# STATEWIDE SURVEY OF CHILD CARE RATES IN RHODE ISLAND

#### Sponsored by

Rhode Island Department of Labor and Training and Rhode Island Department of Human Services

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#### Section I. Introduction

This study is sponsored by the Rhode Island Department of Labor and Training (DLT) on behalf of the Rhode Island Department of Human Services (DHS), pursuant to section 40-6.2-1.1 of the General Laws of State of Rhode Island, as amended. The survey was conducted between June and July 2018 by the Schmidt Labor Research Center (SLRC) at the University of Rhode Island (URI). The questionnaires used in the survey were prepared jointly by SLRC researchers and employees at DHS.

This study was undertaken to determine child care rates charged throughout Rhode Island and, particularly, to establish the 75th percentile rate. The 75th percentile rate indicates the rate at or below which 75% of respondents charge. For example, the 75th percentile weekly rate for toddler care in Family or Group Family Childcare Homes is \$200.00, which means that 75% of respondents who provide such care charge \$200.00 per week or less; or put another way, only 25% charge more than \$200.00 per week.

The ultimate purpose of this study is to assist DHS in determining the appropriate maximum reimbursement rates for child care services provided to families participating in the DHS Child Care Assistance Program (CCAP). The questionnaires, however, also included items to aid in the interpretation of the data, to assist in informing larger policy discussions, and to allow us to learn more about the concerns of providers. For example, questions about the types of care provided, age groups cared for, number of children subsidized, and hours of operation were included. Also, providers were given the opportunity to include written comments.

It should be noted that the data reported here indicate the cost to consumers—that is, the rates (or prices) that providers charge for childcare—not the cost of providing the care.

#### Section II. Methodology

#### The survey

All Family or Group Family Child Care Homes (hereinafter, Homes) and Child Care Centers (hereinafter, Centers) licensed by the Rhode Island Department of Children, Youth, and Families (DCYF) were included in the survey. A "Home" refers to a provider who is licensed to care for up to 12 children in a family home setting. A "Center" is a facility licensed to care for children in a group setting. The largest Center in our study is licensed to care for 326 children.

Every Center received an English questionnaire. Homes received either English or Spanish questionnaire depending on DCYF's record of their preferred language. Participants were mailed a paper survey which included a postage-paid return envelope. They were also emailed a notice, and later a follow-up postcard and another email, in either English or Spanish, that an electronic version of the survey was available online.

The survey was divided into four sections. Section 1 contained nine questions about program information. Section 2 contained seven questions about rates. Section 3 contained eight questions about subsidies and enrollment capacity. Section 4 contained three questions about program quality. Space for comments was offered in several locations throughout the survey.

#### Terms used

The letter "N" used in tables in this report indicates the number of responses to a particular item. The term "mean" refers to the mathematical average. "Standard deviation" ("SD") is a measure of dispersion about the mean. The "median" is the middle occurring value—that is, the 50<sup>th</sup> percentile. The "range" is the distance between the lowest and highest value. Percentages in tables either reflect percentage of respondents responding to that question ("% of resp."), percentage of the entire sample of 533 ("% of sample"), or percentage of the population of 905 licensed RI providers who received a survey (% of pop.").

#### 2018 response rate and response rate across three time periods

Two separate mailing lists were provided by DCYF of licensed child care programs. The list of family child care homes (Homes in this report) contained 479 providers, while the list of licensed early childhood and school-age (Centers in this report) contained 426 providers, for a total of 905 potential respondents. Table 1 shows that, compared to 2015, there were 79 fewer Homes providing licensed care in Rhode Island, but 13 more Centers, for an overall drop in the total population of providers from 971 to 905. In fact, between 2009 and 2018, Home providers have decreased over 55%, from 1,073 to 479.

By July 25, 2018, 533 responses were received: 274 from Homes and 259 from Centers. The overall response rate, therefore, was 58.9%, with 57.2% of Homes and 60.8% of Centers responding.

Table 1. Response Rate of Homes and Centers Across Time									
	2018 2015				2013				
	N	N	% of	N	N	% of	N	N	% of
	pop.	response	pop.	pop.	response	pop.	pop.	response	pop.
Homes	479	274	57.2%	558	159	28.5%	636	182	28.6%
Centers	426	259	60.8%	413	211	51.1%	415	183	44.1%
TOTAL	905	533	58.9%	971	370	38.1%	1,051	365	34.7%

The overall response rate has been increasing across time in recent years. As Table 1 indicates, compared to the 2013 survey, the number of responses increased from 365 to 370 in 2015, for a response rate increase from 34.7% to 38.1% or approximately 3.4%. In 2018, the response rate rose to 58.9%, or an increase of 20.8% over 2015.

The electronic survey option was not used in 2015 because it did not garner many responses in 2011 and 2013. However, it was re-employed in 2018 and electronic responses accounted for 224 of the 533 responses, or 42% of all responses. Two email notices and a postcard mailing with the electronic link were sent as reminders, along with communication from provider organizations, all of which helped increase the response rate. In 2008 legislation was repealed that automatically tied CCAP rates to the Market Rate Survey. In 2018 the first comprehensive update on rates was implemented with the goal of ensuring that rates for high-quality programs meet the 75<sup>th</sup> percentile of the market rate survey, which may also have contributed to the increased response rate.

#### Response bias

Since *all* Homes and Centers licensed by DCYF were included in the survey, there is no concern with sampling error. But since a one hundred percent response rate was not achieved, there remains the possibility of response bias—that is, the possibility that non-respondents *would have* replied differently than respondents. Although our ability to estimate response bias is limited, we can compare the respondent pool with the total population on at least two variables.

Unlike in past surveys, the response rate for Centers is only slightly below that for Homes. Therefore, aggregate measures should reflect both Homes and Centers. As well, in this report, responses are disaggregated so that the results for Home and Centers can be seen separately. Also, the proportion of Spanish- and English-speaking respondents is the same, reducing response bias based on language. In this report, responses are not disaggregated by language.

#### **Section III. Demographics and Characteristics of Providers**

#### Demographics: Response by language and survey method

As shown in Table 2, 315 Spanish surveys (all to Homes) and 590 English surveys (426 to Centers and 164 to Homes) were sent. Completed surveys included 347 English (65.1%) and 186 (34.9%) Spanish responses. The number of Spanish responses increased from 87 in 2013 to 90 in 2015, and then doubled in 2018 to 186. The response rates for both English and Spanish surveys was similar, at 59% for Spanish surveys, and 58.8% for English surveys.

Spanish surveys were completed online by almost one-quarter of respondents (N=44, 23.7%), and by paper by about three-quarters of respondents (N=142, 76.3%). English surveys were fairly evenly divided, with 180 electronic submissions (51.9%) and 167 paper submissions (48.1%).

Table 2. Response by Language and Survey Method							
	Population	on and Respo	ondents	Survey	Method		
	Pop. N	Response N	% of pop.	Paper N/%	Electronic N/%		
Spanish	315	186	59.0%	142/76.3%	44/23.7%		
English	590	347	58.8%	167/48.1%	180/51.9%		
TOTAL	905	533	58.9%	309/58%	224/42.0%		

#### **Demographics: Geographic distribution**

Table 3a compares the geographic dispersion of respondents with the child care provider population by municipality. Most communities are represented in the pool of respondents in relatively close relation to their presence in the population. For example, of the 350 total Providence providers (which represents 38.67% of all providers), 205 of them responded to the survey, representing 39.35% of all respondents and 22.65% of the population of providers.

Table 3a. Geograp	hic Disper	rsion of Surve	y Respondents	and Caregive	er Population
		Responde	nts	Pop	ulation
Town	N	% of Pop. (N=905)	% of Resp. (N=521)	N	% of Pop. (N=905)
Providence	205	22.65%	39.35%	350	38.67%
Pawtucket	37	4.09%	7.10%	55	6.08%
Cranston	33	3.65%	6.33%	83	9.17%
Warwick	29	3.20%	5.57%	40	4.42%
Woonsocket	19	2.10%	3.65%	23	2.54%
Johnston	16	1.77%	3.07%	29	3.20%
East Providence	15	1.66%	2.88%	25	2.76%
Lincoln	15	1.66%	2.88%	17	1.88%
Central Falls	13	1.44%	2.50%	20	2.21%
North Providence	13	1.44%	2.50%	22	2.43%
Barrington	12	1.33%	2.30%	20	2.21%
South Kingstown	11	1.22%	2.11%	20	2.21%
Coventry	9	0.99%	1.73%	14	1.55%
Cumberland	9	0.99%	1.73%	25	2.76%
Bristol	8	0.88%	1.54%	12	1.33%
East Greenwich	8	0.88%	1.54%	13	1.44%
Middletown	7	0.77%	1.34%	12	1.33%
North Kingstown	7	0.77%	1.34%	13	1.44%
West Warwick	7	0.77%	1.34%	10	1.10%
Newport	5	0.55%	0.96%	7	0.77%
Smithfield	5	0.55%	0.96%	11	1.22%
Westerly	5	0.55%	0.96%	10	1.10%
North Smithfield	4	0.44%	0.77%	7	0.77%
Warren	4	0.44%	0.77%	6	0.66%
Charlestown	3	0.33%	0.58%	8	0.88%
Exeter	3	0.33%	0.58%	4	0.44%
Hopkinton	3	0.33%	0.58%	6	0.66%
Tiverton	3	0.33%	0.58%	5	0.55%
Glocester	2	0.22%	0.38%	4	0.44%
Richmond	2	0.22%	0.38%	5	0.55%
Scituate	2	0.22%	0.38%	2	0.22%
Burrillville	1	0.11%	0.19%	7	0.77%
Foster	1	0.11%	0.19%	1	0.11%
Jamestown	1	0.11%	0.19%	3	0.33%
New Shoreham	1	0.11%	0.19%	1	0.11%
Narragansett	1	0.11%	0.19%	3	0.33%
Portsmouth	1	0.11%	0.19%	7	0.77%
West Greenwich	1	0.11%	0.19%	3	0.33%
Little Compton	0	0	0	2	0.22%

