

**NATIONAL ASSOCIATION OF CHILD CARE  
RESOURCE & REFERRAL AGENCIES**



**2011-2012**

# **PUBLIC POLICY AGENDA 112<sup>TH</sup> CONGRESS**

March 2011







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NACCRRRA, the National Association of Child Care Resource & Referral Agencies, is our nation's leading voice for child care. We work with more than 600 state and local Child Care Resource & Referral agencies nationwide. These agencies help ensure that families in 99 percent of all populated zip codes in the United States have access to quality, affordable child care. To achieve our mission, we lead projects that increase the quality and availability of child care, undertake research, and advocate child care policies that improve the lives of children and families. To learn more about NACCRRRA and how you can join us in ensuring access to quality child care for all families, visit us at [www.naccrra.org](http://www.naccrra.org).

The National Association of Child Care Resource & Referral Agencies believes that:

- ▶ All children have a right to be cared for, both in and outside the home, in safe, healthy, and nurturing environments.
- ▶ All children should have access to early learning experiences that help them arrive at kindergarten ready to succeed.
- ▶ All families must have access to quality, affordable, accessible child care for their children.
- ▶ All parents must have a choice of appropriate and affordable learning and caregiving settings for their children.
- ▶ Every community must have a strong child care delivery system that includes Child Care Resource and Referral in order to coordinate training, supply building (expanding child care capacity), planning and policy and education efforts on child care needs.

## About NACCRRA's Agenda

**NACCRRA's public policy agenda is both grassroots-inspired and research-based.** NACCRRA works with more than 600 state and local Child Care Resource and Referral agencies (CCR&R) nationwide. These agencies help ensure that families in 99 percent of all populated zip codes in the United States have access to quality, affordable child care. They not only help families find child care, but CCR&Rs train more than 650,000 child care providers a year; offer technical assistance to providers in a diverse array of settings to improve the quality of care, including meeting the needs of special needs children; and in many states administer child care subsidies for eligible families.

Over the last several years, NACCRRA has conducted focus groups with parents of young children and surveys of parents, grandparents, State Child Care Administrators, and state and local CCR&Rs. Our findings have been published in national reports that describe the current status of the cost, quality and availability of child care in every state. In addition, NACCRRA has conducted numerous quality improvement projects with the Department of Defense to strengthen the quality of civilian child care for children from military families. NACCRRA's public policy goals are supported by the results of this work.

### **What we have learned about child care in the United States from our member agencies, reports, state surveys and national polling:**

**First, child care is expensive.** In 40 states and the District of Columbia, the average price for child care for an infant in a child care center exceeds the cost of a year's tuition at the state's four-year public college.

In addition to the need for care during nontraditional hours, the working poor may select unlicensed or license-exempt care because of the high cost of child care. Only one out of every six children eligible for a subsidy receives assistance. More than one-fifth (22 percent) of children receiving a subsidy are in license-exempt care.

**Second, there are no federal minimum protections for children, and as a result the quality of care varies by state.** Most state regulations do little to protect the health and safety of children in child care. All states have developed early learning guidelines, but they do not require licensed child care programs to incorporate them into programming. States are inconsistent in their approach to oversight. Nationwide, most family child care homes are license-exempt, meaning that there are no standards that apply to their operation and no state entity checks to make sure that children are safe or engaged in age-appropriate stimulating activities. Even for states with standards, little oversight occurs and there is little attention to monitoring. Half the states (25) do not conduct monitoring inspections at least once a year. For example, California only inspects child care centers once every five years. Michigan only inspects family child care homes once every 10 years.

It is difficult to know whether child care programs comply with state laws if inspections do not occur on a regular basis. Worse, 17 states either do not license small family child care homes or do not conduct an inspection prior to issuing a license. It is hard to believe in any other industry that a license would be issued without an inspection.

One of the easiest ways to ensure that children are safe is for states to conduct background checks on child care providers. Yet, half the states do not include a fingerprint check as part of their background check process. A name check only is too easy to manipulate (the use of an alias has enabled individuals in some states to obtain a license to provide child care where a fingerprint check would have revealed their criminal record). Nobody should receive federal funds to provide child care if they have a history of violent offenses.

**Third, many parents do not have a real choice: The income eligibility threshold for child care assistance is very low and the cost of care is high.** The Child Care and Development Block Grant (CCDBG), which allocates grants to states to fund child care subsidies and quality improvements and supports, has been essentially frozen since 2002. About 2.5 million children receive subsidies (through CCDBG, the Temporary Assistance for Needy Families [TANF] program, and the Social Services Block

Grant). However, according to the most recent data from the U.S. Department of Health and Human Services (FY 2007), the median income for families receiving assistance was about \$16,680 per year. Nearly half of the families receiving child care assistance had incomes below poverty (\$17,170 for a family of three in 2007). About 13 percent of families had incomes above 150 percent of poverty (about \$25,700 in 2007 for a family of three).

**Fourth, many middle-income families, not just poor families, struggle with the cost of child care.** Most affected are families who earn too much to qualify for a subsidy, but who cannot afford the market rate. In addition, in many states, parents who receive a modest pay increase find that they no longer qualify for child care assistance, which results in a “cliff effect,” where they are worse off despite their raise and cannot afford market rate care.

The cost of care for infants and toddlers, as well as for children with special needs, is often the most expensive care. And, surveys repeatedly show that there is a shortage of this type of care in most communities.

**Fifth, the training of the child care workforce is weak, uneven, and at best can be described as a scattershot approach where few providers have the training they need.** Child Care Resource and Referral agencies play a major role in training the child care workforce, but fall short of a systematic approach because of the varying requirements throughout the states and modest resources to address training needs. Most states require very little as far as the minimum education level required for staff working in child care centers. For example, 16 states do not require child care providers to have a high school degree. In addition, another 16 states require only a high school degree for staff. Relatively low levels of education make training even more important. Yet, only 13 states require training in child development before providers work with children.

To ensure access to quality, affordable child care, NACCRRA recommends a comprehensive Public Policy Agenda.

## Child Care in America Today

More than 11 million children under age 5 spend a portion of their week in the care of someone other than their mother - on average, about 35 hours per week. About one-quarter of these children are in multiple child care arrangements strung together by their parents to meet the hours required by their jobs. The quality of much of this care varies greatly and many working families struggle with the costs. In a weakened economy, the stress placed on families makes quality child care settings even more important to the healthy development of children.

When family budgets are strained, child care may be one of the first sacrifices made. As parents lose employment or as their hours or pay are reduced, there is little flexibility with regard to household expenses. "Fixed" bills, like rent or mortgage payments, food, and transportation costs compete with child care, and parents may feel forced to make due with whatever arrangement they can find (hoping it is safe, hoping it meets health and safety standards, and hoping the arrangement is temporary until times are better).

According to NACCRRRA's most recent annual child care cost data, the average cost of center-based care for an infant ranges from \$4,550 per year in Mississippi to more than \$18,750 in Massachusetts. The average annual cost for center-based care for a 4-year-old ranges from \$4,050 in Mississippi to \$13,150 in Massachusetts. The cost of care in family child care homes is somewhat less, but still expensive - ranging from \$3,550 per year in South Carolina to more than \$11,900 in Massachusetts for infants and \$3,750 per year in Mississippi to \$11,450 in Massachusetts for a 4-year-old.

To better understand parents' views and experiences in the current economy with regard to child care, as well as the types of changes parents support to improve the quality and availability of affordable child care, in June 2010, NACCRRRA commissioned Lake Research Partners to conduct a nationwide telephone survey of 1,000 parents with children under age 12.



### **Our polling found that quality and affordability were the two biggest concerns for parents.**

While quality was the top concern, about three-quarters of parents (76 percent) rated affordable child care as the most or one of the most important factors in helping working families.

### **Most parents' perceptions about child care standards far exceed government policies.**

- ▶ 85 percent of parents thought all providers had to have a background check.
- ▶ 88 percent thought child care providers offered learning opportunities to children.
- ▶ 78 percent of parents thought child care programs had to be licensed.
- ▶ 74 percent of parents thought child care providers received ongoing training.
- ▶ 73 percent of parents thought all providers are trained in child development before working with children.
- ▶ 67 percent of parents thought that government regularly inspected all child care programs.

### **Unfortunately, the reality is far different from the perception of parents.**

- ▶ Only 10 states require a comprehensive background check including a fingerprint check against state and federal records, a check of the state child abuse registry and the sex offender registry, before allowing adults to be licensed to provide child care.
- ▶ 20 states, including the District of Columbia, conduct inspections of licensed child care centers once a year or less frequently. Montana requires inspections of family child care homes once every five years, and Michigan only requires an inspection once every 10 years. Eight states do not conduct an inspection or on-site visit of family child care homes prior to issuing a license.
- ▶ Only 12 states license most child care centers and all family child care homes. Louisiana and New Jersey only regulate centers.
- ▶ Relatively low levels of education make initial and orientation training very important. Yet state training standards are very weak. In 17 states, providers in small family child care homes do not need any initial training to care for children.
- ▶ Only 21 states and the District of Columbia require all six developmental areas (physical, social, emotional, language, cognitive and intellectual, and cultural) be addressed in child care center program activities. Alabama, California and Idaho do not require that any developmental domains be addressed.
- ▶ There are no federal requirements to ensure that child care centers or family child care homes offer care that meets even minimal standards to protect the health and safety of children.

