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ABSTRACT

In 1980 the federal government mandated that assistance be given states to conduct systematic assessment of current practices in Title XX funded day care programs and that a summary report of this assessment be provided to Congress. Assessment findings are given in this document. Overall, provider practices exceeded state licensing standards and compared favorably with or exceeded the proposed federal requirements. Many centers permitted parent participation in general program policy making, informed parents about their children, and allowed unlimited observation. For all but children under 2 years of age, Title XX funded centers maintained average group sizes smaller than federal maximum limits and state licensing standards. Most centers provided orientation to caregivers. Nearly all provided snacks and lunches, and around 75 per cent provided breakfasts. Centers required immunizations and health assessments even in states without such requirements. All states had fire and sanitation codes for centers and most states had codes for homes. Nearly all centers provided social services information and assistance. Continued assistance is suggested regarding training, health and social services information systems, parent involvement, and group size. (Author/DB)

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# Report to Congress

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## Summary Report of the Assessment of Current State Practices in Title XX Funded Day Care Programs

October 1981

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REPORT TO CONGRESS

SUMMARY REPORT  
OF THE  
ASSESSMENT OF CURRENT STATE  
PRACTICES IN TITLE XX FUNDED  
DAY CARE PROGRAMS

October 1981

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Office of Human Development Services  
Administration for Children, Youth and Families  
Day Care Division

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Prepared by the Day Care Division, Administration for Children, Youth and Families, Office of Human Development Services, Department of Health and Human Services

Allen Smith and Ann Segal, Project Coordinators

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## ACKNOWLEDGMENTS

We would like to thank all the state staff for their cooperation and effort in preparing their reports and responding to our questions. While every effort has been made to report state information accurately, the short time available for preparation of the state reports and the summary report has undoubtedly resulted in some mistakes. We invite states to inform us of any corrections that should be noted.

The ACYF Regional Office day care specialists and consultants Peggy Seeley, Ann Gardner, and Dave Connell are gratefully acknowledged for providing their support and assistance to us and to state staff. In ACYF Headquarters many thanks are deserved, especially to Tom Hertz and Mike Fishman for their assistance in the state orientation sessions and to Marilyn Ellis and Marilyn Finger who spent long hours at the typewriter.

Allen N. Smith  
Ann Segal  
ACYF Project Coordinators

## EXECUTIVE SUMMARY

In March 1980 the Department of Health and Human Services published final day care regulations in the Federal Register. Most of the provisions became effective on October 1, 1980. In December 1980, in response to continuing concern about the potential cost of the regulations to states and providers, a provision was added to the Omnibus Reconciliation Act of 1980. This provision delayed the effective date of the regulations until July 1, 1981.\*

The Omnibus Reconciliation Act of 1980 also mandated the Department of Health and Human Services (HHS) to "assist each state in conducting a systematic assessment of current practices in Title XX funded day care programs and provide a summary report of the assessment to Congress by June 1, 1981."

The Administration for Children, Youth and Families (ACYF) within the Office of Human Development Services (HDS) was responsible for assisting the states in conducting individual assessments and developing this summary report to the Congress. For purposes of this report, Title XX day care programs are defined to include all day care centers and homes receiving any Title XX funds.

The assessments, which were conducted by states, examined both state day care requirements and provider practices. Most states used a model assessment instrument and procedures developed and tested by ACYF. Only two states with Title XX funded day care did not provide a report (Missouri and New Mexico).\*\*

### MAJOR FINDINGS

Child day care represents 18% of all Title XX expenditures and is one of the three highest funded Title XX services in 42 states. The total number of day care centers serving Title XX funded children has increased significantly from the number identified in 1977--from approximately 8,000 to over 10,500. Nationally, while most of the children cared for in Title XX funded centers are between the ages of three and six (64%), 19% are two years and younger and 16% are six years and older.

Overall, this assessment found that provider practices for most non-staffing areas such as training, nutrition, and health exceed state licensing standards and compare favorably with the proposed 1980 HHS requirements. Provider practices for staffing well exceed state standards and often exceed the proposed requirements.

#### Parent Involvement

While only half of the states require that Title XX funded centers allow parents to participate in general program policy making, many centers in all states allow such participation. Nearly all centers regularly exchange information with parents about their children and allow unlimited observation even when such a state requirement is lacking. Nearly all homes also provide parents with opportunities to observe their children.

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\* Pending Congressional action on the proposed Social Services Block Grant, the Department delayed the effective date of the regulations until January 2, 1982. As this report goes to print, Congress has enacted the Social Services Block Grant which amends Title XX of the Social Security Act. Day Care services provided with block grant funds must meet "applicable standards of state and local laws." Given this requirement, the HHS day care regulations will be withdrawn through an announcement published in the Federal Register.

\*\* Alaska has no Title XX funded day care.

### Group Size

Group size addressed the number of children that can comprise single groups. A group is a "cluster of children assigned to one or more caregivers."

Despite the fact that twenty-four of the forty-seven states reporting have no group size requirements for Title XX funded centers, nationally Title XX funded centers maintain averages smaller than group size ceilings set by the proposed HHS requirement and well below existing state licensing standards for all but the under two year old age category.

### Staffing

Staffing requirements address the minimum numbers of classroom caregivers that should be scheduled daily to work with children.

Current day care provider practices for staffing in centers are much closer to the generally more stringent HHS proposed requirements than to state licensing codes across all age categories. Nationally, when current staffing practices are considered in relation to the proposed HHS requirements for the two years and older categories, the number of surplus caregivers is three times greater than the number of additional caregivers needed. However, for the under two year old category, there are more than three times more caregivers needed than surplus caregivers present nationally.

### Training

While only one-half of the states require Title XX funded centers to provide an orientation to caregivers, nearly all centers, in fact, provide such an orientation. As for training, about three quarters of center caregivers and one-half of home caregivers received some training during the past year although only half of the states require such training.

### Nutrition

Most states require both centers and homes to provide snacks and lunches, while less than half of the states require breakfast to be provided. Nearly all Title XX funded centers and homes provide lunches and snacks, while 68% of centers and 77% of homes provide breakfast. Moreover, about three-quarters of all Title XX funded centers and half of all Title XX funded homes participate in the USDA Child Care Food Programs.

### Health and Safety

Most states require children in Title XX day care to have immunizations and health assessments, although only half of the states require that the health assessment meet the American Academy of Pediatrics (AAP) or the Early Periodic Screening, Diagnosis and Treatment (EPSDT) standards. Even in states without such requirements, many providers require immunizations and health assessments. Seventy percent (70%) of reporting states assure HHS funded children receive needed health services.

### Physical Environment

All states have fire and sanitation requirements for centers. Five states have no fire standards for homes; four states have no sanitation standards for homes. The physical environment standard most often not included in state codes is that for swimming safety.

## Social Services

While only half of the states require Title XX funded centers to provide information and assistance to parents on social services, most centers provide information and assistance. Three quarters of reporting states assure that HHS funded children receive needed social services.

### CONCLUSIONS AND IMPLICATIONS

In the past the Federal government and state governments have shared the responsibility of assuring the health, safety and normal age-appropriate development of Federally funded children in day care. It now appears that states will be given the primary responsibility for this assurance. The results of the assessment indicate that state expenditures for day care are among the highest of any social service category. Equally reflective of the importance given to day care by states are the resources committed to assuring that licensing standards and state Title XX day care regulations are met.

A high degree of consistency was observed between state Title XX agency requirements and day care center and family day care home provider practices in the areas of health and the provision of meals. Centers, however, well exceeded state agency requirements with respect to the training of caregivers (particularly, orientation of newly hired caregivers), social services information and parent involvement activities.

While group size is now unregulated by many states, average group sizes in Title XX funded centers even exceeds the requirements of the 1980 HHS requirements for age categories two years and over. The value of small group sizes is obviously recognized by providers.

In the area of staff/child ratio practices, center average practices reflect even less children per caregiver than the HHS requirements for the three to six year old category and less children per caregiver than the state licensing standards in all age categories.

The results of the study should be helpful to states as they consider day care standards. ACYF will continue to offer technical assistance to states on an as-needed basis. Based on this study the focus of such an assistance effort would be in the areas of caregiver training, health and social services information systems, parent involvement, and group size.

## PART I: OVERVIEW OF ASSESSMENT EFFORT

The Omnibus Reconciliation Act of 1980 (P.L. 96-499) delayed the effective date of the Health and Human Services Day Care Regulations (HHSDCR) until July 1, 1981\* and mandated the Department of Health and Human Services (HHS) to "assist each state in conducting a systematic assessment of current practices in Title XX funded day care programs and provide a summary report of the assessments to Congress by June 1, 1981."

### BACKGROUND: THE FEDERAL DAY CARE REGULATIONS AND THE REASON FOR THE ASSESSMENT

The Federal Interagency Day Care Requirements (FIDCR) were written in 1968 based upon a 1967 amendment to the Economic Opportunity Act. At that time the requirements were not attached to funding legislation and were viewed as a model code and made part of the Code of Federal Regulations early in 1969. In 1975 compliance with a modified version of the FIDCR became a condition for funding Title XX day care facilities. In response to general concerns about potential cost, Congress placed a moratorium upon one set of requirements of these regulations, the staff/child ratio requirements for children under 6 years old in day care centers. Each state was required to meet all other FIDCR requirements and could not lower staff/child ratio requirements below those in effect in the state at the time of the moratorium. At the same time, the Department of Health, Education and Welfare was directed to study the appropriateness of having Federal day care regulations for Federally funded day care facilities.

In 1978 the Appropriateness of the Federal Interagency Day Care Requirements was published. The study was written by Department staff assisted by many day care professionals, including providers and parents. Much of the information was based on the Department-sponsored National Day Care Study, a four-year study of center-based preschool day care. The Appropriateness Report concluded that while the 1975 version of the FIDCR needed revision, Federal regulations were necessary to ensure the health, safety, and appropriate development of an especially vulnerable population of children--children eligible for Federally subsidized day care.

A Notice of Proposed Rulemaking was published in the Federal Register on June 15, 1979. The NPRM included requirements for caregiver training, nutrition, health and safety, physical environment, social services, parent involvement, program activities, group composition, and monitoring. Options were proposed for each area of the regulations, and an extensive public comment process followed. This process included ten Regional hearings, one national hearing, and over 4,000 written comments. The comments were carefully analyzed to determine which options should be included in the final regulations. The National Fire Protection Association's Life Safety Code and three other studies, The Licensing Study, (a study of all state day care licensing requirements); the National Day Care Center Study and the Family Day-Care Home Study also provided information for the consideration of the requirements.

As a result of this extensive input and expressions of concern and preferences, the Department published the final Health and Human Services Day Care Regulations on March 19, 1980. Most of the provisions became effective on October 1, 1980. The final regulations included all the areas that were in the NPRM and also allowed states to request up to a two-year extension of the effective date of the group composition requirements. Thirty-two states made that request. States and providers were also able to submit a plan of correction if found out of compliance.

\*Pending Congressional action on the proposed Social Services Block Grant, the Department delayed the effective date of the regulations until January 2, 1982. As this report goes to print, Congress has enacted the Social Services Block Grant which amends Title XX of the Social Security Act. Day Care services provided with block grant funds must meet "applicable standards of state and local laws." Given this requirement, the HHS day care regulations will be withdrawn through an announcement published in the Federal Register.