Table 3b shows the respondents to the 2018 market rate survey by facility type across counties, compared to the county distribution of all providers. Table 3c displays the breakdown of respondents (home vs. centers) within each county. For example, while Table 3b indicates that only 19.5% of all Centers in Rhode Island are located in Kent County, Table 3c indicates that 86.2% of the 58 child care providers in Kent County are Centers. Providence is the only county in which Homes outnumber Centers. In all other counties, Centers comprise between 61% (Washington) and 80% or higher (Kent, Bristol, and Newport) of providers.

	Table 3b. Distribution of Respondents and Population Across Counties							
	All			Н	omes	Ce	enters	
	N	% of	N/% of pop.	N	% of resp.	N	% of resp.	
		resp.						
Kent	58	11.0%	80/8.8%	8	3.0%	50	19.5%	
Providence	392	74.2%	681/75.2%	242	89.3%	150	58.4%	
Washington	36	6.8%	70/7.7%	14	5.2%	22	8.6%	
Bristol	25	4.7%	38/4.2%	5	1.8%	20	7.8%	
Newport	17	3.2%	36/4.0%	2	.7%	15	5.8%	
TOTAL	528	100.0%	905/100%	271	100.0%	257	100.0%	

Table 3c. Breakdown of Respondents (Homes vs. Centers) Within Counties							
	All	Hoi	mes	Centers			
	Total providers	N	N % within county		% within county		
Kent	58	8	13.8%	50	86.2%		
Providence	392	242	61.7%	150	38.3%		
Washington	36	14	38.9%	22	61.1%		
Bristol	25	5	20.0%	20	80.0%		
Newport	17	2	11.8%	15	88.2%		
TOTAL	528	271	100.0%	257	100.0%		

#### Types of Homes and Centers

Table 4 shows that of the 274 Homes that responded, nine were Family Group Homes, reflecting a 100% population response rate, and 265 were Family Homes, reflecting 56.4% of the total Rhode Island Family Home population. Of Centers, 62.6% identified themselves as independent, stand-alone programs, and 42.4% identified as part of a multi-site organization or chain. Overall, Homes represented 51.4% of the sample and 57.2% of the total RI Home population of 479. Centers represented 48.6% of the sample and 60.8% of the total RI Center population of 426.

Table 4. 2018 Home and Center Respondents							
	N N % o						
Homes	274	479	51.4%	57.2%			
Family Homes	265	470	49.7%	56.4%			
Group Homes	9	9	1.7%	100%			
Centers	259	426	48.6%	60.8%			
Independent	147	NA	62.6%	NA			
Multi-site	108	NA	42.4%	NA			
Missing	4	NA	1.5%	NA			
TOTAL	533	905					

#### Age groups

Table 5 shows that Homes are more likely to report that they provide care for infants than do Centers. Out of the respondents Homes (N=274) and Centers (N=259), only 45.5% of Centers reported that they provide care for infants compared to 87.6% of Homes. However, more than half of Centers do provide care for toddlers (61.4%) and 80.3% provide care for preschoolers. Just under half of Centers provide care for school-age children.

	Table 5. Age Groups								
		All		Homes			Centers		
	N	%	% respon dents(N =533)	N	%	% of respond ents (N=274)	N	%	% of respond ents (N=259)
Infants (Birth to 18 months)	358	23.0%	67.1%	240	25.3%	87.6%	118	19.5%	45.5%
Toddlers (18 to 36 month)	413	26.6%	77.5%	254	26.8%	92.7%	159	26.2%	61.4%
Preschoolers (3 through 5 years)	461	29.7%	86.5%	253	26.7%	92.3%	208	34.3%	80.3%
School age (Kindergarten or above)	322	20.7%	60.4%	201	21.2%	73.3%	121	19.9%	46.7%
TOTAL	1554	100%		948	100%		606	100%	

#### **Schedules**

Table 6 displays the schedules of respondents. Most child care providers (85.4%) offer full-day care, with Homes more likely (95.3%) to do so than Centers (74.9%). About half of each offer half- or part-day care. About three-quarters of Homes and about half of Centers provide before and after school care. Almost no Centers, but an average of about 18.5% of Homes, offer weekend or evening care. Over 60% of Homes provide school vacation and school absence care, versus about 40% Centers.

Table 6. Child Care Schedules									
		All			Home	s	Centers		
	N	%	% of all provid. (N=533)	N	%	% of all Homes (N=274)	N	%	% of all Centers (N=259)
Full Day (8+ hours)	455	25.8%	85.4%	261	24.0%	95.3%	194	28.7%	74.9%
Half-day/part-day	294	16.7%	55.2%	150	13.8%	54.7%	144	21.3%	55.6%
Before school care	313	17.8%	58.7%	200	18.4%	73.0%	113	16.7%	43.6%
After school care	317	18.0%	59.5%	203	18.7%	74.1%	114	16.9%	44.0%
Weekend care	53	3.0%	9.9%	47	4.3%	17.2%	6	0.9%	2.3%
Evening care	56	3.2%	10.5%	55	5.1%	20.1%	1	0.1%	0.4%
School-age, summer									
vaca	275	15.6%	51.6%	171	15.7%	62.4%	104	15.4%	40.2%
TOTAL	1763	100%		1087	100%		676	100%	

#### Hours and days of operation reported

Table 7a displays the days and hours of operation reported for respondents. The figures presented include the most frequently reported begin/end times and the range of reported times. Table 7a indicates that during the week, nearly two-thirds (61.5%) of providers open either at 6:30 a.m. (mean N = 181) or 7:00 a.m. (mean N = 145) and close at either 5:30 p.m. (mean N = 130) or 6:00 p.m. (mean N = 130). Another 14.6% (mean N = 78) open between 7:30 and 9:00 a.m. Although split shifts were not part of the analyses, nine providers (one Home and eight Centers) report end times of 9:00 or 9:30 in the morning; seventeen providers (nine Homes and eight Centers) report start times between 2:00 p.m. and 5:00 p.m.

Tables 7b and 7c display the days and hours of operation for Homes and Centers. During the week, most Homes open between 6:00 and 7:00 a.m., with 27.8% opening before 6:30 a.m. Centers open between 6:30 and 7:00 a.m. with only 2.7% opening prior to 6:30 a.m. Three-quarters of Centers (75.7%) close between 5:30 and 6:00 p.m. compared to 35% of Homes. Homes have a wider dispersion of closing times, and are also more likely to provide evening care, with 27% providing care after 6:00 p.m. compared to 4.6% of Centers.

	Table 7a. Days and Hours of Operation, All Providers						
Days	N	From (Range)	To (Range)				
Sunday	37	7:00 a.m. (5 a.m. – 5:00 p.m.)	5:30 p.m. (1 p.m. – 11 p.m.)				
Monday	511	6:30 - 7:00 a.m. (5:00 a.m. – 5: 00 p.m.)	5:30 - 6:00 p.m. (9 a.m. – 11 p.m.)				
Tuesday	509	6:30 - 7:00 a.m. (5:00 a.m. – 5: 00 p.m.)	5:30 - 6:00 p.m. (9 a.m. – 11 p.m.)				
Wednesday	510	6:30 - 7:00 a.m. (5:00 a.m. – 5: 00 p.m.)	5:30 -6:00 p.m. (9 a.m. – 11 p.m.)				
Thursday	508	6:30 - 7:00 a.m. (5:00 a.m. – 5: 00 p.m.)	5:30 - 6:00 p.m. (9 a.m. – 11 p.m.)				
Friday	505	6:30 - 7:00 a.m. (5:00 a.m. – 5: 00 p.m.)	5:30 - 6:00 p.m. (9 a.m. – 11 p.m.)				
Saturday	53	7:00 a.m. (5 a.m. – 5:00 p.m.)	5:30 p.m. (1 p.m. – 11 p.m.)				