### **Parents nearly unanimously support common sense improvements to strengthen the quality of child care.**

- ▶ 94 percent of parents supported requiring child care providers to have basic training in health and safety practices and child development before working with children.
- ▶ 94 percent of parents supported requiring states to have quality standards in place for all child care programs to ensure the health and safety of children.
- ▶ 92 percent of parents supported requiring child care providers to have a background check, including fingerprints.

- ▶ 89 percent of parents supported requiring inspections of child care programs at least once a year.

### **Grandparents agree**

NACCRRA recognizes the important role that grandparents play in the lives of their grandchildren. In 2008, NACCRRA surveyed grandparents (with at least one grandchild under age 18) and found that more than 90 percent supported requiring training for providers, regular inspections of child care programs, setting basic standards of quality, and improving health and safety standards in child care. The policies that NACCRRA proposes differentiate between relatives caring for related children and providers paid to care for unrelated children on a regular basis. While NACCRRA supports efforts to improve all forms of child care, our policy recommendations pertain to child care provided to unrelated children on a regular basis for a fee.

NACCRRA believes to give children what they need to succeed, child care settings must not only provide safe and healthy environments, but also must support learning and development. Parents need a range of quality choices. We need a system that develops and supports all child care settings and offers parents affordable choices.

### **NACCRRA supports policies that:**

- ▶ Ensure minimum quality standards for all child care settings.
- ▶ Require the appropriate oversight of child care providers, to protect children's safety, health and development.
- ▶ Ensure adequate initial screening and training of adults caring for children.
- ▶ Provide services that are comprehensive in scope, support diverse child care arrangements, and involve every aspect of a child's development.
- ▶ Provide the incentives and resources necessary to achieve higher levels of quality and an early learning component.
- ▶ Ensure quality after-school programs for school-age children in all communities.
- ▶ Ensure programs meet the diverse needs of working families.
- ▶ Ensure comprehensive birth to age 5 programs for all children who need them.

# The Child Care and Development Block Grant (CCDBG)

The Child Care and Development Block Grant (CCDBG) is the primary federal grant program that provides child care assistance for families and funds child care quality initiatives. CCDBG is administered to states in formula block grants. States use the grants to subsidize child care for working families earning low incomes. Most of this assistance is administered through vouchers or certificates, which can be used by parents for the provider or program of their choice. In addition, the law requires no less than 4 percent of CCDBG funding in each state to be used for activities to improve the overall quality of child care for all children within a community. CCDBG also funds Child Care Resource and Referral services and quality projects for infants and toddlers.

NACCRRA recommends that Congress conduct hearings on the condition of child care in the United States, paying special attention to the lessons learned from the military child care program. Twenty years ago, Department of Defense (DoD) child care was not accountable, quality was poor, and the safety of children was compromised. Congress passed the Military Child Care Act in 1989 to ensure that funds would be spent in an accountable manner, that care would be of quality, and that child care would be provided in an affordable manner for families. NACCRRA calls on Congress to use the lessons of the military to reauthorize and strengthen CCDBG so that civilian families have access to affordable, quality child care in all communities. Congress should also ensure that funding is sufficient so that eligible children are able to receive assistance.

## **NACCRRA recommends that:**

### **Congress:**

- ▶ Reauthorize CCDBG in the 112th Congress and appropriate sufficient funding to ensure that eligible children are able to receive assistance, and that states can meet quality improvement goals.
- ▶ Conduct hearings that focus on the safety, quality and affordability of child care.
- ▶ Establish quality child care as a goal for any use of related federal funding (i.e., funds used for child care through CCDBG, the Temporary Assistance for Needy Families [TANF] program, and the Social Services Block Grant [SSBG]).
- ▶ Set clear expectations about what quality means and establish a floor for what is minimally acceptable.
- ▶ Require states to conduct comprehensive background checks on all paid child care providers who regularly care for unrelated children.
- ▶ Require all paid child care providers who care for unrelated children on a regular basis to complete 40 hours of initial training (primarily CPR and other basic safety and health training in addition to child development) as well as 24 hours of annual training.
- ▶ Require quarterly unannounced inspections of licensed providers (the same standard Congress required of the military child care system).
- ▶ Require CCDBG quality funds to be linked to measurable program outcomes, especially training and preparation of the workforce.
- ▶ Require federal minimum health and safety protections for children for receipt of federal subsidies.
- ▶ Require states to provide an evidence-based rationale for any child care that is exempt from licensing and to post such information on the Internet.
- ▶ Require states to share information with Child Care Resource and Referral agencies about license revocations and suspensions and other information that will help parents select safe, quality child care for their children.
- ▶ Require states to include child care in disaster planning, response, and recovery efforts.

- ▶ Require states to not only conduct current market rate studies, but use the studies in setting subsidy levels to ensure that families can access no less than 75 percent of providers in the community; and, provide higher subsidy rates for nontraditional hour care, care for infants and toddlers, and care in underserved communities (rural or urban).
- ▶ Require states to create or strengthen Quality Rating and Improvement Systems (QRIS) to tier provider payment rates based on quality indicators and to ensure that low income children are in quality care.
- ▶ Permanently authorize the set-aside for infant-toddler care, school-age care, Child Care Resource and Referral services, and Child Care Aware®, and increase funding for these programs.
- ▶ Increase the federal quality set-aside immediately to 12 percent of the basic block grant, moving toward 25 percent over time, bringing child care on a parity with Head Start.
- ▶ Include a specific set-aside for licensing-related activities to promote the safety and healthy development of children.
- ▶ Authorize funds for pilots in rural communities in areas of high poverty to enable braiding of early childhood funding to better meet the child care needs of parents with children (meeting the criteria of the strongest funding stream to ensure safe, quality care for children).
- ▶ Require the Department of Health and Human Services, in conjunction with the National Academy of Sciences, to determine the cost of quality child care by setting and report back to Congress.

#### **U.S. Department of Health and Human Services:**

- ▶ Permanently authorize a Department of Early Care and Learning within HHS, which encompasses the Office of Child Care and the Office of Head Start, providing sufficient administrative funding to ensure adequate oversight and technical assistance to the States.
- ▶ Authorize the Office of Child Care to impose penalties when state plans fail to meet minimum protections for children, including poor state monitoring practices.
- ▶ Establish definitions and specific qualifications for child care paid for by federal funding, and

- ▶ Support state efforts to create an infrastructure through which quality improvement projects can be systematically supported.

#### **States:**

- ▶ Require all paid child care providers who regularly care for unrelated children (as a business) to obtain a state license.
- ▶ Require child care paid for with federal funds to meet minimum health and safety protections for children.
- ▶ Require transparency in licensing and ensure parents have access to information about licensing and violations (i.e., require states to post inspection reports and substantiated complaints on the Internet).
- ▶ Require that the input of parents be sought as states make child care public policy decisions (through public forums, the Internet or other means).
- ▶ Require comprehensive background checks, including federal and state fingerprint checks, on all paid adult child care providers who regularly care for unrelated children.
- ▶ Require all paid child care providers who care for unrelated children on a regular basis to complete 40 hours of initial training (primarily CPR and other basic safety and health training in addition to child development) as well as 24 hours of annual training.
- ▶ Require quarterly unannounced inspections of licensed providers (the same standard Congress required of the military child care system).
- ▶ Require states to have more effective sliding fee assistance phase-out plans to ensure parents who receive a modest raise do not lose all child care assistance.
- ▶ Raise provider payment rates or reimbursement rates to at least the current 75th percentile of market providers and allow families to receive assistance for 12 months without recertification similar to Head Start eligibility.
- ▶ Require states to apply early learning standards (for children from birth through age 5) to all types of early care and education settings including child care.

## Accountability for CCDBG Funds

Approximately \$10 billion in government money is spent on child care every year throughout the United States – but, with little oversight and even less accountability.

### Accountability for Federal Funds

Of the 1.6 million children whose families receive a subsidy each month to help pay for child care through the Child Care and Development Block Grant (CCDBG), about one-quarter of them are in license-exempt care, (*care that is legally operating but not subject to state licensing standards or regulation*).<sup>1</sup>

An additional 803,000 children each month receive federal subsidies for child care through the Temporary Assistance for Needy Families (TANF) program and the Social Services Block Grant (SSBG),<sup>2</sup> but in the absence of reporting requirements in the law, nothing is known about the type of child care their subsidies are being used for nor the quality of that care.

The other three-quarters of children are in licensed care. But, what we have learned from NACCRRA's state by state studies of state policies for child care centers and family child care homes is that children are, for the most part, left to chance. Half the states do not conduct comprehensive background checks of child care providers to ensure children are not cared for by convicted felons with a violent record. Most states have little if any training requirements. And, monitoring or inspections, particularly of family child care homes, are rare, not routine.

Given the cost of child care today and the great need to make care more affordable for working families, it makes

no sense to have so little accountability. Only one out of every six eligible children receives a child care subsidy. Waiting lists for assistance in 17 states range from thousands of children to nearly 200,000 in California<sup>3</sup>. And, waiting lists are only part of the picture since some states do not authorize the use of them so the absence of a waiting list does not mean that demand and supply are in sync.

It is time for accountability to be strengthened. Beyond important protections for children to ensure that they are in an environment that is safe and promotes their healthy development, there also have been some recent reports of fraud.

**Incidences of Fraud:** In 2010, the Government Accountability Office (GAO) released a report that looked at some incidences of fraud and abuse occurring within CCDBG. The report found at least five states lacking effective controls to verify whether or not providers who were paid with government money had a history of violent convictions.