The extensive Regulatory Analysis of the HHS Day Care Regulations estimated that the regulations would likely result in costs about five percent higher, on average than the current base cost of Federally subsidized day care, and that this increase in costs would be phased in over a three year period. The regulations would cost appreciably less, however, than the 1968 FIDCR if they were strictly enforced, would result in a larger number of subsidized centers being in compliance, and would increase the number of nonsubsidized centers who could satisfy the regulations.

The analysis also stated the "effects of the proposed regulations on children would be beneficial as compared to current practice due primarily to: the positive effects of reduced group size and caregiver training; the absence of adverse effects from relaxing child-staff ratios; the early prevention and detection of potentially expensive health problems; and the provision of needed health services."

A provision in the October 1, 1980 continuing resolution bill (P.L. 96-369) prohibited the Department from expending funds to implement the regulations. During December 1980, in response to continuing concern about the potential cost of the regulations to States and providers, a provision was added to the Omnibus Reconciliation Act of 1980 (P.L. 96-499). This provision delayed the effective date of the regulations until July 1, 1981 and mandated the states' assessment of current practices of Title XX day care facilities. This assessment was mandated as a result of the increasing awareness in Congress that little is known at the state level about actual Title XX provider and state practices. This lack of information was especially apparent as states attempted to support their requests for an extension of the effective date of the group composition requirements. The regulations stated that these requests must contain information on the number of children receiving care in facilities which would be out of compliance with the new requirements and the actual group size and staff/child ratios of those out-of-compliance facilities. The true impact of the regulations would be impossible to assess without this information and few states had such information available. In general, information on actual practices in training, nutrition, health and safety, rates of reimbursement, and many other areas was also missing. A state by state assessment was included in the Omnibus Reconciliation Act as the method for providing Congress with this data.

#### IMPLEMENTATION PLAN FOR THE ASSESSMENT

The Administration for Children, Youth and Families carried out this Congressionally mandated study by adopting an approach which:

1. Followed the Congressional language that the states should have the primary responsibility for conducting the assessments;
2. Incorporated a Federal role which facilitated the states' conduct of a systematic analysis; and
3. Defined Title XX day care programs to include all day care centers and homes receiving any Title XX funds.

Specifically, ACYF assisted the states in conducting assessments by making available to them:

- standardized instruments which could be used to measure day care provider practices and state agency practices and requirements;
- training of state personnel at HHS Regional Offices in the administration of these instruments;
- on-site technical assistance by Regional Office staff and consultants to state personnel in carrying out the assessments and in aggregating and analyzing results; and
- funds ranging from \$1500 to \$4700 to support travel to Regional Office orientation sessions and to help defray the costs of conducting the assessments.

#### Standardized Instruments

A Technical Assistance Package was developed to help states collect information and prepare a state report (See Appendix C). States were free to choose to use other instruments, approaches, and reporting forms if they chose to participate in the study. ACYF did request, however, that states document whatever method was used to gather data to allow the comparability of states' information to be determined.

#### The Technical Assistance Package included:

- a form which could be used to report Title XX day care information on state agency practices, day care home and center provider practices;
- suggested sampling procedures and sample sizes for conducting provider telephone surveys;
- sample advance letters to family day care home and center providers to notify them of the survey;
- telephone survey questionnaires with interviewer instructions for home and center surveys; and
- center group size and staff/child ratio compilation instructions with illustrated tables as well as table shells.

#### Training of State Personnel in the Administration of the Instruments

Sessions were held during February in all HHS Regional Offices to orient state staff to the assessment effort and train them in the administration of the Technical Assistance Package. Most states sent one or two staff to these day and a half sessions that were conducted by Central Office ACYF staff.

#### On-Site Technical Assistance

Regional Office day care staff provided on-site assistance to states during the conduct of the assessments and/or during the compilation of data and the preparation of the state reports. Consultants were also made available to several states that

requested additional assistance. On-going contact was maintained with every state during the assessment, and ACYF Central Office staff were available at all times to respond to questions and provide assistance to Regional Office and state staff.

#### Grants to States

ACYF made available to states grants ranging from \$1500 to \$4700 to be used to help defray the costs involved in conducting the assessment including personnel, travel to the Regional Office training session, supplies, duplication of materials, and telephone calls. Since the number of Title XX funded homes was difficult to determine in some states, the size of the grant was based primarily on the number of Title XX funded day care centers in each state.

#### SUMMARY REPORT

States were requested to submit their assessment information to ACYF by April 15 (later changed to May 1). Data received by that date was analyzed and included in this summary report. Any state information received after that date is noted and attached as part of the total package to the Congress.

This summary report is an analysis of the information provided by states on current state Title XX agency program requirements and practices and Title XX funded provider practices. With the exception of the staffing requirements, this report does not present an analysis of the costs of state compliance with the HHS regulations, primarily because of the difficulty involved in obtaining reliable state-level cost information for such regulatory provisions as health screening and caregiver training.

#### PROVIDER SURVEYS

##### Sampling Design for the Telephone Survey

The requirements for a center to be eligible to participate in the survey of provider practices were that its licensed capacity be at least 13 children; it currently receives income from a Title XX Agency; and it provides day care services less than 14 hours a day. This last requirement was included to eliminate the atypical 24 hour center from biasing a state's profile. Eligibility requirements for a home were that it be registered, certified, or licensed to serve less than 13 children and it also currently receives income from a Title XX Agency.

To satisfy the Congressional mandate, the results of the telephone survey had to provide an assessment of Title XX day care practices separately for each state. Minimum center and home sample size numbers for telephone interviewing were suggested to each state. These numbers would allow information from the sample



to be considered as state-wide results with reasonable confidence. The accuracy criterion selected for this assessment was a 95 percent confidence level for estimates of population statistics at the state level to be no wider than  $\pm 0.075$  for center and  $\pm 0.10$  for homes. Thus, if a percentage finding of 0.50 for a particular center characteristic was recorded, the sample size would have provided 95 percent confidence that the true percent was between 0.425 and 0.575.

Recognizing that some centers or homes might refuse to be surveyed or may not be eligible for the survey, it was suggested that states should initially identify a larger number of facilities to call than the minimum number recommended. An adjustment factor of 30% for centers and 100% for homes was provided. Suggestions were also provided for randomly selecting the number of facilities to call from the population of Title XX facilities available in order to assure that each facility had the same opportunity to be selected for the survey.

Actual sample sizes recommended (See Appendix C) varied from state to state based upon the anticipated total numbers of Title XX facilities in that state. With the exception of Wyoming, all state sample sizes met or exceeded the minimum number recommended for centers. Actual sample sizes used by states for the survey of homes are not available in this report. However, it is believed that nearly all states who surveyed homes also met or exceeded those recommended minimums. State center samples ranged in size from six in North Dakota to 167 in California. The total U.S. sample size for Title XX funded centers was 3,874 for the 39 states that conducted the survey (Maryland survey results were not available to be included in this total). This represents 46.3% of all the Title XX funded centers from those states.

#### Questionnaires for the Telephone Survey

The questionnaires used for the telephone survey were designed to collect information on the practices of providers in centers and homes. Initially developed questions were reviewed by central office, regional office and state agency day care staff and then restructured, reworded and rearranged to make all questions close-ended, and to limit the length of the telephone survey for centers to less than 30 minutes and for homes to less than 15 minutes. The final questionnaires are presented in Appendix C. The day care center questionnaire is composed of six parts:

- Part A: A sequence of four eligibility questions to screen out those centers not eligible to participate in the survey.
- Part B: A series of 32 questions primarily covering child and caregiver characteristics, daily groupings of children and staffing patterns. This is the core part of the questionnaire because it addresses group size and staff/child ratio practices.

Parts C, D, E, & F: Clusters of questions relating respectively to caregiver training practices, health and safety practices, social service practices and parent involvement practices.

The family day care home questionnaire contains 16 questions covering eligibility, health and safety practices, parent involvement practices, nutrition practices and staff/child ratio practices.

Both interviews opened with a brief statement that introduced the interviewer and the survey, identified the purpose of the survey, asked the respondent if the advanced letter was received (the advanced letter contained a confidentiality statement and presented for the respondent's review and preparation the more complex group composition questions that would be asked) and ascertained the director's willingness to participate.

#### Reporting Results of Telephone Surveys

A state reporting form was provided for use by states to record information on state agency requirements and practices and the results of the telephone surveys on provider practices. Items on the reporting form were cross-referenced to specific questions on the telephone survey instruments as an aid to states in filling out the reporting form. A set of detailed instructions and tables were offered to states for aggregating center information relating to the more complex staff/child ratio and group size practices. Instructions for aggregating all other information was not offered because of their relatively straightforward computation requirements.

#### RESPONSE FROM STATES

State response to this assessment effort was excellent. Only three states did not provide any report: Alaska, Missouri and New Mexico (Alaska, however, does not have any Title XX funded day care). Eight states (Arizona, Minnesota, Nebraska, New York, Pennsylvania, South Carolina, West Virginia and Wisconsin) provided reports but did not conduct a survey of provider practices. Information on most provider practices from these states was derived from other state sources such as monitoring reports and are therefore included on the tables in this summary report. However, staff/child ratio and group size provider practices were generally not available for these states, or not available in a format which was comparable to most of the states conducting the survey, and therefore are not included. One state (Maryland) submitted a report too late to be included in the analysis tables. Information on their practices, however, are contained in Appendix B. Figure 1 below depicts the response profile for each state.

#### ORGANIZATION OF REPORT FINDINGS

Summary assessment findings are presented in the next section of this report. Findings are divided into four parts. The first part (Part II) presents demographic characteristics associated with Title XX day care, i.e., number and type of Title XX

FIGURE 1: STATE RESPONSE PROFILE

Submitted Report  
and Conducted Survey

Alabama  
Arkansas  
California  
Colorado  
Connecticut  
Delaware  
District of Columbia  
Florida  
Georgia  
Hawaii  
Idaho  
Illinois  
Indiana  
Iowa  
Kansas  
Kentucky  
Louisiana  
Maine  
Maryland\*  
Massachusetts  
Michigan  
Mississippi  
Montana  
Ohio  
Oklahoma  
Oregon  
Nevada  
New Jersey  
New Hampshire  
North Carolina  
North Dakota  
Rhode Island  
South Dakota  
Tennessee  
Texas  
Utah  
Vermont  
Virginia  
Washington  
Wyoming

Submitted Report  
but Did Not Conduct Survey

Arizona  
Minnesota  
New York  
Nebraska  
Pennsylvania  
South Carolina  
West Virginia  
Wisconsin

Did Not  
Submit Report \*\*

Missouri  
New Mexico

\*Survey data was not available in time to be included in the analysis tables.

\*\*Alaska does not have Title XX Funded Day Care.

funded providers child enrollment patterns, caregiver wages and rates of reimbursement. The next part (Part III) describes Title XX state agency practices and provider practices of non-staffing areas, i.e. program of activities, caregiver training, nutrition, health and safety, physical environment, social services and parent involvement. Part IV describes state requirements and provider practices related to group composition, i.e. group size and staff/child ratio. The final part (Part V) presents conclusions and study implications. Figures and tables depicting both U.S. summaries and state level information are included for illustration purposes. Summary figures and tables appear in the body of the report, while state tables are found in Appendix A.

