuguese
1%	Chinese	2%	Chinese
.01%	Khmer	1.3%	Khmer
.09%	Russian	0.6%	Russian
.1%	American Sign Language	0.1%	American Sign Language
1%	Other	5%	Other

30. Indicate the number of children in your program who are:

15% Black non Hispanic

67% Caucasian non Hispanic

11% Hispanic

4% Asian

0.3% Native American

3.4% Other

- 31. How many of the children you serve have an Individual Educational Plan (IEP) or receive services through Early Intervention (EI)? 4.3
- 32. In addition to those above, how many do you suspect might have any undiagnosed needs (i.e., behavioral, cognitive, emotional, medical, physical, and/or multiple needs)? 7.0
- 33. How many children, who you have served within the last year, have disabilities or special needs that require adaptation of your program? 2.2
  - A. How much money, if any, did your program spend on adaptations in each of the following areas in the past 12 months?

\$3911 Staffing

\$1322

Physical environment

\$75

**Health Services** 

\$1000

Equipment



# PACERONULATION

34. Is your program accredited by the National Academy of Early Childhood Programs (NAF	ECP)
(part of the National Association for the Education of Young Children (NAEYC))?	·

☐ Yes: 32%	□ No: 68%		
A. If NO, pleas	se check the statement that best	describes your program	n's status regarding accreditation

24%	☐ We are not involved at this time
59%	☐ We are in the process of self-study

# B. If you are in the process of self-study how long have you been in the process:

46%	☐ Less than 6 months	6%	☐ More than 24 months
24%	□ 6-12 months	1%	☐ Deferred or Appealed

23% 🗆 12-24 months

35. What are the 3 biggest barriers to accreditation? (Rate 1 to 3 with 1 being the biggest challenge): Higher number reflects greater priority.

75	None	13	Health and safety
163	Staff turnover	83	Cost
92	Philosophical differences	75	Indoor physical environment
30	Parent opposition	71	Outdoor physical environment
20	Relocation	71	Curriculum
96	Staff qualifications	116	Other

# CHASSROOMHDE ORVINETON

36. Please estimate the average staff to child ratio in your program. For example, if you have ten children for each teacher then your ratio is one to ten (1:10). You may use decimals, for example, 2 staff for 7 children is 1: 3.5. A staff person is any paid employee (including aides and/or paraprofessionals). Please do not include volunteers in your estimate.

# Staff Child/Ratios:

Infant (0-14 months)	1: 3
Toddler (15 months-2.8 years)	1:4
Preschool (2.9 - 4.11 years)	1:8
Kindergarten (5 - 6 years)	1:9
School Age (7 – 14 years)	1: 9



37. Please estimate the group sizes within your classrooms by type of care. For example, if there are sixteen children in two different groups in one classroom, the group size is eight. If there are sixteen children in one classroom and they are altogether in one group, then the group size is sixteen.

	Group Size:
Infant (0-14 months)	6
Toddler (15 months-2.8 years)	8 .
Preschool (2.9-4.11 years)	15
Kindergarten (5 - 6 years)	13
School Age (7 – 14 years)	13

# TEACHING STAFF

38. Please enter the following information regarding staff in your program:

Position 200	<u>Ν</u>	nber o	staff	Highest	Lowest:	Average	Percent
	Dung	Mean	ELV.	paid hourly	paid hourl	Payer	demale staff
Director	817	1.3	630	\$18.07	\$14.75	\$17.05	96%
Full-time lead teacher	1599	3.1	517	\$13.08	\$10.81	\$12.08	97%
Part-time lead teacher	332	2	166	\$12.20	\$10.23	\$11.48	81%
Full-time teacher	2111	4.7	452	\$10.62	\$8.90	\$9.89	97%
Part-time teacher	558	2.4	237	\$9.54	\$8.43	\$9.03	87%
Full-time ass't teacher	937	3.1	294	\$8.49	\$7.41	\$8.02	88%
Part-time ass't teacher	962	2.6	367	\$7.80	\$7.11	\$7.50	92%
Total # of staff	7321	11	669				96%

<sup>\*</sup>Full-time denotes staff who work 30 or more hours per week.

39. A) How many teachers (lead teachers, teachers and assistant teachers) have left the program in the last 12 months?

45%	Full-time lead teachers	36%	Part-time teachers
40%	Part-time lead teachers	66%	Full-time assistant teachers
43%	Full-time teacher	68%	Part-time assistant teachers
35%	Total Staff*		

<sup>\*</sup>Turnover is less for total staff as the total number of staff is significantly greater than the number of staff in any one specific category.

B) Why did they leave? (Check all that apply)

☐ Maternity leave	7.9%	☐ Lack of hours
□ Moving	28.1%	☐ Going back to school
☐ Accepted position in other field	24.0%	☐ Disciplinary Reasons
☐ Accepted position in related field	21.1%	☐ Salary
☐ Want to work in public schools	7.9%	□ Retirement
☐ Change position within same agency	20.7%	☐ Other
	☐ Accepted position in other field☐ Accepted position in related field☐ Want to work in public schools	☐ Moving ☐ Accepted position in other field ☐ Accepted position in related field ☐ Want to work in public schools ☐ 28.1% ☐ 24.0% ☐ 7.9%

40. On average, how long did it take to replace them? 8.2 weeks



61

41. A) Overall, how satisfied are you with their replacement(s)?

(Not Satisfied) 1 2 3 4 5 (Very Satisfied) 1.3% 3.5% 24.2% 30.0% 41.0%

B) If you are not satisfied, why? Please check all that apply:

68% ☐ Lack of experience 42% ☐ Lack of education 48% ☐ Lack of training 47% ☐ Lack of motivation 17% ☐ Lack of diversity 16% ☐ Other 22% ☐ Lack of nurturing

42. Indicate the number of teaching staff (lead teachers, teachers, and assistant teachers) in your program who work directly with children, and are:

10.0% Black non-Hispanic
74.2% Caucasian non-Hispanic
8.8% Hispanic
3.7% Asian
1.0% Native American
1.2% Unable to determine
2.2% Other

43. Please estimate the number of lead teachers, teachers, and assistant teachers in your program who work directly with children, and who speak the following languages fluently: (The total may be more than the total number of teachers since some may be bilingual.)

1.0% American Sign Language 82.0% English 8.0% Spanish 0.8% Khmer 2.5% Haitian-Creole 1.3% Russian 2.1% Portuguese 3.2% Other Chinese 1.2%

44. Please list the numbers of each type of staff that have received their highest level of education.

	Assistant	Teachers	Lead	Directors
	Teachers		Teachers	
Less than high school diploma or GED	19.1%	0.9%	1.2%	0%
GED or high school diploma	63.3%	44.3%	11.2%	5.4%
Child Development Associate (CDA) credential	3.3%	12.8%	10.0%	3.8%
Associate of Arts (AA) degree	3.9%	14.6%	22.8%	17.5%
Bachelor's degree in education or related field	4.3%	18.1%	39.0%	37.3%
Bachelor's degree in unrelated field	4.1%	6.3%	6.0%	5.7%
Master's degree in education or related field	1.3%	2.4%	9.3%	24.7%
Master's degree in unrelated field	1.0%	0.3%	0.3%	1.6%
Advanced/professional degree	0%	0.5%	0.2%	4.0%
Percent with BA or higher	10.4%	27.5%	54.9%	73.4%

Distr	(6) (6) (8) (8)			
<b>"是有什么是是</b>		<b>经存在数据的现在分</b> 据	<b>电影中的电影</b> 图	流るの語と思う

- 45. How long have you been employed as director of this program? 8 years
- 46. How long have you been a director outside of this program? 5.1 years
- 47. Please indicate your race:
  - 8% □ Black non-Hispanic
  - 88% 

    □ Caucasian non-Hispanic
  - 2% 🗆 Hispanic
  - **0.3%** □ Asian
  - 0.9% □ Native American
  - 0.8% □ Other (please specify:
- 48. Have you had a course specifically in financial management? 

  Yes: 47% 

  No: 53%

# Beneders which the contract

49. Which benefits are provided for your staff? (Please check all that apply)

	Full-time Staff	Part-time Staff
	(30+ hours per week)	•
☐ vacation	90%	65%
☐ sick time	94%	74%
☐ paid holidays	96%	80%
☐ disability	45%	24%
paid maternity and/or paternity leave	23%	9%
☐ life insurance	40%	16%
☐ retirement package	47%	24%
☐ tuition assistance	71%	61%
☐ health plan	78%	29%
□ other	25%	20%

# CORRIGIONAL COMPANY

50. Who is responsible for curriculum development? (Please check that all apply)

- 69% ☐ Director 53% ☐ Teacher
- 13% ☐ Assistant Director 43% ☐ Group Process
- 23% Curriculum/Education Coordinator Don't know
- 68% ☐ Lead Teacher 5% ☐ Other

Community Profiles / Center & Head Start Survey / 1998 & 1999

- 51. Does your center offer teacher curriculum preparation time? □ Yes: 86% □ No: 14% If yes, 4 hours per week.
- 52. Are you familiar with the state Curriculum Frameworks? 

  Yes: 43% 
  No: 57%

52. Are you minimal with the state currentum rankeworks. 2 103. 4570 2 140. 5776

ERIC

•				
53. W	hat sur	oports would you like to assist you i	n curricu	tium development? (please check all that apply
6	%	□ None		•
5	3%	☐ Funding to have on-site consulta	tion	
4	4%	☐ More educated and trained staff		
5	3%	☐ Training in Curriculum Framew	orks	
6	6%	☐ Money for supplies and equipme		urriculum implementation
1	0%	Other		•
54. W	hich c	urriculum training topics, if any, wo	uld you o	or your staff be interested in?
7	78%	☐ Curriculum development in pres	chool cla	sses
	22%	☐ Curriculum development in kind		
	52%	☐ How to implement state Curricu	_	
	15%			neworks in kindergarten classrooms
	52%	☐ Early childhood assessment		Ū
4	45%	☐ Using portfolio assessment		
	54%	☐ Observation and documentation		
	59%	☐ Screening for disabilities		
	2%	☐ None of the above		
	11%	☐ Other, please specify		
- Paler II		Process Control of the Control of th		
<b>XX</b>	ATRIB			
	_		4	-tt tth amp) have massived 15 have an
				stant teachers) have received 15 hours or
		ences do not apply). Enter "0" if no		in the last 12 months? (Workshops &
•	OITICLE	11 37		
		lead teachers teachers		t teachers
	Mean	1.8 2.2 at 67% 58%		8 8%
	Percen	t 67% 58%	50	5 / 0
56 <b>T</b>	Which 1	training topics are you and your staf	f most in	terested in (Check all that apply):
30. T	36%	☐ Arranging the physical learning	15%	☐ Interfacing with community agencies
	5070	environment		
t	45%	☐ Assessment	10%	☐ School-age Development
ŀ	79%	☐ Behavior & Classroom	11%	☐ Running your business
		Management		
Ī	52%	☐ Building positive relationships	55%	☐ Special Needs/Disabilities
		with parents	1504	
	31%	Computers	47%	Helping families under stress
	47%	☐ Diversity/Multiculturalism	46%	☐ Literacy development for children & families
	18%	☐ Health, Safety, and Nutrition	22%	☐ Literacy development for staff
	30%	☐ Infant and Toddler Development	58%	Stress Management for you and your staff
	JU/0	- Intaint and Toddict Development	1	1

5%

☐ Other

61%

☐ Preschool Development

57. What prob	lems, if any, are there with your current training opportunities? (Check all that apply)
20.2%	□ None
21.0%	☐ There are not enough courses or workshops available.
37.5%	☐ The cost of training is too high.
11.3%	☐ The quality of existing training is not good.
22.1%	☐ The courses and workshops offered do not meet staff needs or interests.
35.7%	☐ Most opportunities are during the day and it is difficult to attend.
10.8%	☐ Not enough notice about training to arrange for coverage.
21.1%	☐ There is not enough incentive to getting more training.
21.8%	☐ I am unable to find someone to care for my children while I attend training.
11.1%	□ Other
58. Would you	a or your staff be interested in receiving training through the internet?
☐ Yes: 2.	No: 51%  Yes, but do not have computer or internet access: 24%

59. Please estimate the percentage of parents in your program who are involved in the following activities. If no parents are involved, please indicate with a "0" in the given category.

Parentactivity of the second second	Percent of parents involved
Some time spent in classroom assisting teachers	22.0%
Assistance in fund raising	37.8%
Participation in a governing board or council	9.2%
Participation in excursions or field trips	29.9%
Participation in celebrations, holidays, festivals	49.9%
Assistance in repair or renovation of facilities	11.0%
Participation in parent groups	23.3%
Participation in parent/teacher conferences	71.7%
Advocacy efforts to increase and enhance early care and	9.7%
education	<u> </u>
Participation in hiring staff	7.5%
Participation in staff evaluations	22.8%

# PHEGINO COLEY

60. Does your program use computers'	, o	Yes:	84.2%		No:	15.8%	o
--------------------------------------	-----	------	-------	--	-----	-------	---

IF YES:

BEST COPY AVAILABLE

- A. How many? 4.0 computers
- B. How many are for use by the children? 2.0 computers
- C. How many are less than two years old? 1.9 computers (Enter "0" if none)



61 D		and your staff use computers for the falls	wina?	(Check all that anniv)		
	61. Do you and your staff use computers for the following? (Check all that apply)					
	68.8% 83.7%	<del></del>				
	53. <i>1 /</i> 6 57.5%	g				
	57.7%					
	37.770 35.8%					
	18.1%	- Profession	ent or s	unnort		
	10.1 /0 11.3%					
	37.3%					
	38.2%			•		
	JU.2 / (	e-man				
AD	MINI	STRATIVE ISSUES				
	i s-lista					
62. V	What is	s your program's annual operating budget	for the	e current fiscal year? \$420,102.00		
62 1	Mat n	ercent of your center's income comes fro	m each	of these four categories		
	-	overnment Contracts	III Caci	of filese four categories.		
_		arent Fees				
		rants, fund-raising and interest income		•		
		ther (Please specify:)				
(	These	four percentages should equal 100%)				
- 4 -				6-11 (-4		
		estimate what percent of your center's ex	penses	fall into each of these four categories:		
	68% Personnel 14% Equipment/Supplies/Food					
		Occupancy (including utilities and mainter	nance)			
		Other (Please specify:)				
(These four percentages should equal 100%)						
65. If your funding increased by \$10,000/year, please indicate how you would use the additional						
funds. (List top three choices only, by using 1, 2, and 3)						
	500	increase supplies and equipment	198	increase tuition subsidies available to		
				families		
	340	increase number of staff persons	106	increase parent services		
	377	improve physical facility	50	serve more children of the same age		
	795	increase salaries of existing staff	52	increase the hours you offer care		
	342	upgrade staff skills through additional	110	work toward accreditation		
	00=	training	155			
	387	increase staff benefits	55	other		

66. Please rate your level of collaboration with the following organizations on a scale of 1 to 5 (1 being no collaboration, 3 being exchange of information, and 5 being interagency agreements and streamlining of resources).

	1	2	3	4	5
Public schools	12%	11%	44%	12%	21%
Head Starts	55%	9%	20%	3%	13%
Local government	48%	14%	24%	4%	10%
Family child care providers	43%	15%	29%	5%	8%
Other child care programs	8%	13%	57%	11%	12%
Business community	36%	25%	31%	4%	5%
Other	17%	2%	14%	11%	56%

Community Profiles / Center & Head Start Survey / 1998 & 1999

	等是自身的现在分词是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
67. Have you ever Yes: 97%	heard of the Community Partnerships for Children (CPC)?  □ No: 3%
68. Do you partici	pate in the Community Partnerships for Children (CPC)?
☐ Yes: 84%	□ No: 16%
If yes, how do	you participate? (Check all that apply)
78%	☐ I provide direct services to CPC-eligible children
72%	☐ I am a member of the CPC council
74%	☐ I attend CPC council meetings on a regular basis
87%	☐ I participate in trainings offered by the CPC program
59%	☐ I receive CDA/accreditation support from the CPC program
85%	☐ I receive supplies and materials from the CPC program
58%	☐ I access resources and materials through a CPC-funded resource library
12%	☐ Other
If no, why not	? (Check all that apply)
50%	☐ time commitment
28%	☐ time of council meetings
10%	☐ day of council meetings
2%	· · · · · · · · · · · · · · · · · · ·
7%	☐ CDA/accreditation requirement
24%	☐ don't know enough about CPC
26%	□ other
	67



# STOYOG YOYU TANDA TANDA

69. Have you done any of the following within the past 12 months to advocate on behalf of the children and families you serve? (check all that apply)

35%	attended or organized legislative breakfast/lunch
31%	invited legislators into programs/events
22%	took parents/children to State House
27%	participated in media coverage of ECE
60%	made phone call or wrote letters to reach legislature
65%	networked with other organizations on advocacy
36%	worked with business community on initiatives concerning child care
14%	Other

# PROVIDERTEEDBACK

70. Please choose the three most pressing public policy issues facing care and education in your community. Use 1 to indicate the most pressing, 2 for the second most pressing and 3 for the third. Higher number reflects greater priority.

172	State reimbursement rates	88	Inclusion of children with special needs
156	More income eligible subsidies	94	The quality of child care in the community
172	Availability of infant and toddler care	191	Staffing qualification
<b>6</b> 8	Availability of school-age care	338	Staffing compensation
37	State and local licensing requirements	138	Creating career advancement opportunities
52	Facilitiescapital improvements	46	Other, please specify
123	Facilities – building new space		,

71. In your own words, what are your biggest concerns regarding early care and education in your community?



# Interpreting and Using Survey Data to Develop Rate Policies

Peggy Ball, NC Division of Child Development

# Features of NC MR Survey

- Census-type survey vs. sample
  - . Rates collected per child (not per center)
  - 85% response rate from 1997 survey
- Private rates paid vs. charged for...
  - · Full-time care
  - Unsubsidized children only
- ▶ Included a cost study component in 1997

# NC Collects Data by Child...



# Not by Facility!



# Data Collected and Sorted by...

- County
- Facility type
- · Center-based care
- Home-based care
- Age group
- Infants/toddlers, 2-year olds, 3-5 year olds, School-age
- Level of license

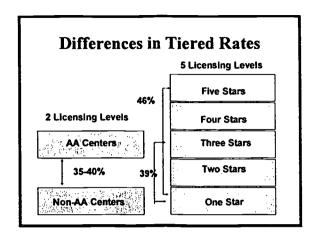
# **Data Analysis**

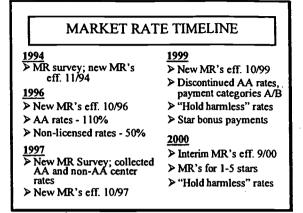
- Separated according to 2 levels of license
- "AA" centers
- · Non-"AA" centers
- Cost study results vs. rates collected
- Validated that "AA" rates 35-40% higher than non- "AA" rates

### Set at the 75th Percentile:

- Statewide market rates
- Center-based care by age group
- · Home-based care by age group
- County market rates
  - Center-based care by age group
  - · Home-based care by age group
- > "75 Kid Rule"
  - Statewide market rates applied if not enough data to establish county market rate



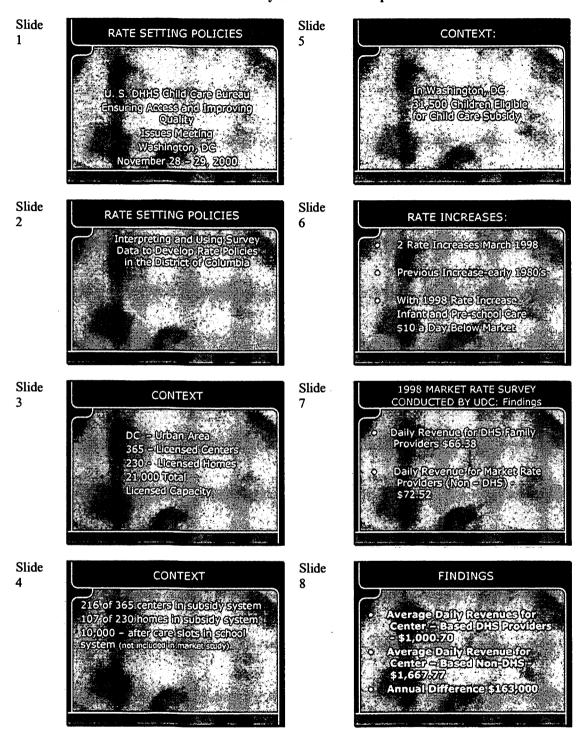






# "Rate Setting Policies: Interpreting and Using Survey Data to Develop Rate Policies in the District of Columbia"

Barbara Ferguson Kamara, Executive Director, District of Columbia Department of Human Services
Office of Early Childhood Development