In addition, GAO found that states lacked effective controls in the child care application and billing process for families applying for grant assistance. Using fake documents, GAO staff invented families and found there was little or no effort by states to verify whether the children existed, whether the employers existed, or whether the employees worked the hours they claimed.<sup>4</sup>

<sup>1</sup> U.S. Department of Health and Human Services, Office of Child Care. (2010). *2009 CCDF data tables (preliminary estimates)*. Retrieved February 23, 2011, from [http://www.acf.hhs.gov/programs/ccb/data/ccdf\\_data/O9acf800\\_preliminary/list.htm](http://www.acf.hhs.gov/programs/ccb/data/ccdf_data/O9acf800_preliminary/list.htm)

<sup>2</sup> U.S. Department of Health and Human Services, Child Care Bureau. (2006). *Child Care and Development Fund (CCDF) Report to Congress for FY 2006 and FY 2007*. Retrieved February 23, 2011, from [http://www.acf.hhs.gov/programs/occ/ccdf/rtc/rtc2006/rtc\\_2006\\_2007.pdf](http://www.acf.hhs.gov/programs/occ/ccdf/rtc/rtc2006/rtc_2006_2007.pdf)

<sup>3</sup> National Women's Law Center. (2010). *State child care assistance policies 2010: New federal funds help states weather the storm*. Retrieved February 21, 2011, from <http://www.nwlc.org/sites/default/files/pdfs/statechildcareassistancepoliciesreport2010.pdf>

<sup>4</sup> U.S. Government Accountability Office. (2010). GAO-10-1062. *Child Care and Development Fund: Undercover tests show five state programs are vulnerable to fraud and abuse*. Retrieved February 23, 2011, from <http://www.gao.gov/new.items/d101062.pdf>

In 2009, a series in the *Milwaukee Journal Sentinel* exposed the fact that in Wisconsin about \$20 million in child care funds were spent in a fraudulent manner.<sup>5</sup>

**Children Left to Chance:** Under current CCDBG law, states are only required to have in place minimum health and safety standards for child care, but that is left entirely at state discretion. States are free to only require providers to complete a self-checklist in many cases. Lack of protection for children and insufficient oversight by states has led to a wide array of safety standards among the states and little monitoring to check compliance. **In eight states, a license is issued to family child care homes without an inspection or on-site visit first.**

CCDBG data shows that in 24 states, at least one-fifth of the children receiving federal subsidies are in license-exempt care.

- ▶ In two states (Hawaii and Michigan), almost two-thirds of the children whose care is paid for through CCDBG are in license-exempt care.
- ▶ In eight states (Connecticut, Hawaii, Illinois, Michigan, Missouri, New York, Oregon and Utah), more than 40 percent of children receiving a subsidy are in license-exempt care.
- ▶ Nationally, 22 percent of children assisted with CCDBG funding are in settings exempt from licensing.<sup>6</sup>

**The time for change is now.** Federal and state child care funds should be spent to ensure that children are safe and to promote healthy development. As shown in the GAO report, more needs to be done to strengthen effective controls and to ensure thorough background checks that children are safe.

Given the billions of dollars spent on child care and the number of hours each week that children under age 5 of working mothers spend in child care, NACCRRA proposes that federal funds be restricted to safe child care that promotes the healthy development of children and that the U.S. Department of Health & Human Services (HHS) should define what this child care means.

### **NACCRRA recommends that Congress protect children by:**

- ▶ Requiring that all paid child care providers who regularly care for unrelated children (as a business) have a comprehensive background check, including federal and state criminal record checks using fingerprints.
- ▶ Requiring that basic health and safety requirements be established and enforced.
- ▶ Requiring child care providers to have training in child development and health and safety practices.
- ▶ Requiring regular unannounced inspections of child care settings to ensure compliance with state laws (as Congress required of the military child care system).
- ▶ Requiring states to share information with Child Care Resource and Referral agencies about license revocations and suspensions and other information that will help parents select safe, quality child care for their children.
- ▶ Creating a Department of Early Care and Learning within HHS, which encompasses the Office of Child Care and the Office of Head Start, and providing sufficient administrative funding to ensure adequate oversight and technical assistance to states.
- ▶ Authorizing the Office of Child Care to impose penalties when state plans fail to meet minimum protections for children, including poor state monitoring practices.
- ▶ Requiring that parents be actively involved and have access to information about licensing and oversight.

Accountability for how child care funds are spent is both a state and a federal responsibility. The reauthorization of CCDBG presents Congress with an opportunity to ensure that child care funds are part of the Administration's call for "a new era of responsibility." Safety, school readiness, and accountability should be the pillars on which CCDBG reauthorization is built.

<sup>5</sup> Rutledge, R. (2009, August 31). Private fortune, Public cash, *Milwaukee Journal Sentinel*, Retrieved December 1, 2010, from <http://www.jsonline.com/watchdog/watchdogreports/56121342.html>; Rutledge, R. (2009, August 31). Government blind to child care fraud, *Milwaukee Journal Sentinel*, Retrieved December 1, 2010, from <http://www.jsonline.com/watchdog/watchdogreports/56276582.html>.

<sup>6</sup> U.S. Department of Health and Human Services. Administration for Children and Youth. Office of Child Care. (2009, October). *FFY 2008 CCDF Data Tables (Preliminary Estimates) Table 4: Child Care and Development Fund; Preliminary estimates: Average monthly percentages of children served in regulated settings vs. Settings legally operating without regulation (FFY 2008)*. Retrieved December 1, 2010 from [http://www.acf.hhs.gov/programs/ccbf/data/ccdf\\_data/08acf800\\_preliminary/table4.htm](http://www.acf.hhs.gov/programs/ccbf/data/ccdf_data/08acf800_preliminary/table4.htm)

## Background Checks to Protect Children

Chief among safety standards is that children are safe in the care of child care providers. **Parents expect their children to be safe in child care.** Parents need to know that their child care providers and others who come into contact with children including volunteers:

- ▶ Do not have a record of violent offenses.
- ▶ Do not have a substantiated case of child abuse or neglect.
- ▶ Are not sex offenders.
- ▶ Have not engaged in other behaviors which mean that they should not be in the business of caring for children.

**A full background check is key to providing this protection.** It includes:

- ▶ Using fingerprints for checks of FBI criminal history records.
- ▶ Using fingerprints for state checks of criminal history records.
- ▶ Checking the child abuse registry.
- ▶ Checking the sex offender registry.

State requirements on background checks vary widely. Only five states (Alaska, Illinois, Michigan, South Carolina and Tennessee) require comprehensive background checks for all types of licensed child care.

The reality is that many states do not require fingerprints to check state and federal records. Given the transitory nature of the child care field, it is important that fingerprints are used to conduct checks of criminal records. A simple background check using a name search is not as effective as a background check using a fingerprint match. Individuals can have very common names or use aliases. It is NACCRRRA's position that background checks are of limited value unless they are based on fingerprints. **A name check can be manipulated, a fingerprint check cannot.**



The reality about background checks in child care centers is:

- ▶ Only 30 states (including the District of Columbia) use fingerprints to conduct a FBI criminal records check.
- ▶ Only 28 states use fingerprints to conduct a state criminal records check.
- ▶ **Only 10 states require centers to conduct a full background check** by using a fingerprint to check state and federal criminal records, checking the child abuse and neglect registry and checking the sex offender registry.

**Forty-two states license small family child care homes where care is provided to six or fewer children. The reality about background checks in small family child care homes is:**

- ▶ 22 states use fingerprints to conduct a FBI criminal records check.
- ▶ 24 states use fingerprints to conduct a state criminal records check.
- ▶ Only eight states conduct a full background check for small family child care homes.

**Nine states do not start licensing family child care homes until there are seven or more children in the home. In those states, there are no background check requirements for providers in small, unlicensed family child care homes. Children in these homes are in situations where their safety is unknown.**

**Forty-two states have specific requirements for large family child care homes. The reality about background checks in large family child care homes is:**

- ▶ 27 states use fingerprints to conduct a FBI criminal records check.
- ▶ 27 states use fingerprints to conduct a state criminal records check.
- ▶ **Only 10 states conduct a full background check.**

The Crime Control Act of 1990<sup>1</sup> requires a background check for federal government employees who work in federal child care programs. The law requires that the checks be based on fingerprints and that the checks are conducted through the Federal Bureau of Investigation (FBI) and each state's criminal history records for which an employee lists current or former residence. Federal agencies may deny employment to any individual convicted of "a sex crime, an offense involving a child victim, or a drug felony." The Department of Defense expanded these requirements to include family child care providers, their assistants and substitutes and their family members age 12 and older.

The Child Care and Development Block Grant (CCDBG) under current law contains no background check requirement.

A recent study of the Federal Child Safety Pilot Program<sup>2</sup> found that requiring fingerprints is both reasonably priced and worth the effort:

- ▶ Fingerprint checks can be completed in less than a week and can be completed at a nominal fee (\$18 - \$24).
- ▶ Of the more than 30,000 background checks conducted, about 6.4 percent of volunteers (who sought to work with children) were found to have criminal records.
- ▶ More than 25 percent of the individuals with criminal records had committed an offense in a state other than the state in which they were applying to volunteer.

### **Parents support fingerprint checks.**

NACCRRRA's 2010 parent poll<sup>3</sup> shows that more than nine in 10 parents (92 percent) favor proposals that would require states to conduct a background check using fingerprints on every paid child care provider caring for unrelated children on a regular basis.