Table 7b. Days and Hours of Operation, Homes						
Dave	N	From	То			
Days	IN	(Range)	(Range)			
Sunday	38	7:00 a.m.	4:00 p.m.			
Sunday		(5 a.m. – 12:00 p.m.)	(2:30 pm – 11:00 p.m.)			
Monday	251	6:00 - 7:00 a.m.	5:00 – 6:00 p.m.			
ivioliday		(5 a.m. – 5:00 p.m.)	(9 a.m. – 11 p.m.)			
Tuesday	249	6:00 - 7:00 a.m.	5:00 – 6:00 p.m.			
Tuesuay		(5 a.m. – 5:00 p.m.)	(9 a.m. – 11 p.m.)			
Wednesday	249	6:00 - 7:00 a.m.	5:00 – 6:00 p.m.			
vveullesuay		(5 a.m. – 5:00 p.m.)	(9 a.m. – 11 p.m.)			
Thursday	247	6:00 - 7:00 a.m.	5:00 – 6:00 p.m.			
Thursday		(5 a.m. – 5:00 p.m.)	(9 a.m. – 11 p.m.)			
Friday	245	6:00 - 7:00 a.m.	5:00 – 6:00 p.m.			
riluay		(5 a.m. – 5:00 p.m.)	(9 a.m. – 11 p.m.)			
Saturday	52	7:00 a.m.	4:00 p.m.			
Jaturuay		(5:00 a.m. – 1:00 p.m.)	(1:30 pm – 11:00 p.m.)			

	Table 7c. Days and Hours of Operation, Centers						
Days	N	From	То				
Days	14	(Range)	(Range)				
Sunday	2	6:30 a.m., 8:00 a.m.	1:00 p.m., 6:00 p.m.				
Monday	260	6:30 a.m.	5:30 – 6:00 p.m.				
Monday		(5:00 a.m. – 2:30 p.m.)	(9 a.m. – 11:00 p.m.)				
Tuesday	260	6:30 a.m.	5:30 – 6:00 p.m.				
Tuesday		(5:00 a.m. – 2:30 p.m.)	(9 a.m. – 11:00 p.m.)				
Wednesday	260	6:30 a.m.	5:30 – 6:00 p.m.				
weuliesday		(5:00 a.m. – 2:30 p.m.)	(9 a.m. – 11:00 p.m.)				
Thursday	259	6:30 a.m.	5:30 – 6:00 p.m.				
Thursday		(5:00 a.m. – 2:30 p.m.)	(9 a.m. – 11:00 p.m.)				
Friday	258	6:30 a.m.	5:30 – 6:00 p.m.				
riluay		(5:00 a.m. – 2:30 p.m.)	(9 a.m. – 11:00 p.m.)				
Saturday	5	6:30 a.m.	4:00 p.m.				
Jaturuay		(5:00 a.m. – 2:30 p.m.)	(1:00 p.m. – 6:00 p.m.)				

#### Weeks of operation reported

Table 8 shows weeks per year of operation. More than three-quarters of respondents (76.8%) operate between 50 and 52 weeks a year, with half of all providers (52.1%) operating for 52 weeks a year.

	Table 8. Weeks of Operation										
	A	All	Но	mes	Centers						
Weeks	N	%	N	%	N	%					
1 to 35	18	3.9%	6	2.7%	12	4.9%					
36 to 40	37	8.0%	4	1.8%	33	13.5%					
41 to 49	52	11.3%	29	13.4%	23	9.4%					
50	73	15.8%	62	28.7%	11	4.5%					
51	41	8.9%	18	8.3%	23	9.4%					
52	240	52.1%	97	4.5%	143	58.4%					
Total	461	100%	216	100%	245	100%					

#### **Section IV. Rates**

#### Determining rates and payment

Table 9 shows that by far the most common method of charging private pay families was weekly, with 90% of Homes and 80.2% of Centers charging this way. Centers were somewhat more likely than Homes to charge monthly (9.5% versus 3.2%). Eleven providers charge bi-weekly. Of the 492 who responded to this question, 49, or about 10%, also list additional payment schedules accepted. In addition to weekly, 21 providers (12 Homes and nine Centers) also charge daily, and six providers (five Homes and one Center) also charged hourly. Other options offered by a small handful of providers include quarterly or semi-annually.

Table 9. Most Common Way Providers Charge									
	A	All	Но	mes	Centers				
	N %		N	%	N	%			
Hourly	10	2.0%	6	2.4%	4	1.7%			
Daily	22	4.5%	10	3.8%	12	5.0%			
Weekly	419	85.2%	225	90.0%	194	80.2%			
Monthly	31	6.3%	8	3.2%	23	9.5%			
Annually	6	1.2%	0	0.0%	6	2.5%			
Other	4 .8%		1	.4%	3	1.2%			
TOTAL	492	100.0%	250	100.0%	242	100.0%			

As Table 10a shows, Homes, much more than Centers, used the DHS/CCAP reimbursement rates to inform the amount they charge private pay parents, reflecting 56.0% of all Homes and 195 of the total 272 (or 71.7%) providers using that metric. Centers, on the other hand, are more likely to use actual operating costs (32.6%) and the rates of nearby child care programs to inform the amount they charge private pay parents (30.8%). Centers reflect 69.9% of providers who use that rates of nearby programs and 79.2% of providers who rely on overall operating costs in setting their rates. Around half of all providers consider how much a family can afford in setting their rates.

Table 10b indicates that about half (N=246) of all providers considered only one criterion in setting their rates; many more Homes (N=170, 62% of all Homes) than Centers (N=76, 29.3% of all Centers) did this. The large majority of Homes (83.5%) relied on the single criterion of DHS/CCAP reimbursement rates. For nearly half (47.4%, N=36) of the Centers relying on one criterion, overall operating costs was most important. About a dozen providers indicated they relied on other information, which included company/employer supplements, military discounts, and consumption expense per child. Five Providers (both Centers and Homes) further consider regulations, teacher qualifications (BrightStar) per age group, other special education pre-school program rates or Montessori schools and quality of the care work.

Table	Table 10a. All Sources of Information Used to Set Private Pay Rates										
		All		Hom	es		Centers				
	N	%	N	of	% of	N	% of	% of			
				Homes	providers		Centers	providers			
DHS/CCAP	272	32%	195	56.0%	71.7%	77	15.7%	28.3%			
reimbursement rates											
Rates of nearby child	216	26%	65	18.7%	30.1%	151	30.8%	69.9%			
care programs											
Board of	45	5%	2	.5%	4.4%	43	8.7%	95.5%			
directors/corporate											
office											
What I feel families	104	12%	44	12.6%	42.3%	60	12.2%	57.7%			
can afford											
Overall operating	202	24%	42	12.1%	20.8%	160	32.6%	79.2%			
costs											
TOTAL	839	100.0%	348	100.0%		491	100.0%				

Table 10b. Single Source of Information Used to Set Private Pay Rates									
	All		Homes		Centers				
	N	%	N	%	N	%			
DHS/CCAP reimbursement rates	156	63.4%	142	83.5%	14	18.4%			
Rates of nearby child care programs	28	11.4%	14	8.2%	14	18.4%			
<b>Board of Directors/Corporate Office</b>	7	2.8%	0	0%	7	9.2%			
What I feel families can afford	13	5.3%	8	4.7%	5	6.6%			
Overall operating costs	42	17.1%	6	3.5%	36	47.4%			
TOTAL	246	100%	170	100%	76	100%			

#### Rate increases and additional fees

Respondents were asked if they had increased their rates in the past year. As shown in Table 11, almost half of all providers (48.8%) who responded to this question increased their rates, more so for Centers (57.7%) than for Homes (38.8%).

Table 11. Increase in Rates in Past Year									
	All		Но	mes	Centers				
	N	% of	N	% of	N	% of			
		resp.		resp.		resp.			
Yes	236	48.8%	97	38.8%	139	57.7%			
No	255	51.9%	153	61.2%	102	42.3%			
Total	483	100%	250	100%	241	100%			

Respondents were asked whether they charged any fees in addition to their base rates, and if so, how much. Table 12a indicates how many providers out of the entire sample of Homes and Centers charge fees and Table 12b indicates how much is charged. In many cases, respondents only responded to some of the choices and left others blank; these are considered a "no" response unless an amount was offered. Also, many respondents either selected a type of fee that they charged but then didn't provide an amount, or vica versa. For example, while 176 providers indicated they charged a registration/application fee, 240 provided an amount; 147 indicated they charged for transportation,

but only 20 offered an amount. Therefore, results in Tables 12a and 12b may not reflect the entire sample of respondents. Other fees charged include yearly insurance, monthly service charges, summer camp, and returned checks.