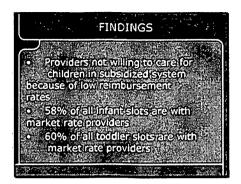




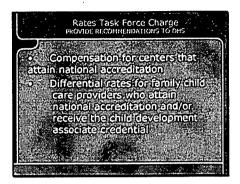
# "Rate Setting Policies: Interpreting and Using Survey Data to Develop Rate Policies in the District of Columbia"

# Barbara Ferguson Kamara, Executive Director, District of Columbia Department of Human Services Office of Early Childhood Development

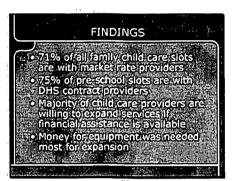




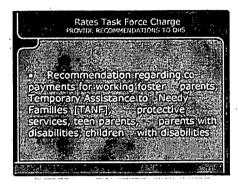
Slide 13



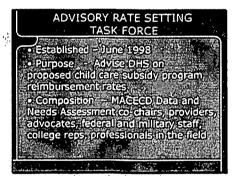
Slide 10



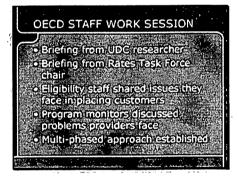
Slide 14



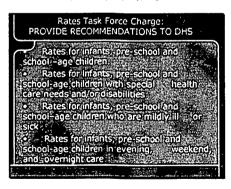
Slide 11



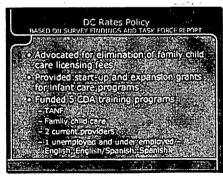
Slide 15



Slide 12



Slide 16

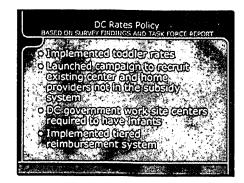




# "Rate Setting Policies: Interpreting and Using Survey Data to Develop Rate Policies in the District of Columbia" Barbara Ferguson Kamara, Executive Director, District of Columbia Department of Human Ser

# Barbara Ferguson Kamara, Executive Director, District of Columbia Department of Human Services Office of Early Childhood Development

Slide 17





# "Rate Adjustments" Abby Cohen, State Technical Assistance Specialist, National Child Care Information Center

	National Child Care Info	rmation Cente	r
Slide 1	RATE ADJUSTMENTS  Abby Cohen National Child Care Information Center  Child Care Information States Rate Sating Polymer Investige Access on Informating Quality National Sec. 28 (2007)	Slide 5	MECHANISMS USED BY STATES  • Flat dollar amount addition  • Percentage above standard rate  • Tiered rate (mild, moderate, severe)  • Individualized assessment
Slide 2	RATE ADJUSTMENTS  Rates that do not depend exclusively on market rate surveys:  • Special needs rates  • Tiered reimbursement for high quality  • Informal care (kith and kin)  • Odd hour	Slide 6	SOME SPECIAL NEEDS RATES ISSUES  • Paying for reasonable accommodations plus additional or only beyond reasonable accommodations  • Consideration of other available funding streams  • Breaking link with market and what private fee paying parents pay
Slide 3	RATE ADJUSTMENTS  • Reasons for not relying on the market vary  • Some states address these issues outside the rate structure through grants, bonuses, etc.	Slide 7	SOME SPECIAL NEEDS RATES ISSUES  • Verification and documentation  • What does it really cost?  • What amount is sufficient?
Slide 4	SPECIAL NEEDS RATES  • Each state defines "special needs" differently  • Can't rely on market because of ADA issues and "market of one" issue  • Mechanism to determine rate varies	Slide 8	TIERED REIMBURSEMENT (paying more for high quality)  Rationale: incentive to attain and maintain quality; recognize cost  24 states and the District of Columbia now have some form of tiered reimbursement



#### Slide 9

# TIERED REIMBURSEMENT (paying more for high quality)

- Most states rely on existing accreditation bodies: others have developed their own systems
- Typically, mechanisms include paying a percentage over standard rate or a dollar amount over standard rate

#### Slide 10

## TIERED REIMBURSEMENT ISSUES

- · How much additional is "enough"
- Potential need to break link between what state pays to improve/maintain quality with what parents pay in low income markets

### Slide 11

### TIERED REIMBURSEMENT ISSUES

- What standards should be used?
- How adequate is monitoring?
- Is accreditation support available?

#### Slide 12

### INFORMAL CARE

- ◆ Definitions vary from state to state
- Difficulties defining market and conducting reliable, valid surveys
- ◆ CCDF allows states to limit in-home option in order to ensure payment of minimum wage

#### Slide 13

# INFORMAL CARE

- States typically pay at a percentage of regulated family child care rate
- Wisconsin has instituted a tiered system Regulated provider: 100% Informal with training: 75% Informal w/o training: 50%



# **AGENDA**

# CHILD CARE BUREAU

# Issues Meeting

Rate Setting Policies: Ensuring Access and Improving Quality
November 28 - 29, 2000

# **Moderator:**

Stephanie Fanjul, Deputy Associate Commissioner Child Care Bureau, Administration for Children and Families U.S. Department of Health and Human Services, Washington, DC

# **DAY 1 – November 28, 2000**

8:00 - 9:00 a.m.

### REGISTRATION

9:00 - 10:00 a.m.

# WELCOME AND OPENING REMARKS

Charlotte Brantley, Associate Commissioner, Child Care Bureau Administration for Children and Families U.S. Department of Health and Human Services, Washington, DC

# INTRODUCTION: USING MARKET RATE SURVEYS TO DEVELOP RATE POLICIES

Louise Stoney, State Technical Assistance Specialist National Child Care Information Center, Averill Park, NY

10:00 - 11:15 a.m.

# MARKET RATE SURVEY DISCUSSION: THE SURVEY SAMPLE, WHICH PROVIDERS TO SURVEY, HOW MANY AND WHY

**Discussion Leaders:** 

David Dominguez, Postdoctoral Fellow, Ph.D., Center for Social Work Research
University of Texas School of Social Work, Austin, TX
Shelley Waters Boots, Research Director
California Child Care Resource and Referral Network, San Francisco, CA



11:15 - 11:30 a.m.

BREAK

11:30 - 12:30 p.m.

#### MARKET RATE SURVEY DISCUSSION: THE SURVEY INSTRUMENT

**Discussion Leader:** 

Deborah Lyons, Director, Center on Applied Research and Urban Policy University of the District of Columbia, Washington, DC

12:30 - 1:30 p.m.

LUNCH (on your own)

≈ 1:30 - 2:30 p.m.

### Market Rate Survey Discussion: Using Market Rate Surveys to Collect Additional Data Discussion Leaders:

Linda Mills, Consultant

Mills and Pardee, Concord, MA

Eric Karolak, Budget/Policy Analyst

Ohio Legislative Budget Office, Columbus, OH

2:30 - 3:30 p.m.

## MARKET RATE SURVEY DISCUSSION: ENSURING ACCURATE DATA: THE ROLE OF THE PROVIDER

Discussion Leaders:

Susan Eckelt, President

National Association for Family Child Care, Tulsa, OK

Lynn White, Executive Director

National Child Care Association, Conyers, GA

Kerry Moser, Executive Director

Catholic Charities Office of Child Care, Providence, RI

3:30 - 3:45 p.m.

**BREAK** 



3:45 - 5:00 p.m.

#### **RATE SETTING POLICIES PRESENTATION: COST STUDIES**

Jana Fleming, Ph.D., Investigator
Frank Porter Graham Child Development Center, Chapel Hill, NC
Jason Sachs, Early Childhood Services
Massachusetts Department of Education, Malden, MA

#### **DAY 2 – November 29, 2000**

8:00 - 8:15 a.m.

#### DAY 2 WELCOME AND OPENING REMARKS

Stephanie Fanjul, Deputy Associate Commissioner, Child Care Bureau Administration for Children and Families U.S. Department of Health and Human Services, Washington, DC

8:15 - 9:15 a.m.

## Rate Setting Policies Discussion: Interpreting and Using Survey Data to Develop Rate Policies

#### **Discussion Leader:**

Peggy Ball, Division of Child Development
North Carolina Dept. of Health and Human Services, Raleigh, NC
Barbara Ferguson Kamara, Executive Director, Office of Early Childhood Development
District of Columbia Dept. of Human Services, Washington, DC

9:15 - 10:15 a.m.

# RATE SETTING POLICIES DISCUSSION: RATE ADJUSTMENTS: TIERED REIMBURSEMENT AND RATES FOR SPECIAL NEEDS, SCHOOL-AGE CARE, INFORMAL CARE

#### **Discussion Leaders:**

Abby Cohen, State Technical Assistance Specialist
National Child Care Information Center, Oakland, CA
Pam Browning, Public Policy Liaison
National School Age Care Alliance, Chevy Chase, MD

10:15 - 10:30 a.m.

BREAK



10:30 - 11:30 a.m.

## RATE SETTING POLICIES DISCUSSION: THE RELATIONSHIPS BETWEEN RATES, PARENT FEES, AND OTHER INNOVATIVE SUBSIDY STRATEGIES

**Discussion Leader:** 

Gina Adams, Senior Research Associate Urban Institute, Washington, DC

11:30 - 12:00 noon

#### **CLOSING REMARKS**

Charlotte Brantley, Associate Commissioner, Child Care Bureau Administration for Children and Families U.S. Department of Health and Human Services, Washington, DC



#### Presenter List and Final Participant List

#### **Child Care Bureau Issues Meeting**

Rate Setting Policies: Ensuring Access and Improving Quality

November 28 - 29, 2000

#### **Presenters**

Introduction

Louise Stoney

National Child Care Information Center

Phone: (518) 674-5635 Fax: (518) 674-2799 E-mail: lstoney@nccic.org

Session I

**David Dominguez** 

University of Texas School of Social Work

Phone: 512-232-5540 Fax: 512-471-6712

E-mail: drdominguez@mail.utexas.edu

**Shelley Waters Boots** 

California Child Care Resource and Referral

Network

Phone: (415) 882-0234 Fax: (415) 882-6233

E-mail: Shelley@rrnetwork.org

Session II

Deborah Lyons

University of the District of Columbia

Phone: (202) 274-7110 Fax: (202) 274-7111

E-mail: netlyon@yahoo.com

Session III

Linda Mills Mills and Pardee Phone: (978) 369-2001 Fax: (978) 369-1741

E-mail: linda@millsandpardee.com

Eric Karolak

Ohio Legislative Budget Office

Phone: (614) 728-3218 Fax: (614) 460-8584

E-mail: ekarolak@lbo.state.oh.us

Session IV

Sue Eckelt

National Association for Family Child Care

Phone/Fax: (918) 744-8997 E-mail: SEckelt@aol.com

Lynn White

National Child Care Association

Phone: (800) 543-7161 Fax: (770) 388-7772 nccallw@mindspring.com

Kerry Moser

Catholic Charities Office of Child Care

Phone: (401) 274-3094 Fax: (401) 274-3092

E-mail: alexandraf@msn.com

Session V

Jana Fleming

Frank Porter Graham Child Development Center

Phone: (919) 962-7321 Fax: (919) 962-7328 E-mail: Jana@unc.edu

Jason Sachs

Massachusetts Department of Education

Phone: (781) 338-6361 E-mail: Jsachs@doe.mass.edu

Session VI

Peggy M. Ball

North Carolina Dept. of Health and Human Services

Phone: (919) 662-4543 ext. 213

Fax: (919) 662-4568

E-mail: Peggy.Ball@ncmail.net

Barbara Ferguson Kamara

District of Columbia Dept. of Human Services

Phone: (202) 727-1839 Fax: (202) 727-8166

E-mail: bkamara@ima.dcgov.org



#### Session VII

Abby Cohen

National Child Care Information Center

Phone: (510) 601-7319 Fax: (510) 594-0753 E-mail: acohen@nccic.org

Pam Browning

National School Age Care Alliance

Phone/Fax: (301) 654-1134 E-mail: pbrow@bellatlantic.net

#### Session VIII

Gina Adams Urban Institute

Phone: (202) 261-5674 Fax: (202) 452-1840

E-mail: gadams@ui.urban.org



# RATE SETTING POLICIES: ENSURING ACCESS AND İMPROVING QUALITY November 28-29, 2000 Loews L'Enfant Plaza Hotel Washington, DC

#### **Participants**

Gina Adams Senior Research Associate Urban Institute 2100 M Street, N.W. Washington, DC 20037

Phn: (202) 261-5674 Fax: (202) 452-1840

E-mail: gadams@ui.urban.org

Kathie Almassy Manager, Child Dev. Fiscal Services Fiscal and Administration Services Division California Department of Education 560 J Street, Room 150 Sacramento, CA 95814

Phn: (916) 323-5843 Fax: (916) 322-6050

E-mail: kalmassy@cde.ca.gov

Sue Bacon
Child Care Program Consultant
Wyoming Department of Family Services
Hathaway Building, Room 389
2300 Capitol Avenue
Cheyenne, WY 82002-0490

Phn: (307) 777-6848 Fax: (307) 777-3659

E-mail: SBACON@state.wy.us

Peggy M. Ball Director North Carolina Division of Child Development 2201 Mail Service Center Raleigh, NC 27699-2201 Phn: (919) 662-4543 ext. 213

Fax: (919) 662-4568

E-mail: Peggy.Ball@ncmail.net

Don Beltrame

Connecticut Department of Social Services Family Services/Child Care Team 25 Sigourney Street, 10th Floor Hartford, CT 06106-5033 Phn: (860) 424-5363

Phn: (860) 424-5363 Fax: (860) 951-2996

E-mail: don.beltrame@po.state.ct.us

Ann Benck

Department Head, Planning and Assessment South Carolina Department of Health and Human Services P.O. Box 8206, 8th Floor Columbia, SC 29202-8206

Phn: (803) 898-2730 Fax: (803) 898-4510

E-mail: Benck@dhhs.state.sc.us

Helen Blank

Director, Child Care and Development

Children's Defense Fund

25 E Street, N.W.

Washington, DC 20001 Phn: (202) 662-3547 Fax: (202) 662-3560

E-mail: hblank@childrensdefense.org

Brenda Bonds

U.S. Department of Health and Human Services Administration for Children and Families

Child Care Bureau

Switzer Building, Room 2046

330 C Street, S.W.

Washington, DC 20447 Phn: (202) 690-7214

Fax: (202) 690-5600

E-mail: bbdonds-anderson@acf.dhhs.gov

http://www.acf.dhhs.gov



Shelley Waters Boots
Research Director
California Child Care Resource
and Referral Network
111 New Montgomery Street, Suite 700

San Francisco, CA 94105 Phn: (415) 882-0234 Fax: (415) 882-6233

E-mail: Shelley@rrnetwork.org http://www.rrnetwork.org

Charlotte Brantley
Associate Commissioner
U.S. Dept. of Health and Human Services
Administration for Children and Families
Child Care Bureau
Switzer Building, Room 2046
330 C Street, S.W.
Washington, DC 20447
Phn: (202) 690-6782

E-mail: cbrantley@acf.dhhs.gov http://www.acf.dhhs.gov

Brenda Brannock
Financial Policy Consultant
Minnesota Department of
Children, Families and Learning
1500 Highway 36 West
Roseville, MN 55113
Phn: (651) 582-8314

Phn: (651) 582-8314 Fax: (651) 582-8496

Fax: (202) 690-5600

E-mail: brenda.brannock@state.mn.us

Pam Browning
Public Policy Liaison
National School-Age Care Alliance
4317 Elm Street
Chevy Chase, MD 20815
Phn: (301) 654-1134
E-mail: pbrow@bellatlantic.net

Joyce Butler Vice President USA Child Care 395 Rochambeau Avenue Providence, RI 02906 Phn: (401) 351-5523 Fax: (401) 621-9906 E-mail: jepb@tiac.net

Yvonne M. Chase
Deputy Commissioner
Alaska Department of Education
and Early Development
333 West 4th Avenue, Suite 320
Anchorage, AK 99501
Phn: (907) 269-4607
Fax: (907) 269-4635
E-mail: yvonne\_chase@eed.state.ak.us
http://www.eed.state.ak.us

Abby Cohen
State Technical Assistance Specialist
National Child Care
Information Center (NCCIC)
5337 College Avenue, Suite 332
Oakland, CA 94618
Phn: (510) 601-7319
Fax: (510) 594-0753
E-mail: ACohen@nccic.org
http://nccic.org

Ray Collins
Senior Researcher
National Child Care Information Center
243 Church Street, N.W., 2nd Floor
Vienna, VA 22180
Phn: (800) 616-2242
Fax: (800) 716-2242
E-mail: rcollins@nccic.org

http://nccic.org



Dr. Margaret Leitch Copeland Child Care Dev. Bureau Administrator New Hampshire Division for Children, Youth and Families 129 Pleasant Street Concord, NH 03301

Concord, NH 03301 Phn: (603) 271-8153 Fax: (603) 271-4729

Carol de Barba
Child Care Progam Specialist
U.S. Dept. of Health & Human Services
Administration for Children and Families
Child Care Bureau
Policy Division
Switzer Building, Room 2046
330 C Street, S.W.
Washington, DC 20447
Phn: (202) 690-6243

Fax: (202) 690-5600

E-mail: Cdebarba@acf.dhhs.gov http://www.acf.dhhs.gov

Nancy Dierker CCCAP Coordinator Colorado Department of Human Services 1575 Sherman Street Denver, CO 80203 Phn: (303) 866-3960

Fax: (303) 866-4453

E-mail: nancy.dierker@state.co.us

Pia Divine

U.S. Dept. of Health & Human Services Administration for Children and Families Child Care Bureau Switzer Building, Room 2046 330 C Street, S.W. Washington, DC 20447

Phn: (202) 690-6705 Fax: (202) 690-5600

E-mail: pdivine@acf.dhhs.gov http://www.acf.dhhs.gov David Dominguez
Post-Doctoral Research Fellow
University of Texas
Center for Social Work Research
1925 San Jacinto Blvd., Room 3.212CA
Austin, TX 78712-1203

Phn: (512) 471-7596 Fax: (512) 471-9514 or (512) 471-6712

E-mail: drdominguez@mail.utexas.edu

Carolyn Drugge
Director, Office of Child Care
and Head Start
Maine Department of Human Services
11 State House Station
221 State Street
Augusta, ME 04333-0011
Phn: (207) 287-5060

E-mail: carolyn.drugge@state.me.us

Tracy Dry
Research Associate
National Child Care Information Center
243 Church Street, 2nd Floor
Vienna, VA 22180
Phn: (800) 616-2242
Feat: (800) 716 2242

Fax: (800) 716-2242 E-mail: tdry@nccic.org

Fax: (207) 287-5031

http://nccic.org

Sue Eckelt
President
National Association for Family Child Care
3539 S. Toledo Avenue
Tulsa, OK 74135
Phn/Fax: (918) 744-8997
E-mail: SEckelt@aol.com



Stephanie Fanjul

Deputy Associate Commissioner

U.S. Dept. of Health and Human Services

Administration for Children, Youth and Families

Child Care Bureau

Switzer Building, Room 2046

330 C Street, S.W.

Washington, DC 20447

Phn: (202) 690-6782

Fax: (202) 690-5600

E-mail: sfanjul@acf.dhhs.gov http://www.acf.dhhs.gov

**Bobbie Ferguson** 

Day Care Administrator

Arkansas Division of Child Care

and Early Childhood Education

P.O. Box 1437, MS 604

Little Rock, AR 72203

Phn: (501) 682-0494

Fax: (501) 682-2317

E-mail: bobbie.ferguson@mail.state.ar.us

Jana Fleming

Principal Investigator

Frank Porter Graham Child Development Center

University of North Carolina, Chapel Hill

CB#8040

Chapel Hill, NC 27599-8040

Phn: (919) 962-7321

Fax: (919) 962-7328

E-mail: Jana@unc.edu http://www.fpg.unc.edu

Bobbi Gitter

Child Care Administrator

North Dakota Department

of Human Services

600 E Blvd.

Bismark, ND 58505

Phn: (701) 328-4603

Fax: (701) 328-1060

E-mail: gitterb@state.nd.us

Anne Goldstein

**Executive Director** 

National Child Care

Information Center (NCCIC)