### **NACCRRRA recommends that Congress protect children by:**

- ▶ Reauthorizing CCDBG to require comprehensive background checks, including fingerprint checks for all child care providers caring for unrelated children and for all providers receiving federal subsidies.
- ▶ Prohibiting the use of CCDBG or TANF funds to pay convicted felons to provide child care.
- ▶ Requiring all paid providers (caring for unrelated children on a regular basis) to have a state license or permit.

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<sup>1</sup>101st Congress. (1990). S.3266 *Crime Control Act of 1990*. Subtitle E-Child care worker employee background checks. Retrieved December 1, 2010, from <http://thomas.loc.gov/cgi-bin/query/F?c101:./temp/~c101UdycZl:e63066>

<sup>2</sup> Federal Bureau of Investigation, CJIS Division. (2003). *PROTECT Act pilot program* [PowerPoint]. Retrieved December 1, 2010, from [www.search.org/files/ppt/01-04Nash.ppt](http://www.search.org/files/ppt/01-04Nash.ppt)

<sup>3</sup> NACCRRRA. (2010). *The economy's impact on parents' choices and perceptions about child care*. Retrieved December 1, 2010, <http://www.naccrra.org/publications/naccrra-publications/publications/9890928-Parent-Poll-Report-FINALNov5-2010.pdf>

## Inspections to Promote Child Safety & Learning

Inspections ensure that those providing a public good are meeting minimum standards. Without inspections, we cannot know whether the service or product is really safe.

Most major services today have regular inspections:

- ▶ Dog groomers are inspected.
- ▶ Beauty salons are inspected.
- ▶ Restaurants are inspected.

### Children deserve the same level of protection.

NACCRRRA believes that all child care programs that regularly care for unrelated children for pay (as a business) should be licensed and should be inspected at least quarterly.

### Regular inspections are a means of ensuring that children are cared for in settings that meet minimum health and safety requirements.

- ▶ Programs that are inspected more frequently are more likely to adhere to required regulations.<sup>1</sup>
- ▶ Frequent, unannounced inspections prevent providers from covering up violations, especially when there is a history of violations and/or sanctions or complaints.
- ▶ Inspecting child care settings is associated with lower rates of accidents requiring medical attention.<sup>2</sup>
- ▶ On-site guidance during inspections helps providers improve the level of care they offer.
- ▶ There is increased accountability for how federal and state funds are spent.

**Current inspection practices could be putting children in jeopardy.** Recent NACCRRRA research about licensing requirements for child care centers and family child care homes found:<sup>3</sup>

- ▶ Only eight states conduct monitoring inspections at least quarterly for centers (Florida, New Mexico, North Carolina, Oklahoma, Oregon, Tennessee, Virginia and Wyoming).
- ▶ 20 states (including the District of Columbia) conduct inspections of centers once a year or less frequently.
- ▶ California inspects child care centers once every five years.
- ▶ Iowa requires inspections of family child care homes once every five years.
- ▶ Michigan requires inspections of family child care homes once every 10 years.
- ▶ Eight states issue a license to family child care homes without conducting an initial inspection (Georgia, Kansas, Michigan, Montana, Pennsylvania, South Carolina, Texas and West Virginia).
- ▶ **17 states either do not license small family child care homes (providers who care for six or fewer children) or do not conduct an inspection prior to issuing a license.**

Exactly what triggers licensing and therefore inspections is important. When a state allows a family child care provider to care for a large number of children without being required to be licensed, most children **in family child care homes** in that state are in a setting that will never be inspected.

<sup>1</sup> Gormley, Jr., W.T. (1995). *Everybody's children: Child care as a public program*. Washington, D.C.: Brookings Institution.

<sup>2</sup> Fiene, R. (2002). *13 indicators of quality child care: Research update*. Retrieved December 1, 2010, from the Office of Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services, at <http://aspe.hhs.gov/hsp/ccquality-ind02/>

<sup>3</sup> NACCRRRA. (2011). *We can do better: NACCRRRA's ranking of state child care center regulations and oversight: 2011 update*. Retrieved from <http://www.naccrra.org/publications>

<sup>4</sup> NACCRRRA (2010). *Leaving children to chance: NACCRRRA's ranking of state standards and oversight of small family child care homes: 2010 update*. Retrieved December 1, 2010, from <http://www.naccrra.org/publications/naccrra-publications/leaving-children-to-chance-2010.php>

- ▶ Three states do not license family child care homes; therefore, there are no inspections of homes. In Iowa and Louisiana, all programs with seven or more children are considered centers; in New Jersey programs with six or more children are considered centers.
- ▶ South Dakota does not license family child care homes until 13 children are in the home. At that point, there is one inspection per year.
- ▶ Idaho, Iowa, Louisiana, Mississippi, Ohio and South Carolina require licensing at seven children.
- ▶ Indiana, New Jersey and Virginia require licensing at six children.

**Reports of routine inspections and complaint inspections should be available to parents on the Internet.** Only 26 states post reports on both regular monitoring and inspections due to complaints on the Internet. In addition, Maryland posts information about routine inspections and Oregon posts information about inspections from complaints.<sup>5</sup> Posting information on the Internet will provide parents with information to make better informed decisions. Parents should also be encouraged to check with their Child Care Resource and Referral agency for additional information in selecting child care.

**There is strong support among parents for requiring inspections of child care programs.** According to a 2010 nationwide poll conducted by NACCRRA, most parents' perceptions about child care licensing standards far exceed the reality of government policies.<sup>6</sup> NACCRRA's polling of parents found:

- ▶ 67 percent of parents believe the government regularly inspects all child care programs.
- ▶ 88 percent favor requiring states to inspect all child care programs at least once a year, including those operated from people's homes who are paid to provide care for unrelated children.

- ▶ 89 percent favor a proposal that includes requiring child care providers' place of business to be licensed and inspected regularly for health and safety. This proposal would not apply to those people who provide care to their relatives.

**NACCRRA recommends that Congress PROTECT CHILDREN by:**

- ▶ Requiring a set-aside within the Child Care and Development Block Grant (CCDBG) for licensing related activities.
- ▶ Requiring states to demonstrate how they will measure child care provider compliance with state standards, laws, and policies.
- ▶ Requiring all child care programs to undergo quarterly unannounced inspections (similar to the nation's military child care system);
- ▶ Requiring states to set reasonable caseloads per inspector.
- ▶ Requiring states to post inspection findings and complaints on the Internet where parents can easily access the information to be better informed about child care options.
- ▶ Requiring states to share information with Child Care Resource and Referral agencies about license revocations and suspensions and other information that will help parents select safe, quality child care for their children.
- ▶ Strengthening Congressional oversight with regard to how states are meeting health and safety requirements.
- ▶ Requiring child care centers and family child care homes that have a license or permit to be smoke-free and to have an emergency disaster preparedness plan.
- ▶ Granting the U.S Department of Health and Human Services (HHS) the authority to withhold funds from states without adequate oversight and,
- ▶ Providing discretionary funds to the HHS Office of Child Care to provide better oversight of state implementation of CCDBG.

<sup>5</sup> NACCRRA. (2011).

<sup>6</sup> NACCRRA. (2010). *The economy's impact on parents' choices and perceptions about child care*. Retrieved December 1, 2010, from <http://www.naccrra.org/publications/naccrra-publications/publications/9890928-Parent-Poll-Report-FINALNov5-2010.pdf>

## Training for a Quality Workforce

Every week, about 2.3 million individuals earn a living caring for and educating children younger than age 5 in the United States. About 1.2 million are providing care in licensed settings, such as child care centers and family child care homes. The remaining 1.1 million caregivers are paid relatives, friends or neighbors<sup>1</sup>.

**Child care providers have an enormous impact on children's development.** Research shows that better trained providers lead to higher quality care and more positive outcomes for children. A provider's skill level helps determine whether children in care are safe and have the early learning experiences they need to succeed in school. Children in the care of inadequately prepared providers spend more of their day in aimless activity and show delays in language and social development. Yet most child care providers lack the training and education needed to provide a quality environment.

**Training is important.** Initial training helps ensure providers have a base of knowledge about how children develop before beginning to work with children. It also acquaints them with basic health and safety skills such as first aid and CPR, practices related to sleep position of infants, information about the danger of shaking babies and the prevention of other hazards such as children swallowing small objects and drowning in small amounts of water.

Annual training supports initial learning and helps providers improve their skills, deepen their understanding about how children learn, and stay up-to-date in changes in health and safety practices. Annual training can also reduce the isolation of family child care providers.

Unfortunately, training requirements vary by state and few states require adequate initial training or ongoing training. **The Child Care and Development Block Grant (CCDBG) requires no minimum training for child care providers.** As a result, only 13 states require child care providers in centers to have initial training in early childhood education prior to working with children. Fewer states have such requirements for providers in family child care homes.



- ▶ The number of required annual training hours for caregivers in most states is very low and insufficient to ensure they have the knowledge and skills needed to care for young children. Twenty-three states require fewer than 15 hours of annual training.
- ▶ More than one-fifth of states do not even require staff to be trained on fire safety and other health and safety skills.<sup>2</sup>

According to a 2010 nationwide poll conducted by NACCRRRA, most parents' perceptions about child care licensing standards far exceed the reality of government policies. For example, the majority of parents believe child care providers are required to have training in CPR or first aid, basic health and safety practices and in child development.<sup>3</sup> NACCRRRA's parent polling found:

- ▶ 94 percent of parents support requiring paid child care providers caring for unrelated children on a regular basis to have basic training in health and safety practices and child development before working with children.