## PART II: DEMOGRAPHIC CHARACTERISTICS

### NUMBER AND TYPE OF TITLE XX FUNDED DAY CARE CENTERS AND HOMES (Figures 2, 2a, 2b and 3; State Table 1)

Nationally, there are 10,773 (with five states not reporting) day care centers serving Title XX children.\* Twenty-seven percent (27%) of these centers are eligible to receive a waiver from the group size and staff/child ratio requirements. Waivered centers are centers whose enrollment includes not more than 20 percent or a maximum of ten (whichever is less) Title XX funded children. If a center receives a waiver, the group size and staff/child ratio requirements of the proposed HHS day care regulations do not apply; the center must comply instead with state standards for these components. One-fourth of the Title XX centers are profit centers while three-fourths are either private non-profit or public non-profit centers. This represents a comparable rate of profits to non-profits found in 1973.

With the information from seven states not included, the reported national total of family day care homes serving Title XX funded children is 29,329.

### ENROLLMENT BY AGE OF CHILDREN IN TITLE XX FUNDED FACILITIES (State Table 2)

With information not available from ten states, (see State Table 2) the national total of enrolled children (Title XX funded and non-Title XX funded) in Title XX funded centers is 472,960 (significantly higher than 1979). This is the total number of children in centers which would be affected by the HHS Day Care Regulations. Those children in waiverable centers, however, (27% of centers) would not be affected by the HHS group composition requirements.

Nationally, Title XX funded children account for approximately one half (47%) of all children enrolled in centers serving any Title XX children. In some states, such as Mississippi, the total enrollment in a center is Title XX children. In other states such as Kansas, Title XX children tend to be dispersed among centers serving primarily children supported entirely by parent fees, non-Title XX subsidies, or a combination of other than Title XX funding. States in which children are dispersed among centers can be identified by noting those with a large number of waiverable centers (see State Table 1).

Nationally, six percent (6%) of the children cared for in Title XX funded centers are under two years of age; thirteen percent (13%) are two years old; sixty five percent (65%) are three to six years old; fourteen percent (14%) are six to ten years old; and two percent (2%) are ten to fourteen years old. Five states provide no center care for infants and fourteen states report that they serve no children ten to fourteen years old.

\* It is estimated that there are 569 centers in the five states not reporting on the numbers of centers. The combined total, 11,342, is substantially higher than the 8,100 Federally funded centers reported in the 1977 National Day Care Center Survey.

FIGURE 2

# REPORT ON TITLE XX DAYCARE NUMBER OF DAY CARE CENTERS

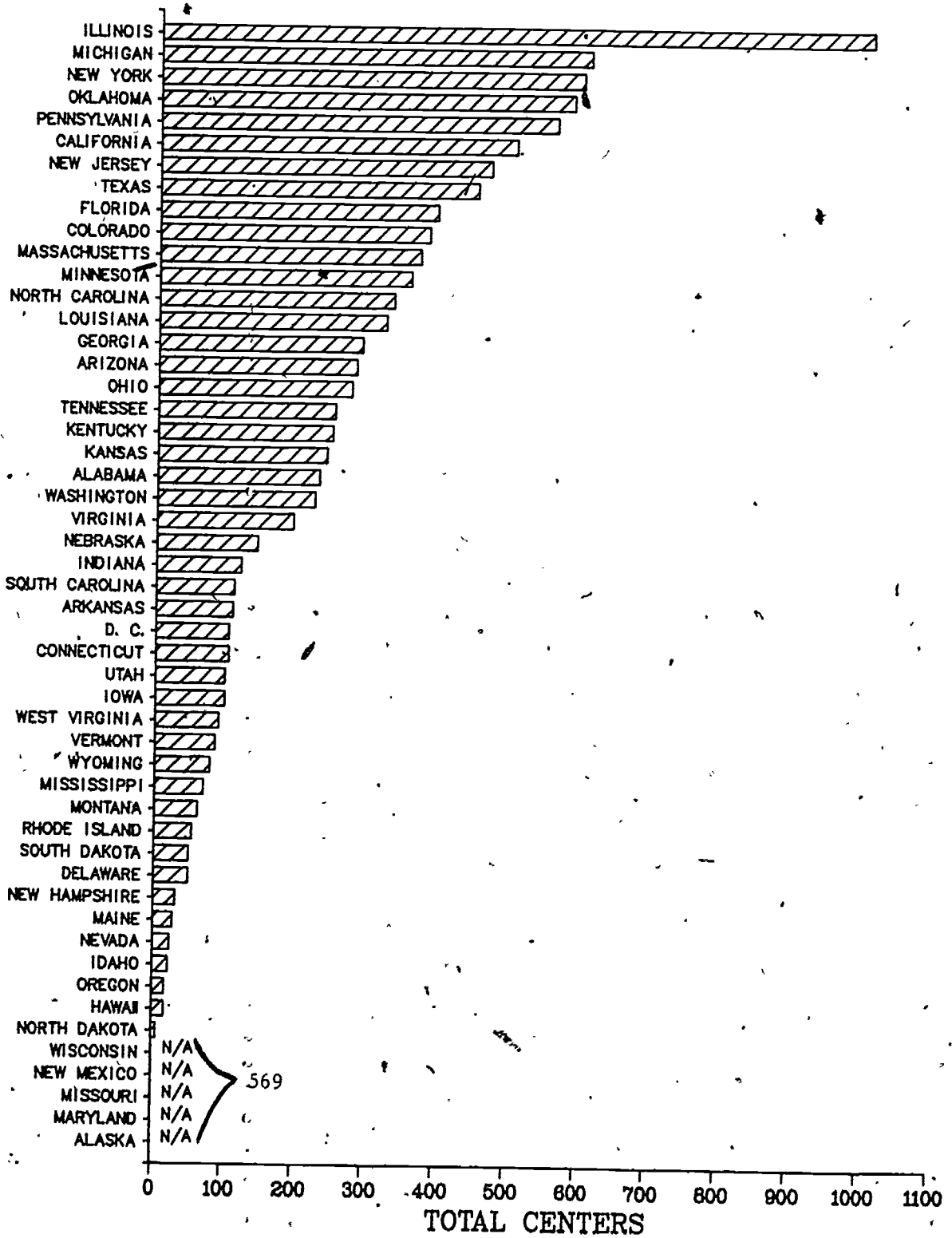
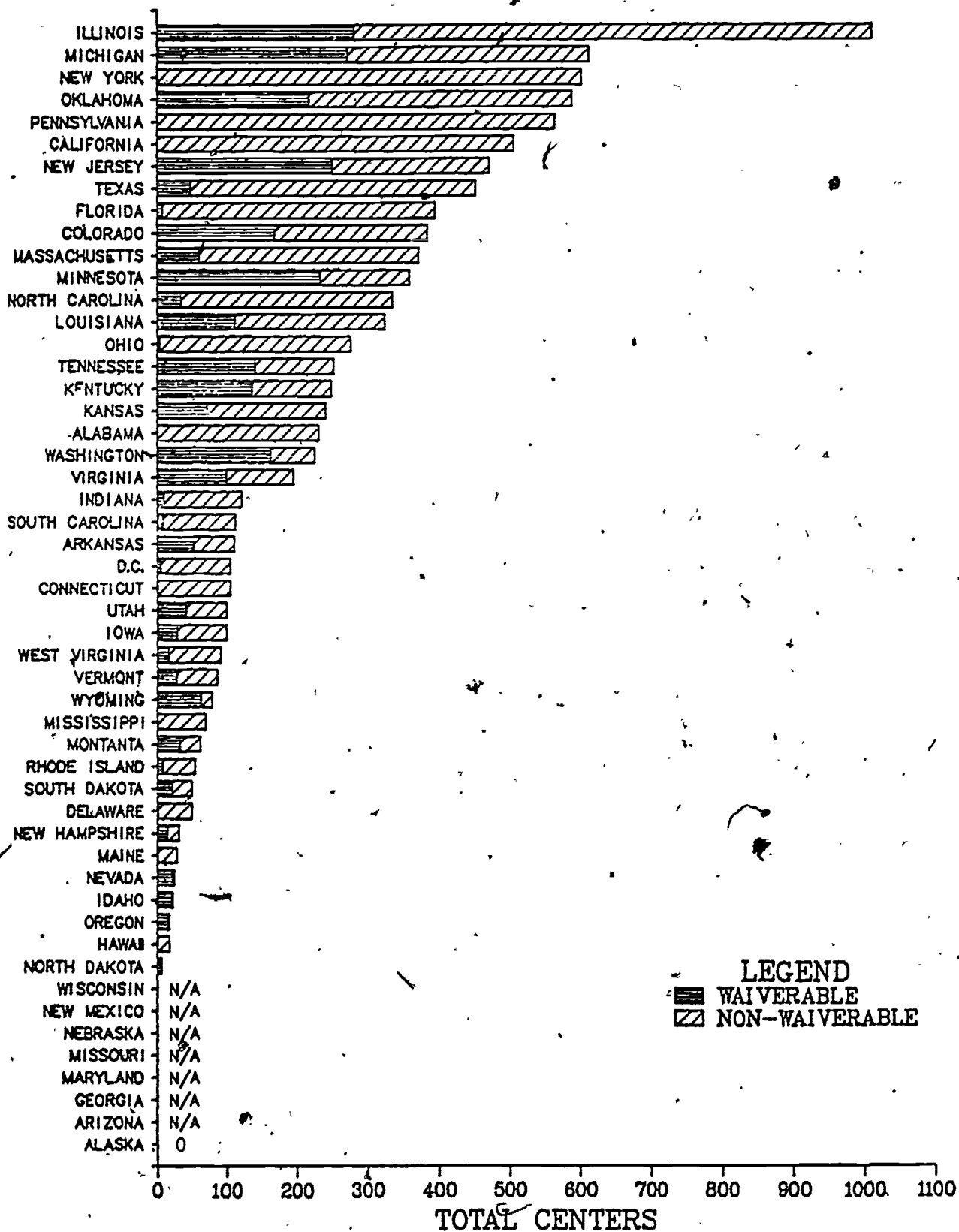