243 Church Street, N.W., 2nd Floor

Vienna, VA 22180

Phn: (800) 616-2242

Fax: (800) 716-2242

E-mail: agoldste@nccic.org

http://nccic.org

Ginny Gorman

National Tribal Child Care Specialist

U.S. Dept. of Health & Human Services

Administration for Children and Families

Child Care Bureau

Switzer Building, Room 2046

330 C Street, S.W.

Washington, DC 20447

Phn: (202) 401-7260

Fax: (202) 690-5600

E-mail: ggorman@acf.dhhs.gov

http://www.acf.dhhs.gov

Nancy Guy

Section Chief, Program Operations

North Carolina Department of Human Resources

Division of Child Development

2201 Mail Services Center

Raleigh, NC 27626-2201

Phn: (919) 662-4561 ext. 300

Fax: (919) 662-3071

E-mail: nancyguy@ncmail.net

www.dhhs.state.nc.us/dcd/

Nancy P. Hard

Director, Child Care Management

Texas Workforce Commission

101 East 15th Street, Room 130T

Austin, TX 78778-0001

Phn: (512) 936-0474

Fax: (512) 463-5067

E-mail: Nancy.Hard@twc.state.tx.us



Jeanette M. Hercik Managing Associate Caliber Associates - Child Care Administration Project 10530 Rosehaven Street, Suite 400 Fairfax, VA 22030

Phn: (703) 385-3200 Fax: (703) 385-3206 E-mail: hercikj@calib.com

Karen Heying Head Start Fellow U.S. Department of Health and Human Services Administration for Children and Families Child Care Bureau **Program Operations** 330 C Street, S.W., Room 2321 Washington, DC 20447 Phn: (202) 205-8713 Fax: (202) 690-5600

E-mail: KHeying@acf.dhhs.gov http://www.acf.dhhs.gov

Kathryn Holod Child Care Administrator Pennsylvania Department of Public Welfare Office of Children, Youth and Families Bureau of Child Day Care Services P.O. Box 2675

Harrisburg, PA 17105 Phn: (717) 787-8691 Fax: (717) 787-1529

E-mail: KHOLOD@DPW.state.pa.us

Moniquin Huggins **Director, Program Operations** U.S. Dept. of Health & Human Services Administration for Children and Families Child Care Bureau Washington, DC Switzer Building, Room 2046 330 C Street, S.W. Washington, DC 20447 Phn: (202) 690-8490

Fax: (202) 690-5600

E-mail: mhuggins@acf.dhhs.gov

http://www.acf.dhhs.gov

Beverly B. Hunter Director, Division of Outstationed **Program Monitoring** South Carolina Department of Health & Human Services P.O. Box 5616 Greenville, SC 29606-5616 Phn: (864) 250-8297

Fax: (864) 250-8044

E-mail: hunter@dhhs.state.sc.us

Julia Isaacs **Division Director** Division of Health and Human Services Assistant Secretary for Planning & Evaluation Humphrey Building, Room 404-E 200 Independence Avenue, S.W. Washington, DC 20201 Phn: (202) 690-6805 Fax: (202) 690-6562

E-mail: jisaacs@osaspe.dhhs.gov

Eve Jacobs Co-Chair, Data Needs & Assessment Washington DC Mayor's Advisory Committee on Early Childhood Education 4620 North Park Avenue, #1104E Chevy Chase, MD 20815 Phn: (301) 652-3616

Fax: (301) 652-8085 E-mail: ejacobs@erols.com

Kathleen Joyce Consultant Fried & Sher, Inc. 425 Carlisle Drive Herndon, VA 20170 Phn: (703) 435-1700 Fax: (703) 435-1811

E-mail: KJoyce@friedandsher.com



Barbara Ferguson Kamara
Executive Director
District of Columbia Department
of Human Services
Office of Early Childhood Development
717 14th Street, N.W., # 730
Washington, DC 20005
Phn: (202) 727-1839

Fax: (202) 727-8166

E-mail: bkamara@dhs.dcgov.org

Bethany Kashawlic

U.S. Department of Health and Human Services Administration for Children and Families Child Care Bureau Switzer Building, Room 2046 330 C Street, S.W.

Washington, DC 20447 Phn: (202) 205-8531 Fax: (202) 690-5600

E-mail: bkashawlic@acf.dhhs.gov

http://www.acf.dhhs.gov

Rachel Katuin

Child Care Subsidy Program Manager Kansas Department of Social and Rehabilitation Services

Children and Family Policy Division Docking State Office Building 915 S.W. Harrison, 618W

Topeka, KS 66612 Phn: (785) 368-6351 Fax: (785) 296-0146 E-mail: rak@srskansas.org

Erik Karolak

Ohio Legislative Budget Office 77 South High Street, 15th Floor Columbus, OH 43266-0347

Phn: (614) 728-3218 Fax: (614) 460-8584

E-mail: ekarolak@lbo.state.oh.us

Arthur Leen

U.S. Dept. of Health & Human Services Administration for Children and Families

Child Care Bureau

Switzer Building, Room 2046

330 C Street, S.W. Washington, DC 20447 Phn: (202) 401-5067 Fax: (202) 690-5600

E-mail: aleen@acf.dhhs.gov http://www.acf.dhhs.gov

Mark Lewis

Oklahoma Department of Human Services Division of Child Care Sequoyah Memorial Office Building P.O. Box 25352

P.U. BOX 23332

Oklahoma City, OK 73125-0352

Phn: (405) 521-4441 Fax: (405) 522-2564

E-mail: Mark.Lewis@okdhs.org

Beverly Lynn

Child Care Administrator New Jersey Department of Human Services Division of Family Development P.O. Box 716

Trenton, NJ 07205 Phn: (609) 588-2163 Fax: (609) 588-3051

E-mail: blynn@dhs.state.nj.us

Deborah Lyons

Director, Center from Applied Research and Urban Policy University of the District of Columbia UDC/CARUP #52/416 4200 Connecticut Avenue, N.W.

Washington, DC 20008 Phn: (202) 274-7110 Fax: (202) 274-7111

E-mail: netlyon@yahoo.com



Ivelisse Martinez-Beck FRCD Fellow U.S. Dept. of Health & Human Services Administration for Children and Families Child Care Bureau Switzer Building, Room 2046 330 C Street, S.W. Washington, DC 20447 Phn: (202) 690-7885

Fax: (202) 690-5600 E-mail: ibeck@acf.dhhs.gov http://www.acf.dhhs.gov

Matthew McKearn U.S. Dept. of Health & Human Services Administration for Children and Families Child Care Bureau Switzer Building, Room 2046 330 C Street, S.W. Washington, DC 20447 Phn: (202) 690-5641

Fax: (202) 690-5600 E-mail: mmckearn@acf.dhhs.gov

http://www.acf.dhhs.gov

Judith McLaughlin Resource Manager State of Maryland Department of Human Resources Child Care Administration 311 West Saratoga, 1st Floor Baltimore, MD 21201-3521 Phn: (410) 767-7156

Fax: (410) 333-8699

E-mail: jmclaugh2@dhr.state.md.us

Linda Mills Mills and Pardee, Inc. 191 Sudbury Road Concord, MA 01742 Phn: (978) 369-2001 Fax: (978) 369-1741

E-mail: linda@millsandpardee.com

Pat Montoya Commissioner Administration for Children and Families 330 C Street, S.W., Room 2134 Washington, DC 20447 Phn: (202) 205-8347 E-mail: pmontoya@acf.dhhs.gov

Alexandra "Kerry" Moser **Executive Director** Rhode Island Catholic Charities Office of Child Care 485 Mt. Pleasant Avenue Providence, RI 02908 Phn: (401) 274-3094 ext. 12 Fax: (401) 274-3092 E-mail: alexandraf@msn.com

Angela Myers Human Service Specialist West Virginia Child Care Division P.O. Box 2570 Fairmont, WV 26555 Phn: (304) 363-3261 Fax: (304) 436-5541

Paul Nelson Manager, Child Development and Care Michigan State, Family Independence Agency 235 S. Grand Avenue, Suite 1308 Lansing, MI 48933

Phn: (517) 335-6183 Fax: (517) 241-8053

E-mail: nelsonp@state.mi.us



Diane V. Paige
Program Analyst
District of Columbia Department
of Human Services
Office of Early Childhood Development
717 14th Street, N.W., Suite 730
Washington, DC 20005

Phn: (202) 727-1839 Fax: (202) 727-8166

E-mail: dpaige@ima.dcgov.org

April Reddick
Program
District of Columbia Department of Human
Services
Office of Early Childhood Dev.
717 14th Street, N.W., Suite 400
Washington, DC 20005

Phn: (202) 727-8111 Fax: (202) 727-8164

E-mail: awhelchel@ima.dcgov.org

Sally Reigel
Program Manager
Washington Department
of Social and Health Services
Office of Child Care Policy
P.O. Box 45700

Olympia, WA 98504-5700 Phn: (360) 902-8046 Fax: (360) 902-7588

E-mail: reis300@dshs.wa.gov

Terry Ring

U.S. Department of Health and Human Services Administration for Children and Families Child Care Bureau Switzer Building, Room 2046

330 C Street, S.W. Washington, DC 20447

Phn: (202) 401-5964 Fax: (202) 690-5600

E-mail: tering@acf.dhhs.gov http://www.acf.dhhs.gov Shannon Rudisill

Director of Technical Assistance

U.S. Department of Health and Human Services Administration for Children and Families

Child Care Bureau

Switzer Building, Room 2046

330 C Street, S.W.

Washington, DC 20447

Phn: (202) 205-8051 Fax: (202) 690-5600

E-mail: srudisill@acf.dhhs.gov http://www.acf.dhhs.gov

Jason Sachs

Early Childhood Services

Massachusetts Department of Education

350 Main Street Malden, MA 02148 Phn: (781) 338-6361

E-mail: Jsachs@doe.mass.edu

Jennifer Sargent

Associate

Caliber Associates

10530 Rosehaven Street, Suite 400

Fairfax, VA 22030 Phn: (703) 385-3200 Fax: (703) 385-3206

E-mail: sargentJ@calib.com

http://www.cailb.com

Linda Saterfield

Bureau Chief

Illinois Department of Human Services

300 Iles Park Place, 2nd Floor

Springfield, IL 62762 Phn: (217) 785-2559 Fax: (217) 524-6030

E-mail: dhsd6501@dhs.state.il.us



Laura Schrager
Project Director
Child Care Research & Analysis
Washington Department of
Social & Health Services
P.O. Box 45204
Olympia, WA 98504-5204

Phn: (360) 902-0717 Fax: (360) 902-0705

E-mail: schrals@dshs.wa.gov

Karen Schulman Program Associate Children's Defense Fund 25 E Street, N.W. Washington, DC 20001 Phn: (202) 662-3509

Fax: (202) 662-3560

E-mail: kschulman@childrensdefense.org

http://www.childrensdefense.org

Madelyn Schultz U.S. Dept. of Health & Human Services Administration for Children and Families Child Care Bureau Switzer Building, Room 2046 330 C Street, S.W. Washington, DC 20447 Phn: (202) 401-5140

Fax: (202) 401-5140 Fax: (202) 690-5600 mschultz@acf.dhhs.gov http://www.acf.dhhs.gov

Nancy Schwachter Senior Associate Child Care Administration Project Caliber Associates 10530 Rosehaven Street, Suite 400 Fairfax, VA 22030

Phn: (703) 385-3200 Fax: (703) 385-3206

E-mail: schwachn@calib.com

Margery Sher Principal Fried & Sher, Inc. 425 Carlisle Drive Herndon, VA 20170 Phn: (703) 435-1700 ext. 101

Fax: (703) 435-1811

E-mail: MSher@friedandsher.com

John Sciamanna
Senior Policy Associate
American Public Human Services Association
810 First Street, N.E., Suite 500
Washington, DC 20002
Phn: (202) 682-0100
Fax: (202) 289-6555

E-mail: jsciamanna@aphsa.org

Rod Southwick
Massachusetts State
Child Care Administration
Office of Child Care Services
One Ashburton Place, Room 1105
Boston, MA 02180
Phn: (617) 626-2089

Fax: (617) 626-2028

E-mail: rod.southwick@state.ma.us

Scott Spiegel
Research Statistician
Child Care Automation
Resource Center (CCARC)
3206 Tower Oaks Blvd., Suite 400
Rockville, MD 20852

Phn: (301) 816-5500 x244 Fax: (301) 816-5517

E-mail: sspiegel@anteon.com



Nina Stanton

Special Assistant to the Executive Director

National Child Care

Information Center (NCCIC)

243 Church Street, NW, 2nd Floor

Vienna, VA 22180 Phn: (800) 616-2242 Fax: (800) 716-2242

E-mail: nstanton@nccic.org

http://nccic.org

Louise Stoney

Technical Assistance Specialist

National Child Care

Information Center (NCCIC)

308 Thais Road

Averill Park, NY 12018

Phn: (518) 674-5635 Fax: (518) 674-2799

E-mail: LStoney95@aol.com

http://nccic.org

Mike Theis

Lead Analyst

Virginia Department of Social Services

730 E Broad Street Richmond, VA 23219 Phn: (804) 692-1882

Fax: (804) 692-1808

E-mail: mjt2@email1.dss.state.va.us

Karen Tvedt

Director of Policy

U.S. Dept. of Health & Human Services Administration for Children and Families

Child Care Bureau

Switzer Building, Room 2046

330 C Street, S.W.

Washington, DC 20447

Phn: (202) 401-5130 Fax: (202) 690-5600

E-mail: ktvedt@acf.dhhs.gov

http://www.acf.dhhs.gov

Patricia Urzedowski Child Care Administrator Nebraska Department of Health

and Human Services System

P.O. Box 95044

Lincoln, NE 68509-5044

Phn: (402) 471-9431 Fax: (402) 471-7763

E-mail: Pat.Urzedowski@hhss.state.ne.us

Margie Van Meter

Coordinator of Quality Enhancement Activities Mississippi Department of Human Services

Office for Children and Youth

P.O. Box 352

Jackson, MS 39205

Phn: (601) 359-4541

Fax: (601) 359-4422

E-mail: mvanmeter@mdhs.state.ms.us

Yasmina Vinci

**Executive Director** 

National Association of Child Care Resource and Referral Agencies

1319 F St., NW, Suite 810 Washington, DC 20004

Phn: (202) 393-5501 Fax: (202) 393-1109

E-mail: yvinci@naccrra.net

Elyse Wasch

Legislative Assistant

Office of Senator Jack Reed

320 Hart Senate Office Building

Washington, DC 20510

Phn: (202) 224-4642

Fax: (202) 224-4680

E-mail: Elyse Wasch@reed.senate.gov



Lynn White Executive Director National Child Care Association 1016 Rosser Street Conyers, GA 30012

Phn: (800) 543-7161 Fax: (770) 388-7772

E-mail: nccallw@mindspring.com

Avisia Whiteman Minnesota Department of Children, Families and Learning 1500 Highway 36 West Roseville, MN 55113

Phn: (651) 582-8516 Fax: (651) 582-8496

E-mail: avisia.whiteman@state.mn.us

Andrew Williams

Child Care Program Specialist
U.S. Dept. of Health and Human Services
Administration for Children and Families
Child Care Bureau
Switzer Building, Room 2046
Washington, DC 20447
Phn: (202) 401-4795

Phn: (202) 401-4795 Fax: (202) 690-5600

E-mail: awilliams@acf.dhhs.gov

http://www.acf.dhhs.gov

Linda Zang

Program Development Chief Maryland Department of Human Resources Child Care Administration 311 Saratoga Street, Suite 161 Baltimore, MD 21201

Phn: (410) 767-7813 Fax: (410) 333-8699

E-mail: lzang@dhr.state.md.us



#### **APPENDIX 4**

#### Sample of State Survey Materials

Note: Additional survey instruments are available from the National Child Care Information Center, 800-616-2242.

#### **Surveys**

#### **District of Columbia**

• 2000 Market Rate and Expansion Capacity Survey Child Care Providers in the District of Columbia

#### North Carolina

- 2000 North Carolina Child Care Market Rate Survey Important Instructions for Child Care Centers
- 2000 North Carolina Child Care Market Rate Survey Important Instructions for Family Child Care Homes

#### Ohio

• 2000 Licensed Provider Market Rate Survey

#### **Publications**

Child Care Rate Survey — 1999 For the Oklahoma Department of Human Services Office of Child Care



## 2000 MARKET RATE AND EXPANSION CAPACITY SURVEY CHILD CARE PROVIDERS IN THE DISTRICT OF COLUMBIA

Hello, my name is:
I am calling from the Center for Applied Research and Urban Policy at the University of the District of Columbia. We are working on a research project for the Department of Human Services, Office of Early Childhood Development to determine the cost of child care services in the District of Columbia. May I speak with the program director.
I have a number of questions that we are asking all licensed child care providers in the District, and we will appreciate your information being included. Your participation in this survey will contribute to the process for establishing fair and equitable reimbursement rates and policies for child care providers in the city. This interview will take approximately 15 minutes to complete. May I continue now or would you prefer to schedule a more convenient time for the survey? What would be the best time to call you?
First, I will ask you some general questions about your program/center. Then I will ask you some questions about your current enrollment, rates, facilities, staff and benefits.
Name of your Family Child Care Program/Center:
Name of Director:
Address:
Phone Number: Ward Location:
Days and Hours of Operation Home Center
Months of Operation: Jan_Feb_Mar_Apr_May_Jun_Jul_Aug_Sept_Oct_Nov_Dec_



1

1.	Which of the following describes the type of child care provider you are? (check all that apply)							
	<ul> <li>□ (a) Non-profit provider (tax-exempted)</li> <li>□ (b) For profit provider</li> <li>□ (c) Agency of Government</li> <li>□ (1) Department of Defense provider</li> <li>□ (2) Federal, non DoD provider</li> <li>□ (3) District Government</li> <li>□ (d) Cooperative provider</li> <li>□ (e) Part of a child care system</li> <li>(Please identify)</li> </ul>	☐ (f) Head Start pr☐ (g) Montessori☐ (h) Child Develo☐ (i) Private Schoo☐ (j) Employer/Co☐ (k) Other (Please Identif	opment Center ol					
2.	How many child care spaces is < name> licensed	l for?	-					
3.	What is the maximum number of children you can	currently serve at any	one time?					
4.	How many children do you currently have enrolle If enrollment is greater than the licensed capacity,	<del>-</del>	rogram?					
5.	Does your child care program offer the following	types of service?	·					
	(a) Full-time care (35 hours a week or more	re)Yes	No					
	(b) Part-time care (less than 35 hours a we		No					
	(c) Evening care (after 6:00 p.m.)		No					
	(d) Overnight Care		No					
	(e) Saturday		No					
	(f) Sunday		No					
	(g) Holiday							
	(h) Drop-in		No					
	(i) Before School .(before 8:00 a.m.)		No					
	(j) After School (after 3:00 p.m.)							
	(k) Full-Day during school closing		No					
	(l) Mildly ill or sick children		No					
	(m) Children with disabilities							
	(n) Emergency or Back-up care		No					
6.	How many days per year is your program closed f	or:						
	(a) holidays	(c) staff training	<del></del>					
	(b) vacation	(d) other reasons						
	<del></del>							



7.	of Human Se	_	have a contrac	ct or provider agre	eme	nt w	ith tr	ie D.	C. D	epar	ıment
	(a)	□Yes		If Yes, are yo					□Lev		
		ow many slot asis?	s are used by	the Department o	f Hu	man	Ser	vice	s on a	a mo	onthly
Now	I AM GOING TO	O ASK YOU SO	ME QUESTIO	NS ABOUT THE NU	MBE:	R OF	СНІ	LDR	EN Y	ou s	ERVE
				RATELY ABOUT FU							
				E IS CHILDREN YO	OU H	AVE	35 I	HOU	RS A	WEE	K OR
MORI	E; PART-TIME I	S LESS THAN	35 HOURS A V	VEEK.							
8.	program for or providers ow	each of the fol n children).	llowing age gr How many ch	or more per week) oups? (If family h ildren with disabi	iome lities	pro do :	vide	r, be	sure	to in	clude
	IF NO CHI	LDKEN FUL	L-TIME, GC	Total			num				
				Enrollment					Chi	ldre	n w/
						Ser	ve	•	Di	sabi	lities
	(a) Infant (6	weeks to 12 n	nonths)		_						
	` '	(13 months to	•								
	, ,	I (2 to $2\frac{1}{2}$ yrs	,		_				-		
		ol $(2\frac{1}{2}$ to 4 ye									
	(e) School ag	ge (4 years ar	id older)		-						
9.				for each of the fol			ge g	roup	s? (P	lease	e give
	(a) Infant (6	weeks to 12 n	nonths)	\$	per:	Н	D	W	M	Y	
	` '	(13 months to	•	\$	-	Н	D	W	M	Y	
	(c) Toddler I	I (2 - 2½ yrs)		\$	per:	Η	D	W	M	Y	
	, ,	ol $(2\frac{1}{2})$ to 4 ye	•	\$	-	H		W		Y	
	(e) School ag	ge (4 years ar	nd older)	\$	per:	H	D	W	M	Y	
	(f) If charges	are per year,	how many m	onths per year do	you (	oper	ate?				
	(g)Do you ha	ave additional	l charges for s	ummer: □Yes (S	\$			per			□ No
	(h) Addition	al charges for	Before/After	: □ Yes (	\$			_ pei	·	)	□No
10.	If you offer t	raditional hor	urs and nontra	ditional hours, do	you	chai	rge d	iffer	ent ra	ates	for:
				§ per							
	(b) W	Veekend	□Yes (	[\$per		)		No			
	(c) E	vening care	□Yes (	(\$ per (\$ per		)		No			