Table 12a. Additional Fees Charged – All Providers										
	l l	All	Но	mes	Centers					
	N	% of sample	N	% of Homes	N	% of Centers				
Registration/Application fee	176	33.0%	87	31.7%	89	34.4%				
Transportation	147	27.6%	31	11.3%	116	44.8%				
Food/Meals	131	24.6%	25	9.1%	106	41.0%				
Late pick-up/early drop-off	177	33.2%	85	31.0%	92	35.5%				
Late payment	140	26.3%	46	16.8%	94	36.3%				
Materials	147	27.6%	23	8.4%	124	47.9%				
Extended day	164	30.8%	43	15.7%	121	46.7%				
Night care	140	26.3%	29	10.6%	111	42.9%				
Weekend care	140	26.3%	30	10.9%	110	42.5%				
Event/field trip	121	22.7%	31	11.3%	90	34.7%				
Other	43	8.1%	5	2.7%	38	14.7%				

Table 12b. Average Am	ounts of A	dditional Fees Ch	arged	
Days	N	Mean N	Median	Range
Days		(SD)		
Registration/Application fee	241	\$53.31	\$50.00	1-300
Registration/Application rec	2-11	(27.35)		
Transportation	20	\$17.25	\$12.50	2.5-50
Transportation	20	(15.30)		
Food/Meals	18	\$52.06	\$5.00	2-300
1 oou) Wears	10	(101.21)		
Late pick-up/early drop-off (in minutes)	204	\$5.84	\$1.50	.01-40
Late plan up/carry arop or (in minutes)	204	(6.76)		
Late payment (by the day)	134	\$15.70	\$10.00	.5-50
Edite payment (by the day)	154	(9.89)		
Materials	17	\$88.67	\$50.00	5-260
Widterfuls		(93.32)		
Extended day (by the hour)	38	\$18.82	\$13.50	3.5-65
Extended day (by the nodi)	30	(14.28)		
Night care (number of hours unknown)	5	\$27.00	\$25.00	10-50
Tagite care (namber of nours anknown)		(14.83)		
Weekend care (number of hours unknown)	4	\$51.25	\$52.50	20-80
Treesend care (names of flours afficiently		(30.65)		
Event/field trip	45	\$17.59	\$10.00	1-100
Eventy neta trip	7.5	(22.19)		

#### **Rate Discounts**

Respondents were asked to identify all discounts or adjustments to their rates. Of the 533 respondents, almost two-thirds (N=337, 63.2%) offered at least one discount. About 40% of Homes and about 87% of Centers offered discounts. Where discounts were offered, about two-thirds of Homes (N=75, 67.6%) were most likely to offer only one type of discount, and that was typically a sibling discount (see Table 13). Another quarter of those Homes offering discounts (26.1%) offered two discounts, usually both sibling discount and a sliding fee.

Centers were much more likely to offer discounts in general; only 16.8% of Centers offered no discounts. Over 80% of Centers offered between one and three discounts. Center discounts were most often for siblings and for the child not attending due to vacation or illness. A few providers offer other discounts, including military, corporate, employee/staff, and tuition waivers for hardship.

		Table 1	l3. Discount	s or Ad	justments	to Rates			
		All			Homes	S		Center	S
			% of			% of			% of
	N	%	pop. (N=533)	N	%	pop. (N=274)	N	%	pop. (N=259)
No discounts	196	0.0%	36.8%	163	0.0%	59.5%	33	0.0%	12.7%
Sliding Fee	68	11.4%	12.6%	37	23.6%	13.5%	31	7.0%	12.0%
Low Income Rate	31	5.2%	5.8%	15	9.6%	5.5%	16	3.6%	6.2%
Sibling Discount	265	44.4%	49.7%	64	40.8%	23.4%	201	45.7%	77.6%
Student/Family Scholarships	44	7.3%	8.3%	4	2.5%	1.5%	40	9.1%	15.4%
Vacation/Illness (child not attending)	145	24.3%	27.2%	26	16.6%	9.5%	119	27.0%	45.9%
Other	44	7.3%	8.3%	11	7.0%	4.0%	33	7.5%	12.7%
TOTAL	597	100.0%	NA	157	100.0%	NA	440	100.0%	NA

#### Weekly rates

The following three tables (Tables 14a, 14b, and 14c) provide data on weekly rates for all respondents and for Homes and Centers separately.

			Table 14a.	Reported Wee	kly Rates, All P	roviders	
		N	Mean	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>
	Farly	Childhood	(S.D.)	percentile	percentile	percentile	percentile
Infants (Birth t months)		333	\$210.67 (49.72)	\$175	\$200.00	\$240.00	\$273.00
Toddlers (18 to month)	o 36	377	\$206.51 (75.98)	\$173.35	\$200.00	\$235.00	\$260.00
Preschoolers ( through 5 year		422	\$188.33 (66.66)	\$160	\$185.00	\$215.00	\$245.00
	Schoo	l Age Rate	es				
Before school	only	211	\$68.51 (34.23)	\$50	\$60.00	\$85.00	\$100.00
After school or	nly	224	\$86.64 (37.75)	\$72	\$90.00	\$100.00	\$125.00
Before and aft school	er	242	\$128.49 (50.26)	\$110	\$125.00	\$150.00	\$175.00
Summer vacation/camp	0	195	\$164.97 (42.23)	\$150	\$165.00	\$180.00	\$200.00

		Table 1	4b. Reported V	Veekly Rates, H	omes			
	N	Mean	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>		
_		(S.D.)	percentile	percentile	percentile	percentile		
Early Childhood Rates								
Infants (Birth to 18	223	\$190.39	\$173.35	\$180.00	\$200.00	\$240.00		
months)	223	(42.05)	\$175.55	\$180.00	<b>3200.00</b>	\$240.00		
Toddlers (18 to 36	225	\$182,92 \$169 \$1		\$175.00	\$200.00	\$225.00		
month)	223	(38.10)	2103	\$175.00	\$200.00	\$223.00		
Preschoolers (3	224	\$169.45	\$156	\$161.34	\$191.50	\$222.50		
through 5 years)	224	(41.10)		Ş101.54	<i>\$191.50</i>	\$222.50		
Sch	ool Age Rat	es						
Before school only	116	\$72.48	\$47.50	\$73.86	\$90.00	\$113.00		
	110	(38.09)	Ş47.50	773.80	<i>γο</i> .σο	\$115.00		
After school only	123	\$78.66	\$51.25	\$76.00	\$100.00	\$125.00		
	123	(36.60)	751.25	\$70.00	7100.00	\$125.00		
Before and after	144	\$121.69	\$100	\$120.00	\$150.00	\$180.00		
school	144	(46.64)	2100	Ş120.00	\$150.00	\$100.00		
Summer	103	\$156.76 \$150		\$160.00	\$180.00	\$200.00		
vacation/camp	103	(44.15)	7130	\$100.00	7100.00	7200.00		

		Table 1	4c. Reported W	eekly Rates, Co	enters			
	N	Mean	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>		
	14	(S.D.)	percentile	percentile	percentile	percentile		
Early Childhood Rates								
Infants (Birth to 18	110	\$251.79	\$229.75	\$245.00	\$263.50	\$308.00		
months)	110	(37.14)	\$229.73	Ş24J.00	<b>7203.30</b>	\$308.00		
Toddlers (18 to 36	152	\$241.43 \$215 \$2		\$234.00	\$250.00	\$289.70		
month)	132	(100.82)	<b>7213</b>	7234.00	\$230.00	\$289.70		
Preschoolers (3	198	\$209.68	\$187.5	\$210.00	\$230.00	\$250.62		
through 5 years)	130	(81.98)	\$107.5	Ş210.00	<i>\$250.00</i>	Ş230.02		
Schoo	ol Age Rate	es						
Before school only	95	\$63.66	\$49	\$57.00	\$75.00	\$95.00		
	33	(28.28)	7-7	Ş37.00	\$75.00	755.00		
After school only	101	\$96.35	\$81	\$92.00	\$101.00	\$124.00		
	101	(37.02)	701	752.00	7101.00	Ç124.00		
Before and after	98	\$138.47	\$115	\$135.00	\$150.25	\$175.00		
school	50	(53.85)	7113	7133.00	7150.25	71/5.00		
Summer	92	\$174.15	\$148.5	\$175.00	\$198.75	\$213.50		
vacation/camp	32	(38.15)	7140.5	71/3.00	7130.73	7213.JU		

#### Number of hours per week

Table 15 shows the median number of hours covered by the weekly rates.