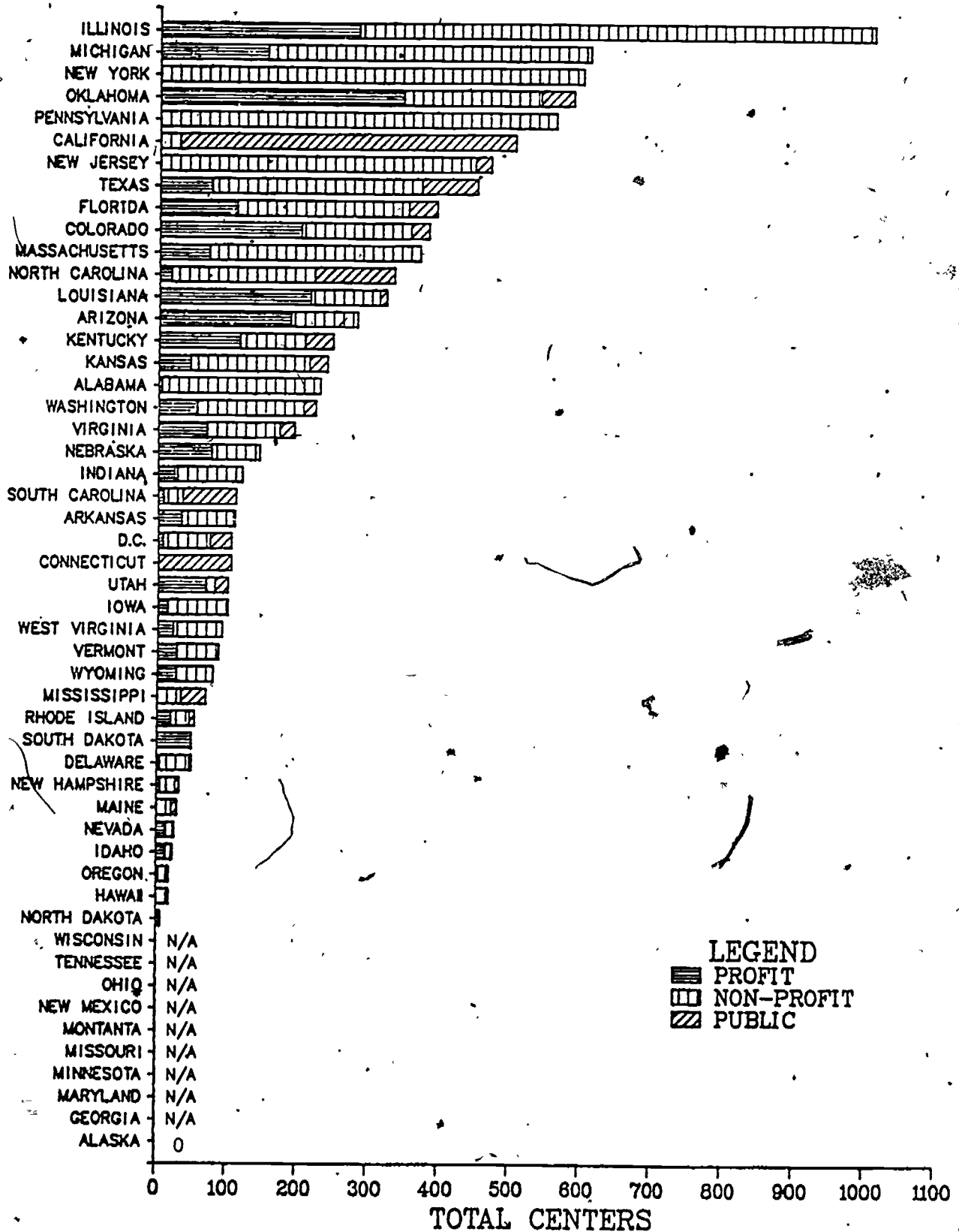
FIGURE 2a

# REPORT ON TITLE XX DAY CARE NUMBER OF DAY CARE CENTERS WAIVERABLE AND NON-WAIVERABLE



LEGEND  
 [Solid Box] WAIVERABLE  
 [Hatched Box] NON-WAIVERABLE

# REPORT ON TITLE XX DAY CARE NUMBER OF DAY CARE CENTERS PROFIT, NON-PROFIT AND PUBLIC

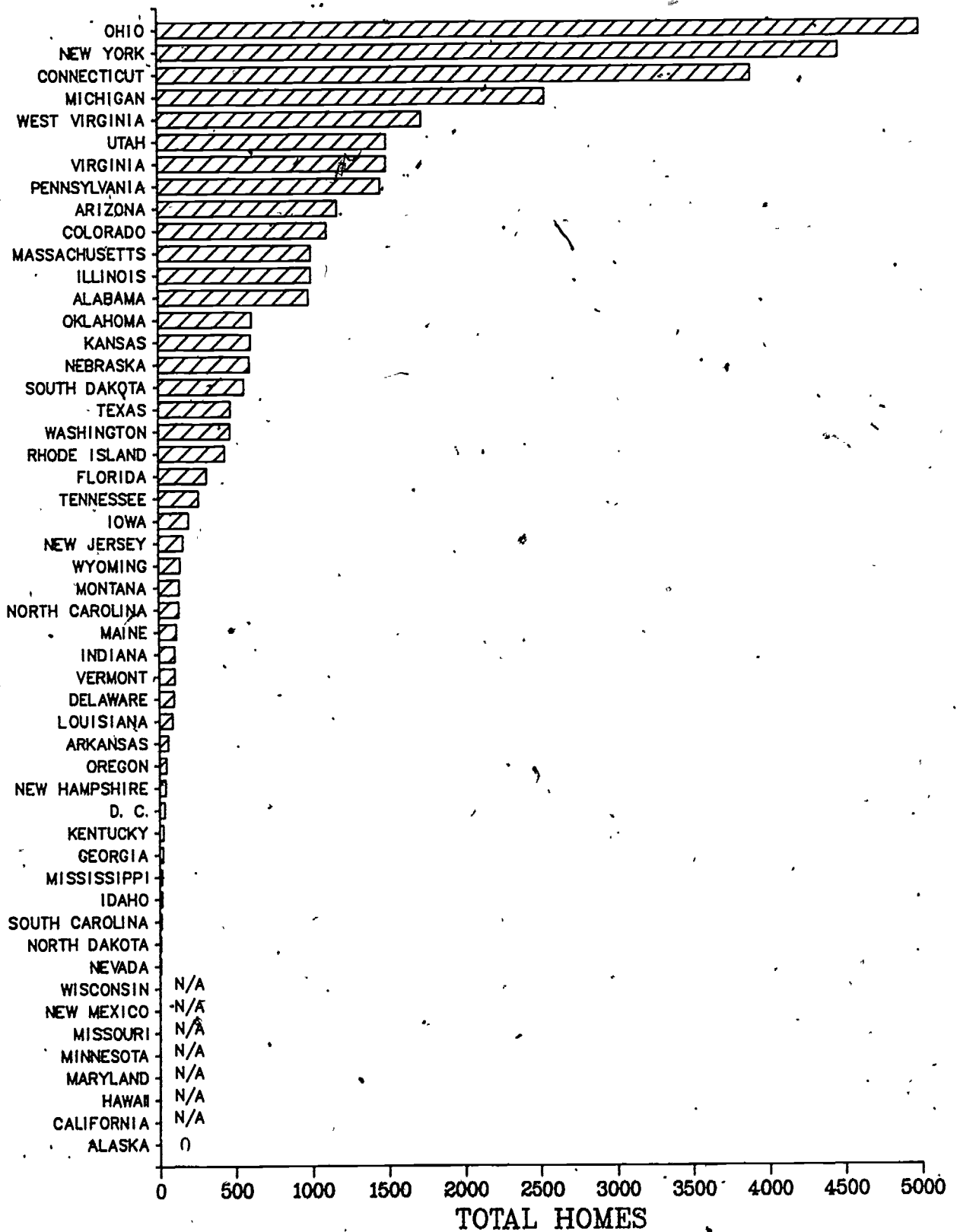


**LEGEND**  
 PROFIT  
 NON-PROFIT  
 PUBLIC



FIGURE 3

# REPORT ON TITLE XX DAYCARE NUMBER OF DAY CARE HOMES



The number of Title XX children served in family day care homes is 96,768 (with seven states not reporting). Not included in this assessment is the number of Title XX children in in-home day care (in 1979 that number represented 11.5% of all day care paid for by Title XX funding). In-home day care is care provided in the child's home.

#### CAREGIVER WAGES (Figures 4 and 5; State Table 3)

The U.S. average hourly wages for each type of caregiver in centers are \$4.78 for a lead caregiver (\$9,942 per year for a 40 hour week); \$3.97 for a caregiver (\$8,258 per year); and \$3.49 for a caregiver aide (\$7,259 per year). (California salaries are not considered in this discussion since its significantly higher salaries are inconsistent with the national picture.)

The average salary for a lead caregiver ranges between \$3.56 per hour in Oklahoma and \$6.02 per hour in Pennsylvania. The average salary for a caregiver ranges from \$2.67 per hour in Montana to \$5.68 per hour in Connecticut. Caregiver aides salaries range between \$2.30 per hour in Montana and \$4.04 per hour in the District of Columbia.

While all states (except Montana) show average salaries above minimum wage for caregivers and caregiver aides, these salaries are lower than the OMB March 1981 poverty guideline for an urban family of four\* (\$8,450 per year).

#### DAILY RATE OF REIMBURSEMENT AND TYPES OF REIMBURSEMENT (State Tables 4 and 5)

The daily rate of reimbursement for a child in care in a center or a home varies greatly both within a state and from state to state.\*\* The reimbursement rate is crucial in determining the level of care that can be provided. A rate of reimbursement can be established in many ways: a state may set a fixed rate; a state may negotiate with a provider up to a maximum rate; a rate may be based on actual cost or market price. Many states use more than one type of reimbursement basis. Nineteen states reported establishing rate differentials for children of differing ages in centers based on the actual cost differences of providing care to different age children.

Reimbursement can be made based on the scheduled enrollment of the center or home or on the number of children actually attending each day. Seventeen states reimburse only using scheduled enrollment, twenty-two states reimburse based on actual attendance, and seven states use both methods. Twenty-five states report having supplemental rates for children with special needs. Thirty-two states have established a sliding fee scale.

#### TITLE XX EXPENDITURES FOR DAY CARE (Figure 6)

The state FY 80 Title XX Comprehensive Annual Service Program (CASP) plans show that states anticipate spending \$722,890,414 or 18.1% of their total federal Title XX funds on day care services for children. This is a reduction from the FY 1979 CASP plans' \$822,289,290 or 21.7% of total Title XX funds. California, planning to shift the support of day care primarily to state funds, accounts for much of this decrease.

\* The OMB March 1981 poverty guideline for a farm family of four is \$7,190.

\*\* These variations preclude meaningful discussion of the actual rates provided.