11.	Please estimate the number of full-time	Hrs. Per day	Days	,	Weel	ks	N	Iont	hs
	(a) Infant (6 weeks to 12 months)	i ci day	per we	<b></b>	por r	i on th	P	<b></b> , -	
	(b) Toddler (13 months to 24 months)		_				_		
	(c) Toddler II (2 to $2\frac{1}{2}$ years)		<del></del>				_		
	(d) Pre-school (2½ to 4 years)						_		
	(e) School age (4 years and older)						_		
IF NO	O CHILDREN ENROLLED PART-TIN	ME, GO T	O QUES	TIC	N 14	١.			
12.	How many children are enrolled part-tingroups? By part-time, I mean less than 3 to include providers own children). However.	5 hours per	rweek. (	lf far	nily h	ome j	prov	/ider	be sure
		Total		Chi	ldren	w/			
	,		llment		isabi]				
	(a) Infant (6 weeks to 12 months)	Lino			13401	11105			
	(b) Toddler (13 months to 24 months)								
	(c) Toddler II (2 to 2½ yrs)				_				
	(d) Pre-school (2½ to 4 years)				_				
	(e) School age (4 years to 5 years)								
	(f) Ages 6 years - 13 years								
	(g) Age 14 and older								
	(g) rigo 14 and older								
13.	What do you charge for part-time care if your answer per hour, per day, per week					group	os?	(Plea	se give
	(a) Infant (6 weeks to 12 months)	\$		per:	Н	D	W	M	Y
	(b) Toddler (13 months to 24 months)	\$		per:		D	W	M	Y
	(c) Toddler II (2 to 2½ yrs)	\$		per:		D	W	M	Y
	(d) Pre-school (2½ to 4 years)	\$		per:		D	W	M	Y
	(e) School age (4 years to 5 years)	\$		per:		D	W	M	Y
	(f) Ages 6 years - 13 years	\$		per:			W	M	Y
	(g) Age 14 and older	\$		per:			W	M	Y
14.	Is the rate different for nontraditional ho	ours of care	e?						
	(a) Overnight □Yes (	\$	per	)		J No			
		\$ \$				J No			
		\$ \$		_		J No			
	<del>.</del>	<del>-</del>							



15.	Please estimate the number of hour				
		Hrs.	Days	Weeks	Months
	(a) Infant (6 also to 12 months)	Per day	_	per month	
	(a) Infant (6 weeks to 12 months)				
	(b) Toddler (13 months to 24 mont	.ns)			
	(c) Toddler II (2 to 2½ years)			<del>-</del>	<del></del>
	(d) Pre-school (2½ to 4 years)				
	(e) School age (4 years and older)			<del></del>	
	(f) Ages 6 years - 13 years			<del>-</del>	
	(g) Age 14 and older				
16.	For school age children, during the 4 years and older did you serve ful more hours per day during school provider, be sure to include providiving at home.	l-time? By this in vacations, summeder's own child	I mean, 35 oners, or schoren, if any,	or more hours ool breaks. (a ages 4 throug	a week or 7 or If family home
	What do you charge for full-time can	are when school	is not in ses	sion for child	ren age 4 years
17.	and older? \$ per:				
17. 18.	and older? \$ per:		N	o	
			N	0	
	and older? \$ per:  Does your program have a waiting	list? Yes	<del></del>		age groups?:
18.	and older? \$ per:  Does your program have a waiting  IF NO, GO TO 20 IF YES,  How many children are currently of	list? Yes	<del></del>		age groups?:
18.	and older? \$ per:  Does your program have a waiting  IF NO, GO TO 20 IF YES,  How many children are currently of  (a) Infant (6 weeks to 12 months)	list? Yeson your waiting	<del></del>		age groups?:
18.	and older? \$ per:  Does your program have a waiting  IF NO, GO TO 20	list? Yeson your waiting	<del></del>		age groups?:
18.	and older? \$ per:  Does your program have a waiting  IF NO, GO TO 20 IF YES,  How many children are currently of  (a) Infant (6 weeks to 12 months)  (b) Toddler (13 months to 24 months)  (c) Toddler II (2 to 2½ years)	list? Yeson your waiting	<del></del>		age groups?:
18.	and older? \$ per:  Does your program have a waiting IF NO, GO TO 20 IF YES, How many children are currently compared to the series of the series	list? Yes on your waiting ths)	<del></del>		age groups?:
18.	and older? \$ per:  Does your program have a waiting  IF NO, GO TO 20 IF YES,  How many children are currently of  (a) Infant (6 weeks to 12 months)  (b) Toddler (13 months to 24 months)  (c) Toddler II (2 to 2½ years)	list? Yes on your waiting ths)	<del></del>		age groups?:
18.	and older? \$ per:  Does your program have a waiting IF NO, GO TO 20 IF YES, How many children are currently compared to the series of the series	list? Yes on your waiting ths)	list for each	of following	age groups?:
18. 19.	and older? \$ per:  Does your program have a waiting  IF NO, GO TO 20 IF YES,  How many children are currently of  (a) Infant (6 weeks to 12 months)  (b) Toddler (13 months to 24 months)  (c) Toddler II (2 to 2½ years)  (d) Pre-school (2½ to 4 years)  (e) School age (4 years and older)	list? Yes on your waiting ths) offer special progiven me, do you	list for each	of following esN extra fees bey	lo yond your basic
18. 19. 20.	Does your program have a waiting IF NO, GO TO 20 IF YES, How many children are currently of (a) Infant (6 weeks to 12 months) (b) Toddler (13 months to 24 months) (c) Toddler II (2 to 2½ years) (d) Pre-school (2½ to 4 years) (e) School age (4 years and older) Does your child care home/center Other than rates you have already grates for child care? By this I m following:	list? Yes on your waiting ths) offer special progiven me, do you	ograms? Y	esN extra fees bey	lo yond your basic
18. 19. 20.	Does your program have a waiting IF NO, GO TO 20 IF YES, How many children are currently of (a) Infant (6 weeks to 12 months) (b) Toddler (13 months to 24 months) (c) Toddler II (2 to 2½ years) (d) Pre-school (2½ to 4 years) (e) School age (4 years and older) Does your child care home/center Other than rates you have already grates for child care? By this I merely the solution of the content o	list? Yes on your waiting ths) offer special progiven me, do you chean, do you ch	ograms? Y charge any	esN extra fees bey fees and how Fee \$	No yond your basic much for the per
18. 19. 20.	Does your program have a waiting IF NO, GO TO 20 IF YES, How many children are currently of (a) Infant (6 weeks to 12 months) (b) Toddler (13 months to 24 months) (c) Toddler II (2 to 2½ years) (d) Pre-school (2½ to 4 years) (e) School age (4 years and older) Does your child care home/center Other than rates you have already grates for child care? By this I m following:  (a) Registration	list? Yes on your waiting ths) offer special provices me, do you chean, do you chean	ograms? Y charge any large extra	esN extra fees bey fees and how Fee \$ Fee \$	No yond your basic y much for the
18. 19. 20.	and older? \$ per:  Does your program have a waiting IF NO, GO TO 20 IF YES, How many children are currently of (a) Infant (6 weeks to 12 months) (b) Toddler (13 months to 24 months) (c) Toddler II (2 to 2½ years) (d) Pre-school (2½ to 4 years) (e) School age (4 years and older)  Does your child care home/center  Other than rates you have already grates for child care? By this I m following:  (a) Registration (b) Supplies	on your waiting ths)  offer special provide an, do you chean, do you che	ograms? Y charge any large extra  No	esN extra fees bey fees and how Fee \$ Fee \$ Fee \$	ond your basic much for the per
18. 19. 20.	and older? \$ per:  Does your program have a waiting  IF NO, GO TO 20 IF YES,  How many children are currently of  (a) Infant (6 weeks to 12 months)  (b) Toddler (13 months to 24 months)  (c) Toddler II (2 to 2½ years)  (d) Pre-school (2½ to 4 years)  (e) School age (4 years and older)  Does your child care home/center  Other than rates you have already grates for child care? By this I may following:  (a) Registration  (b) Supplies  (c) Activities/Programs	on your waiting ths)  offer special provide an, do you chean, do you che	ograms? Y charge any large extra No No	esN extra fees bey fees and how Fee \$ Fee \$ Fee \$ Fee \$	ond your basic much for the per per per per
18. 19. 20.	and older? \$ per:  Does your program have a waiting IF NO, GO TO 20 IF YES, How many children are currently of (a) Infant (6 weeks to 12 months) (b) Toddler (13 months to 24 months) (c) Toddler II (2 to 2½ years) (d) Pre-school (2½ to 4 years) (e) School age (4 years and older)  Does your child care home/center  Other than rates you have already grates for child care? By this I m following:  (a) Registration (b) Supplies (c) Activities/Programs (d) Meals	on your waiting ths)  offer special province me, do you chean, do you chean, do you ches Yes Yes Yes Yes	ograms? Y charge any arge extra No No No	esN  extra fees bey fees and how  Fee \$	yond your basic much for the per per per



22.	In addition to parent fees, does your program receive rever sources? What percentage of your total revenues come from		he following
			of revenues
	(a) Federal government grants	□Yes □No	
	(b) District government grants		
	(c) Private grants (foundations, businesses, etc.)		
	(d) Fund Raising Activities	□Yes □No _	
	(e) Agency Reimbursements (incl. CAFCP, subsidies)	□Yes □No _	<u> </u>
	(f) Other (Please Identify)		
	(1) Other (Flease identity)	TIES DINO	
23.	Do you receive noncash contributions on a regular basis for Equipment $\square$ Yes $\square$ No Food $\square$ Yes $\square$ No Rent $\square$ Yes $\square$ No Utilities $\square$ Yes $\square$ No	any of the following Other	-
24.	What percentage of your total revenues come directly from	parent charges?	%
	WOULD LIKE TO ASK YOU A FEW QUESTIONS ABOUT YOU QUESTIONS CONCERN THE ABILITY YOU HAVE TO EXPAND		
25.	Are you willing to expand the hours of operation for your p	rooram?	
23.	(a) $\square$ Yes $\square$ No If No, GO TO QUESTION 26	_	
	(a) = 1 cs = No 1F NO, GO 10 QUESTION 20	IF YES,	
	Which of the Callering to a construction and a second	h a:111: 4	. 10
	Which of the following types of service would you l	be willing to expar	1 <b>a</b> ?
	(a) Children with Disabilities.	•	
	☐ (b) Evening Care (after 6:00 pm)		
	□ (c) Weekend Care		
	(d) Overnight Care		
	□ (e) Drop-In		
	(f) Other (Please Identify)		
26.	Can your space be enlarged to take in additional children?		
	(a) ☐ Yes ☐ No If NO, GO TO QUESTION 27	IF YES,	
	How many additional children would you be able to serve?		•
	How many of the additional child care slots could be used f	or each of the	
	following categories? (Please count each slot once only)		
	(a) Infant (6 weeks to 12 months)		
	(b) Toddler (13 months to 24 months)	•	
	(c) Toddler II (2 to $2\frac{1}{2}$ yrs)		
	(d) Pre-school (2½ to 4 years)		
	(e) School age (4 years and older)		•
	(c) believe age ( 7 years and older)		

IF FAMILY HOME CHILD CARE PROVIDER ASK 27; IF NOT, GO TO 28.



UDC/CARUP4/26/00

6

27.	Would you be willing to hire an assistant to take care of mo	ore children?  Yes  No
28.	What would you need in order to expand your program or i	facilities?
	<ul> <li>□ (a) Money for renovation</li> <li>□ (b) Money for equipment</li> <li>□ (c) Assistance with an architect</li> <li>□ (d) Additional transfer</li> <li>□ (e) Other (please</li> </ul>	
29.	If financial assistance were available, would you be willing	to expand your facility?
30.	☐ Yes ☐ No  What is the current professional accreditation status of you	r program?
	<ul> <li>□ (a) Accredited; by</li> <li>□ (b) have filed for accreditation; With</li> <li>□ (c) am preparing to apply for accreditation; With</li> <li>□ (d) am not currently accredited by a professional</li> </ul>	
31.	If your program is not currently accredited, what assistant accredited?  (a) Additional information (b) Mentor (c) Assistance with fees (d) Other (please identify)	nce would you need to become
Now 1	OW I WOULD LIKE TO ASK YOU A FEW QUESTIONS ABOUT YOUR	R PROGRAM AND STAFF?
32.	Using the following categories, how many people, including program on a normal day? Please place each employee in your total number of current employees.	ng yourself, work in your one category only. What is
	Number on a normal day  (a) Administrator Only (b) Administrator/Teacher (c) Teacher (d) Assistant Teacher (e) Classroom Aide (f) Other (Please Identify categories)	Total current employees

ERIC Full Text Provided by ERIC

33.	How long has the typical em employees have left and/or b					? How ma	any		
			ne Aver lea	rage nu ving in	mber past	Average hired i	n past		
			3	4- 6	7-12	3	4-6	7-12	
	(a) Administrator Only		mos.	mos.	mos.	mos.	mos.	mos.	
	(b) Administrator/Teacher								
	(c) Teacher			. ——					•
	(d) Assistant Teacher								
	(e) Classroom Aide								
	(f) Other								-
34.	How many members of your highest degree for each emptorategory with a CDA		f they hav	ve a CD		_		iff in eac	
			Degre	_					Has
		Doctorate 1	Masters F	Bachelo	rs Assoc	iate H.S./	GED	(	CDA
	(a) Administrator Only		<del></del>					_	
	(b) Administrator/Teacher		<del></del>				_	_	
	(c) Teacher						_	_	
	(d) Assistant Teacher		<del></del>				_	_	
	(e) Classroom Aide (f) Other		<del>. —</del>					_	
	(g)Total degrees in	<del></del>				_	_	_	
	early childhood education								
	or related fields							_	
35.	What is the average number employee? Clock hours incl hours. (Include staff enrolled (a) Administrator On (b) Administrator/Te (c) Teacher with Bac (d) Teacher with CD	ude training d I in college co lly acher helor's degree A	luring wo urses, CI	ork hour OA train	s and tra	ining duri			of
	(e) Assistant Teacher								
	(f) Classroom Aide					<del></del>			
	(g) Other								
	(Flease Identity c	ategories)							
	(h) Who pays for training?								
	(i) Is the director generally						□ Yes		□ No



UDC/CARUP4/26/00

36.	Which of the following benefits, if What percentage is paid by you, th			to full-tin	ne emplo	yees in yo	our program?
	what percentage is paid by you, in	e employe	1 :	%	paid by	employe	r
	(a) Health insurance (b) Life Insurance	□Yes □Yes	□No □No				
	(c) Disability Insurance	□ Yes					
	(d) Retirement plan	□Yes					
	(e) Paid sick leave	□Yes	□No			(#	of days)
	(f) Paid vacation	□Yes	□No			(#	of days)
	(g) Other	□Yes	□No			`	• /
	(Please identify						
	(h) Offer benefits to part-ti: (i) Offer no benefits □			□Yes	□No		
	If no benefits: Does subsidize health car IF YES, PLEASE DES	e costs in	any way	? 🗆	Yes [	JNo	r employees or
37.	What percentage of salaries is you	r benefit p	ackage?		%.		
38.	Are the following benefits available	le for depe	ndents o	f employe	ees:		
	<ul><li>(a) Health Insurance</li><li>(b) Life Insurance</li></ul>	□Yes □Yes	□No □No	(c)	Other	□Yes	□No 
39.	Do benefits begin when hired or months before being eligible for be When hired □Yes □No	enefits?					
40.	What percentage of employees par	ticipate in	benefits	offered?			<b>%</b>
41.	Does the availability of health insu	ırance affe	ect staff to	urnover?	□Yes	□No	□Not sure
42.	What are barriers to employees' pa	articipation	n?				
	Go	TO QUEST	ion 46				
For F	FAMILY PROVIDERS ONLY:						
43.	What is the source of above benefit	its?		_spouse	s	elf	_other
44.	How much in out-of-pocket health	care expe	enses did	you spen	d in the	last year?	\$



UDC/CARUP4/26/00

45.	How often did you use the er For your own child's care?			ear for your own c	are?	
	GO TO QUES	<b>FION 47</b>				
46.	What is the salary paid for ea	ach catego	ry of employee?			
		Beginni	ng Salary	Salary w/ 3 yr experience		w/ 5 yrs. erience
	(a) Administrator Only	\$	per:	\$	\$	
	<ul><li>(b) Administrator/Teacher</li><li>(c) Teacher with Bachelor's</li></ul>	\$			\$	
	degree or higher	\$	per:	\$	\$	
	(d) Teacher with CDA	\$	per:		\$	
	(d) Assistant Teacher	\$	per:	<b>5</b>	\$	
	(e) Classroom Aide	\$	per:	\$	\$	
	(f) Other	\$	per:	\$	\$	
48.		ur programek who is number on the aver	(e) As (f) Cla (g) Ot  n/center? By volum  not directly paid by of volunteer hours a  rage week?	acher with CDA ssistant Teacher assroom Aide ther nteers I mean anyon by your program. I	☐ Yes ☐ N	No
inform partic	k you for taking the time to con mation you would like to share cipation in this survey will cont oursement rates and policies for	with us, paribute to t	please call the Centhe process for esta	ter at 202-274-711 ablishing fair and e	0. Again, y quitable	
Interv	viewed by:		Date and tir	me:	_	
UDC/C	ARUP4/26/00			. '		10



## 2000 NORTH CAROLINA CHILD CARE MARKET RATE SURVEY IMPORTANT INSTRUCTIONS FOR CHILD CARE CENTERS

- Please answer every question. If a question does not apply to you, write "N/A."
- All information (except summer care for school-age children) should be given for the month of November 2000.
- All rates that you report should be for **on-time payment** and **on-time pick-up** of children. If parents received a discount for paying early, write the un-discounted amount that they paid. If parents paid more than your regular charge due to late payment or because they picked up their children late, do not count these extra charges when you write the rates that parents paid.
- A full-time child is one who attends 30 or more hours per week. A part-time child attends for less than 30 hours per week.
- Preschool-age children are all children under 5 and 5 year-olds who are not in kindergarten.
- School-age children include children from ages 5 through 12 who are attending school.
- A "child receiving subsidized child care" is a child whose child care rate is partially or completely paid on a regular basis by an organization outside your center which provides the subsidy for the specific child. The funds used to make the subsidy payment are usually public funds. Funds may come from organizations such as the county Department of Social Services, local Smart Start Partnership, or Child Care Resource and Referral Agency. (Note: Smart Start payments made to child care providers based on the total number of children in care are not considered subsidies.)
- "Private-paying parents" are parents whose children do not receive subsidized child care.
- If your program is a **Head Start center** or **certified Developmental Day center**, please write that on the top of the survey form and mail back the blank survey. (Because Head Start and Developmental Day centers are different from other child care centers in important ways, they are not being surveyed here.)
- If you need help filling out the survey, start by looking at the enclosed sample.
- If you have any more questions about how to answer a survey question, think the survey does not apply to your program, or see more than one way to answer a question, please contact North Carolina State University and refer to this "market rate survey." Contact information:

  Phone: (919)515-1323. Fax: (919)515-3642. Email: Art Anthony@ncsu.edu.



#### CHILD CARE MARKET RATE SURVEY - CHILD CARE CENTERS

1-Star2-Star TemporaryProvi	_3-Star sional		-Star cial Pro	5-Si visional		_A robatio	AA nary	
2. ENROLLMENT AND VACA each age group during Noven classrooms, please break out in	aber 200	0. Fill o	ut the ta	ble belo	w. If yo	u have r		
	Infants	l-year olds	2-year olds	3-year olds	4-year olds	5-year olds in pre- school	5 thru 12 year olds in school	Center total
How many children in each age group were enrolled full-time in November?								
How many children in each age group were enrolled part-time in November?			·					
	23.574.574							
How many vacant full-time spaces in each age group did you have in November?								
How many vacant part-time spaces in each age group did you have in November?								
3. SUBSIDIZED CHILD CARE During November, how many Examples of subsidized child care local Smart Start partnerships, and whose parents paid the rate you can the local Smart Start office.	of the c e include a d child car	assistance e resourc	e to paren e and refe	ts from co erral agen	ounty dep cies. No	artments te: <b>Do</b> no	of social s	ervices children
		 re:	$\neg \leftarrow$				ubsidized o	

- 4. CHILD CARE RATES FOR YOUNG CHILDREN. Please tell us the full-time rates that private-paying parents paid your center to care for their young children (0 through 5) in November 2000. Then tell us the number of young children enrolled full-time in November 2000 whose parents were private-paying.
  - Write your on-time rates. Do not write what the rates turned out to be after you gave parents discounts for paying early or after you charged them extra for paying late.
  - Enter "0" for enrollment if: (1) during November you did not care for children in an age group or (2) all children in that age group were subsidized. (See number 3 for examples of subsidy funding sources.)
  - The numbers you give for enrollment below might be different than the answers you gave in question number 2.
  - When adding up enrollment for the table below:
    - <u>Do not</u> count any children who received subsidized child care. (See instructions for definition of "children receiving subsidized child care.")
    - Do count children who received a second-child discount.