<sup>1</sup> NACCRRRA. (2010). *Child care in America: 2010 state fact sheets*. Retrieved December 1, 2010, from <http://www.naccrra.org/publications/naccrra-publications/2010-state-by-state-facts.php>

<sup>2</sup> NACCRRRA. (2011). *We can do better: NACCRRRA's ranking of state child care center regulations and oversight: 2011 Update*. Retrieved from <http://www.naccrra.org/publications/>

- ▶ 88 percent of parents support an annual training requirement for providers.

**Child Care Resource and Referral agencies (CCR&Rs) play a major role in training the child care workforce.**

Between local CCR&R agencies and State CCR&R Networks, more than 650,000 child care providers (in both child care centers and family child care homes) receive training every year. Individual workshops typically last about three hours, while planned series or sequences generally consist of seven classes or workshops for a total of nearly 24 hours. About 7 percent of providers receiving training from CCR&Rs are relatives who have sought out workshops to strengthen their caregiving efforts.

**NACCRRRA supports policies that:**

Ensure child care providers have access to a continuum of professional development opportunities, beginning with quality community-based training programs that are linked to career ladders and tied to higher education.

Give incentives for child care providers to improve the quality of care and education they provide.

**NACCRRRA recommends that Congress:**

- ▶ Reauthorize CCDBG in the 112th Congress and create a quality community-based training system for child care run by the CCR&R Network in every state.
- ▶ Require all paid child care providers (caring for unrelated children on a regular basis) to have a minimum of 40 hours of training in child development and behavior guidance, learning activities, first aid/CPR, recognizing child abuse, and basic health and safety practices prior to working with children.
- ▶ Require all paid child care providers (caring for unrelated children on a regular basis) to attend at least 24 hours of ongoing training annually.
- ▶ Expand minimum training requirements for directors of child care programs that result in a credential for directors and administrators of early care and education programs.
- ▶ Create and expand more online training opportunities, training to better address children with special needs, and training in languages other than English (where a community needs assessment shows that many providers have limited English proficiency).

## Affordable Child Care for Families

Improving access to affordable, quality child care is one of NACCRRRA's top goals. Although child care is a necessity to enable parents to work, the high price of child care in every community strains household budgets and forces parents to make compromises about the quality and safety of care they choose for their children.

Every year, NACCRRRA reports on child care prices based on surveys to Child Care Resource and Referral (CCR&R) State Networks, who collect price data from local CCR&Rs in their states.<sup>1</sup> The 2010 report once again found:

### Child care costs are high.

- ▶ The average cost of full-time child care for an infant in a center in 2009 ranged from more than \$4,550 in Mississippi to more than \$18,750 in Massachusetts.
- ▶ The average cost of full-time care for a 4-year-old child in a center ranged from more than \$4,050 in Mississippi to more than \$13,150 a year in Massachusetts.
- ▶ The average cost for care for a school-age child for part-time care in a center ranged from more than \$2,150 in Mississippi to more than \$10,000 in New York.
- ▶ The average annual cost for full-time care in a family child care home for an infant ranged from more than \$3,550 in South Carolina to more than \$11,900 in Massachusetts.
- ▶ The average annual cost for full-time care in a family child care home for a 4-year-old child ranged from more than \$3,750 in Mississippi to more than \$11,450 in Massachusetts.
- ▶ The average annual cost for part-time care in a family child care home for a school-age child ranged from more than \$1,800 in Mississippi to more than \$9,400 in New York.



### Child care costs are rising.

- ▶ Since 2000, the cost of child care has increased twice as fast as the median income of families with children.
- ▶ The average increase among all states in the cost of care for a 4-year-old in a center exceeded the rate of inflation.

### Child care costs are high compared to family income.

- ▶ In 36 states, the average annual cost of center-based infant care exceeded 10 percent of the state's median income for a two-parent family.
- ▶ In New York, the average annual cost of center-based care for a school-age child exceeded 12 percent of state median income - for part-time care.

### Child care costs are high compared to household expenses.

- ▶ In every U.S. region, the average center-based child care fee for an infant exceeded the average annual amount that families spent on food.
- ▶ Center-based child care fees for an infant exceeded annual rent payments in 24 states.

<sup>1</sup> NACCRRRA. (2010). *Parents and the high cost of child care: 2010 update*. Retrieved December 1, 2010, from <http://www.naccrra.org/publications/naccrra-publications/publications/9890928-Parent-Poll-Report-FINALNov5-2010.pdf>

- ▶ Center-based child care fees for two children (an infant and a 4-year-old) exceeded annual rent and mortgage payments in 18 states.

### **Child care costs are high compared to college costs**

- ▶ In 40 states, the average annual cost for center-based care for an infant was higher than a year's tuition and related fees at a four-year public college.

The Child Care and Development Block Grant (CCDBG) allocates funds to states to be used for child care for families with low incomes. However, funding has been essentially frozen since 2002. In 2009, about 2.5 million children received federal subsidies through CCDBG, the Temporary Assistance for Needy Families program, and the Social Services Block Grant.<sup>2</sup> According to 2007 data from the U.S. Department of Health and Human Services (HHS), the median income for families receiving assistance was about \$16,680 per year. Nearly half of the families receiving child care assistance had income below the poverty level (\$17,170 for a family of 3 in 2007).<sup>3</sup>

The current landscape shows that income eligibility is low and the cost of care is high. In 2010, 19 states had waiting lists for child care assistance.<sup>4</sup> Waiting lists are only a partial picture, however, because some states simply do not authorize keeping waiting lists. If a state does not have a waiting list, it does not mean that they do not have families who are eligible for and want assistance. In addition, some families decide against joining a waiting list once they hear how many families are on it.

Families with incomes between \$25,000 and \$50,000 have a particularly difficult time. They generally are not eligible for subsidies and cannot afford the market rate in their community. This is the group of families most likely to use informal, unlicensed arrangements that may or may not be safe or reliable. They have few choices. They need to work. These are the families also least likely to be enrolled in preschool of any type, and who may be at risk of starting school behind their peers.

### **NACCRRRA recommends that Congress:**

- ▶ Increase federal investments in child care fee assistance for eligible children and quality improvement efforts.
- ▶ Provide resources for planning and developing child care capacity to increase the availability of quality child care options for working families.
- ▶ Reduce barriers in the subsidy administration process that prevent families from accessing assistance.
- ▶ Require states to have more effective sliding fee assistance phase-out plans to ensure that parents who receive a modest raise do not lose all child care assistance.
- ▶ Provide child care assistance to families who do not qualify for CCDBG but who cannot afford the market cost of child care in their community.
- ▶ Require HHS to undertake a study of quality child care to assist all families with young children in affording quality child care.
- ▶ Ensure that public pre-kindergarten programs are designed to meet the child care needs of working families.
- ▶ Improve federal and state tax codes to help families at all income levels pay for care.

<sup>2</sup> HHS, Office of Child Care. (2010). *Pathways and partnerships for child care excellence*. Retrieved December 1, 2010, from [http://www.acf.hhs.gov/programs/ccb/ta/pubs/pathways/pathways\\_partnerships\\_v1.pdf](http://www.acf.hhs.gov/programs/ccb/ta/pubs/pathways/pathways_partnerships_v1.pdf)

<sup>3</sup> HHS, Office of Child Care. (2010, rev.) *Child Care and Development Fund (CCDF) report to Congress for FY 2006 and FY 2007*. Retrieved December 1, 2010, from [http://www.acf.hhs.gov/programs/ccb/ccdf/rtc/rtc2006/rtc\\_2006\\_2007.pdf](http://www.acf.hhs.gov/programs/ccb/ccdf/rtc/rtc2006/rtc_2006_2007.pdf)

<sup>4</sup> Schulman, K., & Blank, H. (2010). *State child care assistance policies 2010: new federal funds helps states weather the storm*. Retrieved December 1, 2010, from <http://www.nwlc.org/sites/default/files/pdfs/statechildcareassistancepoliciesreport2010.pdf>

# Disaster Planning, Response and Recovery

The federal government plays a major role in helping families, states, and communities prepare for and recover from disasters. Child care not only provides a safe place for children to be, but also is critical in helping a community regain its economic vitality in the aftermath of a disaster (i.e., enabling parents to get back to work).

There are more than 11 million children under age 5 in child care each week. In the event of an emergency, child care providers need to have a plan that is integrated with the community and state's emergency management plan to ensure the safety of children. Disaster planning for child care programs is especially critical because children—many of whom are not mobile and cannot communicate even basic information to a rescuer—are particularly vulnerable in the face of danger.

In addition, child care services need to be provided by trained, qualified caregivers in emergency shelters and on a temporary basis during days (and perhaps weeks) immediately following a disaster in a community or region. During relief and rebuilding efforts, child care demand may far surpass pre-disaster needs as parents clean up, sort out property, look for work, and begin the long process of recovery.

## **Child care programs need a disaster plan.**

Unfortunately, despite several major natural disasters during the last five years, not all states require child care programs to be integrated into state emergency planning for disaster preparation, response, and recovery.

- ▶ 26 states require all licensed child care programs to have a written plan for evacuating and moving children to a safe location in the case of a disaster.
- ▶ 26 states require all licensed child care programs to have a written plan to notify parents of an emergency and reunite them with their children.
- ▶ 18 states require all licensed child care programs to have a written plan to address children with special needs.