REPORT ON TITLE XX DAYCARE  
AVERAGE HOURLY WAGES  
FOR DAY CARE LEAD TEACHER

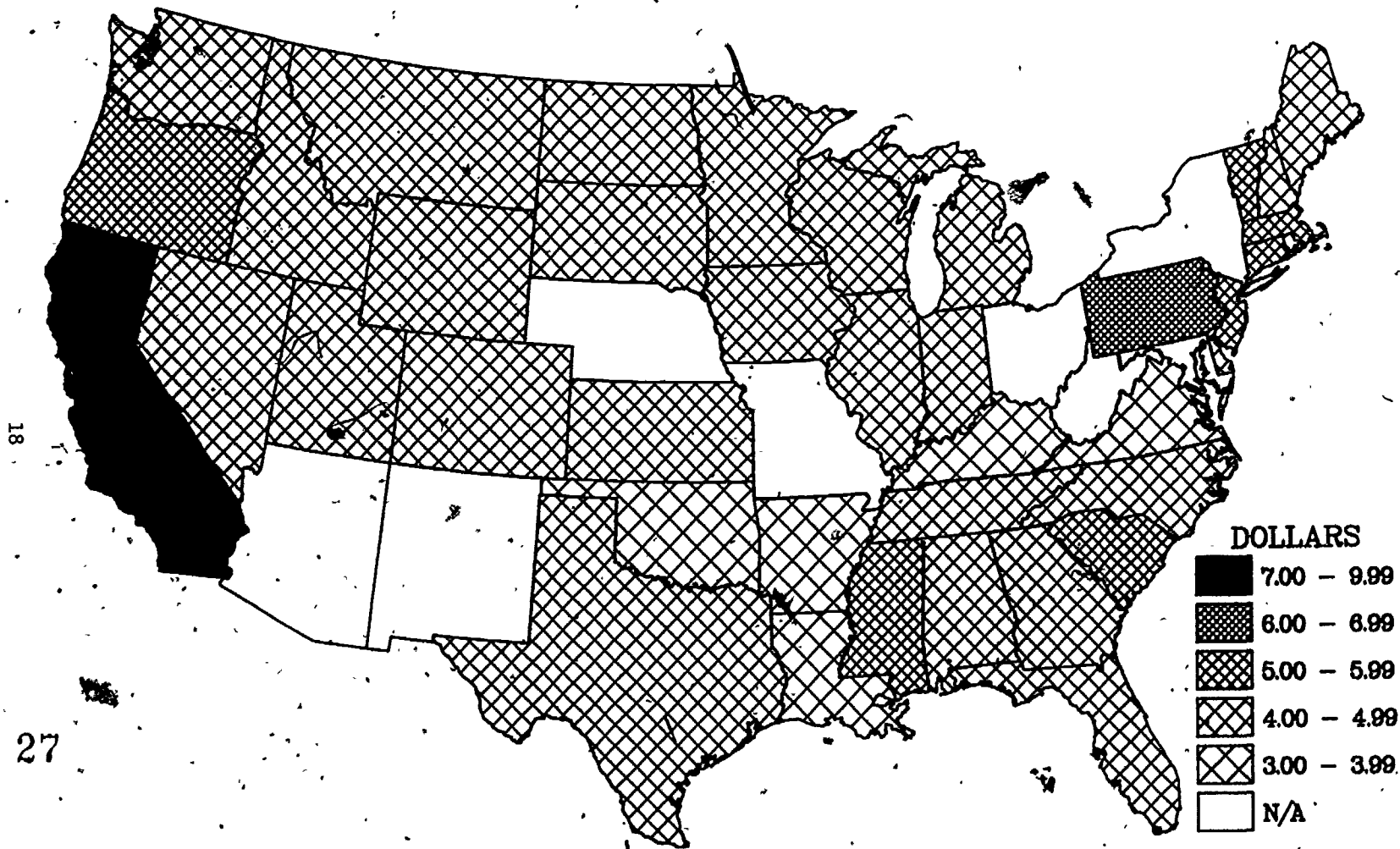


FIGURE 4

REPORT ON TITLE XX DAYCARE  
 AVERAGE HOURLY WAGES  
 FOR DAY CARE TEACHER AIDE

19

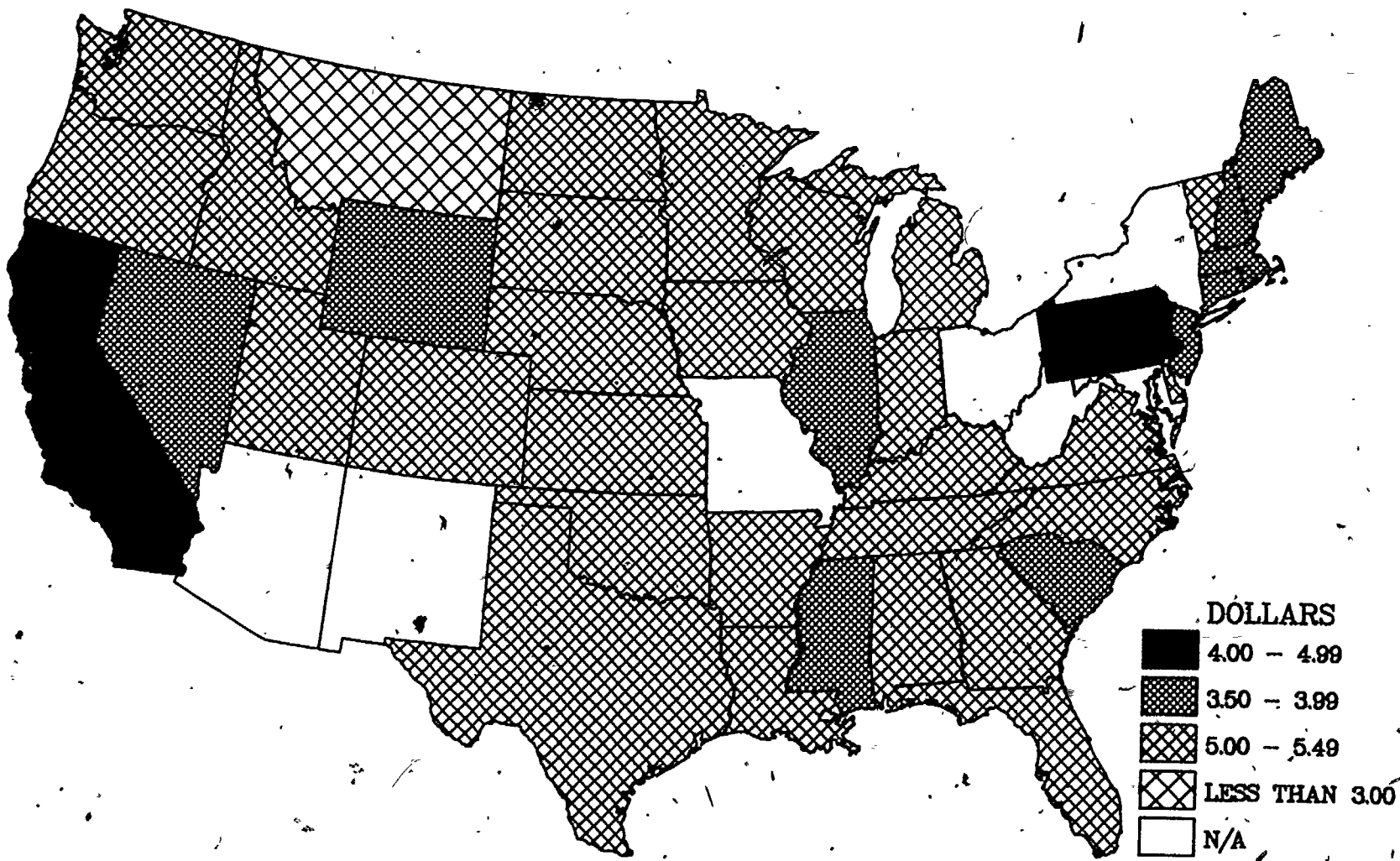


FIGURE 5

29

30

PERCENT OF TITLE XX EXPENDITURES PLANNED  
FOR CHILD DAY CARE  
FY 80

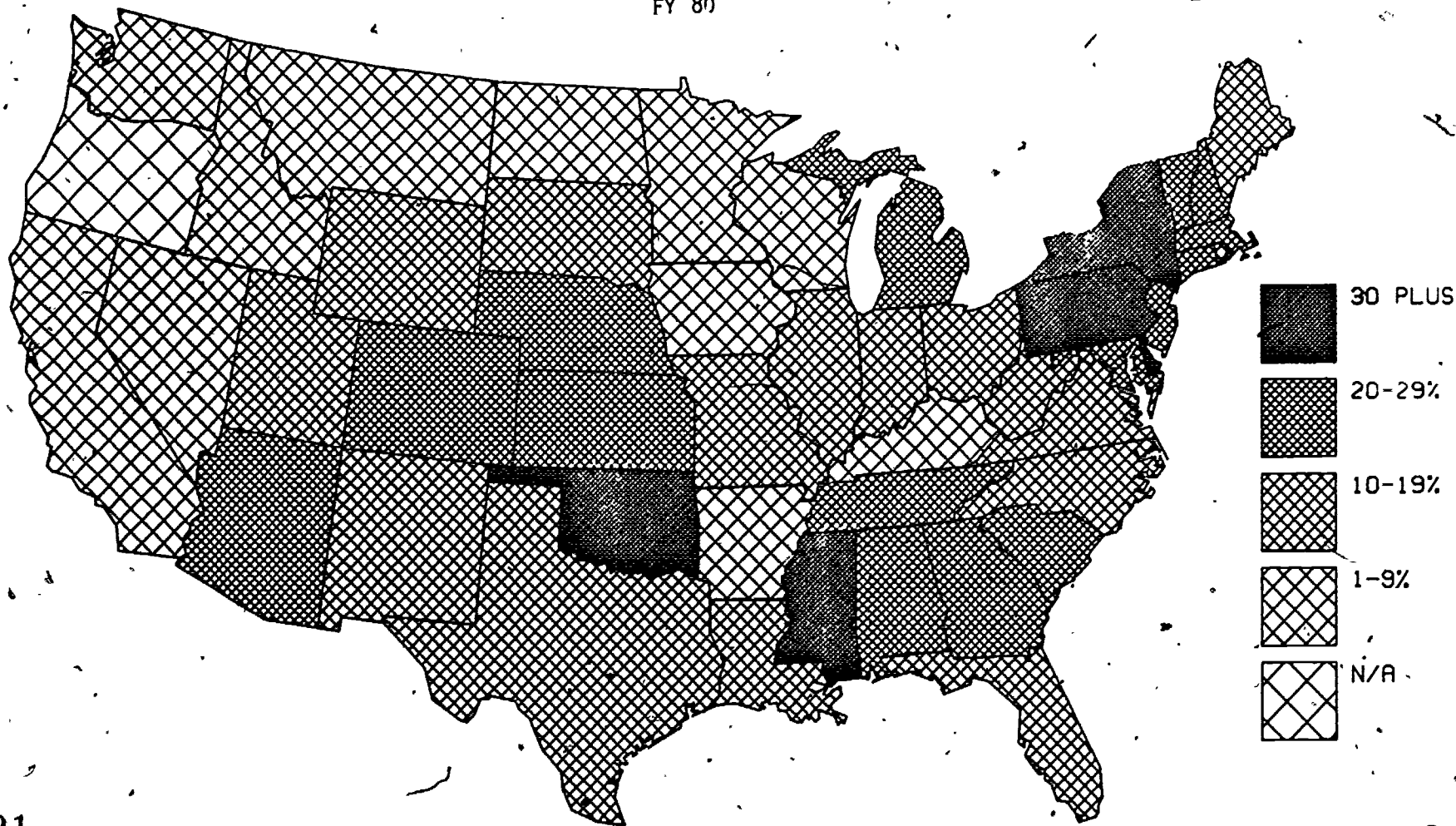


FIGURE 6

Forty-two states continue to report day care as one of the three top funded services. Twenty-two states plan to expend more than 20% of their total Title XX funds on day care services for children. The percentage of Title XX funds expended on child day care ranges from 43.2% in New York to 0% in Alaska.

### PART III: STATE AGENCY AND PROVIDER PRACTICES\*

Assessment findings for each area are organized according to state agency practices and provider practices. Summary Tables 1 and 2 (found at the end of Part III) provide U.S. profiles for each of these areas. State statistical tables for each area are located in Appendix A and are referenced accordingly.