#### 4. CHILD CARE RATES FOR YOUNG CHILDREN (Continued)

	Infants	1-year	2-year	3-year	4-year	5-year olds
For the age groups shown to the right		olds	olds	olds	olds	(pre-school)
What was the full-time rate that private- paying parents paid in November?	\$	\$	\$	\$	\$	\$
Was the rate you gave per (circle one)	Week or month?					
How many children of private-paying parents were enrolled full-time in November?						

- 5. RATES FOR SCHOOL-AGE CARE. Please tell us the rates that private-paying parents paid your center to care for their school-age children during July and November 2000. Also tell us how many school-age children with private-paying parents were enrolled in July 2000 for full-time summer care and in November 2000 for other types of school-age care. Fill out the table below.
  - Some children may be counted in: a) the full-time summer, b) the full-day and c) only one of the last three columns.
  - Children should not be counted more than once in the last three columns of the table.

	Full-Time	Full-Day	Before AND	Before	After School
	School-	(School	After School	School Only	Only
	Age Care	Breaks	(November)	(November)	(November)
•	(July)	during fall	}		
For the time frames shown to the right		2000)			
What was the rate that private-paying parents	\$	\$	\$	\$	\$
paid for school-age care?		ł			
	Day, week	Day, week	Day, week	Day, week	Day, week
Was the rate per (circle one)	or month?	or month?	or month?	or month?	or month?
How many school-age children of private-					
paying parents were enrolled?					

6. Does your center have a <u>sliding fee scale</u> or offer <u>scholarships?</u>

That is, do you determine the rate a private-paying parent will pay based on family income? (Please circle)

YES

NO

If so, and if you have a written description of the sliding fee scale/scholarship program, please attach.

Does your center offer weekend care? (Please circle)
 If so...
 Does your center charge more for weekend care than weekday care?
 YES NO N/A

 Does your center offer shift care (care during 2<sup>nd or</sup> 3<sup>rd</sup> shift)?
 YES NO lf so...
 Does your center charge more for 2<sup>nd</sup> or 3<sup>rd</sup> shift care than 1<sup>st</sup> shift care? YES NO N/A

9. TRANSPORTATION. If your center offers transportation on a regular basis and charges a separate transportation fee, tell us the transportation fee paid by private-paying parents in November. Also write the typical number of children you transported on a typical day in November whose parents were private paying. Write "N/A" if you don't provide transportation.



#### 9. TRANSPORTATION (continued)

- If your center provides transportation but does not charge for it, put \$0 for the amount you charge and enter the typical number of children you transported on a typical day in November.
- If your center offers multiple options for transportation and cannot show all types of fees here, you may attach a description of your various fees.

	Infants through 2- years olds	3-year olds through preschool - age 5-year olds	School-age
What was the fee paid by private-paying parents for transportation in November?	\$N/A	\$ N/A	\$ N/A
Was the fee per (circle one)	Day, week or month?	Day, week Or month?	Day, week Or month?
Was the fee for transportation to child care, from child care, or both to and from child care? (circle one)	To From or To <u>and</u> From	To From or To <u>and</u> From	To From or To <u>and</u> From
What was the typical number of children of private- paying parents transported on a typical day in November?	N/A	N/A	N/A

## 10. OTHER FEES. Please tell us if your program charges any of the following fees by filling out the table below.

	Do you charge? (circle yes or no)	Fee paid by private- paying parents	How often is the fee charged? (circle one)
Application/Enrollment Fee (charged before a child begins attending)	Yes No	\$ 15	monthly yearly
Registration Fee (charged when a child begins attending or periodically while a child is attending)	Yes No	\$ N/A	One time weekly monthly yearly
Insurance Fee (if separate from registration fee)	Yes No	\$ N/A	One time weekly monthly yearly
Supplies Fee (charged periodically to pay for classroom materials)	Yes No	\$ 15	One time weekly monthly vearly
Activities Fee (charged periodically for special events such as field trips)	Yes No	\$ 20	One time weekly monthly yearly

#### Please tell us about any additional fees your program charges by filling out the table below.

Describe the fee	Fee paid by private- paying parents	How often is the fee charged? (Circle one)
I don't have any other fees.	S	One time weekly monthly yearly
	\$	One time weekly
		monthly yearly

Thank you for completing the survey!

Please return the survey in the enclosed envelope, already stamped and addressed for you.



#### 9. TRANSPORTATION (continued)

- If your center provides transportation but does not charge for it, put \$0 for the amount you charge and enter the typical number of children you transported on a typical day in November.
- If your center offers multiple options for transportation and cannot show all types of fees here, you may attach a description of your various fees.

	Infants through 2- years olds	3-year olds through preschool - age 5-year olds	School-age
What was the fee paid by private-paying parents for transportation in November?	\$	\$	\$
Was the fee per (circle one)	Day, week or month?	Day, week Or month?	Day, week Or month?
Was the fee for transportation to child care, from child care, or both to and from child care? (circle one)	To From or To <u>and</u> From	To From or To <u>and</u> From	To From or To <u>and</u> From
What was the typical number of children of private- paying parents transported on a typical day in November?			

## 10. OTHER FEES. Please tell us if your program charges any of the following fees by filling out the table below.

	Do you charge? (circle yes or no)		Fee paid by private- paying parents	How often is the fee charg (circle one)		
Application/Enrollment Fee	Yes	No	\$	One time	weekly	
(charged before a child begins attending)				monthly	yearly	
Registration Fee (charged when a	Yes	No	\$	One time	weekly	
child begins attending or periodically while a child is attending)				monthly	yearly	
Insurance Fee (if separate from	Yes	No	\$	One time	weekly	
registration fee)				monthly	yearly	
Supplies Fee (charged periodically to pay for classroom materials)	Yes	No	\$	One time	weekly	
to pay for classiconi materials)				monthly	yearly	
Activities Fee (charged periodically	Yes	No	\$ .	One time	weekly	
for special events such as field trips)				monthly	yearly	

#### Please tell us about any additional fees your program charges by filling out the table below.

Describe the fee	Fee paid by private- paying parents	How often is the fee charged? (Circle one)
	\$	One time weekly monthly yearly
	\$	One time weekly monthly yearly

Thank you for completing the survey!

Please return the survey in the enclosed envelope, already stamped and addressed for you.



#### SAMPLE CHILD CARE MARKET RATE SURVEY - CHILD CARE CENTERS

1.	LICENSE I YPE	AS 01 N	lovember 2000	), what type of	license did y	our child	care center	nave?
	(Check one.)		/					
	1-Star	_2-Star	✓ 3-Star	4-Star	5-Star	A	AA	
	Temporary	Pı	rovisional	Special Prov	isional	_Probatio	onary	
2	ENDOLI MENT	ANID MA	CANCIEC I	llagas dell ver ob		allmant a	and wasan sis	

2. ENROLLMENT AND VACANCIES. Please tell us about your enrollment and vacancies in each age group during November 2000. Fill out the table below. If you have mixed-age classrooms, please break out information into the age groups listed below.

	Infants	1-year olds	2-year olds	3-year olds	4-year olds	5-year olds in pre- school	5 thru 12 year olds in school	Center total
How many children in each age group were enrolled full-time in November?	N/A	9	16	12	8	6	0	51
How many children in each age group were enrolled part-time in November?	N/A	0	0	0	15	1	12	28
<b>28</b> (447) (4.74)			<b>24</b> 13 20					
How many vacant full-time spaces in each age group did you have in November?	N/A	1	0	0	0	0	0	1
How many vacant part-time spaces in each age group did you have in November?	N/A	0	0	0	1	0	3	4

#### 3. SUBSIDIZED CHILD CARE

During November, how many of the children counted above received <u>subsidized child care</u>? Examples of subsidized child care include assistance to parents from county departments of social services, local Smart Start partnerships, and child care resource and referral agencies. Note: Do not include children whose parents paid the rate you charge but for whom you received a Smart Start quality bonus payment from the local Smart Start office.

Children receiving full-time subsidized care: 18		Children receiving part-time subsidized care: 3
--	--	---

4. CHILD CARE RATES FOR YOUNG CHILDREN. Please tell us the full-time rates that private-paying parents paid for your center to care for their young children (0 through 5) in November 2000. Then tell us the number of young children enrolled full-time in November 2000 whose parents were private-paying.

- Write your on-time rates. Do not write what the rates turned out to be after you gave parents discounts for paying early or after you charged them extra for paying late.
- Enter "0" for enrollment if: (1) during November you did not care for children in an age group or (2) all children in that age group were subsidized. (See number 3 for examples of these funding sources.)
- The numbers you give for enrollment below might be different than the answers you gave in question number 2.
- When adding up enrollment for the table below:
  - <u>Do not count any children who received subsidized child care.</u> (See instructions for definition of "children receiving subsidized child care.")
  - Do count children who received a second-child discount.



109

#### 4. CHILD CARE RATES FOR YOUNG CHILDREN (Continued)

·	Infants	1-year	2-year	3-year	4-year	5-year olds
For the age groups shown to the right		olds	olds	olds	olds	(pre-school)
What was the full-time rate that private-	s N/A	\$ 100	\$ 90	\$ 85	\$ 80	\$ 80
paying parents paid in November?						
	Week or	Weekor	Week or	Week or	Weekor	Week or
Was the rate you gave per (circle one)	month?	month?	month?	month?	month?	month?
How many children of private-paying parents	N/A	6	10	7	5	5
were enrolled full-time in November?		}				

- 5. RATES FOR SCHOOL-AGE CARE. Please tell us the rates that private-paying parents paid your center to care for their school-age children during July and November 2000. Also tell us how many school-age children with private-paying parents were enrolled in July 2000 for full-time summer care and in November 2000 for other types of school-age care. Fill out the table below.
  - Some children may be counted in: a) the full-time summer, b) the full-day and c) only one of the last three columns.
  - Children should not be counted more than once in the last three columns of the table.

	Full-Time	Full-Day	Before AND	Before	After School
	School-	(School	After School	School Only	Only
	Age Care	Breaks	(November)	(November)	(November)
	(July)	during fall	ļ		<b>t</b>
For the time frames shown to the right		2000)			
What was the rate that private-paying parents paid for school-age care?	\$ 80	\$ 20	\$ N/A	\$ N/A	\$ 20
\	Day, week	Day week	Day, week	Day, week	Day, week
Was the rate per (circle one)	or month?	or month?	or month?	or month?	or month?
How many school-age children of private- paying parents were enrolled?	8	9	N/A	N/A	9

6. Does your center have a <u>sliding fee scale</u> or offer <u>scholarships?</u>

That is, do you determine the rate a private-paying parent will pay based on family income? (Please circle)

If so, and if you have a written description of the sliding fee scale/scholarship program, please attach.

Does your center offer weekend care? (Please circle)
 If so...
 Does your center charge more for weekend care than weekday care?
 YES NO N/A
 NO N/A
 So...
 Does your center offer shift care (care during 2<sup>nd or</sup> 3<sup>rd</sup> shift)?
 If so...
 Does your center charge more for 2<sup>nd</sup> or 3<sup>rd</sup> shift care than 1<sup>st</sup> shift care? YES NO N/A

9. TRANSPORTATION. If your center offers transportation on a regular basis and charges a separate transportation fee, tell us the transportation fee paid by private-paying parents in November. Also write the typical number of children you transported on a typical day in November whose parents were private paying. Write "N/A" if you don't provide transportation.



### 2000 NORTH CAROLINA CHILD CARE MARKET RATE SURVEY IMPORTANT INSTRUCTIONS FOR FAMILY CHILD CARE HOMES

- Please answer every question. If a question does not apply to you, write "N/A".
- All information (except summer care for school-age children) should be given for the month of November 2000.
- The first question asks for information about the children who were in your care during November 2000, not including any school-age children cared for only during school breaks. Please provide information about the children's attendance and what their parents paid for their care. Later questions ask for the fees that are paid by parents for services such as full-day school-age care and transportation.
- Do not include information about your own children.
- If you charge a single fee to a family with more than one child, please break down how much of the fee is for each child.
- "Private-paying parents" are parents whose children do not receive subsidized child care. Private-paying parents pay the full fee directly to you as the provider.
- "Subsidized child care" is care that is partially or completely paid for on a regular basis by an
  agency outside your family child care home. Subsidized child care funding pays for <u>specific</u> children,
  unlike some other sources of funding that pay a certain amount for all of the children in your home.
  Subsidized child care funds are usually public funds. For example, subsidized child care funds can
  come from county Departments of Social Services, local Smart Start Partnerships, Child Care
  Resource and Referral agencies, and other organizations.
- "On-time rates" are the rates that parents pay for child care if they pay on time. (Some providers give discounts for early payment or charge extra for late payment.)
- If you need help filling out the survey, start by looking at the enclosed sample.
- If you have **questions** about how to answer a survey question, think the survey does not apply to you, see more than one way to answer a question, or cared for more than eight children at a time in November (not including your own), please contact North Carolina State University and refer to this "market rate survey." Contact information:

Phone: (919)515-1323. Fax: (919)515-3642. Email: Art\_Anthony@ncsu.edu.



111

#### CHILD CARE MARKET RATE SURVEY -- FAMILY CHILD CARE HOMES

	1-Sta	r2-	Star	_3-Star _	4	-Star	5-Star			
	Famil	y Child C	are Home	License			<del> </del>			
		orary _	Provis		Spe	cial Provis	sional	Probati	onary	
2.	INFORMATION ABOUT THE CHILDREN IN YOUR CARE. Thinking about a typical period of enrollment for your family child care home in November, please tell us about each child in your care by filling out the table below. Provide information about every child you regularly cared for in November. Do not include drop-in children. Do not include school-age children who received care only during school breaks. (See question #5.) Do not list any child more than once. We have provided an example in the first row.									
	How old was this child in November? (specify months or years old)	How many hours per week in November was this child in your care?	How many days per week in November was this child in your care?	If this child is school age, of you usually control for this child before or aft school or both (mark one or b	lid are d er th?	Did you care for this child during the 1st, 2nd, or 3rd shift? (circle all that apply)	In November, how much did the parent pay for care for this child?	Is the parent payment you listed per week or month? (mark one)	Does the child receive subsidized child care? (See instructions.)	Does the payment you listed reflect any sort of discount you offer parents or is it the full amount that you charge for that age child?  (mark one)
Example	2 yrs.	50	5	Before School After School		1) 2: 3	s:90	Week / Month []	Yes (No.)	Discounted Fee
Child 1				Before School		1 2 3	\$	Week	Yes No	Discounted Fee
Child 2				After School Before School		1 2 3	\$	Month ☐ Week ☐	Yes No	Full Fee  Discounted Fee
Child 3				After School Before School	R	1 2 3	<u> </u>	Month ☐ Week ☐	Yes No	Full Fee  Discounted Fee
Ciliu 3				After School		1 2 3		Month		Full Fee
Child 4				Before School After School		1 2 3	\$	Week □ Month □	Yes No	Discounted Fee  Full Fee
Child 5				Before School		1 2 3	\$	Week 🔲	Yes No	Discounted Fee
Child 6	<del> </del>			After School Before School	H	1 2 3	\$	Month ☐ Week ☐	Yes No	Full Fee  Discounted Fee
				After School				Month		Full Fee
Child 7		_		Before School After School		1 2 3	\$	Week □ Month □	Yes No	Discounted Fee  Full Fee
Child 8				Before School	=	1 2 3	\$	Week 🔲	Yes No	Discounted Fee
Child 9*				After School Before School	뮤	1 2 3	\$	Month ☐ Week ☐	Yes No	Full Fee  Discounted Fee
				After School	Ĭ		_	Month 🗌		Full Fee
Child 10*			·	Before School After School	日.	1 2 3	\$	Week □ Month □	Yes No	Discounted Fee
Child 11*				Before School	<u> </u>	1 2 3	\$	Week	Yes No	Discounted Fee
<u> </u>				After School				Month		Full Fee
Child 12*				Before School After School		1 2 3	\$	Week □ Month □	Yes No	Discounted Fee
Child 13*				Before School		1 2 3	\$	Week 🔲	Yes No	Discounted Fee  Full Fee
Child 14*	_			After School Before School After School	<u> </u>	1 2 3	\$	Month ☐ Week ☐ Month ☐	Yes No	Discounted Fee Full Fee

After School

After School

Before School



Child 15\*

112

Month [

Week Month 🔲 Yes No

Discounted Fee

Full Fee

<sup>\*</sup>Extra rows are included in case you cared for some children part-time, there was turnover in the children in your home, or you provided child care during more than one shift. Attach an extra page if you need more space to list children's information.

•	for giving each discount.		ist the r	<u></u>
٠.	SUMMER SCHOOL-AGE CHILD CARE			
	Did you care for any school-age children in July 2000? Yes (go to	o 4a)	□No (g	o to 5)
	4a. What was the on-time rate that private-paying parents paid in July for <u>full-time</u> school-age care?	per w	eek OR p	er <u>month</u>
	4b. How many school-age children of private-paying parents were you caring for on a regular full-time basis in July?		child(re	en)
•	SCHOOL-AGE CHILD CARE BREAKS DURING SCHOOL YEAR			
	Did you care for any school-age children in November 2000? Yes (go	to 5a)	∐No (go	to 6)
	5a. What was the on-time rate that private-paying parents paid for a full day of school-age care (such as during a teacher workday or another school break)?  OR	\$ p	er day for	a full day
	If you only charge for the extra ½ day in care, what is that extra rate?	\$ p	er day for	extra time
	5b. How many school-age children did you care for in November whose parents were private paying?		child	(ren)
•	Does your program have a <u>sliding fee scale</u> or offer <u>scholarships?</u> That is, do you determine the rate a private-paying parent will pay based on family income? ( <i>Please circle</i> )	YES	NO	
	If so, and if you have a written description of these special rates, please at	tach.		
•	Does your program offer weekend care? (Please circle)	YES	NO	
	<u>If so,</u> does your program charge more for weekend care than weekday care?	YES	NO	N/A
•	If you reported in the table in number 2 that your program offers child care during the $\frac{2^{nd} \text{ or } 3^{rd} \text{ shift}}{}$			
	Do you charge more for 2 <sup>nd</sup> or 3 <sup>rd</sup> shift care than for 1 <sup>st</sup> shift care?	YES	NO	N/A



9. TRANSPORTATION. Some programs offer transportation on a regular basis and charge a separate transportation fee. If your family child care home offers transportation, tell us the transportation fee paid by private-paying parents in November. Also write the typical number of children you transported on a typical day in November whose parents were private paying. If you provided transportation but did not charge for it, put \$0 for the amount you charged and enter the typical number of children you transported on a typical day in November. If you cannot show all your transportation fees here, you may attach a description of your fees. Enter "N/A" in all boxes if you don't offer transportation.

	Infants through 2-years olds	3-year olds through preschool-age 5-year olds	School-age
What was the fee that private-paying parents paid for transportation in November?	\$	\$	\$
Was the fee per (circle one)	Day, week or month?	Day, week or month?	Day, week or month?
Was the fee for transportation to child care, from child care, or to and from child care? (circle one)	To From or To and From	To From or To and From	To From or To and From
What was the typical <b>number of children</b> of private- paying parents transported on a typical day in November?			

## 10. OTHER FEES. Please tell us if you charge any extra fees by filling out the table below.

	Do you char (circle ye		Fee paid by private-paying parents	How often is the (circle	_
Application/Enrollment Fee (charged before a child begins to attend the child care program)	Yes	No	\$	One time monthly	weekly yearly
Registration Fee (charged when a child begins attending or periodically while a child is attending)	Yes	No	\$	One time monthly	weekly
Supplies Fee (charged periodically to pay for classroom materials)	Yes	No	\$	One time monthly	weekly yearly
Activities Fee (charged to pay for special events such as field trips)	Yes	No	\$	One time monthly	weekly yearly

Please tell us about any other fees you charge by filling out the table below.

Describe the fee	Amount paid by private-paying parents	How often is the fee charged?
<del></del>	\$	One time weekly
		monthly yearly
	S	One time weekly
		monthly yearly

Thank you for filling out the survey! Please return the survey in the stamped envelope (enclosed).