Table 15. Median Number of Ho	urs Connect	ed to Week	dy Rates
	All	Homes	Centers
Infants (Birth to 18 months)	40	40	40
Toddlers (18 to 36 month)	40	40	40
Preschoolers (3 through 5 years)	40	40	30
Before school only	10	10	8.75
After school only	12.5	10	13.75
Before and after school	20	20	22.50
Summer vacation/camp	40	40	40

#### Comparison with the previous survey

Table 16a shows comparisons between the current survey data and figures from the 2015 survey.

Table	Table 16a. Comparison of 75 <sup>th</sup> Percentile Weekly Rates 2015 and 2018									
	Α	II	Hoi	nes	Centers					
	2015	2018	2015	2018	2015	2018				
Early Childhood Rate	es									
Infants (Birth to 18 months)	\$225.00	\$240.00	\$182.50	\$200.00	\$248.00	\$263.00				
Toddlers (18 to 36 month)	\$225.00	\$235.00	180.00	\$200.00	\$231.00	\$250.00				
Preschoolers (3 through 5 years)	\$200.00	\$215.00	\$175.00	\$191.50	\$215.00	\$230.00				
School Age Rates										
Before school only	\$81.00	\$85.00	\$85.00	\$90.00	\$81.00	\$75.00				
After school only	\$105.00	\$100.00	\$90.00	\$100.00	\$105.00	\$101.00				
Before and after school	\$150.00	\$150.00	\$140.00	\$150.00	\$165.00	\$150.25				
Summer vacation/camp	\$200.00	\$180.00	\$167.50	\$180.00	\$225.00	\$198.75				

Table 16b displays the percentage changes for each of the categories of care. Between 2015 and 2018 school age rates at the 75<sup>th</sup> percentile declined across all categories for Centers. Rates increased across all categories for Homes for both early childhood and school age and for early childhood categories for Centers.

Table 16b. Percent Change of 75 <sup>th</sup> Percentile from 2015 to 2018							
	All	Homes	Centers				
Early Childhood Rate Changes							
Infants (Birth to 18 months)	6.67%	9.59%	6.05%				
Toddlers (18 to 36 month)	4.44%	11.11%	8.23%				
Preschoolers (3 through 5 years)	7.50%	9.43%	6.98%				
School Age Rate Changes							
Before school only	4.94%	5.88%	-7.41%				
After school only	-4.76%	11.11%	-3.81%				
Before and after school	0.0%	7.14%	-8.94%				
Summer vacation/camp	-10.00%	7.46%	-11.67%				

#### **Section V. Enrollment Capacity and Subsidies**

#### Reported enrollment capacity

Table 17a shows the reported enrollment capacity, or number of children permitted by license, for the 483 providers who answered the question. No Homes are licensed for more than 12 children; three-quarters of Centers (74.9%) are licensed for 50 or more children. Table 17b displays the descriptive statistics for the enrollment capacity permitted by license for both Homes and Centers.

Table 17a. Number of Children Permitted by License									
	Α	.II	Hor	nes	Cen	ters			
	N	%	N	%	N	%			
1 to 5	17	3.5%	17	6.6%	0	0%			
6 to 12	243	50.3%	239	93.4%	4	1.8%			
13 to 49	53	11.0%	0	0%	53	23.2%			
50 to 99	111	23.0%	0	0%	111	48.9%			
100 +	59	59 12.2%		0%	59	26.0%			
Total	483	100%	256	100%	227	100%			

Table 17b. Enrollment Capacity, Descriptive Statistics							
	All	Homes	Centers				
Mean	40.06	6.66	77.73				
Standard Deviation	47.92	1.26	46.98				
Median	8.0	6.0	69.0				
Panga	322	8	320				
Range	(4-326)	(4-12)	(6-326)				
N	483	256	227				

#### **Current Enrollment**

Table 18a displays current full-time enrollment, or the number of children for which providers are currently caring full-time, eight or more hours a day. Table 18b compares descriptive statistics for full time enrollment between the 2018 and the 2015 survey data. Compared to 2015, while the number of providers has decreased, the median number of children enrolled in both Homes and Centers has increased by over a third, from four to six children in Homes and from 36 to 57.5 in Centers.

Table 18a. Current Full-Time Enrollment in Homes and Centers								
	ı	All	Но	mes	Cer	nters		
	N	%	N	%	N	%		
0 to 5	87	21.4%	85	35.0%	2	.8%		
6 to 12	139	34.2%	135	55.5%	4	1.7%		
13 to 49	74	18.2%	12	4.9%	62	26.7%		
50 to 99	69	17.0%	0	0.0%	69	29.7%		
100 +	37	9.1%	0	0.0%	37	15.9%		
Total	406	100%	243	100%	232	100%		

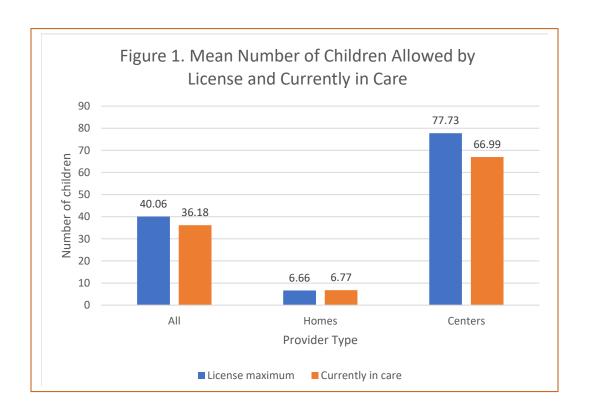
Table 18b. Current Full-Time Enrollment, Descriptive Statistics for Homes and Centers, 2018 and 2015									
		2018		2015					
	All	Homes	Centers	All	Homes	Centers			
Mean	36.18	6.8	67.0	29.4	4.3	54.8			
Standard Deviation	45.3	3.6	48.4	51.5	2.1	63.7			
Median	12	6	57.5	8	4	36			
Range	0-321	0-24	5-321	0-578	0-8	0-578			
N	475	243	232	259	130	129			

Tables 19a displays the number of children for which providers are currently caring part- or half-time. Table 19b compares descriptive statistics for half- or part-time enrollment between the 2018 and the 2015 survey data. The median number of children receiving part-time care has doubled for Homes from three to six, and by nearly tripled for Centers, from 24 to 61.

Table 19a. Current Part- or Half-Time Enrollment in Homes and Centers								
	,	All	Hoi	mes	Cer	nters		
	N	%	N	%	N	%		
0 to 5	49	18.8%	49	36.3%	0	0.0%		
6 to 12	80	30.8%	77	57.0%	3	2.4%		
13 to 49	58	22.3%	9	6.6%	49	39.2%		
50 to 99	50	19.2%	0	0.0%	50	40.0%		
100 +	23	8.8%	0	0.0%	23	18.4%		
Total	260	100%	135	100%	125	100%		

Table 19b. Current Part- or Half-Time Enrollment, Descriptive Statistics for Homes and Centers, 2018 and 2015									
		2018			2015				
	All	Homes	Centers	All	Homes	Centers			
Mean	35.77	6.9	66.88	20.2	3.8	31.7			
Standard Deviation	43.19	3.57	44.78	26.2	2.6	29.1			
Median	13.5	6	61	10	3	24			
Range	2-237	2-24	8-237	0-170	0-12	1-170			
N	260	135	125	206	85	121			

Figure 1 provides a visual representation of the differences between the number of children providers are licensed to care for, and the number for which they currently care. For Centers, there appears to be some underutilization of capacity, but not so for Homes



#### Changes in number of classrooms or ages served

Respondents were asked whether the number of classrooms or the ages served has increased, decreased, or stayed the same in the last year. As Table 20 indicates, the large majority reported that numbers had remained the same across every age group. Beyond that, more providers reported a modest increase in infant and toddler numbers and a slight decrease in preschool and school age children.

Table 20. Changes in Number of Classrooms or Ages Served								
	-	All	Но	mes	Cei	nters		
	N	%	N	%	N	%		
Infant (Birth to 18 mos.)								
Increased	40	12.5%	21	11.2%	19	14.3%		
Decreased	30	9.4%	27	14.4%	3	2.3%		
Stayed the same	250	78.1%	139	74.3%	111	83.5%		
TOTAL	320	100%	187	100%	133	100%		
Toddler (18 to 36 mos.)								
Increased	52	14.9%	33	18.3%	19	11.2%		
Decreased	31	8.9%	19	10.6%	12	7.1%		
Stayed the same	267	76.3%	128	71.1%	139	81.8%		
TOTAL	350	100%	180	100%	170	100%		
Preschool (3 to 5 yrs.)								
Increased	39	10.3%	15	8.2%	24	12.2%		
Decreased	46	12.2%	23	12.6%	23	11.7%		
Stayed the same	293	77.5%	144	79.1%	149	76.0%		
TOTAL	378	100%	182	100%	196	100%		
School Age (Kindergarten or al	bove)							
Increased	26	8.2%	15	9.0%	11	7.4%		
Decreased	28	8.9%	15	9.0%	13	8.7%		
Stayed the same	261	82.6%	137	82.0%	125	83.9%		
TOTAL	316	100%	167	100%	149	100%		

#### Reported enrollment by subsidized/private pay category and age group

As Table 21a shows, in general more survey respondents have DHS/CCAP children enrolled than private pay children. For example, about half of all providers (50.8%) have DHS/CCAP toddlers enrolled (with a mean of 4.94 and a median of 3 children per provider) compared to 34.5% who have private pay toddlers enrolled. However, while the number of providers serving subsidized children is higher, the median number of private pay children enrolled is higher across all age groups. Table 21b breaks down this data by Homes and Centers. Homes are about three times as likely to have DHS/CCAP children enrolled than private pay children (e.g., 107 report having CCAP infants enrolled and 46 report having private pay infants enrolled). Centers are about equally as likely to have either (e.g. 87 report having CCAP infants enrolled and 89 report having private pay children enrolled).