#### PROGRAM OF ACTIVITIES

##### o State Agency Practices (State Table 6)

Ninety-four percent (94%) of states currently require Title XX centers to have a program of activities, while seventy-nine percent (79%) have a similar requirement for homes. Seventy-nine percent (79%) of states also provide technical assistance to centers, while sixty-eight percent (68%) provide assistance to homes.

##### o Provider Practices

No survey questions regarding a program of activities were asked of providers. It was assumed that all providers would respond that they have a planned program of activities.

##### o Discussion

The assessment shows that a program of activities is currently required of most Title XX providers.

#### TRAINING

##### o State Agency Practices (State Table 7)

Fifty-one percent (51%) of states reporting currently require Title XX funded centers to provide an orientation for caregivers. Fifty-seven percent (57%) of states have a training requirement for caregivers, and seventy-two percent (72%) of states have a training plan.

##### o Provider Practices (State Table 15)

While only one-half of the states reporting require centers to provide an initial orientation for caregivers, nearly all of the centers surveyed provide an orientation. The average length of time given to that orientation is 12.8 hours.

The percentage of credentialed center caregivers in states ranges from 8% in Oklahoma to 62% in Hawaii. The U.S. median percentage of credentialed center caregivers is 35%. The state percentage of non-credentialed center caregivers receiving training during the past year ranges from 14% in Wyoming to 100% in six states, with the U.S. median percentage being 73%.

\* Staff/child ratio and group size practices are discussed in Part IV

The percentage of credentialed home caregivers in states ranges from 0% in six states to 33% in North Dakota and Texas with the U.S. median being 8%. The percentage of home caregivers receiving training during the past year ranges from 12% in Louisiana and Virginia to 100% in eight states. The U.S. median is 51%.

o Discussion

The variation in state practices related to training of caregivers reflect both a state difference in the perception of the importance of providing training for caregivers and the limit of available state resources committed to such training.

The generally low percentage of center and home caregivers identified as credentialed can be partially related to the use of the term "Nationally recognized credential". Few caregivers have degrees or the training that meets such a narrow definition of credentialed.

Also related to the low percentage of caregivers with credentials are the average hourly wages shown in State Table 3. A caregiver with a nationally recognized credential can often find a job with a higher salary and shorter hours.

The U.S. medians for caregiver training indicate that about three-fourths of the center caregivers and one-half of home caregivers now receive training annually. Child care related training is undefined in this assessment; that is, no measure was used to determine the type or extent of training received. The proposed 1980 HHS Regulations also make no attempt to define training, thereby leaving it up to states to design a program appropriate to their needs and resources.

## NUTRITION

o State Agency Practices (Figures 7 and 8; State Table 8)

Current state requirements for the provision of meals are identical for centers and homes. Forty-five percent (45%) of states require both Title XX funded centers and homes to provide breakfast; ninety-two percent (92%) of states require both centers and homes to provide snacks; and eighty-nine percent (89%) of states require both centers and homes to provide lunch.

Eighty-one percent (81%) of states provide consultative services on nutrition to centers, while 68% provide such assistance to homes.

Participation in the USDA Child Care Food Program (CCFP) can support the costs of providing meals. Approximately 72.6% of Title XX funded centers now receive CCFP funding. The percentage of participating centers has been limited by the fact that profit centers are not eligible to receive funds. Since this restriction is being eliminated, the percentage of participating centers should increase. Approximately one-fourth of Title XX funded centers are profit centers.



REPORT ON TITLE XX DAYCARE  
PARTICIPATION IN USDA DAYCARE FOOD PROGRAM  
FOR CENTERS

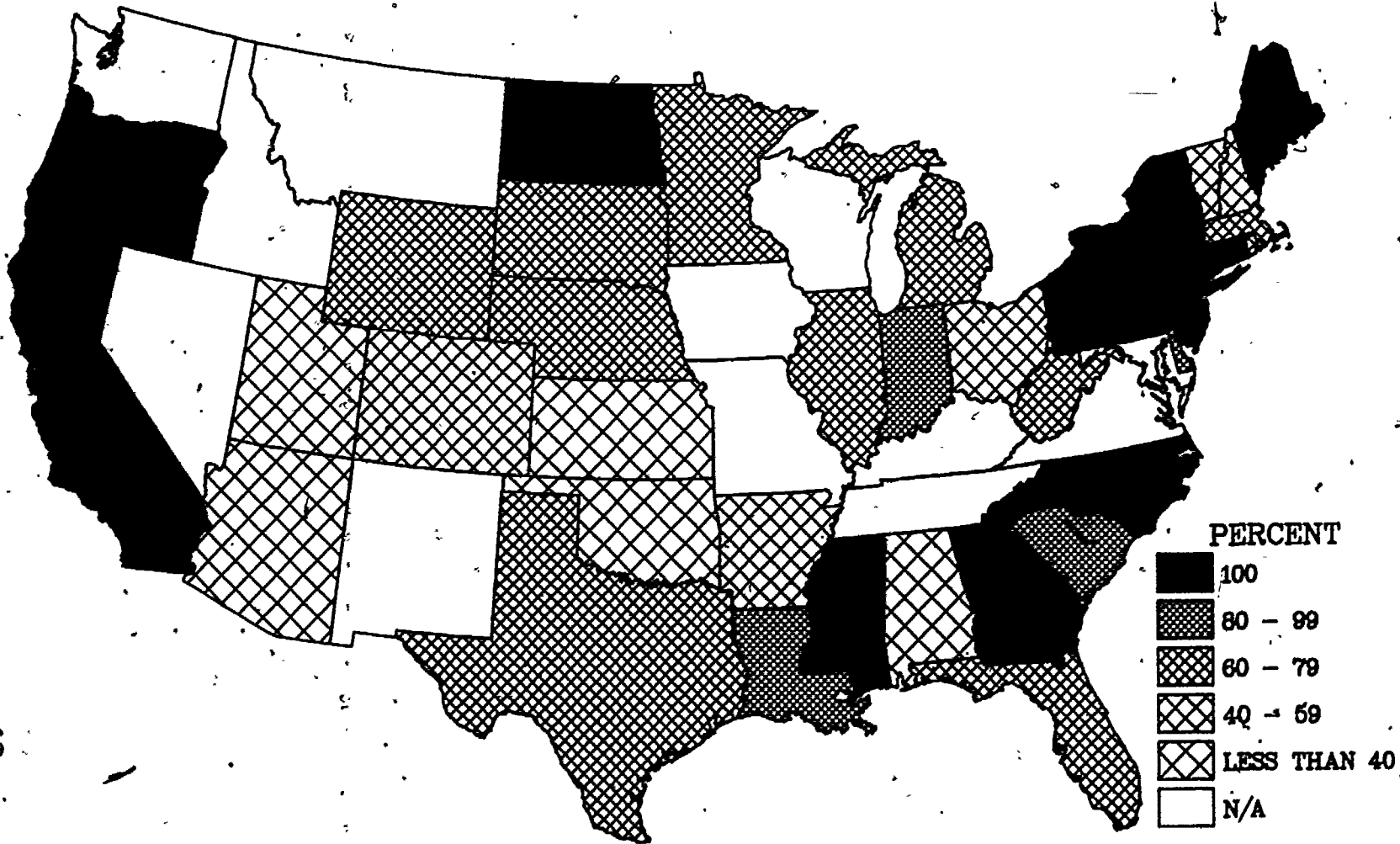


FIGURE 7

37

# REPORT ON TITLE XX DAYCARE PARTICIPATION IN USDA DAYCARE FOOD PROGRAM FOR HOMES

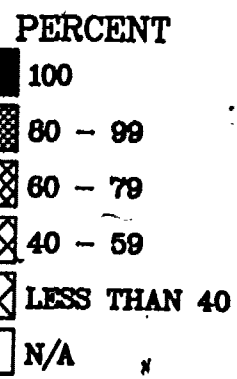
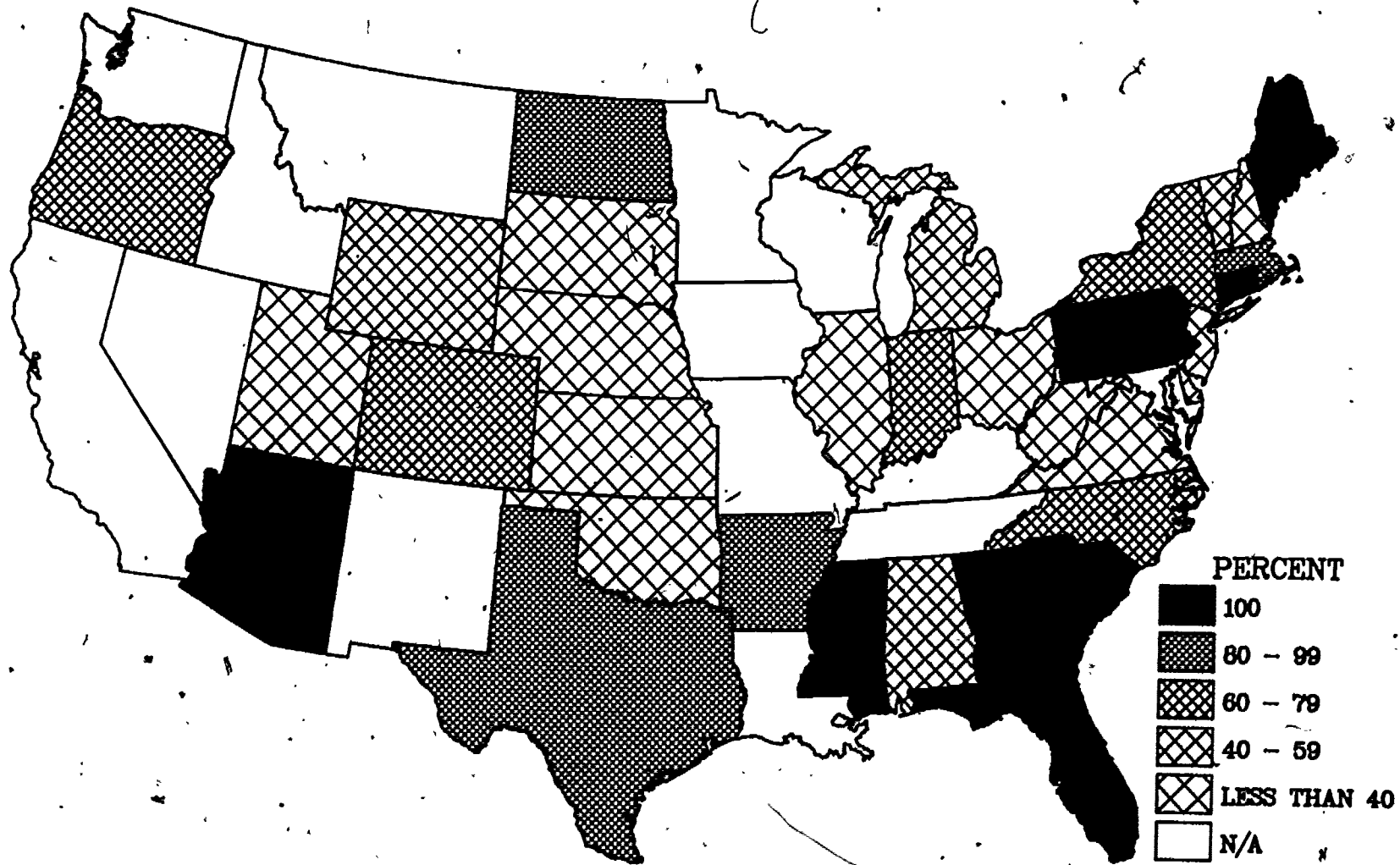


FIGURE 8

All homes may participate in CCFP if they are sponsored by a non-profit umbrella organization. The U.S. average percent CCFP participation of Title XX homes in states is 52.5%. Obviously, some states have been effective in linking CCFP with Title XX homes. Seven states report all homes participating.

o Provider Practices (State Table 16)

Both centers and homes are providing more than the state required meals. Nearly all centers and homes provide snacks and lunches. A median of sixty-eight percent (68%) of centers provide breakfast; a median of seventy-seven percent (77%) of homes provide breakfast.