## SAMPLE CHILD CARE RATE SURVEY -- FAMILY CHILD CARE HOMES

			-	-,	-	-	d care home ha	ive: (Mark	i <u>une</u> .)
	1-Star				_4-Star	5-Sta	ır	•	
	Famil	y Child C							
	Temp	orary _	Provis	ionalSp	ecial Pro	visional	Probation	ary	
2.	enrollment filling out to	for your fan he table be	nily child c low. Provi	are home in Nov de information a	ember, <b>pl</b> e bout every	ease tell us child you	C. Thinking about about each child regularly cared for	<b>l in your ca</b> or in Novem	re by ber. Do
							ceived care <u>only</u> ded an example		
	How old	How	How	If this child is of	Did yo		Is the	Does the	Does the payme
	was this	many	many	school age, did	care for	ſ	•	child	you listed refle
	child in	hours per	days per	you usually care	child du		· 1 -	receive	any sort of
	November?	week in	week in	for this child	the 1st, 2		he you listed	subsidized	discount you
	(specify	November	November	before or after	or 3 <sup>rd</sup> sh	ift? parent	pay per week	child care?	offer parents or
	months or	was this	was this	school or both?	(circle	all for care	for or month?	(See	it the full amou
	years old)	child in	child in	(mark one or both	) that app	ly) this ch	ild? (mark one)	instruc-	that you charg
		your care?	your care?					tions.)	for that age chil (mark one)
Example	2 yrs.	50	5	Before School:		s 90	⁄∻⊪ Week. ✓₄	Yes (No)	Discounted Fee
				After School -			Month 🗍		Full Fee
Child 1	6 mos.	45	5	Before School After School	1 2 3	\$ 80	Week ☐ ( Month ✓	Yes No	Discounted Fee
Child 2	9 mos.	45	5	Before School After School		\$ 60	Week ✓ Month [	Yes No	Discounted Fee Full Fee [
Child 3	15 mos.	50	5	Before School After School		3 40	0 Week ☐ Month ✓	Yes No	Discounted Fee Full Fee
Child 4	3 yrs.	30	5	Before School  After School	1 $2$ $3$	\$ 55	Week ✓ Month [	Yes (No	Discounted Fee Full Fee
Child 5	3 yrs.	50	5	Before School  After School	$\begin{pmatrix} 1 & 2 & 3 \\ & & & \\ & & \\ & & & \\ & & & \\ & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & $	\$ 85	Week ✓ Month [	Yes (No	Discounted Fee Full Fee
Child 6	7 yrs.	15	5	Before School ☐  After School ✓	1 (2) 3	\$ 25	Week ✓ Month □	Yes (No	Discounted Fee Full Fee
Child 7				Before School After School		\$	Week   Month	Yes No	Discounted Fee Full Fee [
Child 8				Before School After School	1 2 3	\$	Week ☐ Month ☐	Yes No	Discounted Fee
Child 9*				Before School After School	1 2 3	\$	Week   Month	Yes No	Discounted Fee Full Fee
Child 10*				Before School After School	: 1	\$	Week []	Yes No	Discounted Fee
Child 11*				Before School	<del>                                     </del>	\$	Week 🗍	Yes No	Discounted Fee
				After School		- 1	Month 🗍		Full Fee
Child 12*				Before School After School	1 2 3	\$	Week   Month	Yes No	Discounted Fee
Child 13*				Before School	1 2 3	\$	Week 🗌	Yes No	Discounted Fee
Child 14*	<del>                                     </del>			After School Before School		\$	Month Week	Yes No	Discounted Fee
				After School	'		Month [		Full Fee [
Child 15*				Before School After School	1	\$	Week   Month	Yes No	Discounted Fee Full Fee
							,	L	

\*Extra rows are included in case you cared for some children part-time, there was turnover in the children in your home, or you provided child care during more than one shift. Attach an extra page if you need more space to list children's information.



	If you indicated in the table (question #2) that any payments reflected discounts, list the reason for giving each discount.  Child 1 – DSS set the fee
	Child 2 – parents received \$10 discount for early bird payment (on-time charge: \$90)
1.	SUMMER SCHOOL-AGE CHILD CARE
	Did you care for any school-age children in July 2000? Yes (go to 4a) No (go to 5)
	4a. What was the on-time rate that private-paying parents paid in July for full-time school-age care?  85 per week OR per month? (circle)
	4b. How many school-age children of private-paying parents were you caring for on a regular full-time basis in July?
5.	SCHOOL-AGE CHILD CARE BREAKS DURING SCHOOL YEAR
	Did you care for any school-age children in November 2000? ✓ Yes (go to 5a) No (go to 6)
	5a. What was the on-time rate that private-paying parents paid for a full day of school-age care (such as during a teacher workday or another school break)?
	OR \$ N/A per day for extra time
	If you only charge for the extra ½ day in care, what is that extra rate?
	5b. How many school-age children did you care for in November whose parents were private paying?
6.	Does your program have a sliding fee scale or offer scholarships?  That is, do you determine the rate a private-paying parent will pay based on family income? (Please circle)  YES  NO
	If so, and if you have a written description of these special rates, please attach.
7.	Does your program offer weekend care? (Please circle)  YES  NO
	If so, does your program charge more for weekend care than weekday care?  YES NO N/A
8.	If you reported in the table in number 2 that your program offers child care during the $2^{nd}$ or $3^{rd}$ shift
	Do you charge more for 2 <sup>nd</sup> or 3 <sup>rd</sup> shift care than for 1 <sup>st</sup> shift care?  YES  NO  N/A



9. TRANSPORTATION. Some programs offer transportation on a regular basis and charge a separate transportation fee. If your family child care home offers transportation, tell us the transportation fee paid by private-paying parents in November. Also write the typical number of children you transported on a typical day in November whose parents were private paying. If you provided transportation but did not charge for it, put \$0 for the amount you charged and enter the typical number of children you transported on a typical day in November. If you cannot show all your transportation fees here, you may attach a description of your fees. Enter "N/A" in all boxes if you don't offer transportation.

	Infants through 2-years olds	3-year olds through preschool-age 5-year olds	School-age
What was the fee that private-paying parents paid for transportation in November?	sN/A	s N/A	s N/A
Was the fee per (circle one)	Day, week or month?	Day, week or month?	Day, week or month?
Was the fee for transportation to child care, from child care, or to and from child care? (circle one)	To From or To and From	To From or To and From	To From or To <u>and</u> From
What was the typical <b>number of children</b> of private- paying parents transported on a typical day in November?	s N/A	s N/A	s N/A

## 10. OTHER FEES. Please tell us if you charge any extra fees by filling out the table below.

		arge this fee?  yes or no)	Fee paid by private-paying	How often is the fee charged?
	7		parents	(ejrcle one)
Application/Enrollment Fee (charged before a child begins to attend the child care program)	Yes	No	\$ 15	One time weekly monthly yearly
Registration Fee (charged when a child begins attending or periodically while a child is attending)	Yes	No	s N/A	One time weekly monthly yearly
Supplies Fee (charged periodically to pay for classroom materials)	Yes	No	\$ N/A	One time weekly monthly yearly
Activities Fee (charged to pay for special events such as field trips)	Yes	No	\$ 20	One time weekly monthly yearly

Please tell us about any other fees you charge by filling out the table below.

Describe the fee	Amount paid by private-paying parents	How often is the fee charged?
I don't have any other fees.	\$	One time weekly
		monthly yearly
	\$	One time weekly
		monthly yearly

Thank you for filling out the survey! Please return the survey in the stamped envelope (enclosed).



Place address label here CHILD CARE FACILITY

## **INSTRUCTIONS:**

<u>ALL INFORMATION WHICH IDENTIFIES A SPECIFIC LICENSED PROVIDER WILL REMAIN</u>
<u>CONFIDENTIAL.</u> Please answer each question COMPLETELY and return the 2000 Licensed Provider
Market Rate Survey no later than May 1, 2000 to:

Place address label here R&R FACILITY

The Ohio Department of Human Services (ODHS) is conducting this survey in compliance with H.B. 408, Section 5104.04, of the Ohio Revised Code, which states:

(3) The department shall, at least once during every twelve-month period of operation of a center or type A home, collect information concerning the amounts charged by the center or home for providing child day-care services for use in establishing rates of reimbursement pursuant to section 5104.30 of the Revised Code.

The information provided by this survey will be used by ODHS to establish the maximum Market Rate for reimbursing Licensed Child Care Providers who render Publicly Funded Child Care services to Ohio's low income families. The maximum Market Rate will be itemized by the age of the child, time of service(s), and type of service(s) provided.

In addition, LBO is investigating the various payment processes used by the County Departments of Human Services (CDHS) for reimbursing providers and the feasibility of a prospective payment system. LBO will be making recommendations regarding the payment system to the Ohio Legislature for review.

Assessing and establishing an accurate and equitable Market Rate and reporting an accurate evaluation of the CDHS payment system(s) hinges exclusively on the information supplied by you, the Licensed Child Care Provider. Please complete all questions accurately and return the survey in the return envelope enclosed no later than May 1, 2000.

If additional space is needed for any response, please use the blank page located on the back of the survey or
attach a separate page. Please ensure additional response(s) are numbered according to the question(s) being
answered. If you have questions or desire additional clarification, please call the Resource & Referral Office at
After office hours, please leave a message and your call will be returned.

#### **MAILING INSTRUCTIONS:**

After accurately completing the survey, please fold and insert into the enclosed SELF-ADDRESSED STAMPED ENVELOPE and mail immediately.

Thank you in advance for your cooperation.



T		N.T	rı	1
111	HH.	N.		v

Please mark all items applicable to your Licensed facility. This information is vital for assessing the variou types of licensed facilities throughout the state, and ensuring that a representative sample of each type i adequately evaluated. PLEASE CIRCLE CORRECT ANSWER AND/OR FILL-IN BLANK!

•	TO1 11-4-	r Type(s) of licensed	1 '1 1	. 1. 1 44 /	\ I I A I
	Please indicate va	ir i unaici at licenced	Child care tacility h	V CITCIING IPHOTI	thin the left column
1.	I ICUSC INCIDENCE YO	H I A Decis) of Heelisen	Cities care ractiffy o	y one only	o) in the left column.

- A. NOT APPLICABLE
- B. Type A Family Child Care Home
- C. Type C Child Care Center
- D. Type D Day Camp
- 2. What type of Business is your licensed child care facility?
  - A. For-profit, single location
  - B. For-profit, multiple locations
  - C. Not-for-profit, single location
  - D. Not-for-profit, multiple locations
- 3. Are you part of an agency or organization that provides services other than child care?

YES

NO

## **CURRENT ENROLLMENT**

The following questions ask about your current enrollment.

## PLEASE CIRCLE CORRECT ANSWER AND/OR FILL-IN BLANK!

<b>4</b> .	How many children is your child care facility licensed to serve in the following categories?							
	A.	NOT APPLIC	·					
	B.	Infant	(0 months to less than 18 months)					
	C.	Toddler	(18 months to less than 3 years)					
	D.	Preschool	(3 years to less than 5 years)					
	E.	School Age	(5 years to less than 13 years)					
5.	How	many SUBSIDIZ	LED children do you serve in the following categories?					
	A.		NE, go to question 20)					
	B.	Infant	(0 months to less than 18 months)					
	C.	Toddler	(18 months to less than 3 years)					
	D.	Preschool	(3 years to less than 5 years)					
	E.	School Age	(5 years to less than 13 years)					



## **CURRENT PAYMENT SYSTEM**

The Ohio Legislature has asked the Legislative Budget Office to study publicly-funded child care payment procedures and make recommendations regarding the feasibility and the potential for development of a cost-based prospective payment system. Please share with us your experience of the child care payment system by completing the questions in the following section.

PLEA	ASE CIRCLE CORRECT ANSWER AND/OR FILL-IN BLANK!				
 6.	Do you serve PUBLICLY-SUBSIDIZED CHILDREN? (Children for whom a CDHS pays all or part of the cost of care)				
	YES NO If YES, go to question 8. If NO, answer question 7 and then go to question 24.				
7.	WHY DO YOU NOT OFFER SUBSIDIZED CHILD CARE? Please list the top 3 reasons with 1 being the most significant and 3 being the least significant.				
	1.				
	2				
	3				
8.	How long do you estimate it usually takes the CDHS TO DETERMINE INITIAL ELIGIBILITY for a child?				
	A. Under 2 weeks				
	B. 2-3 weeks				
	C. 4-6 weeks				
	D. More than 6 weeks				
	E. Don't know				
9.	Do you serve CHILDREN WHILE THEY ARE AWAITING AN INITIAL ELIGIBILITY DETERMINATION BY THE CDHS?				
	YES NO				
	If NO, go to question 13				
10.	For the most recent 12-month period, what was the approximate monthly average percentage of children awaiting their initial eligibility determination WHO TURNED OUT NOT TO BE ELIGIBLE?				



# **2000 LICENSED PROVIDER MARKET RATE SURVEY** Page 3 of 14

11.	DO YOU ATTEMPT TO OBTAIN PAYMENT FROM THE PARENT(S) of children you have served whose initial eligibility determination turns out to be ineligible?
	YES NO
12.	For the most recent 12-month period, what was the approximate monthly average of HOW MUC MONEY YOU LOST because you provided service to children awaiting their initial eligibility determination who turned out NOT to be eligible?  \$
13.	For the most recent month, approximately what PERCENTAGE of invoices/vouchers to the county were REJECTED BECAUSE THE COUNTY CONSIDERED THEM INACCURATE OR INCOMPLETE?%
14.	For the most recent 12-month period, what was the AVERAGE LENGTH OF TIME REQUIRE BY THE COUNTY to process an invoice/voucher (i.e., from date of invoice/voucher until the date the check was issued)?
	A. 30 days or less B. 31-60 days C. 61-90 days D. 91-120 days E. More than 120 days
15.	For the most recent 12-month period, what was the TOTAL DOLLAR AMOUNT OF CHILD CAR SERVICES BILLED to the CDHS on average each month?  \$
16.	For the most recent 12-month period, what was the PERCENTAGE OF INVOICES/VOUCHER for which you received PAYMENT WITHIN 30 DAYS?
17.	Please indicate, the CURRENT OUTSTANDING AMOUNT owed to you by the county:
	1. 30 days or less: \$  B. 31-60 days: \$  C. 61-90 days: \$  D. 91-120 days: \$  E. More than 120 days: \$



Page 4 of 14

18.	In the last 12 months, have you experienced a CASH FLOW CRISIS RESULTING FROM THE CDHS NOT PAYING INVOICES WITHIN 30 DAYS OF BILLING?						
	YES NO						
	If NO, go to question 20						
19.	If YES to question 18, in the last 12 months, how have you responded to a CASH FLOW CRISIS RESULTING FROM THE CDHS NOT PAYING INVOICES WITHIN 30 DAYS OF BILLING? (Please circle all that apply)						
	A. Secured a loan						
	B. Established a line of credit						
	C. Used a personal credit card						
	D. Go without paying the director or staff  E. Other, please specify:						
<b>2</b> 0.	In terms of your administrative and personnel cost, HOW MUCH DOES IT COST YOU OR HOW MUCH DO YOU SAVE each month as a result of providing publicly-funded child care services? (Choose one)						
	A. Added cost: \$  B. Added savings: \$						
21.	What FACTORS do you feel CONTRIBUTE TO DELAYS IN PROCESSING PAYMENTS for subsidized child care, with 1 being most significant and 3 being the least significant:						
	1						
	2						
	3						
22.	When does the CDHS INFORM YOU THAT A CHILD'S ELIGIBILITY HAS BEEN TERMINATED?						
	A. Immediately						
	B. Within 2 weeks						
	C. 2-3 weeks						
	D. 4-6 weeks E. Never						
	D. INCYCI						



Page 5		ED PROVIDER	MARKET RATE SURVET					
23.	On a grading scale like that used in schools, HOW WOULD YOU RATE THE CURRENT CHILD CARE PAYMENT SYSTEM?							
	A.	A						
	B.	В						
	D.	С						
	D.	D						
	E.	F						
			PRICES					
Please	answer	each question acc	curately and completely. The accuracy of	your pricing	information is essential			
			rket Rate for each applicable age group a		ed time interval.			
PLEA	SE CIF	CLE CORREC	T ANSWER AND/OR FILL-IN BLAN	<u>                                      </u>				
24.	AUTI	our child care HORIZED PAY es (CDHS)?	facility ever CONTRACTED and/or MENT (COAP) VOUCHER with an	honored the	CERTIFICATE OF Department of Human			
	YES	NO	۷.					
	II NO,	go to question 2	0					
25.	If YES	S to questions 24 honored a CERT	, how many CDHSs is, or has, your child IFICATE OF AUTHORIZED PAYME	l care facility NT (COAP)	CONTRACTED with VOUCHER?			
26.	What	is your basic HO	URLY RATE charged to the general put	olic?				
	A.	NOT APPLIC	ABLE					
	B.	Infant	(0 months to less than 18 months)	\$	per hour			
	C.	Toddler	(18 months to less than 3 years)	\$	per hour			
	D.	Preschool	(3 years to less than 5 years)	\$	per hour			
	E.	School Age	(5 years to less than 13 years)	\$	per hour			
27.	What	is your basic DA	ILY FULL-TIME RATE charged to the	e general pub	olic?			
	<b>A</b> .	NOT APPLIC	ARIF					
	д. В.	Infant	(0 months to less than 18 months)	\$	per day			
	C.	Toddler	(18 months to less than 3 years)	\$	per day			
	D.	Preschool	(3 years to less than 5 years)	\$	per day			
	E.	School Age	(5 years to less than 13 years)	\$	per day			



# 2000 LICENSED PROVIDER MARKET RATE SURVEY Page 6 of 14

28.	What	is your basic DA	ILY PART-TIME RATE charge	d to the general p	oublic?				
	Α.	NOT APPLIC	ARIF						
	В.	Infant	(0 months to less than 18 mon	ths) \$	per day				
	C.	Toddler	(18 months to less than 3 year	, <u></u>	per day	•			
	D.	Preschool	(3 years to less than 5 years)	\$	per day				
	E.	School Age	(5 years to less than 13 years)		per day				
29.			ILY RATE for PART-WEEK R day, Friday care only)	ATE charged to	the general public?				
	A.	NOT APPLIC	ABLE						
	В.	Infant	(0 months to less than 18 mon	ths) \$	per day				
	C.	Toddler	(18 months to less than 3 year		per day				
	D.	Preschool	(3 years to less than 5 years)	\$	per day				
	E.	School Age	(5 years to less than 13 years)	\$ <u></u>	per day				
30.	What is your basic WEEKLY RATE charged to the general public?								
	Α.	NOT APPLIC	CABLE						
	B.	Infant	(0 months to less than 18 mon	ths) \$	per week				
	C.	Toddler	(18 months to less than 3 year	rs)	per week				
	D.	Preschool	(3 years to less than 5 years)	\$	per week				
	E.	School Age	(5 years to less than 13 years)	<b>\$</b>	per week				
Thou		training or adver	NON-TRADITIONAL H		e traditional 6 AM to 6 P	 ''			
hours altern reliab addre Tradi	of opera ative ca le and at ess this a tional H	tion offered by mo are during Non-T fordable quality growing need, mo ours.	ost Licensed Child Care Centers. Caraditional hours. As more and mochild care services during Non-Trace Licensed Child Care Centers a	Consequently, pare ore parents enter ditional hours is are remaining ope	ents are often forced to se the workforce, finding sa becoming very difficult.	e for			
31.	Does	your child care f	acility provide services during NO	N-TRADITION	AL HOURS?				
	YES If NO	NO O, go to question	34						
32.	If YF	ES to question 31	, what are your NON-TRADITIO	NAL HOURS?					
	FRO	M TO_		W TH e circle correct da	F S ny(s)				



Page 7 of 14

What RATE does your child care facility charge to the general public to provide child care services during NON-TRADITIONAL HOURS?

Α	Same	RATE	as TRA	OITIG	NAT.	HOURS
---	------	------	--------	-------	------	-------

B. C. D. E. F.	NOT APPLIC Infant Toddler Preschool School Age	ABLE (0 months to less than 18 months) (18 months to less than 3 years) (3 years to less than 5 years) (5 years to less than 13 years)	\$ \$ \$ \$	per HOUR per HOUR per HOUR per HOUR per HOUR
G.	NOT APPLIC	ABLE		
H.	Infant	(0 months to less than 18 months)	\$	per DAY
I.	Toddler	(18 months to less than 3 years)	\$	per DAY
J.	Preschool	(3 years to less than 5 years)	\$	per DAY
K.	School Age	(5 years to less than 13 years)	\$	per DAY
L.	NOT APPLIC	ABLE		
M.	Infant	(0 months to less than 18 months)	\$	per WEEK
N.	Toddler	(18 months to less than 3 years)	\$	per WEEK
Ο.	Preschool	(3 years to less than 5 years)	\$	per WEEK
P.	School Age	(5 years to less than 13 years)	\$	per WEEK

#### SPECIAL NEEDS

Providing safe, efficient and dependable child care services to children with a physical and/or mental handicap, as verified by licensed physician and/or licensed/certified psychologist, is an important part of Ohio's Publicly Funded Child Care program. PLEASE CIRCLE CORRECT ANSWER!