Table 21a. Provider E	nrollment Informat	ion by Age Group a	nd Pay Category, All	Providers
	Infant	Toddler	Preschool	School Age
DHS/CCAP				
N (% sample)	N=194 (36.4%)	N=271 (50.8%)	N=319 (59.8%)	N=242 (45.4%)
Mean	4.14	4.94	8.92	10.74
Median	2	3	3	4
Stand. devia.	4.91	5.88	15.55	16.20
Range	1-32	1-40	1-200	1-89
Private Pay				
N (% sample)	N=135 (25.3%)	N = 184 (34.5%)	N = 225 (42.2%)	N = 125 (23.4%)
Mean	6.45	8.97	17.83	24.53
Median	4	6	11	13
Stand. devia.	8.24	10.21	19.36	34.89
Range	1-53	1-59	1-114	1-297
Total All Providers	329 (61.7%)	455 (85.4%)	544 (102.1%)	367 (68.8%)

Table 2	Table 21b. Provider Enrollment Information by Age Group and Pay Category, Homes and Centers							
	Infant	Toddler	Preschool	School Age				
Family Homes								
DHS/CCAP								
N (% sample)	107 (20.1%)	155 (29.1%)	167 (31.3%)	143 (26.8%)				
Mean	1.88	2.02	2.31	2.65				
Median	1	2	2	2				
Stand. devia.	1.48	1.27	1.59	1.54				
Range	1-8	1-7	1-12	1-7				
Private Pay								
N (% sample)	46 (8.6%)	57 (10.7%)	49 (9.2%)	18 (3.4%)				
Mean	1.59	2.21	2.84	1.67				
Median	1	2	2	2				
Stand. devia.	1.10	1.38	3.40	7.67				
Range	1-6	1-6	1-20	1-4				
Centers								
DHS/CCAP								
N (% sample)	87 (16.3%)	116 (21.7%)	152 (28.5%)	99 (18.6%)				
Mean	6.93	8.85	16.20	22.41				
Median	5	7	12	15				
Stand. devia.	6.11	7.22	20.11	20.23				
Range	1-32	1-40	1-200	1-89				
Private Pay								
N (% sample)	89 (16.7%)	127 (23.8%)	176 (33.0%)	107 (20.1%)				
Mean	8.97	12.0	22.01	28.37				
Median	6	9	16	20				
Stand. devia.	9.17	10.99	19.90	36.34				
Total All Providers	329 (61.7%)	455 (85.4%)	544 (102.1%)	367 (68.8%)				

#### Subsidized enrollment

Centers and Homes are consistent in their enrollment of subsidized families. As Table 22 indicates, of the 500 respondents who answered this question, an average of 85.8% for both Homes and Centers (N=429) accept DHA subsidized CCAP families. (While the 71 who did not accept subsidized families were requested to skip the next two questions, 11 chose to answer them anyway.) Over half (58.6%) of all providers accept new CCAP families during the pending period. As to whether providers charge during the pending period, about a third (33.3% of Homes and 36.4% of Centers) charge the full, private-pay rate during the pending period. About a fifth of Homes (21.4%) and nearly a third of Centers (31.8%) charge a discounted rate. The remaining third (31.8%) of Centers do not charge during the pending period, along with almost half (45.2%) of Homes. Of note here is that of the 117 providers who do not charge during the pending period, two thirds, or 65% (N=76) of them are Homes.

Table 22. Su	Table 22. Subsidized Enrollment and Pending Period							
	Δ	All .	Homes		Cen	ters		
	N	%	N	%	N	%		
Do you accept DHS subsidize	d CCAP fo	milies?						
Yes	429	85.8%	222	86.0%	207	85.5%		
No	71	14.2%	36	14.0%	35	14.5%		
Total	500	100.0%	244	100.0%	241	100.0%		
Do you accept new CCAP fan not guaranteed?	nilies duri	ng the "pe	nding pe	riod" wher	n DHS subs	sidies are		
Yes	258	58.6%	139	59.4%	119	57.8%		
No	182	41.4%	95	40.6%	87	42.2%		
Total	440	100.0%	221	100.0%	205	100.0%		
Do you charge families durin	g the "pe	nding peri	od"?					
Yes, full, private pay rate	103	34.7%	56	33.3%	47	36.4%		
Yes, discounted rate	77	25.9%	36	21.4%	41	31.8%		
No	117	39.4%	76	45.2%	41	31.8%		
Total	287	100.0%	158	100.0%	129	100.0%		

Table 23a shows the number and percentage of survey respondents reporting currently caring for DHS/CCAP subsidized children. While in 2015 6.9% of respondents had no subsidized children in their care, this percentage is down to 4.2% in 2018.

Table 23a. DHS/	Table 23a. DHS/CCAP Subsidized Children, Frequency Distribution							
	ļ	All	Но	mes	Centers			
Number of children	N	% (of 429)	N	% (of 222)	N	% (of 207)		
0	18	4.2%	8	3.6%	10	4.8%		
1	21	4.9%	13	5.8%	8	3.9%		
2	24	5.6%	17	7.6%	7	3.4%		
3	33	7.7%	29	13.1%	4	1.9%		
4	32	7.5%	28	12.6%	4	1.9%		
5	28	6.5%	22	9.9%	6	2.9%		
6	34	7.9%	32	14.4%	2	1.0%		
7	18	4.2%	12	5.4%	6	2.9%		
8	28	6.5%	25	11.3%	3	1.4%		
9	13	3.0%	6	2.7%	7	3.4%		
10	10	2.3%	8	3.6%	2	1.0%		
11-25	84	19.6%	22	9.9%	62	29.9%		
26-100	78	18.2%	0	0.0%	78	37.7%		
101+	8	1.9%	0	0.0%	8	3.9%		

Table 23b contains descriptive statistics for both 2018 and 2015. The median number of DHS/CCAP-subsidized children is 5 for Homes (versus 4 in 2015) and 23 for Centers, compared to 12 in 2015.

Table 23b. Subsidized Children, Descriptive Statistics								
		2018		2015				
	All	Homes	Centers	All	Homes	Centers		
Mean	18.46	5.97	32.03	15.6	4.7	23.5		
Standard Deviation	20.61	3.78	33.31	24.3	3.2	29.4		
Median	8	5	23	7	4	12		
Range	1-200	1-24	1-200	0-201	0-20	0-201		
N	411	214	197	290	122	168		

Table 24 shows the number of providers by the percentage of children in their care who are subsidized by DHS/CCAP. About one-third (34.3%) of all providers provide 100% of their care to subsidized children. Almost all of these (93.2%) are Homes: two-thirds (62.5%) of Homes have 100% of their children subsidized; only 4.7% of Centers do. About 61% of Centers report that subsidized children make up less than half of their enrollment compared to 23% of Homes.

Table 24. Changes in Number of DHS/CCAP Subsidized Children Served								
	Į.	All	Но	mes	Centers			
Percentage of	N	%	N	%	N	%		
Children								
0	64	13.5%	29	11.9%	35	15.1%		
>0 - 25%	75	15.8%	8	3.3%	66	28.4%		
>25 – 50%	58	12.2%	19	7.8%	40	17.2%		
>50 – 75%	59	12.4%	18	7.4%	41	17.7%		
>75 – 99%	56	11.8%	17	7.0%	39	16.8%		
100%	163	34.3%	152 62.5%		11	4.7%		
Total	475	100%	243	100%	232	100%		

#### Changes in numbers of subsidized children

Of the approximately 86% of providers who accept subsidized children, Homes and Centers are about equally represented, even though the distribution pattern in the percentage of children they enroll differs (see Table 24). As Table 25a indicates, overall, over half (52.5%) of providers did not experience a change in the number of DHS/CCAP children they served. This was, however, truer for Homes (58.6%) than Centers (46.2%). Also, Centers were more likely to have experienced an increase (28.3%) than Homes (17.7%); Centers, in fact, represented 60.6% (N=60) of the providers who experienced an increase, with Homes representing 39.4% (N=39).