#### HEALTH AND SAFETY

o State Agency Practices (State Table 9)

Ninety-six percent (96%) of states reporting require immunizations for children in centers; seventy-nine percent (79%) require immunizations for children in homes. Eighty-five percent (85%) of states require health assessments for children in centers, while only half of those states require that the assessments meet the Early Periodic Screening, Diagnosis and Treatment (EPSDT) standards. Seventy percent (70%) of states require that children in homes have a health assessment; only thirty percent (30%) require that the assessment meet the EPSDT standards.

Over half of the states reporting (55%) provide health services information to centers; forty percent (40%) provide such information to homes. Seventy percent (70%) of states assure center children receive services; sixty-eight (68%) of states assure children in homes receive services.

o Provider practices (State Table 17)

Nationally, nearly all providers (U.S. median of 95% for centers and 93% for homes) require immunizations for children in care. Even in a state with no immunization requirement such as Idaho, 57% of centers and 33% of homes require children to have immunizations.

Most providers (U.S. median of 89% for centers and 92% for homes) also require a health assessment for children in care. In those states which have no requirement for a health assessment, some providers have established such a requirement. In Arkansas, for example, which has no assessment requirement, 61% of centers and 57% of homes reported requiring an assessment.

Nearly every center maintains a health record on children in care and most (a U.S. median of 88%) assist parents in obtaining needed services. The percentage of centers receiving health care information and assistance from the state agency varies between 0% and 100%, with a U.S. median of 63%.

o Discussion

There is little argument that immunization and a health assessment should be required in day care centers and homes. Most states and many providers perceive immunizations and health assessments as vital services and protection for children in care. Many providers require immunizations and health assessments even when the state has no requirement. Most centers also assist parents in obtaining needed health services for their children and maintain health records on children in care. While state agencies vary greatly in providing health care information and assistance to centers, about 70% of state agencies assure that children receive needed health care.

Only twenty states reported requiring an assessment that meets the standards of the EPSDT assessment for children in center care; only fourteen states have such a requirement for children in homes. The difference between a health assessment as more generally required and an assessment meeting the standards of EPSDT generates an increased cost of health care. The increased cost of the assessment can vary from location to location and health practitioner to health practitioner.

PHYSICAL ENVIRONMENT

o State Agency Practices (State Table 10)

All states reported having fire and sanitation standards for centers; eighty-nine percent (89%) have fire standards for homes and ninety-two percent (92%) have sanitation standards for homes. Eighty-seven percent (87%) of states have standards for transportation of center children; fifty-seven percent (57%) of states have standards for the transportation of children cared for in family homes. Over half of the states have swimming safety standards for centers; less than half have such standards for homes. Ninety-four percent (94%) of states have equipment safety standards for centers; eighty-three percent (83%) have such standards for homes.

o Provider Practices

Not assessed.

o Discussion

While all states have fire and sanitation standards for centers, five states have no fire standards for homes and four states have no sanitation standards for homes. The standard most often missing is that for swimming safety.

SOCIAL SERVICES

o State Agency Practices (State Table 11)

Over half (55%) of the states reporting require Title XX funded centers to provide information about social services to parents. Forty percent (40%)

require homes to provide such information. Over half of the states provide information to centers and homes about social services. Seventy-five percent (75%) of states assure that HHS funded children receive needed social services.

o Provider Practices (State Table 18)

Nearly all centers (a U.S. median of 94%) provide parents with information and referral to needed social services. Most centers (85%) also provide assistance to parents in obtaining these services, and 79% follow up to see that such services are obtained. A median of 63% of centers received information and assistance from the state agency related to social services for children in care.

o Discussion

While twenty-one states reported having no requirement that centers provide information and assistance to parents related to social services, nearly all centers report that they provide such information and assistance. In Wyoming, for example, although centers are not required to provide social service information to parents, ninety-three percent (93%) of centers reported doing so and sixty-seven (67%) of centers reported assisting parents obtain such services. Also, many states (75%) appear to have established some type of system to assure that HHS funded children receive needed services.

## PARENT INVOLVEMENT

o State Agency Practices (State Table 12)

About half of the states (47%) reporting require centers to provide parents with opportunities to participate in general program policy making. Over half of the states (57%) require centers to allow parents unlimited access to observe their children. Seventy percent (70%) of states provide information and technical assistance to centers on working with parents. Sixty percent (60%) provide such information to homes.

o Provider Practices (State Table 19)

While only half of the states require that Title XX funded centers allow parents to participate in general program policy making, many centers in all states allow such participation (a U.S. median of 73%). Nearly all centers regularly exchange information with parents about their children and allow unlimited access to parents even when such a state requirement is lacking. Nearly all homes also provide parents with opportunities to observe their children.

o Discussion

Provider practices indicate that parents generally have access to observe their children's day care programs, and parents with children in centers can often participate in general program policy making. The actual extent of parent impact on the day care program, however, cannot be determined through this assessment.

**SUMMARY TABLE 1: STATE REQUIREMENTS AND STATE AGENCY PRACTICES RELATIVE TO HHS DAY CARE REGULATORY PROVISIONS (PERCENT OF STATES REPORTING)**

<u>REGULATORY PROVISION</u>	<u>PERCENT OF STATES</u>	
	<u>FOR CENTERS</u>	<u>FOR HOMES</u>
<b>PROGRAM OF ACTIVITIES</b>		
• REQUIREMENT	94	79
• TECHNICAL ASSISTANCE	81	68
<b>CAREGIVER TRAINING</b>		
• ORIENTATION REQUIREMENT	51	-
• TRAINING REQUIREMENT	57 *	57 *
• TRAINING PLAN	72 *	72 *
<b>HEALTH SERVICES</b>		
• HEALTH ASSESSMENT REQUIREMENT	85	70
• IMMUNIZATION REQUIREMENT	96	79
• AAP/EPSDT STANDARD	43	30
• INFORMATION TO PROVIDER	55	40
• ASSURE CHILDREN RECEIVE SERVICE	70	68
<b>MEAL REQUIREMENT</b>		
• BREAKFAST	45	45
• SNACKS	92	92
• LUNCH	89	89
• CONSULTATION	81	68
<b>PHYSICAL ENVIRONMENT</b>		
• FIRE	100	89
• SANITATION	100	92
• TRANSPORTATION	87	57
• SWIMMING	94	83
• EQUIPMENT	55	40
<b>SOCIAL SERVICES</b>		
• PARENT INFORMATION REQUIREMENT	55	40
• PROVIDE INFORMATION TO PROVIDER	55	57
• ASSURE CHILDREN RECEIVE SERVICE	75	75
<b>PARENT INVOLVEMENT OPPORTUNITIES</b>		
• PARTICIPATION IN POLICYMAKING	47	-
• UNLIMITED ACCESS	57	-
• INFORMATION AND TECHNICAL ASSISTANCE	70	60

\* DATA COMBINED FOR HOMES AND CENTERS

SUMMARY TABLE 2: TITLE XX FUNDED CENTER AND HOME PRACTICES RELATIVE TO HHS DAY CARE REGULATORY PROVISIONS (DISTRIBUTION OF STATES REPORTING) \*

DISTRIBUTION OF STATES\*\*

PROVISIONS ***	US MEDIAN %							US MEDIAN %								
	FOR CENTERS							FOR HOMES								
	0-15%	16-30%	31-45%	46-60%	61-75%	76-90%	91-100%	0-15%	16-30%	31-45%	46-60%	61-75%	76-90%	91-100%		
CAREGIVER TRAINING																
• PROVIDE ORIENTATION	100	-	-	-	-	2	40	-	-	-	-	-	-	-		
• CAREGIVERS RECEIVING TRG	73	1	1	5	6	8	10	11	51	4	8	5	8	1	5	9
• CREDENTIALLED CAREGIVERS	35	3	13	18	5	1	-	-	8	28	7	2	-	-	-	-
HEALTH SERVICES																
• REQUIRE HEALTH ASSMT	89	2	1	-	1	2	1	38	92	2	-	2	6	4	2	25
• REQUIRE IMMUNIZATION	99	-	-	-	1	-	1	42	93	-	-	2	2	4	4	29
• MONITOR HEALTH RECORDS	99	-	-	-	-	-	3	41	-	-	-	-	-	-	-	-
• ASSIST PARENTS	88	-	-	-	1	4	16	18	-	-	-	-	-	-	-	-
• RECD INFO FROM STATES	63	1	3	9	6	7	7	8	-	-	-	-	-	-	-	-
MEAL REQUIREMENT																
• BREAKFAST	68	1	3	5	6	14	6	7	77	1	1	2	4	9	13	8
• SNACKS	97	1	-	-	-	-	3	39	96	-	-	-	-	-	5	35
• LUNCH	94	-	-	-	1	3	3	36	94	-	-	-	-	1	9	30
SOCIAL SERVICES																
• PARENT I&R	94	-	-	-	-	1	8	29	-	-	-	-	-	-	-	-
• PARENT ASSISTANCE	85	1	-	1	1	8	17	10	-	-	-	-	-	-	-	-
• FOLLOW-UP SERVICE	79	1	-	1	3	9	15	9	-	-	-	-	-	-	-	-
• RECD INFO FROM STATE	63	-	-	6	12	8	4	9	-	-	-	-	-	-	-	-
PARENT INVNT OPPORTUNITIES																
• UNLIMITED ACCESS	95	-	-	-	-	1	-	35	-	-	-	-	-	-	-	-
• REGULARLY EIC OF INFO	100	-	-	-	-	-	-	40	-	-	-	-	-	-	-	-
• PROGRAM POLICY/MAING	73	1	1	2	6	8	9	8	-	-	-	-	-	-	-	-
• OBSERVE CHILDREN	-	-	-	-	-	-	-	-	95	-	-	-	-	1	2	35

\*. GROUP COMPOSITION PROVISIONS ARE PRESENTED ON SUMMARY TABLES 3-11

44 \*\* THE TOTAL NUMBERS OF STATES REPORTING PROVIDER PRACTICES TO SPECIFIC PROVISIONS VARIES BASED UPON STATE AVAILABILITY OF SUCH INFORMATION

\*\*\* PROGRAM OF ACTIVITIES AND PHYSICAL ENVIRONMENT PROVIDER PRACTICES WERE NOT ASSESSED

#### PART IV: GROUP COMPOSITION

The intent of group composition requirements is to insure sufficient numbers of caregivers are providing safe and protective care and supervision to children and that children are cared for in grouping arrangements which promote their age-appropriate development. Since the composition of a group comprises both numbers of children as well as numbers of caregivers, group size and staffing requirements are inextricably linked in a classroom. This important linkage was carefully considered when these two provisions were developed for day care centers. Group composition in family day care homes has different characteristics and dimensions, and therefore their regulatory provision as well as their assessment results are treated separately.