34. Has your facility ever served children with SPECIAL NEEDS?

YES NO

#### ADDITIONAL SERVICES

Several innovative Licensed Child Care facilities offer services in addition to those required for State Licensure. The following questions refer to the most common additional services. If your facility offers a service(s) which is not identified, please list your service(s) with pricing and frequency offered in the space provided.

## PLEASE CIRCLE CORRECT ANSWER AND/OR FILL-IN BLANK!

35. Does your child care facility provide TRANSPORTATION?

YES NO
If NO, go to question 38



# **2000 LICENSED PROVIDER MARKET RATE SURVEY** Page 8 of 14

36.	If YES to que	stion 35,	is the c	ost of TRANSPORTAT	YON included in your basic rate?		
	YES If YES, go to	NO question	38				
37.	If NO to Ques	tion 36,	what is	your rate for providing T	RANSPORTATION?		
	One Way:	\$	per d	ay/week			
	Round Trip:	\$	per d	ay/week			
	Other:	2	per d	ay/week			
38.	Does your chil	ld care fa	icility re	quire a REGISTRATIO	ON FEE?		
	YES	NO					
	How	often:			<u> </u>		
	Cost:		\$	per registration			
<b>3</b> 9.	Does your child care facility require an ADVANCE PAYMENT?						
	YES	NO					
	How	often:			<u> </u>		
	Cost:		\$	per advance payment			
<b>4</b> 0.	Does your chil	ld care fa	icility re	quire a DEPOSIT?			
	YES	NO					
	How						
	Cost:		\$	per deposit	_		
41.	Does your fac	ility char	ge an A	CTIVITY FEE?			
	YES	NO					
	How	often:			<u></u>		
	Cost:		\$	per activity	·		
42.	Does your fac	ility char	ge ANY	OTHER FEE(S) not n	nentioned above?		
	YES	NO					
	Please describ						
	How				<u> </u>		
	Cost		2	Other fee(s)			



Page 9 of 14

#### **DISCOUNTS**

Several Licensed facilities offer special pricing discounts to families with more than one child in care, as well as, other special pricing discounts. Information of this type assists the State with developing a more complete picture of the child care market. Please answer each question completely.

PLEASE CIRCLE CORRECT ANSWER AND/OR FILL-IN BLANK!

If NO, go to question 47					
What is your basic DISCOUNT RATE charged to the public?					
Infant 2 <sup>nd</sup> \$ 3 <sup>rd</sup> \$ Preschool 2 <sup>nd</sup> \$	3 <sup>rd</sup> \$				
Infant 2 <sup>nd</sup> \$ 3 <sup>rd</sup> \$ Preschool       2 <sup>nd</sup> \$         Infant 2 <sup>nd</sup> \$ 3 <sup>rd</sup> \$ School Age       2 <sup>nd</sup> \$	3 <sup>rd</sup> \$				
Does your facility offer other type(s) of <b>DISCOUNT RATE(S)</b> to the general public?					
YE <b>S</b> NO					
If NO, go to question 47.					
If YES to question 45, please describe other type(s) of DISCOUNT R	RATE(S)?				

#### ALTERNATIVE PAYMENT SYSTEMS

The following questions concern other possible ways to design a child care payment system. Let us know how you think each would improve or worsen the stability and predictability of payment for subsidized child care services. PLEASE CIRCLE CORRECT ANSWER!

- The private-pay model. The county would pay you in advance, based on weekly enrollment without regard to the actual number of hours or days the child attends during the week, just as is the case with private-pay families. How would this system affect whether you are paid or paid on time?
  - A. Significantly improve
  - B. Minimally improve
  - C. No effect
  - D. Minimally worsen
  - E. Significantly worsen



Page 10 of 14

- 48. Historical projection. You would receive monthly payments in advance of the month of service, based on your past use and current payment rates. The county would reconcile the accuracy of those payment with you monthly using its current method for determining invoice/voucher accuracy. Based on this reconciliation, the next month's payment would be adjusted as necessary. How would this system affect whether you are paid or paid on time?
  - A. Significantly improve
  - B. Minimally improve
  - C. No effect
  - D. Minimally worsen
  - E. Significantly worsen
- 49. Annual contracts for subsidized care. The CDHS would contract with you to make available a set level of subsidized child care services annually, i.e. the CDHS would purchase a set number of slots from you each year by contract and begin paying on the contract in advance of the delivery of child care services. How would this system affect whether you are paid or paid on time?
  - A. Significantly improve
  - B. Minimally improve
  - C. No effect
  - D. Minimally worsen
  - E. Significantly worsen
- Mixed prospective payment and reimbursement approaches. As in the previous question, the CDHS would contract with you for a set number of slots. In addition, if you cared for eligible children beyond the number of slots in your yearly contract, the CDHS would reimburse you using its current reimbursement payment methods. How would this system affect whether you are paid or paid on time?
  - A. Significantly improve
  - B. Minimally improve
  - C. No effect
  - D. Minimally worsen
  - 5. Significantly worsen



Page 11 of 14

- 51. Cost-center model. The state would determine subsidy rates using a mixture of a base rate (derived from a market rate survey) and a separate additional amount which would include cost for other items, i.e. training and professional development, facility costs and supplies. You would receive each month in advance a monthly payment based on past service and a base rate. The CDHS would reconcile the accuracy of those payments with you each month as well, taking into consideration actual volume of service provided (using the CDHS' current process for examining invoices/vouchers for accuracy and eligibility) and making an adjustment for actual cost incurred by your center during the month. How would this system affect whether you are paid or paid on time?
  - A. Significantly improve
  - B. Minimally improve
  - C. No effect
  - D. Minimally worsen
  - E. Significantly worsen
- Automated eligibility. Your facility would be allowed to enter eligibility information on-line for clients and counties would perform the actual determination of eligibility. You would have continuing access to this automated eligibility system giving you the ability to verify a client's eligibility status at any time. How would this system affect whether you are paid or paid on time?
  - A. Significantly improve
  - B. Minimally improve
  - C. No effect
  - D. Minimally worsen
  - E. Significantly worsen
- 53. Electronic funds transfer (EFT). The current system would be maintained and enhanced by requiring county auditors or the Auditor of State to process child care payments to providers through electronic funds transfer. How would this system affect whether you are paid or paid on time?
  - A. Significantly improve
  - B. Minimally improve
  - C. No effect
  - D. Minimally worsen
  - E. Significantly worsen
- 54. Electronic benefits transfer (EBT): Eligible parents would swipe a magnetic "smart card" through a reader at your facility connected live or hooked up daily to the county. How would this system affect whether you are paid or paid on time?
  - A. Significantly improve
  - B. Minimally improve
  - C. No effect
  - D. Minimally worsen
  - E. Significantly worsen



## QUALITY

Parents and child care experts know that young children grow, change and develop at an amazing rate. They know, perhaps instinctively, that their interactions with young children and children's interaction with their surroundings stimulate the growing process. And now, scientific research has confirmed that the experiences in the first three years after birth determine the actual wiring of the brain. Recent national studies confirm that children do better in high-quality programs than in poor-quality care. Children in high-quality centers have greater language ability, better pre-math skills, and more advanced social skills than children in poor-quality programs.

## PLEASE CIRCLE CORRECT ANSWER AND/OR FILL-IN BLANK!

55.	Does your child care facility meet any standards in addition to those required for Licensure, i.e., National Association for the Education of Young Children (NAEYC), National Association of Family Day Care (NAFDC), Head Start, American Camp Association (ACA), etc.?						
	YES Please List:	NO					
56.	Does your ch	uild care facility survey parents regarding their satisfaction with the care their children					
	YES If NO, go to o	NO question 58.					
<b>57</b> .	What percent	age of parents are satisfied with the care their children receive in your facility?					
	%						
58.	Does your ch	ild care facility pay for health care insurance for your employees?					
	YES	NO					
59.	life insurance 1. Vaca 2. Sick 3. Perso 4. Life 5. Educ 6. Pens	ld care facility pay for any other benefits, such as pension, vacation, sick, personal leave s, other? Please check all that apply: ation Leave Leave conal Leave Insurance cational Leave ion cr (describe)					



Page 13 of 14

<ol> <li>Does your child care facility offer in-service training to your empl</li> </ol>	loyees	!
--	--------	---

YES NO

61. Does your child care facility pay for employees to attend professional development programs?

YES NO

62. Does your child care facility have a formal partnership with a Head Start provider to provide full day/full year care for all children?

YES NO

#### **PLEASE SIGN**

It may be necessary to follow-up with your licensed child care facility to clarify information provided. To assist with the clarification process, please provide name(s) and title(s) of person(s) completing survey. Once again, on behalf of the Ohio Department of Human Services and the Ohio Legislative Budget Office, thank you for taking the time to complete this survey. <u>ALL INFORMATION WHICH IDENTIFIES A SPECIFIC LICENSED CHILD CARE FACILITY AND/OR PROVIDER(S) WILL REMAIN CONFIDENTIAL.</u>

~

TITLE

DATE

## **2000 LICENSED PROVIDER MARKET RATE SURVEY** Page 14 of 14

ADDITIONAL INFORMATION	
Please ensure all responses are numbered according to the question(s) being answered.	
<del></del>	
<del></del>	



## Child Care Rate Survey - 1999

## For the

## Oklahoma Department of Human Services Office of Child Care

# David A. Penn Center for Economic and Management Research Michael F. Price College of Business The University of Oklahoma

August 1999



## Child Care Rate Survey - 1999

## Center for Economic and Management Research Michael F. Price College of Business The University of Oklahoma

## Fielding the Questionnaire

Nearly 3,500 facilities were randomly selected from listings of licensed child care facilities provided by the Department of Human Services. Facilities in smaller counties were sampled at a higher rate than facilities in larger counties in order to obtain an acceptable geographic coverage: all the facilities were included in the sample in counties with 20 or fewer providers.

Questionnaires were mailed to each provider during the period November 1998 through March 1999. Providers were asked to review the questionnaire, then wait for a call from a telephone interviewer to collect the data.

#### **Data Analysis**

County-level weights were used in the data analysis to retain proportionality. All data presented in the tables are estimates of the population of child care centers and family child care homes inferred from the weighted sample statistics.

#### Response Rate

Of the sample of 3,436 facilities, 360 were determined to be either no longer in business or not open to the public and 413 could not be reached by telephone. Eligible providers, those that were in business and could be reached by telephone, consisted of 2,663 facilities. Of these, 71 refused to complete the interview and 421 were still unresolved (busy signal, no answer, or an appointment time was set) at the conclusion of interviewing. Interviews were completed with 2,171 facilities, or 81.5 percent of eligible providers. Response rates were nearly identical for centers and homes.

	Centers	Homes	Total
Total number of providers in sample	1,166	2,270	3,436
Ineligible (not open to public, not in business)	66	294	360
Telephone number not in service, wrong number	102	311	413
Eligible providers	998	1,665	2,663
Refusals and terminations	36	35	71
Busy, no answer, appointment	150	271	421
Completed interviews	812	1,359	2,171
Response rate (percent)	81.4	81.6	81.5



.34

## Characteristics of Child Care Centers

Approximately 68 percent of child care centers are for-profit facilities. Church related centers are 11.4 percent, while not-for-profit facilities are 10.6 percent (Table 2).

Table 2:	
Type of Child Care Center	Percent
For profit	67.6
Not-for-profit	10.6
Church	11.4
Educational setting	6.4
Public or government	3.2
Other	0.8

## Children Accepted for Care

Care for infants is more difficult to find than for other ages of children: just 63 percent of centers offer care for infants on a full-time basis and only 36 percent offer part-time care. Full-time care is much easier to find than is part-time care for every age group.

Table 3:		
Age of Children Acc	epted for Care	e
(Percent of provider	s)	
Full-time care	Centers	Homes
Infants	63.3	81.2
Toddlers	77.7	90.7
Twos	87.4	94.3
Threes	92.2	93.9
Fours and fives	93.4	89.9
Kindergartners	87.6	73.1
School agers	79.9	64.2
Part-time care	Centers	Homes
Infants	36.4	39.4
Toddlers	44.7	43.7
Twos	53.3	45.4
Threes	58.6	45.7
Fours and fives	61.8	45.5
Kindergartners	60.7	43.0
School agers	64.4	43.8



## Vacancies at Centers and Homes

Approximately 62 percent of centers and 38 percent of homes reported one or more vacancies at the time of the interview. Vacancies targeted specifically for infants and toddlers are very few.

Table 4:		
Vacancies by Age Group		
	Centers	Homes
Percent of facilities with vacancies	61.7	38.0
Number of Vacancies		
Infants	200	128
Toddlers	414	156
Twos	514	321
Threes	1,069	340
Fours and fives	1,387	236
Kindergartners	776	112
School agers	1,206	130
Any age	5,689	1,261
All	11,255	2,684



## Children on Waiting Lists

Sixty-two percent of centers and 38 percent of homes maintain a list of children waiting for admission. The total number of children on waiting lists is probably somewhat overestimated, since a number of children can be found on lists for more than one facility. However, the *distribution* of children by age is informative: more than 50 percent of children on waiting lists are under two years old, and 32 percent are infants.

In addition, demand for slots is growing: 24 percent of centers and 16 percent of homes reported that the number of children on their waiting lists had increased from one year earlier.

Table 5:		
Children on Waiting Lists		
·	Centers	Homes
Percent of facilities that have waiting lists:	61.7	37.6
Number of children on waiting lists:		
Infants	3,689	2,661
Toddlers	3,134	859
Twos	2,543	758
Threes	1,971	641
Fours and fives	1,305	403
Kindergartners	387	138
School agers	981	338
Number of children on waiting list		
is more than(percent of facilities)		
Six months ago	25.3	15.2
One year ago	23.9	15.9



## DHS Subsidy Program

Nearly 90 percent of centers and 76 percent of homes participate in the DHS child care subsidy program (Table 6). However, only about 54 percent of participating centers and 64 percent of participating homes will accept subsidized infants for care (Table 7).

Participation in the subsidy program can be a challenge for centers and homes. More than half the centers and 27 percent of the homes report that parents have difficulty paying the required co-pay. In addition, the administrative requirements of participating in the subsidy program requires 22 hours of work per month for the average center and 8 hours per month for the average home. Valued at the minimum wage, the cost to the average participating center and home is \$115 per month and \$43 per month, respectively.

T 11 C		
Table 6:		
Participation in the DHS Subsidy Program	1	
Percent of facilities participating in	Centers	Homes
subsidy program	88.6	76.0
Percent reporting that parents have difficulty paying co-pay	52.4	27.2
Average monthly hours needed for progam administration Estimated monthly cost @ \$5.15 hour	22.4 \$115	8.3 \$43
Average number of subsidy children in care	25.4	4.8
Percent of providers that participate in the Child Care Food Program	45.9	72.0



Table 7:		
Ages of Subsidy Children Accepted	<u>.                                    </u>	
Percent of subsidy providers that accept children by age group:	Centers	Homes
Infants	54.1	64.2
Toddlers	69.2	70.9
Twos	77.9	73.4
Threes	82.9	73.0
Fours and fives	82.9	70.9
Kindergartners	82.2	60.9
School agers	78.2	55.9



## Type of Care Offered

One in five child care centers care for children who are physically disabled, mentally retarded, or emotionally disturbed. Care for children with disabilities is much more rare in family child care homes.

However, family child care homes are much more likely to offer care in the evenings, overnight care, weekend care, and care that accommodates a parent's flexible work schedule. Homes are also much more likely to provide care for children who are sick.

Roughly one in five child care centers and one in three family child care homes believe that local need is high for flexible schedules, evening care, and weekend care.

Table 8:		
Type of Care Offered		
	Centers	Homes
Percent of facilities that care for		
children who are		
Physically disabled	21.5	8.5
Mentally retarded	15.6	5.6
Emotionally disturbed	20.8	7.4
Other disabilities	22.3	7.9
Percent that care for sick children	8.3	17.4
Percent of facilities that offer:		
Flexible schedules	18.8	32.4
Evening care	9.3	28.2
Overnight care	2.3	22.2
Weekend care	6.9	19.5
Percent of facilities that perceive high		
local need for		
Flexible schedules	25.3	36.5
Evening care	23.0	35.0
Overnight care	11.8	18.9
Weekend care	21.2	35.1



Charges and Fees
Activity fees are used by 35 percent of centers and 17 percent of homes. Centers are much more likely to charge a registration fee than are homes.

Table 9:		
Charges and Fees		
	Centers	Homes
Percent of facilities that charge for:		
Deposit	8.5	5.4
Registration	35.0	3.0
Activities	35.1	17.4
Transportation	3.6	2.8
Supplies	6.5	1.5
Average annual charge (\$):		
Deposit	42.33	56.51
Registration	33.10	36.37
Activities	52.68	45.19
Transportation	121.30	154.94
Supplies	44.25	49.07



## Payment for Service

Most centers and homes, about 59 percent, expect parents to pay for days when the child is sick. A little less than half of centers and homes charge for holidays when the facility is closed. Only about 30 percent charge when the child is away for a family vacation.

Table 10:		
Payment for Service (percent of facilities)		
	Centers	Homes
Percent of facilities that expect parents to		
pay for		
Holidays	45.2	46.7
Days when child is sick	58.7	59.0
Child's family vacation	30.5	31.6
Service regardless of attendance	54.2	57.4



## **Number of Teachers**

Licensed child care centers employ 11,500 teachers, with 7,500 of these working full-time. The average number of teachers per center is 5.4, with the average center in the High rate area supporting more than double the number of teachers than the average center in the Low rate area.

Roughly 2,700 full-time teachers left employment at centers during the past twelve months, a turnover rate of 36.5 percent. The turnover rate was higher for part-time teachers. The rate of turnover for all teachers at centers (both full- and part-time) is 43.9 percent.

On average, one teacher is available for every 7.3 children in child care centers. A lower ratio of children to teachers is found in facilities in the High rate area than in the Medium and Low rate areas.

Table 11:
Number of Teachers at Child Care Centers

Number of Teachers at Cliffu Care Centers				
		I	Rate Area	
	All	High	Medium	Low
Estimated total number of teachers				
Full-time	7,456	4,518	1,362	1,573
Part-time	4,083	2,547	730	801
Total	11,539	7,065	2,092	2,374
Estimated total number of teachers who				
have left in the previous 12 months				
Full-time	2,718	1,718	358	638
Part-time	2,348	1,475	441	431
Total	5,066	3,193	799	1,069
Annual rate of turnover of teachers (percent)				
Full-time	36.5	38.0	26.3	40.6
Part-time	57.5	57.9	60.4	53.8
Total	43.9	45.2	38.2	45.0
Average number of teachers per facility:				
Full-time	5.4	7.7	4.6	3.2
Part-time	3.0	4.3	2.5	1.6
Average number of children per teacher:	7.3	6.7	7.9	8.4



## Starting Pay

Table 12 shows the average for the lowest and the highest starting wage at child care centers. About half of child care centers offer a fixed starting wage, while for the other half the starting wage depends on education and experience. The average starting wage ranges from just \$5.26 to \$5.52 per hour, not considerably higher than the minimum wage of \$5.15 per hour. Starting wages for teachers with more experience and/or education are higher in the High rate area and in centers that have achieved NAEYC accreditation.

Table 12:
Average Starting Pay for Teachers at Child Care Centers (\$)

		J	Rate Area			Not
	State	High	Medium	Low	Accredited	Accredited
Lowest starting pay (per hour)	5.26	5.35	5.23	5.21	5.84	5.24
Highest starting pay (per hour)	5.52	6.02	5.35	5.26	- 7.20	5.48
Lowest starting pay (annualized*)	10,730	10,905	10,673	10,637	11,918	10,699
Highest starting pay (annualized*)	11.269	12,284	10,907	10,732	14,693	11,174

<sup>\*</sup> Assumes 2,040 paid hours in a year



## Most Experienced Teacher

Child care centers were asked to indicate the years of experience and pay rate for the most experienced teacher. The results show that the level of experience varies greatly, with about 30 percent with ten years or more but nearly 42 percent with 5 years or less experience.

Experience tends to be strongly related to the level of rates in the surrounding area. For centers in the High rate area, for example, 41.2 percent of the most experienced teachers had 10 years or more, compared with 24.3 percent in the Medium rate area and 17.8 percent in the Low rate area.