Table 25a. Changes in Number of DHS/CCAP Subsidized Children Served							
	-	All	Но	mes	Centers		
	2	%	2	%	2	%	
Increase	99	22.9%	39	17.7%	60	28.3%	
Decreased	106	24.5%	52	23.6%	54	25.5%	
Stayed the Same	227	52.5%	129	58.6%	98	46.2%	
TOTAL	432	100.0%	207 100.0% 211 100.0%				

Respondents who experienced a decrease in the number of subsidized children were asked to select all reasons why the decrease occurred. Table 25b shows that multiple reasons were offered by several respondents. Almost half (49%) of the reasons offered was that families did not qualify for CCAP. This reason was offered by two-thirds of Homes (64%) and over one-third of Centers (38.4%). Another 17% of responses, almost all from Centers, were that the reimbursement rate was insufficient. Other reasons comprised almost a quarter of the responses and included: more head start and preschool programs in the area of operation/free-preschool (two Homes), challenges associated with the launch of UHIP (one Center), challenges in getting assistance in qualifying for the assessment. Seven Homes reported moving or withdrawing from the program, and two Centers reporting accepting more private pay children.

Table 25b. Reasons Number of DHS/CCAP Subsidized Children Served Has Decreased								
	A	All .	Hoi	mes	Centers			
	N	%	N	%	N	%		
Funding issue	9	6.1%	1	1.6%	8	9.3%		
Closed a classroom	5	3.4%	0	0%	5	5.8%		
Insufficient	25	17.0%	2	3.2%	23	26.7%		
reimbursement rate								
Too much paperwork	3	2.0%	1	1.6%	2	2.3%		
Families do not qualify	72	49.0%	39	64.0%	33	38.4%		
for CCAP								
Other	33	22.4%	18	29.5%	15	17.4%		
TOTAL	147	100.0%	61	100.0%	86	100.0%		

#### **Section VI. Program Quality**

#### **BrightStars** participation

Respondents were asked to provide their BrightStars rating, and if they did not participate in the BrightStars program, to offer reasons why not. They were then asked to identify supports and resources that might assist them in improving the quality of their programs. Finally, they were asked to offer any additional comments. Table 26a displays the BrightStars ratings across all respondents, Homes and Centers. Among the respondents, a large majority of Homes (87.7%) reported having either a one- or two-star rating, as well as 55% of Centers. Note: administrative data from 2018 show that 74% of licensed family child care Homes have one- or two-star ratings and only about 42% of early childhood Centers have a one- or two-star rating.

Table 26a. BrightStars Rating								
	A	Ш	Hon	nes	Ce	Centers		
	N	%	N	%	N	%		
1 Star	198	39.3%	134	51.5%	64	26.2%		
2 Stars	164	32.5%	94	36.2%	70	28.7%		
3 Stars	26	5.2%	1	.4%	25	10.2%		
4 Stars	44	8.7%	4	1.5%	40	16.4%		
5 Stars	10	2.0%	1	.4%	9	3.7%		
Do not participate	62	12.3%	26	10.0%	36	14.8%		
TOTAL	504	100%	504 100% 260 100%					

As Table 26b indicates, of the 62 providers (26 Homes and 36 Centers) who do not participate in the BrightStars program, the most commonly reported reasons (38.7%) were too much paperwork and too time consuming. This was especially true for Homes. Respondents offered several other reasons not

listed. These included: disinterest, stressful on staff and takes away from the children, dissatisfaction with the rating scale and the effectiveness of the system to support families and providers, and incompatibility with Montessori programming. Note: all CCAP providers are required to participate in BrightStars.

Table 26b. Why No Participation in BrightStars							
		All	Н	omes	Centers		
	N	% of non- participant (N=62)	N	% (N=26)	N	% (N=36)	
Too much paperwork	24	38.7%	13	50%	11	30.5%	
DHS/CCAP rates do not support quality	11	17.7%	7	26.9%	4	11.1%	
Don't understand the process/tools	6	9.6%	5	19.2%	1	2.7%	
Time-consuming	24	38.7%	16	61.5%	8	22.2%	
Too costly	8	12.9%	5	19.2%	3	8.3%	
Other	42	67.7%	17	65.4%	27	75.0%	
TOTAL	115		63		54		

#### Supports and resources

Almost all respondents chose several items in the list of resources that might assist the quality of their programs. As Table 27 shows, professional development opportunities was the most commonly selected resource, followed closely by tiered reimbursement rates and grants. Centers are more interested in facilities and quality improvement grants than Homes, with about 63% of these requests coming from Centers. Homes are more likely than Centers to be interested in mentoring/coaching and low-cost loans, with about 62% of these requests coming from Homes. Bonuses for increasing BrightStars rating was of virtually no interest. Other supports and resources were suggested by 46 providers. These included: dissatisfaction with technical assistance from the DHS; need for affordable trainings and staff prioritization, including fewer restrictions on approved continuing education; need for food and wage grants (CCH); increased CCAP rates; and funding for child assessment materials and program access.

Table 27. Supports and Resources To Assist Program Quality							
		All	Н	omes	Cer	nters	
	N	% of all providers (N=533)	N	% of all Homes (N=274)	N	% of all Centers (N=259)	
Scholarships for staff/employees (free/low-cost college coursework)	227	42.6%	91	33.2%	136	52.5%	
Tiered reimbursement (higher DHS/CCAP rates)	297	55.7%	142	51.8%	155	59.8%	
Free-low cost professional development opportunities	313	58.7%	164	59.9%	149	57.5%	
Coaching, mentoring, and technical assistance	173	32.5%	106	38.7%	67	25.9%	
Grants for facilities improvements	288	54.0%	108	39.4%	180	69.5%	
Grants for quality improvements	282	52.9%	104	38.0%	178	68.7%	
Assistance with cost of materials and supplies	266	49.9%	118	43.1%	148	57.1%	
Low cost loans	88	16.5%	56	20.4%	32	12.4%	
Bonus for increasing your BrightStars Rating	1	0.2%	0	0.0%	1	0.4%	
Other	46	8.6%	12	4.3%	34	13.1%	

#### **Comments**

Providers were offered the opportunity to share any additional comments. They appear below, verbatim.

- If we could have someone walk us through the BrightStars ITERS and ECERS process by coming to our school and doing the two assessments, telling us what areas need improvement and working with us to improve these areas before we have an assessment team from BrightStars come to my school to improve our star rating.
- We have had Brightstars tell us our score but it was left up to us to figure out how to
  improve it. When I have asked if someone could come to my school to help us prepare, I
  was told that it would cost us. If the state wants all quality child care center to have high
  BrightStar ratings to prove that government grants are working, then they should be
  helping us in any way possible to make themselves look better.
- We have SPK children, they account for 36 children in our enrollment but the survey did not ask for SPK children on the enrollment numbers.
- The DHS CCAP rates are barely enough to break even. We also struggle with enrollment because parents with subsidies fluctuate so often. The minute a parent looses a job they are no longer eligible for CCAP. This is not helpful for the child nor the parent that needs that time to look for other employment opportunities.
- The star rating does not indicate the quality of THIS program. We are stuck at 2 in the only area of Teacher's education when their longevity and experience has made the MLK program outstanding.

- When I interview potential clients I let them know of my program including Brightstars.
   They tell me they heard about me through a friend or family member and how they and their child love it here. They don't care about Brightstars whatsoever. They know all about it, too.
- We provide Medical and Dental with 50% co-share. We need affordable group Medical and Dental for Child Care Employees. It's time we had a group rate for this group!! These expenses are killing us but you can't hire quality people without it!!
- Providing wages comparable to the level of education and experience needed to be high quality continues to be a challenge.
- I would like more support in getting CCAP children.
- We have been waiting on a one-page document for 6 months from Brightstars. It takes an unacceptable amount of time for things to be processed through their office and now our funds are tied to this system. They can't do their jobs within a timely manner if they are funded and supported sufficiently for the tasks that have been given to them.
- Please share your rate results. If it is helping you determine DHS subsidy, it will help us in rates for similar programs as well as pricing in the different locations in the state.
- I as well as others in this field are having difficulty finding and retaining qualified staff. The rate of pay we can afford to offer is lower that they can make at McDonald's and the responsibilities are greater.
- I only serve 2 DHS children....both school kindergarten grade or higher. Reimbursement is given as a preschooler and school age, yet they are both in elementary school. It's also frustrating that I only receive \$2.50 a week (why bother printing a check) from the state for one of them and the parent has to pay a weekly share of \$38 a week. My weekly private rate is \$70 so I'm losing money for this space....very frustrating especially as a small business owner. DHS should be paying centers weekly not hourly since that's what our centers do.
- BrightStars staff must be aware and trained to know that a home program is a family home. To understand that the work of a provider is too roles to elaborate.
- Take more into account Spanish-speaking people for training and skills
- I'd like increased by DCYF
- I am a recent provider approved by DCYF. Not yet and I started my program. At this time Entoy the application process for the DHS Child Care Program (CCAP). (Spanish)
- I believe that high quality care is indispensable and a child's right and should be promoted and encouraged to achieve better education at the state level.
- Thank you for your survey.
- It is my PERSONAL OPNION, I think the increases in the rates average to be equally. I say this because the centers of care the increase to their rates be proportional according to the calculation of stars they have, in contrast to the providers of child care will be approximately \$4.00 a month as \$1.00 per week by child. I really like my work, I feel very comforted when the parents are going to work calm because I take care of their children, (Spanish)
- The provider has a direct paid vacation and insurance
- How to guide the mothers to pay the copayment when the children are on vacation, (for a week) the parents like to pay or not pay the copayment for the week they are on vacation. (Spanish)