Credit: FEMA, Michael Rieger

## **The National Commission on Children and Disasters**

The National Commission on Children and Disasters, authorized under the Consolidated Appropriations Act of 2008, was charged with examining and assessing the needs of children in preparation for, response to, and recovery from disasters.

In October 2010, the Commission issued its final report to the President and Congress. It included recommendations to address disaster planning and recovery related to children, ranging from trauma, physical and mental health, child welfare, child care, housing (sheltering, intermediate, long-term), evacuation and transportation, to elementary and secondary education, juvenile justice, and state and local emergency management.

## **NACCRRA and Disaster Preparedness**

In 2006, NACCRRA launched a disaster preparedness training initiative specifically for child care providers and CCR&Rs. This training helps programs develop a plan and engage with emergency management as a partner. In 2007, NACCRRA convened 22 agencies and organizations in New Orleans, Louisiana, to plan a nationwide campaign to ensure that child care is no longer an afterthought in a time of crisis. The collective experience and knowledge of the participants led to a rich discussion about policies that need to be changed to ensure the safety and care of all children.

Through NACCRRA's work related to training, the summit in New Orleans, and its work with the National Commission on Children and Disasters, it is clear that in addition to on-the-ground changes in practice, there is much work to be done with federal, state, and local policymakers to ensure that child care is fully integrated into the disaster planning and recovery process.

### **NACCRRA recommends that:**

#### **Congress:**

- ▶ Require states to include child care services in state emergency planning.
- ▶ Designate a lead agency to coordinate federal agency support to child care during and after a disaster.
- ▶ Fund teams with people appropriately trained to assist in setting up and providing temporary child care after a disaster.
- ▶ Enact the Emergency Child Care Act, which would allow federal relief funds to be used for technical assistance for emergency child care services, including training, supervision, and other services provided for children.
- ▶ Reauthorize the Child Care and Development Block Grant (CCDBG) and require state child care plans to clearly demonstrate how the state will address child care needs before, during and after a disaster, and authorize specific funding so that quality set-aside dollars aren't the only funds used for emergencies.
- ▶ Require disaster planning as part of each state's health and safety standards for child care providers.
- ▶ Authorize a contingency fund within CCDBG that can be released by the President during federally declared disasters to help with repair, renovation, reconstruction, and the provision of temporary child care.
- ▶ Allow the Secretary of the U.S. Department of Health and Human Services (HHS) to transfer payments from states affected by a major disaster or emergency to other states experiencing a significant increase in the number of eligible families who have been displaced as a result of a major disaster or emergency.

- ▶ Define a role for HHS for child care in emergencies, including working with state child care administrators and CCR&R State Networks.
- ▶ Fund long-term mental health services for children and families impacted by disasters.
- ▶ Authorize HHS to expand fee assistance to serve families significantly impacted by disasters, including assistance for first responders who may not have needed child care previously or who now may need it for longer hours as part of their recovery efforts.

#### **States:**

- ▶ Institute child care regulation waivers in emergencies to ensure that the needs of children, families, the child care workforce, and the community as a whole are met and create a process for putting these policies in place.
- ▶ Create agreements in each state to ensure that child care licensing offices share information and expertise with emergency management offices.
- ▶ Require, facilitate and fund comprehensive emergency preparedness plans, including materials to "shelter in place" and procedures for evacuation for child care providers.
- ▶ Allocate funds for child care for first responders, shelter occupants, and families impacted by disasters.
- ▶ Establish gap grants to ensure that child care providers can reopen and provide services as quickly as possible after a disaster.

#### **Local Governments:**

- ▶ Require, facilitate and fund child care emergency plans for each county/locality so that the needs of children are integrated into the community's plan, and child care providers know what to do.
- ▶ Require the immediate assessment of the child care infrastructure to ensure timely, accurate response and adequate funding and effort for recovery.

# Rural Child Care Challenges

More than 11 million children under age 5 of working mothers are in some type of child care setting every week – on average for about 35 hours a week. The Child Care and Development Block Grant (CCDBG) is the federal law that allocates funds to states and sets minimum parameters under which states design their own programs.

Nowhere in the federal law is there guidance about how states should operate, contract for, provide training, technical assistance, underwrite, or oversee child care programs in rural areas. Yet, rural communities have unique needs and challenges far different from urban settings. The lack of formal child care options, distances to work sites, lack of transportation, and irregularity of work schedules reduce child care options available for parents.

## Rural Communities

Rural work is more likely to be seasonal and or temporary and many rural labor markets are dominated by one employer. Rural parents are also more likely to have less education and more likely to be underemployed.

- ▶ Poor children in rural areas face significant educational, social and economic challenges just as their urban counterparts do, but many of these problems are exacerbated by limited access to support services.

- ▶ Rural poor families tend to be poor for longer periods of time than urban families. And, children living in communities with persistent poverty face greater lifelong challenges – health, cognitive development, educational outcomes, and emotional difficulties.

## Rural Poverty

In 2009, 20.7 percent of all children under age 18 lived in poverty throughout the United States (\$18,310 for a family of three in 2009). But, the rate of rural poverty was much greater.

- ▶ Overall, nearly 29 percent (28.6 percent) of rural children lived in poverty in 2009.
- ▶ One-quarter or more of rural children lived in poverty in 15 states – Alabama (31.2 percent), Arizona (33.8 percent), Arkansas (30.4 percent), Florida (29.6 percent), Georgia (31.3 percent), Kentucky (31.9 percent), Louisiana (29.7 percent), Mississippi (37.8 percent), Missouri (26.4 percent), North Carolina (28.8 percent), Oklahoma (25.3 percent), South Carolina (33.5 percent), Tennessee (25 percent), Texas (27.1 percent), and West Virginia (29.2 percent).
- ▶ In 19 states, the rate of rural poverty far exceeded inner city poverty.

## Impact of the Current Economy on Rural Parents

In June of 2010, NACCRRA commissioned Lake Research Partners to conduct a nationwide survey of 1,000 parents with children under the age of 12. The responses of rural parents shed particular light on their needs and challenges.

- ▶ 60 percent of rural parents compared to 49 percent of all parents said they could not afford to stay home and not work.
- ▶ 64 percent of rural parents say they worry at least some of the time about not having enough money to pay their bills.

- ▶ 37 percent of rural parents say the economy has affected their child care in some way.

## Top Concerns About Child Care

- ▶ The biggest concern rural parents have about child care is the quality of care; cost is the second biggest concern.
- ▶ 75 percent of rural parents said affordable child care is the most important factor or one of the most important factors in helping working parents in today's economy.

### Child Care Settings Used by Rural Parents

- ▶ 29 percent of rural parents use a child care center compared to 44 percent of parents overall.
- ▶ 21 percent of rural parents use a family child care home provider compared to 12 percent of parents overall.
- ▶ Of rural parents using informal care, 44 percent said they had to miss work as a result of some type of breakdown in their child care arrangement.

### The Gap Between Parents' Perceptions and Reality

- ▶ 92 percent of rural parents think that child care providers offer learning opportunities for children. The reality is that less than half the states require all six developmental areas (such as social and emotional development, approaches toward learning, language development, etc); only 14 states require providers to read to children, and only 20 states restrict the use of media such as television and videos in family child care homes.
- ▶ 83 percent of rural parents think that child care providers must have a background check. The reality is that only 10 states require a comprehensive background check including a fingerprint check against state and federal records as well as a check of the sex offender and child abuse registries.

- ▶ 73 percent of rural parents think child care providers receive ongoing training annually. The reality is that in most states ongoing training requirements are very low and pale in comparison to even the most basic health and safety practices and child development skills needed to care for young children.
- ▶ 65 percent of rural parents think that the government regularly inspects child care. The reality is that half the states conduct inspections once a year or less frequently. Montana inspects family child care homes only once every five years and Michigan inspects family child care homes once every 10 years. Eight states do not conduct an inspection or home visit before granting a child care license.

### Rural Parents Are Willing to Contribute

- ▶ 69 percent of rural parents said they would support increased funding to improve the quality of child care even if it meant paying \$10 more in taxes each year.

### Rural Parents Support Initiatives to Strengthen the Quality of Child Care

- ▶ Rural parents overwhelmingly support requiring background checks (92 percent), basic training in health and safety practices and child development (95 percent), and inspections of all child care programs at least once a year (88 percent).

### NACCRRRA recommends that Congress:

- ▶ Reauthorize CCDBG in the 112th Congress.
- ▶ Authorize a specific pilot for rural areas that would allow braiding of federal funding streams related to early childhood programs to better meet the needs of families with children in rural areas. Such braiding would have to meet the standards of the highest criteria among braided funds to ensure safety and quality care for rural children; and
- ▶ Require evaluation of pilots and a report to Congress and the President, including recommendations for sustainability and replication.

## License-Exempt Child Care

More than 11 million children under age 5 of working mothers spend time in child care every week. According to the most recent Census Bureau data, about 42 percent of these children are in organized care (33.7 percent in child care centers and 8.8 percent in family child care homes). About one-quarter (24.6 percent) are in multiple arrangements and more than 10 percent (11.4 percent) have no regular child care arrangement.