Table 13:

Years of Experience for the Most Experienced Teacher at Child Care Centers

			Rate Area	
Years of Experience	State	High	Medium (Percent)	Low
2.5 years or less	15.4	13.7	12.3	19.3
More than 2.5 years up to 5 years	26.5	19.0	33.3	32.0
More than 5 years up to 7 years	12.1	12.0	10.3	13.5
More than 7 years up to 10 years	16.5	14.1	19.8	17.4
More than 10 years up to 20 years	23.4	31.0	21.7	14.8
More than 20 years	6.1	10.3	2.7	3.0
Five years or less	41.9	32.7	45.7	51.3
Ten years or more	29.5	41.2	24.3	17.8

The pay rate for the most experienced teacher tends to increase with years of experience (Table 14): teachers with 2.5 years or less experience average \$6.10 per hour, climbing to \$6.86 for 7 to 10 years experience and \$7.53 for more than 20 years experience. The most experienced teacher at accredited facilities earns at least 20 percent more than does the most experienced teacher at facilities that are not accredited.



1.45

Table 14:

Average Pay for the Most Experienced Teacher at Child Care Centers, by Years of Experience (S/hour)

			Rate Area			Not
Years of Experience	All	High	Medium	Ļow	<u>Accredited</u>	<u>Accredited</u>
Up to 2.5 years	6.10	6.64	5.67	5.78	7.84	6.06
2.5 to 5 years	6.22	6.89	6.05	5.83	7.89	6.18
· 5 years to 7 years	6.57	6.82	7.03	6.06	8.59	6.49
7 years to 10 years	6.86	7.51	6.75	6.26	9.03	6.72
10 years to 20 years	7.19	7.79	6.84	5.94	8.43	7.07
More than 20 years	7.53	7.44	8.19	7.57	11.00	7.35
All	6.53	7.13	6.38	5.91	8.40	6.44

The level of education also tends to increase with rate area. Table 15 shows the distribution of education of the most experienced teacher by rate area for child care centers. Nearly half (48.7 percent) in the Low rate area have no more than a high school diploma, compared with just 31.8 percent in the High rate area. Similarly, nearly a third of the most experienced teachers in the High rate area have a Bachelor's degree or better, compared with 25.2 percent in the Medium rate area and 13.5 percent in the Low rate area.



Table 15:
Education Level for the Most Experienced Teacher
Child Care Centers
(Percent)

		Rate Area			
Education of Highest Paid Teacher	State	High	Medium	Low	
Less than High School	0.6	0.4	1.3	0.3	
High School diploma or equivalent	38.9	31.8	37.8	48.7	
Vo-tech training	6.4	6.8	6.3	5.9	
Some college	20.0	18.0	19.7	22.8	
Associate's Degree	9.9	10.7	9.7	8.9	
Bachelor's Degree	19.7	24.7	21.7	12.2	
Master's Degree	4.4	7.5	3.4	1.0	
Doctorate Degree	0.1	0.0	0.0	0.3	
Bachelor's Degree or better	24.2	32.2	25.2	13.5	

Pay for the most experienced teacher tends to increase with education (Table 16). Average pay for the teachers with no more than a high school diploma is just \$6.12, compared with \$7.64 for those with at least a Bachelor's degree.

Table 16:
Pay for the Most Experienced Teacher by Level of Education
Child Care Centers (\$/hour)

	Rate Area					Not
Education of Highest Paid Teacher	All	High	Medium	Low	Accredited	Accredited
High School diploma or less	6.12	6.68	5.93	5.77	7.76	6.10
Vo-tech training or some college	6.49	7.05	6.12	6.09	8.49	6.46
Associate's Degree	6.66	7.10	6.38	6.15	6.24	6.69
Bachelor's Degree or higher	7.64	8.01	7.66	6.50	9.41	7.41



## Level of Education of the Facility Director

A relatively large percentage of directors of child care centers have a college education; 29 percent have at least a Bachelor's degree (37.4 percent in the High cost area) and 9.2 percent have a Master's degree. By contrast, only 7.5 percent of proprietors of family child care homes have a college degree.

Table 17: Education Level of the Facility Director (Percent)

<u>-</u>	Child Care Centers			
e de la companya de La companya de la co	Rate Area			
Education Level	State	High	Medium	Low
Less than High School	0.6	0.4	0.5	0.8
High School diploma or equivalent	30.2	20.8	33.2	39.3
Vo-tech training	5.2	4.5	6.1	5.7
Some college	24.3	25.3	21.8	24.5
Associate's Degree	10.8	11.6	9.9	10.3
Bachelor's Degree	19.1	23.7	18.2	14.3
Master's Degree	9.2	13.3	8.4	4.9
Doctorate Degree	0.7	0.4	1.8	0.3
Bachelor's Degree or better_	29.0	37.4	28.5	19.5

Family Child Care Homes Rate Area Education Level State High Medium Low Less than High School 8.4 8.6 7.4 8.7 High School diploma or equivalent 44.1 37.0 45.3 54.1 Vo-tech training 5.2 4.6 5.3 6.1 Some college 30.2 36.4 31.5 19.8 Associate's Degree 4.5 5.0 2.7 5.1 Bachelor's Degree 6.6 6.9 6.9 5.9 Master's Degree 0.9 1.4 0.9 0.2 Doctorate Degree 0.0 0.0 0.0 0.0 Bachelor's Degree or better 7.5 8.4 7.8 6. l



## Child Care Center Expansion Potential

In order to determine the potential for adding child care capacity, centers were asked to indicate the number of slots that could potentially be added within the present square

Table 18: Expansion Potential in Child Care Centers

		]	Rate Area	
	State	High	Medium	Low
Percent of facilities that could add				
slots within present square footage	26.4	26.5	22.7	27.7
Number of Slots that COULD be added:				
Infants	432	122	59	251
Toddlers	443	115	57	271
Twos	601	174	75	353
Threes	836	316	133	388
Fours and fives	1,117	461	196	460
Kindergartners	588	245	115	228
School agers	1,012	392	220	399
Total	5,029	1,825	855	2,350
Number of slots that WILL LIKELY				
be added in the next 12 months:				
Infants	108	35	32	40
Toddlers	95	48	13	35
Twos	226	83	34	108
Threes	375	184	82	110
Fours and fives	444	256	33	153
Kindergartners	199	145	23	32
School agers	523	180	128	213
Total	1,970	931	345	691
Percent of slots LIKELY to be added during				
the next 12 months:				
Infants	25.0	28.7	54.2	15.9
Toddlers	21.4	41.7	22.8	12.9
Twos	. 37.6	47.7	45.3	30.6
Threes	44.9	58.2	61.7	28.4
Fours and fives	39.7	55.5	16.8	33.3
Kindergartners	33.8	59.2	20.0	14.0
School agers	51.7	45.9	58.2	53.4
Total	39.2	51.0	40.4	29.4



footage of their structure and also the likelihood that these slots will be added within the next 12 months. About one-fourth (26.4 percent) could potentially add slots, with 25 percent to 50 percent of these slots likely to be added in the next 12 months, with slots for the younger children (infants and toddlers) showing the smallest potential for increase.

#### Two Star Status of Child Care Centers

Nearly 25 percent plan to begin the process for national accreditation, with centers in the High rate area are much more likely to start the accreditation process than are centers in the Medium and Low rate areas. About half of centers intend to apply for Two Star status with the next year.

Table 19:
Accreditation and Two Star Status, Child Care Centers (percent)

		Rate Area		
	State	High	Medium	Low
Has begun self-study process for national accreditation	24.8	32.4	17.3	19.9
Intend to apply for Two Star status in the next 12 months	51.0	57.0	48.1	44.8

#### Planned Rate Increases

Forty-four percent of centers and 29 percent of homes raised rates last year. Approximately 39 percent of centers and 25 percent of homes either have raised rates this year or have plans to raise rates.

Table 20:		
Rate Increases (percent)		
	Centers	Homes
Increased rates last year	44.4	29.2
Increased rates this year	31.6	19.7
Plan to increase rates this year	8.5	5.4



#### **Market Rates**

Rates for child care were estimated for seven age categories of children:

- Infants (0-9 months of age),
- Toddlers (10-23 months of age),
- Two year olds,
- Three year olds,
- Four and five year olds,
- Kindergartners (currently attending kindergarten), and
- School-agers (six years or older or completed kindergarten).

A facility must meet three conditions to be included in the rate analysis for a particular age group: 1) must accept children for care in the age group, 2) must charge a market-based rate, not a rate based on parent's income, and 3) must currently have children in care in the age group. Aggregate rates are computed by weighting each facility by the number of children in the age group, then applying a county-level weight.

Average market child care rates are summarized in Table 21. Daily, weekly, and monthly charges are shown. Not all facilities reported rates for all three time periods; thus, rates were converted from one time period to another as follows:

Daily = Weekly / 5

Weekly = Monthly / 4.33.

Average rates in the High rate area are 13 percent higher than the statewide market rate for infants and toddlers and 7.7 percent higher for two and three year olds. Accredited centers charge considerably more than other facilities; market rates for infants and toddlers in accredited centers are 28 percent higher than statewide and 16.7 percent higher for two and three year olds. Market rates for family day care homes are considerable lower than for child care centers (Table 22). Detailed mean rates are provided in Appendix A.



Table 21: Charges by Child Care Centers Average (mean) rates

State	Daily	Weekly	Monthly
Infants and toddlers	17.53	84.11	354.41
Two and three year olds	15.74	74.50	313.74
Four and five year olds	15.27	72.25	304.98
Kindergartners and			
School agers	12.82	59.35	247.01
High Rate Area	Daily	Weekly	Monthly
Infants and toddlers	20.22	95.52	403.98
Two and three year olds	17.98	83.26	351.86
Four and five year olds	17.01	79.00	334.90
Kindergartners and			
School agers	13.79	63.68	268.13
Medium Rate Area	Daily	Weekly	Monthly
Infants and toddlers	15.59	75.35	314.78
Two and three year olds	13.95	67.86	283.20
Four and five year olds	13.33	65.00	271.73
Kindergartners and			
School agers	11.83	52.23	214.71
Low Rate Area	Daily	Weekly	Monthly
Infants and toddlers	13.69	68.07	285.51
Two and three year olds	12.12	60.11	252.36
Four and five year olds	11.84	58.79	246.28
Kindergartners and			
School agers	10.76	53.33	215.90
Accredited	Daily	Weekly	Monthly
Infants and toddlers	22.24	107.25	460.32
Two and three year olds	20.23	92.30	393.78
Four and five year olds	19.68	90.14	385.36
Kindergartners and			
School agers	16.35	69.17	297.89
Not Accredited	Daily	Weekly	Monthly
Infants and toddlers	17.22	82.57	347.36
Two and three year olds	15.43	73.26	308.21
Four and five year olds	14.96	71.01	299.44
Kindergartners and			
School agers	12.62	58.79	244.10



Table 22: Charges by Family Child Care Homes Average (mean) rates

State	Daily	Weekly	Monthly
Infants and toddlers	13.96	68.99	287.61
Two to five year olds	12.73	62.42	260.38
Kindergartners and			
School agers	10.76	53.46	218.75
High Rate Area	Daily	Weekly	Monthly
Infants and toddlers	14.85	73.40	306.07
Two and three year olds	13.75	67.57	282.18
Kindergartners and			
School agers	11.01	54.72	225.76
Medium Rate Area	Daily	Weekly	Monthly
Infants and toddlers	13.40	67.13	279.61
Two and three year olds	12.16	60.66	252.86
Kindergartners and			
School agers	10.57	53.12	215.61
Low Rate Area	Daily	Weekly	Monthly
Infants and toddlers	12.58	62.79	261.87
Two and three year olds	11.35	56.55	235.68
Kindergartners and			
School agers	10.36	51.47	208.97



Table B1:
Average Daily Charge Child Care Centers (\$)
Full-time Care

				Vindoranta
	Infants &	Twos &	Fours &	Kindergartners
	Toddlers	Threes	Fives	& School
Adain Carrati				Agers
Adair County	14.00	12.46	12.00	12.00
Alfalfa County	13.00	11.92	11.50	10.86
Atoka County	12.86	11.54	11.64	
Beaver County	•			
Beckham County	13.19	11.55	11.28	10.74
Blaine County	14.00	11.43	11.27	11.00
Bryan County	13.69	11.81	11.67	10.23
Caddo County	14.12	12.67	12.46	10.55
Canadian County	18.85	15.92	15.79	12.70
Carter County	13.08	11.83	11.40	11.01
Cherokee County	13.95	12.49	12.38	10.78
Choctaw County	11.35	11.02	10.88	10.80
Cimarron County				
Cleveland County	19.89	18.74	17.31	14.77
Coal County	12.89	12.00	12.00	*
Comanche County	16.28	14.54	13.24	11.63
Cotton County	14.00	12.00	12.00	12.00
Craig County	9.00	10.67	11.27	9.89
Creek County	13.80	12.82	12.77	11.02
Custer County	13.89	12.06	11.61	11.91
Delaware County	14.03	12.70	10.77	11.83
Dewey County				11.00
Ellis County	13.56	12.00	12.00	12.00
Garfield County	15.38	14.02	13.17	11.94
Garvin County	13.48	11.87	12.00	10.68
Grady County	13.56	12.26	12.04	10.83
Grant County	•		12.01	10.00
Greer County	13.55	11.68	11.33	10.55
Harmon County	12.31	10.46	10.47	10.00
Harper County	13.63	13.58	12.55	14.38
Haskell County		11.71	11.45	12.00
Hughes County	12.47	11.07	10.81	10.34
Jackson County	13.40	12.71	12.82	12.42
Jefferson County		10.00	10.00	10.00
Johnston County	14.00	12.00	12.00	12.00
Kay County	18.96	15.49	14.26	13.26
Kingfisher County	15.00	15.00	15.00	13.20
Kiowa County	13.10	11.46	11.17	10.56
Latimer County	14.00	12.00	12.00	10.56
Le Flore County	15.10	11.65	11.61	10.70
Lincoln County	15.09	12.58	13.02	10.70
Logan County	15.23	13.58	14.03	10.31 11.99
Love County	9.63	9.00	9.00	
McClain County	14.73	13.97	13.61	9.00
McCurtain County	14.86	13.16	12.43	11.41
McIntosh County	14.00	11.71	12.00	10.18
•			12.00	11.43
		154		



Table B1:
Average Daily Charge Child Care Centers (\$)
Full-time Care

_	infants & Toddlers	Twos & Threes	Fours & Fives	Kindergartners & School Agers
Major County	16.00	14.05	13.45	13.50
Marshall County	13.57	12.67	12.55	8.81
Mayes County	13.78	12.63	12.45	12.48
Murray County	13.00	11.74	11.64	11.50
Muskogee County	13.40	12.02	11.90	11.04
Noble County	14.63	12.59	11.96	10.90
Nowata County	14.00	12.00	12.00	11.52
Okfuskee County	14.00	12.00	12.00	12.00
Oklahoma County	20.19	17.79	16.56	13.54
Okmulgee County	13.32	11.53	11.39	8.78
Osage County	13.98	12.27	11.76	10.99
Ottawa County	13.92	12.06	12.06	11.40
Pawnee County	12.45	11.91	11.98	11.22
Payne County	15.92	14.12	13.21	14.44
Pittsburg County	14.34	12.63	10.45	11.57
Pontotoc County	14.34	12.65	12.34	10.77
Pottawatomie County	14.25	12.68	12.43	10.52
Pushmataha County	12.78	10.80	10.44	8.00
Roger Mills County	13.00	11.00	11.00	
Rogers County	15.03	13.20	12.78	11.58
Seminole County	14.16	12.38	11.94	10.59
Sequoyah County	13.56	12.27	12.27	10.96
Stephens County	13.95	12.76	12.62	12.44
Texas County	14.06	12.60	12.13	12.43
Tillman County	11.58	9.82	9.81	9.13
Tulsa County	20.44	18.17	17.67	14.05
Wagoner County	14.92	12.97	12.05	11.41
Washington County	17.42	15.58	15.24	10.20
Washita County '	11.77	11.06	10.89	9.68
Woods County	13.50	13.50	13.50	13.50
Woodward County	12.61	11.99	11.95	9.89
State	17.53	15.74	15.27	12.82
High Rate Area	20.22	17.98	17.01	13.79
Medium Rate Area	15.59	13.95	13.33	
Low Rate Area	13.69	12.12	11.84	
Accredited	22.24	20.23	19.68	
Not accredited	17.22	15.43_	14.96	12.62



Table B7:
Average Daily Charge Family Child Care Homes (\$)
Full-time Care

	Infants &	Twos to	Kindergartners & School
	Toddlers	Fives	Agers
Adair County	11.23	10.81	11.33
Alfalfa County	9.83	9.78	8.63
Atoka County	14.00	11.00	0.00
Beaver County	13.33	11.00	•
Beckham County	13.18	11.70	10.90
Blaine County	12.70	10.45	10.00
Bryan County	12.40	11.68	10.50
Caddo County	12.61	11.21	10.50
Canadian County	15.31	13.39	11.05
Carter County	13.52	11.70	9.85
Cherokee County	13.49	12.69	9.44
Choctaw County	11.74	11.32	11.60
Cimarron County			
Cleveland County	15.26	14.00	11.25
Coal County			
Comanche County	13.16	11.66	9.89
Cotton County	13.00	12.56	12.00
Craig County	13.00	10.68	10.29
Creek County	12.63	11.82	11.39
Custer County	12.56	11.24	10.64
Delaware County	13.00	11.00	10.00
Dewey County	•	•	
Ellis County	12.05	10.52	10.07
Garfield County	13.13	12.00	11.23
Garvin County	12.99	11.26	10.84
Grady County	12.92	11.76	10.60
Grant County	12.33		
Greer County	14.00	13.00	
Harmon County	13.00	11.00	11.00
Harper County	12.61	12.00	
Haskell County	13.02	11.12	10.67
Hughes County	10.00	10.00	
Jackson County	13.30	12.22	12.52
Jefferson County	12.76	11.38	10.50
Johnston County			
Kay County	12.67	11.75	10.85
Kingfisher County	12.17	11.48	11.70
Kiowa County	12.92	11.90	9.67
Latimer County	14.00	12.00	
Le Flore County	12.05	11.31	10.14
Lincoln County	11.60	11.49	
Logan County	13.51	12.21	10.23
Love County	15.00		11.00
McClain County	12.62	13.11	
McCurtain County	13.06	11.77	9.19



Table B7:
Average Daily Charge Family Child Care Homes (\$)
Full-time Care

•			16° al a a a a a
			Kindergartners
	Infants &	· Twos to	& School
-	Toddlers	Fives	Agers
McIntosh County	12.41	10.90	9.83
Major County	13.00	12.50	
Marshall County	13.00	11.00	10.00
Mayes County	12.51	11.28	9.30
Murray County	12.00	10.81	9.67
Muskogee County	12.62	11.44	9.93
Noble County	13.65	11.74	10.69
Nowata County	15.00	10.33	10.00
Okfuskee County	12.37	10.62	10.33
Oklahoma County	15.06	13.84	11.11
Okmulgee County	12.72	11.25	10.16
Osage County	12.65	11.22	11.11
Ottawa County	12.50	11.35	10.00
Pawnee County	12.25	12.07	10.11
Payne County	15.17	13.94	13.23
Pittsburg County	13.09	11.88	10.60
Pontotoc County	11.73	10.52	9.00
Pottawatomie County	12.85	11.25	10.29
Pushmataha County	13.00	11.00	
Roger Mills County	12.36	10.60	
Rogers County	13.92	13.13	12.00
Seminole County	11.48	10.26	8.96
Sequoyah County	12.95	10.92	10.10
Stephens County	12.80	12.22	10.72
Texas County	11.75	11.74	10.70
Tillman County	12.02	10.94	9.67
Tulsa County	14.51	13.61	10.80
Wagoner County	13.02	11.24	10.00
Washington County	13.95	12.19	10.35
Washita County	10.41	10.00	10.00
Woods County	12.76	11.62	10.00
Woodward County	<b>11.9</b> 9	11.81	10.60
State	13.96	12.73	10.76
I Wal Data A		40.75	44.54
High Rate Area	14.85	13.75	
Medium Rate Area	13.40	12.16	
Low Rate Area	12.58	11.35	10.36





## U.S. Department of Education

Office of Educational Research and Improvement (OERI)

National Library of Education (NLE)

Educational Resources Information Center (ERIC)



## **NOTICE**

## **Reproduction Basis**

 This document is covered by a signed "Reproduction Release
(Blanket)" form (on file within the ERIC system), encompassing all
or classes of documents from its source organization and, therefore,
does not require a "Specific Document" Release form.

This document is Federally-funded, or carries its own permission to reproduce, or is otherwise in the public domain and, therefore, may be reproduced by ERIC without a signed Reproduction Release form (either "Specific Document" or "Blanket").

EFF-089 (3/2000)