#### Appendix A – Survey

## RHODE ISLAND DEPARTMENT OF HUMAN SERVICES 2018 STATEWIDE SURVEY OF CHILD CARE RATES

# Conducted by the Schmidt Labor Research Center University of Rhode Island

The results of this survey will be used by the RI Department of Human Services (DHS) to determine the rates typically charged for child care across Rhode Island. Although your participation is voluntary, DHS is required by state and federal law to collect and report this information.

Individual responses will be kept completely confidential and will not be identified with a particular center, individual, or program. Only summary statistics will be reported. No respondents will be identified by name to any state or federal agency.

Please fill out a separate questionnaire for every site you operate. This enables us to collect accurate information on response rates and child care capacity.

#### **General Instructions for Paper Survey**

- 1. Please answer every question, unless asked to skip questions.
- 2. If you operate multiple sites, please fill out a separate questionnaire for each site you operate.
- 3. If the rates you charge varied for the same child care service, please enter the rate that was charged to most families.
- 4. Please use the rates you charge for child care services only, and do not include any discounts, fees, or other charges.
- 5. If you charge monthly, please divide the monthly rate by 4.33 to arrive at the weekly rate.
- 6. If you charge daily, please multiply your daily rate by 5 to arrive at the weekly rate.

#### **SECTION 1. PROGRAM INFORMATION**

1.) For whi	ich type of facility are you responding?
	<ul> <li>a Family Child Care Home (please skip to question 3 below)</li> <li>b Group Family Child Care Home (please skip to question 3 below)</li> <li>c Child Care Center</li> </ul>
-	re a Childcare Center, does your facility operate as an independent, stand-alone program or is tof a multi-site organization or chain?
	a Independent, stand-alone program b Part of a multi-site organization or chain
3.) Do you	offer or participate in any of the following programs?
	<ul> <li>a Comprehensive Early Childhood Education program (i.e. you are approved by the R.I. Department of Education)</li> <li>b Head Start programs (i.e. you are an accredited Head Start provider)</li> <li>c State Funded Pre-Kindergarten program</li> <li>d Early Head Start- Child Care Partnership</li> </ul>
4.) For whi	ich age groups do you provide child care services? (check all that apply)
	<ul> <li>a Infants: Birth to 18 months old</li> <li>b Toddlers: 18 to 36 months old</li> <li>c Preschoolers: 3 through 5 years old</li> <li>d School-age children: in Kindergarten or above</li> </ul>
5.) Which t	types of child care schedule(s) do you offer? (check all that apply)
	a Full-day: 8 or more hours b Half-day or part-day c Before school care d After school care e Weekend care f Evening care g School-age, summer vacation h Other (please specify):

6.) What are your usual hours of operation? Indicate start and end time for each day and cross out the days you are closed.

Sı	ın	M	on	Tu	es	W	ed	The	urs	F	ri	S	at
Start	End												

7.) How many weeks per year do you operate?
8.) In what county is your program located?
a Kent
b Providence
c Washington
d Bristol
e Newport
9.) (Response is optional) In what zip code is your program located?

#### **SECTION 2. RATES**

Please provide the <u>weekly, full-time rate</u> you charge to private paying families, even if you do not currently care for any private-pay children. Do not include discounts, CCAP subsidies, sliding-scale rates, or scholarships. If you do not care for an age or offer the schedule listed, please enter "X."

#### 1.) Early Childhood Rates

	Infant	Toddler	Preschool
	(Birth to18 mos.)	(18 to 36 mos.)	(3 to 5 yrs.)
Full Time,			
Weekly Rate			
Number of hours covered by this rate			

#### 2.) School Age Rates

	Before School Only	After School Only	Before and After School	Summer Vacation/ Camp
Full Time,				
Weekly Rate				
Number of hours covered by this rate				

3.)	What is the most common way that you charge?	
	a Hourly b Daily c Weekly d Monthly e Annually f. Other (please specify):	
4.)	What information do you use to set your private pay rates? (check all that apply)	
	<ul> <li>a DHS/CCAP Reimbursement Rates</li> <li>b Rates of nearby child care programs</li> <li>c Board Of Directors/Corporate Office</li> <li>d What I feel families can afford</li> <li>e Overall Operating Costs</li> <li>f. Other (please specify):</li> </ul>	
5.)	Have you increased rates in the last year?  a Yes  b No	

6.)	Do you charge any	fees in addition to your	base rate? Check the	appropriate boxes.
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	No	Yes	If Yes,
			How much?
Registration/Application Fee			
Transportation			
Food / Meals			
Late Pick-up/Early Drop-Off			

Night Care				
Weekend Ca	ire			
Event/Field	Trip			
Other:				
b Lov c Sib				
e Vac f Ot	her (please speci	ild not attending) fy)		
e Vac f Ot	cation/Illness (chi her (please speci	ild not attending) fy)  ACITY		School Age
e Vac f Ot	tation/Illness (chi her (please speci IES AND CAP/ you currently ha	ild not attending) fy)  ACITY  ve enrolled in your	program?	School Age (Kindergarten or above)
e Vac f Ot	tation/Illness (chicker (please specified)  IES AND CAPA  you currently ha  Infant  (Birth to 18	ACITY  ve enrolled in your	program?  Preschool	(Kindergarten

b. \_\_\_\_ No (IF YOU ANSWERED NO, PLEASE SKIP TO ITEM 5 BELOW)

b. \_\_\_ No (IF YOU ANSWERED NO, PLEASE SKIP TO ITEM 5 BELOW)

3.) Do you accept new CCAP families during the "pending" period, when DHS subsidies are not

a. \_\_\_\_ Yes

a. \_\_\_\_ Yes

guaranteed?

4.) Do you c	harge families during the "	pending" period?		
b.	Yes, I charge the full, I. Tes, I offer a discount No, I do not charge fa	ed or partial rate	CCAP eligibility is	"pending."
5.) How mai	ny children does your DCYF	license allow you	ı to care for?	
6.) In the las	st year, has the number of o	classrooms or the	ages you serve ch	anged?
		Increased	Decreased	No Change
	Infant			
	(Birth to18 mos.)			
	Toddler			
	(18 to 36 mos.)			
	Preschool			
	(3 to 5 yrs.)			
	School Age (Kindergarten or above)			
a. b.	st year, has the number of [ Increased Decreased Stayed the Same	DHS/CCAP subsid	ized children you s	serve:
a. b. c. d. e.	swered "Decreased" in the Funding issue Closed a classroom Reimbursement Rate Too much paperwork Families do not qualif Other (please specify)	not sufficient to s		that apply)

#### **SECTION 4. QUALITY**

1.) What	is your current BrightStars rating?
	a 1 Star ]
	b 2 Stars
	c 3 Stars (PLEASE SKIP TO ITEM 3 BELOW)
	d 4 Stars
	e 5 Stars
	f I do not currently participate in BrightStars
2.) If you	do not currently participate in BrightStars, why not? (Check all that Apply)
	a Too much paperwork
	b DHS/CCAP Rates do not support quality
	c Don't understand the process/tools
	d Time-consuming
	e Too costly
	f Other (please specify)
3.) What	supports and resources would assist you in improving the quality of your program (check all
· -	apply)
	a Scholarships for staff/employees (Free or low-cost college coursework)
	b Tiered Reimbursement (Higher DHS/CCAP Rates)
	c Free/Low-cost Professional Development Opportunities
	d Coaching, Mentoring, and Technical Assistance
	e Grants for Facilities Improvements
	f Grants for Quality Improvement
	g Assistance with Cost of Materials and Supplies
	h Low Cost Loans
	i Bonus for Increasing your BrightStars Rating
	j Other (please specify)

### PLEASE INCLUDE ANY ADDITIONAL COMMENTS YOU WOULD LIKE TO SHARE WITH US:

Thank you for participating in the 2018 Rhode Island Child Care Rate Survey!