### Child Care for Children of Working Mothers

- ▶ The children of mothers who work full-time are more likely to be in organized child care (46.9 percent compared to 33 percent of the children whose mothers work part-time).
  - ▶ The children of mothers who work day shifts are more likely to be in organized child care (50.9 percent compared to 28.2 percent of the children whose mothers work night shifts).
  - ▶ Children age 3 to 4 of working mothers are most likely to be in organized child care (54.7 percent compared to 37.2 percent of toddlers age 1-2 and 27.5 percent of infants under age 1).
- ▶ 24 states allow providers to care for more than four children before a license is required. South Dakota allows the largest number of children per family child care home without any health and safety standards or oversight, setting the licensing threshold at 13, so that providers in South Dakota may provide care for 12 children without a license.<sup>1</sup>
  - ▶ 12 states exempt child care centers provided by a church or religious organization.<sup>2</sup>
  - ▶ 18 states exempt child care provided by a church or religious organization on a limited basis.<sup>3</sup>
  - ▶ 37 states allow exemptions to child care regulations if the care is provided in a public school setting.<sup>4</sup>

Family child care homes and centers that do not trigger state licensing requirements are not mandated to meet the most basic standards such as health and safety standards, background checks and training requirements. Unlicensed care is not inspected; therefore, the health and safety of children in this type of care is unknown.

Even with Head Start, state-funded pre-k, state and federal child care subsidies, children under age 5 with working mothers living in poverty (\$18,310 for a family of three in 2009) are the least likely to be in any type of organized child care setting (31.6 percent).

### Organized Child Care Settings vs. Informal Settings

What we know from Census Bureau data is that more than half the children under age 5 of working mothers are not in organized care. What we do not know from Census Bureau data is the percentage of children in organized settings that are license-exempt care (legally operating but exempt from state licensing requirements).

### Why Licensing Matters

Theoretically, licensing exists to protect the public. In the case of child care, licensing seeks to ensure that children are in a safe setting that promotes their healthy development. Background checks ensure that children are safe from individuals with a violent history who should not be in the business of caring for children. Training requirements as part of the licensing process ensure that children are in the care of individuals who are better equipped to meet their needs (i.e., trained in CPR, first aid, basic health and safety practices, safe-sleeping positions for infants, child development, etc.). Inspections as part of the licensing process ensure that licensed providers comply with state standards. NACCRRRA has released a series of reports making

<sup>1</sup>NACCRRRA (2010) *Leaving Children to Chance, NACCRRRA's Ranking of State Standards and Oversight of Small Family Child Care Homes*

<sup>2</sup>NACCRRRA (2010) *State by State Assessment of Child Care Regulations and Exemptions*

<sup>3</sup> Ibid.

<sup>4</sup> Ibid.

recommendations to improve state licensing and oversight, but the fact remains that parents can make more informed choices when care is licensed and children are in a setting that is more likely to promote their safety and healthy development.

### **School Readiness**

While child care licensing is about safety, it is also designed to promote school readiness. As part of the state training requirements linked to licensing, providers are also guided in age appropriate activities and learning activities to support children's growth in many states.

NACCRRA's June 2010 poll of parents with children under age 12 found that 88 percent of parents think that child care providers offer learning opportunities for children. The reality is that many states have some requirements, but those requirements should be strengthened. (State requirements vary but generally involve developmental areas such as cognitive development, language development, physical development, social development, emotional development and cultural development).

But, there are NO developmental requirements for license-exempt care. The television could be on all day. There are no health and safety protections for children. Providers may know CPR or may not. Providers may know safe-sleeping practices or not.

The parents of infants who have died in license-exempt care are the strongest advocates for training in safe-sleeping practices. But, for their infants, it is too late. School readiness is not their concern at this point. It is a tragedy all the way around but in many cases, particularly with infant care, training could have made a difference. And, licensing can be the link to training.

### **Federally Subsidized Care**

There is no requirement under the Child Care and Development Block Grant (CCDBG) for subsidies used by low-income families to be used in licensed care. Of the 1.6 million children who receive a subsidy each month, approximately three-quarters are in licensed care. The most recent data shows:<sup>5</sup>

- ▶ In 24 states, at least one-fifth of the children whose care is paid for with a subsidy were in license-exempt care.

- ▶ In two states (Hawaii and Michigan), almost two-thirds of the children receiving assistance were in license exempt care.
- ▶ In eight states (Connecticut, Hawaii, Illinois, Michigan, Missouri, New York, Oregon and Utah), more than 40 percent of the children receiving assistance were in license exempt care.
- ▶ Nationally, 22 percent of children assisted through CCDBG were in a setting exempt from licensing.

An additional 803,000 children each month received federal subsidies for child care through the Temporary Assistance for Needy Families (TANF) program and the Social Services Block Grant (SSBG),<sup>6</sup> but in the absence of reporting requirements in the law, nothing is known about the type of child care their subsidies are being used for nor the quality of that care.

In contrast, all child care providers who participate in the Office of Military Child Care fee assistance program must be licensed. Participating providers must also have an annual inspection.

### **NACCRRA recommends that Congress:**

- ▶ Reauthorize CCDBG in the 112th Congress and require all paid providers caring for unrelated children on a regular basis (like a business) to be licensed by states.
- ▶ Require child care providers receiving subsidies through federal programs to have a license.
- ▶ Require a background check, including a fingerprint check, for all providers receiving federal funds.
- ▶ Require states to publicly disclose an "evidence-based" rationale for any category of license-exempt care. For each category, the rationale for exemption should be about the safety or quality of care backed by data.

<sup>5</sup> HHS, OCC. (2008). *FY2008 CCDF Data Tables*, Table 4. Average monthly percentages of children served in regulated settings vs. settings legally operating without regulation (FFY 2008), Retrieved from [http://www.acf.hhs.gov/programs/ccb/data/ccdf\\_data/08acf800\\_preliminary/table4.htm](http://www.acf.hhs.gov/programs/ccb/data/ccdf_data/08acf800_preliminary/table4.htm); January 14 , 2011.

<sup>6</sup> HHS, OCC (2008). *Child Care and Development Fund (CCDF) Report to Congress for FY2006 and FY2007*, Retrieved from [http://www.acf.hhs.gov/programs/ccb/ccdf/rtr/rtrc2006/rtrc\\_2006\\_2007.pdf](http://www.acf.hhs.gov/programs/ccb/ccdf/rtr/rtrc2006/rtrc_2006_2007.pdf); January 14 , 2011

## Connecting Families with Services

Parents are their children's first and most important teachers and caregivers, yet many parents in the United States struggle to balance the demands of parenting and work. Parents need quality child care and greater flexibility and support in the workplace to enable them to be productive, reliable employees and to support their families.

### **NACCRRRA supports policies that:**

- ▶ Ensure stable and adequate funding for child care subsidy programs, so that families in need—families receiving Temporary Assistance for Needy Families (TANF) and families earning low incomes who do not receive assistance—can access quality child care.
- ▶ Make quality child care options universally accessible and affordable.
- ▶ Support families in providing the best quality early learning opportunities for their children.
- ▶ Promote transparency in their child care licensing practices so that parents have access to inspection results and substantiated complaints through the Internet.

### **Child Care Aware® helps families locate quality child care and child care resources in their community**

Child Care Aware®, a program of NACCRRRA, operates a national hotline and website that provides both child care information and local Child Care Resource and Referral agencies (CCR&Rs) referrals to families in English and Spanish. The program, partly funded by the Office of Child Care, U.S. Department of Health and Human Services, serves more than 1.5 million consumers annually through the hotline and website combined.

NACCRRRA also provides assistance specifically to help military families locate and make decisions about their child care options with the unique parameters set by each of the branches through Child Care Aware® (CCA).

CCA works with CCR&Rs to provide Enhanced Referrals, which are specialized and comprehensive parent consumer education and personalized referral services



that may include searches for child care vacancies. CCR&Rs also provide extra follow-up support to meet the Service Member families' child care needs.

### **NACCRRRA recommends that Congress:**

- ▶ Continue federal funding for the Child Care Aware® program in order to help all families, including deployed military personnel, find quality child care.

### **Temporary Assistance for Needy Families Child Care**

Temporary Assistance for Needy Families (TANF) is the block grant created by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA). TANF recipients, families transitioning off TANF, and other families earning low incomes are eligible for child care assistance through vouchers and certificates that are funded through the Child Care and Development Block Grant (CCDBG). States are authorized to use TANF funds to finance child care in two ways. States can transfer up to 30 percent of TANF funds into their CCDBG program, and/or states can choose to spend TANF funds directly on child care.

### **NACCRRA recommends that Congress:**

- ▶ Ensure sufficient mandatory child care funding to meet TANF work requirements and adjust current child care assistance for inflation.
- ▶ Eliminate barriers to subsidy access for eligible families such as frequent recertification requiring low-wage families to take off from work and multiple original documents to prove identification.
- ▶ Expand transitional child care assistance for those working their way off TANF to avoid a “cliff effect” where a modest increase in income leaves a family financially worse off.
- ▶ Expand child care subsidies for those who do not qualify for TANF but who struggle to make ends meet and cannot afford quality care in their community without financial assistance.
- ▶ Improve data collection on families who receive child care assistance through TANF funds. Currently, the Department of Health and Human Services collects data on children receiving assistance through CCDBG funds only.

### **Head Start**

Head Start and Early Head Start are comprehensive child development programs that serve children from birth to age 5, their families, and pregnant women. The overall goal of these programs is to increase the school readiness of young children in families earning low incomes. The Head Start program delivers comprehensive services including: education, health, nutrition, screening for developmental delays, and a variety of social services, if the family needs them. The program is designed to meet the social, emotional, physical and cognitive development of children. Legislation that reauthorized Head Start included a provision creating State Early Learning Councils to increase coordination and collaboration among State preschool, Head Start programs, child care programs, early childhood special education, and other early childhood programs, including in the areas of outcomes and standards, technical assistance, coordination of services, cross-sector professional development and training, community outreach, communication, and better serving the needs of working families.

### **NACCRRA recommends:**

- ▶ That the State Early Learning Councils authorized within the Head Start Act include CCR&Rs or work closely with them to ensure that resource and

referral plays a key role in working with parents to access early learning settings for their children; and,

- ▶ That CCR&Rs work to ensure that strengthening the quality of child care from birth through age 5 is an objective that State Early Learning Councils pursue.

### **The Child Abuse Prevention and Treatment Act**

The Child Abuse Prevention and Treatment Act (CAPTA) allocates funds to states for the identification, investigation, and prevention of child abuse. CAPTA requires certain professionals to report suspected maltreatment or child abuse to a state child protective services agency. Child care providers are “mandatory reporters,” which means that they are required by law to report suspected child abuse.

According to the most recent data from HHS (2009), 3.3 million referrals alleging child maltreatment of about 6 million children were made to child protective services agencies. About 60 percent of referrals were screened for investigation. Of those, about 702,000 children were determined to be victims of child abuse or neglect (61,000 of whom were abused more than once). Each year, children die from abuse and neglect. In 2009, 1,676 children died, with nearly 80 percent under 4 years old. CAPTA was reauthorized in the 111th Congress.

Child care providers have a legal responsibility to report suspected cases of child abuse and yet, child abuse recognition training is a minimal effort by most states.

### **NACCRRA recommends that Congress:**

Work with the Office of Child Care to encourage states to use either CCDBG or CAPTA funds to offer child care providers access to training (online or in person) in child abuse recognition to ensure that they have the training they need to help keep children safe and the confidence they need in working with parents in suspected abuse cases.

### **Tax benefits could help more families afford quality care.**

Child Care Resource and Referral agencies not only help families locate child care, but also help them find ways to pay for it. For many families in the United States, high fees make child quality care impossible to afford. Tax benefits, in addition to subsidy assistance, play an important role in increasing the affordability of child care. CCR&Rs inform families of tax benefits and help them work through eligibility requirements. However, current child care related benefits, which have not been updated in years, provide only modest relief and should

be revised to reflect the cost of child care in today's market. NACCRRA supports updated and sufficient tax relief, through the Dependent Care Tax Credit as well as the Dependent Care Assistance Program for families.

### **NACCRRA recommends that Congress:**

#### ***Improve the Dependent Care Tax Credit (DCTC)***

- ▶ Increase both the percentage of employment-related child care expenses and the allowable amount of eligible expenses that families earning low or middle incomes are allowed to claim against their income taxes each year.
- ▶ Make the Dependent Care Tax Credit refundable and available on an advanced basis, similar to the Earned Income Tax Credit. This will allow families earning lower incomes to benefit, regardless of tax liability.

#### ***Improve the Dependent Care Assistance Program (DCAP)***

- ▶ Eliminate the “use it or lose it” provision of the DCAP, so that more families are able to participate in the program.
- ▶ Authorize funding for outreach programs to encourage employers and employees to utilize Dependent Care Assistance Programs.
- ▶ Increase the maximum amount of excluded income in the DCAP, especially for families with two or more children.

### **Child and Adult Care Food Program**

The Child and Adult Care Food Program (CACFP) provides federal funds to child care centers, family child care homes, Head Start, and after-school programs to help provide nutritious lunches and snacks. As of 2009, about 140,600 family child care homes and 51,200 centers participated in the program serving 3.2 million children every day. Child care providers are reimbursed based on the types of meals they serve and the type of care being provided. The program has a means-tested tiered reimbursement rate system. As part of CACFP, three inspections per year are conducted to protect program integrity and ensure that participants are in compliance. CACFP was reauthorized in the 111th Congress.

### **NACCRRA fully supported reauthorization and will work with CCR&Rs to implement the new law.**

In addition, NACCRRA supports the following policies to help families.

### **NACCRRA recommends that Congress:**

- ▶ Promote early identification and treatment of developmental disabilities and emotional and behavioral disorders in children, including expansion of Part C of the Individuals with Disabilities Education Act (IDEA), the Section 619 Preschool Program (IDEA), and the Children's Mental Health Services Grant Program.
- ▶ Increase funding for the Child Care Assistance for Parents Who are Students (CCAMPIS) program from \$15 million to \$20 million per year. More than 25 percent of undergraduate students and two-thirds of non-dependent women students have children.
- ▶ Provide paid leave under the Family and Medical Leave Act (FMLA) and expand FMLA to cover all workers. Current law provides unpaid leave for those who work in companies of 50 or more employees only.
- ▶ Pass the Healthy Families Act to require employers to provide at least seven sick days per year for full-time employees -- enabling employees to care for themselves, or their children when necessary.
- ▶ Authorize new funding or tax credits to support At-Home Infant Care, to help parents who want to stay home to care for their own infants. This funding should be separately authorized, and should not come out of current funding streams for child care programs designed to help make child care more affordable for low-wage workers.

## Child Care Program Liability Insurance

Few states require licensed child care programs to disclose to parents whether or not they carry liability insurance. Unfortunately, most parents only find out about the lack of liability insurance when a child is seriously injured or dies in the care of the provider. Legislation has been pending in Congress to require states as part of their child care licensing process to recommend to each child care provider that providers carry current liability insurance. The bill would require licensed child care providers to publicly post a notice specifying whether or not the child care provider carries current liability insurance so that parents can know before an accident occurs or factor in a provider's lack of liability insurance in their decision about programs in which they will place their children.

Parents assume that licensed child care providers will provide a safe setting for their children. Liability insurance disclosure laws are required in California, Georgia, New Hampshire and Virginia. In the absence of state laws to require liability insurance, it makes sense to require disclosure to parents so that they can make informed choices. Liability insurance does not prevent accidents but parents can make more informed choices if the information is publicly disclosed.

### **NACCRRRA recommends that Congress:**

- ▶ Pass the Anthony DeJuan Boatwright Act in the 112th Congress, which would require licensed child care providers to disclose to parents whether or not they carry liability insurance.

## Child Care Support for Military Families

The Department of Defense (DoD) offers extensive support for families of active duty military personnel living on or near military installations. This support includes quality child care at affordable prices. However, Guard members, Reservists, as well as many active duty Service Members do not live near military installations and lack access to military child care centers. NACCRRRA currently works with DoD to help these families find and afford quality child care in their neighborhoods. Unfortunately, in many states, the state licensing requirements are so poor that military families cannot use the fee assistance for which they are eligible because the child care in their community is far below military standards.

### **NACCRRRA recommends that Congress:**

- ▶ Include adequate funding in the Department of Defense Appropriations Act to increase the availability and quality of civilian child care for military families who are not served by military installation child development programs.
- ▶ Strengthen CCDBG to raise licensing standards in all states comparable to DoD so that military families eligible for DoD assistance can find quality child care in their community.
- ▶ Support civilian child care capacity building efforts, including training, technical assistance and wage enhancements, particularly for communities undergoing rapid growth due to the BRAC (Base Realignment and Closure) process.
- ▶ Increase federal funding for supports for nontraditional child care for military families—hourly care, specialized respite care for families whose children have special needs, and extended-hour care programs.

## Strengthening and Sustaining Communities

Child care is an essential building block of any community and investments in child care are investments in our children, our economy and our future. Child care plays an important role in the economy, helping to generate 15 million jobs and more than \$500 billion in income. Parents need child care so that they can work. Children need a safe place to be where they can learn and continue healthy development.

### **NACCRRRA supports policies that:**

- ▶ Ensure that every community has a strong child care delivery system.
- ▶ Create innovative strategies to increase the supply, affordability, and quality of child care.

### **Strengthening the Child Care Resource and Referral System**

There is no system for early care and learning in the United States. Instead, a patchwork of options about which parents know little have cropped up throughout the states. More than 600 Child Care Resource and Referral agencies (CCR&Rs) across the country help to fill this gap by providing a set of core services to build, integrate and strengthen the child care infrastructure. CCR&Rs connect parents to child care providers, educate parents about quality child care, and inform families about financial assistance for child care. Many CCR&Rs also directly administer child care subsidies.

Each year, CCR&Rs work to build the supply of quality care by training more than 650,000 child care providers and help to develop more than 450,000 new child care slots. In addition, CCR&Rs conduct market rate surveys, community needs assessments, and analyses of child care supply and demand. Perhaps most importantly, CCR&Rs help communities leverage investments in early education; every dollar in federal funding received by a CCR&R agency leads to an additional \$3.18 in public and private support. NACCRRRA supports federal funding to establish and strengthen CCR&Rs.



### **NACCRRRA recommends that Congress:**

- ▶ Encourage states to use Child Care and Development Block Grant funds to establish or support a system of Child Care Resource and Referral, coordinated by a statewide lead Child Care Resource and Referral agency; and,
- ▶ Include Child Care Resource and Referral representatives in federal, state, and local advisory panels whose purpose is to coordinate early education systems.

### **Child Care Facilities**

Many communities face shortages of licensed quality child care. Low-income neighborhoods are especially likely to lack quality child care facilities. Investments in child care construction help to ensure that children have access to safe learning environments and that parents are able to contribute to the local economy.

### **NACCRRRA recommends that Congress:**

Authorize federal grant money to low-income communities to construct or renovate child care facilities.