Group size addresses the maximum number of children that can comprise single groups. A group is a "cluster of children assigned to one or more caregivers." More than one group of children may occupy a single room provided that each group meets the group size requirement and has its own clearly defined physical space with at least one principally responsible caregiver. Specific group size prescribed ceilings for day care centers in the proposed 1980 HHS regulations are based upon the recommendations of the National Day Care Study which demonstrated a strong link between this component and quality of care for children. These maximums vary by child age, apply only to certain activity periods of the day (when groups do not, usually merge) and differ depending upon whether a center is reimbursed on a scheduled enrollment basis (paid for child absenteeism) or on an attendance basis (paid only for children in attendance). There is also a mixed-age rule associated with this provision to allow centers administrative flexibility and to group children based upon their developmental rather than their chronological ages, should this be considered desirable. These issues were reflected in both the center assessment survey and in the compilation tables which were provided to states for aggregating and reporting group size practices.

Staffing requirements in the proposed 1980 HHS regulations address the minimum numbers of classroom caregivers (certain volunteers and non-classroom staff are included) that should be scheduled daily to work with children. These minimums are based upon the number of children in each age category which attend the center for specific time periods and the staff/child ratios which differ for each of these regulatory age categories. Like group size, different staff/child ratios are also prescribed for scheduled enrollment and attendance based options. For groups comprising children under two years old, the staff child ratio is 1:3 for each group. However, staffing ratios may be calculated on a center level basis for all ages of children two years and older. As such, a center may compose groups of any ratio of caregivers and children two years and older, provided that the staffing requirements for the center are met. This provision allows for greater flexibility in assigning caregivers based on the developmental needs of children, makes monitoring substantially easier and reduces the overall cost impact of this requirement. This flexibility was reflected in both the center assessment survey and in the compilation tables which were provided to states for aggregating and reporting staffing practices.

The next sections present the summary findings of state provider practices separately for group size and staffing (staff/child ratio) in day care centers. Each of these sections deal with a comparison of HHS and State Licensing Day Care Requirements and actual current practices in Title XX funded centers. The final section presents a discussion of family day care homes.



## GROUP SIZE PRACTICES

The HHS Day Care Regulations group size requirements are:

	Enrollment	Attendance
Birth to 2 years	6	6
2 years	12	12
3 to 6 years	18	16
6 to 10 years	16	14

### HHS vs State Licensing Group Size Requirements

Group size is regulated by state licensing codes in only 18 states. A slightly larger number of states (23) have group size provisions for their Title XX funded centers. This is a relatively small number of states considering the important relationship of group size to the quality of care that has recently been demonstrated for this component in a national study. However, it was not too surprising, since for many years the regulatory emphasis at both the Federal and state levels has been on staff/child ratio and not group size. Considering both the important contribution of group size toward quality and its relatively low cost implications, it is anticipated that more and more states will be incorporating a group size provision into their licensing codes in the near future.

For the 18 states having a group size licensing requirement, the average maximum ceilings are somewhat higher than the HHS requirements across all regulatory age categories. (Although, as seen in State Table 13, these average figures tend to be comparable to the HHS requirements for those 23 states that impose a special group size requirement on Title XX funded centers). As seen in Summary Table 3 below, the average state licensing ceilings for the under two's, two, three, four, five and six + year olds, compared with the HHS ceilings are: 10.0 vs 6; 16.8 vs 12; 19.6, vs 19.9, 21.5 vs 18 and 25.0 vs 16, respectively. In fact, only two state codes are equivalent or better than the HHS requirements for the under two year old age category (Alabama and Illinois); five states for the two year olds (Alabama, Illinois, Kansas, Massachusetts and New Hampshire); two states for the four year olds (Alabama and New York); two states for the five year olds (Alabama and New York); and one state for the six + year olds (Alabama). Only Alabama has HHS equivalent or lower group size licensing ceilings across all age categories. On the other hand, the group size ceilings were the highest across most age categories for North Carolina, Ohio and Texas. These latter states, as well as others that prescribe higher ceilings than the HHS requirement (see State Table 13), might benefit from lowering them in light of the earlier discussion depicting the cost-effectiveness of this regulatory component.

### Group Size Provider Practices in Title XX Funded Centers

Except for the under two age category, Title XX funded centers\* actually maintain averages below the group size ceilings set by the HHS requirements and well-below

\* Except when noted, findings are presented for non-waiverable centers

SUMMARY TABLE 3: STATES GROUP SIZE LICENSING REQUIREMENTS FOR CENTERS BY AGE OF CHILD (PERCENT OF STATES REPORTING)

MAXIMUM GROUP SIZE REQUIREMENT	AGE OF CHILD					
	UNDER TWO YEARS	TWO YEARS	THREE YEARS	FOUR YEARS	FIVE YEARS	SIX YEARS AND OLDER
6 or Lower	11	5	0	0	0	0
7 to 9	34	16	0	0	0	0
10 to 12	17	5	0	0	0	0
13 to 15	11	11	17	5	5	0
16 to 18	5	21	5	5	11	6
19 to 21	11	26	56	56	28	18
22 to 24	0	0	0	11	0	0
25 to 27	5	11	11	11	28	30
28 or Higher	5	5	11	11	28	47
ALL STATES (%)	18* (100%)	18 (100%)	18 (100%)	18 (100%)	18 (100%)	17 (100%)
MEDIAN STATE CEILING	10.0	16.8	19.6	19.9	21.5	25.0
HHS CEILING *	6	12	18(16)	18(16)	18(16)	16(14)

\* - ONLY 18 STATES REPORTING HAVE GROUP SIZE LICENSING REQUIREMENTS

\*\* - NUMBERS IN PARENTHESIS REFLECT ATTENDANCE REQUIREMENTS

REFERENCE: STATE TABLE 13

state licensing standards. As seen in Summary Tables 4 and 5, these U.S. averages in scheduled enrollment centers are 8.0, 9.6 and 12.2 and in attendance based centers are 6.8, 8.0 and 12.6 for the under two, two and three-to-six year old age categories, respectively. Only the under two year olds (8.0 and 6.8) exceed, on the average, the HHS ceiling requirement of 6.0. However, this is still appreciably lower than the average state licensing requirement of 10.0. Average center practices for the under two year old age category in most states are above the HHS ceiling, regardless of whether the center is reimbursed on a scheduled enrollment basis or on an attendance basis. The opposite is true for the two year and three-to-six year old age categories.

Interestingly, attendance-based waiverable centers (those with less than 20% HHS funded children) maintain lower average group sizes than the non-waiverable centers - (see State Tables 20 and 21), while for the scheduled enrollment centers both waiverable and non-waiverable centers perform identically.

When these findings are considered along with the findings of the 1977 National Day Care Center Survey, it seems more evident that most centers in the U.S. (Title XX funded and non-Title XX funded) would have little difficulty meeting a group size requirement comparable to the proposed HHS ceiling for the two-year-old and three-to-six year old children. Changing the group size ceiling for the under two year olds from 6.0 to 8.0 would also put this category in a more favorable position.

#### State Group Size Practices and Compliance Issues

Only approximately one-fifth (21.6%) of all U.S. groups in Title XX funded centers would not meet the HHS group size requirements (see Summary Table 6). Delaware, Maine, Michigan and Nevada had more than 30% of their groups falling below the HHS requirements, with Delaware (58%), Maine (89%) and Nevada (56%), falling appreciably below. Connecticut (0%), Mississippi (5%), North Dakota (7%) and Oregon (8%) had the smallest percent of groups not meeting the HHS group size requirements.

#### STAFFING (STAFF/CHILD RATIO) PRACTICES

The proposed HHS Day Care Regulations staff/child ratio requirements are:

	Enrollment	Attendance
Birth to 2 years-	1:3	1:3
2 years	1:4	1:4
3 to 6 years	1:9	1:8
6 to 10 years	1:16	1:14

#### HHS vs State Licensing Staff/Child Ratio Requirements

Staff/Child ratio is regulated by most state licensing codes. With the exceptions of Mississippi and Connecticut, each state has licensing standards that limit the

**SUMMARY TABLE 4: ACTUAL AVERAGE GROUP SIZE PRACTICES IN SCHEDULED ENROLLMENT  
TITLE XX FUNDED NON-WAIVERABLE CENTERS (PERCENT OF STATES REPORTING)**

ACTUAL AVERAGE GROUP SIZE	AGE OF CHILD		
	UNDER TWO YEARS	TWO YEARS	THREE TO SIX YEARS*
6 or Lower	12	0	0
7 to 9	82	42	0
10 to 12	6	52	58
13 to 15		5	37
16 to 18			5
19 to 21			
22 to 24			
25 to 27			
28 or Higher			
<b>ALL STATES (%)</b>	<b>17 (100%)</b>	<b>19 (100%)</b>	<b>19 (100%)</b>
<b>MEDIAN STATE PRACTICE</b>	<b>8.0</b>	<b>9.6</b>	<b>12.2</b>
<b>HHS CEILING</b>	<b>8</b>	<b>12</b>	<b>18</b>

\* - GROUP SIZE FIGURES FOR THE SIX AND OLDER AGE CATEGORIES ARE NOT REPORTED BECAUSE OF VERY SMALL SAMPLE SIZES

REFERENCE: STATE TABLE 20

**SUMMARY TABLE 5: ACTUAL AVERAGE GROUP SIZE PRACTICES IN ATTENDANCE BASED TITLE XX FUNDED NON-WAIVERABLE CENTERS (PERCENT OF STATES REPORTING)**

ACTUAL AVERAGE GROUP SIZE	AGE OF CHILD		
	UNDER TWO YEARS	TWO YEARS	THREE TO SIX YEARS*
6 or Lower	24	22	0
7 to 9	64	44	11
10 to 12	12	28	37
13 to 15		6	47
16 to 18			5
19 to 21			
22 to 24			
25 to 27			
28 to Higher			
<b>ALL STATES (%)</b>	<b>18 (100%)</b>	<b>19 (100%)</b>	<b>20 (100%)</b>
<b>MEDIAN STATE PRACTICE</b>	<b>6.8</b>	<b>8.0</b>	<b>12.6</b>
<b>HHS CEILING</b>	<b>6</b>	<b>12</b>	<b>16</b>

\* - GROUP SIZE FIGURES FOR THE SIX AND OLDER AGE CATEGORIES ARE NOT REPORTED BECAUSE OF VERY SMALL SAMPLE SIZES

REFERENCE: STATE TABLE 21

36

53

54

**SUMMARY TABLE 6: STATE GROUP SIZE COMPLIANCE IMPLICATIONS (PERCENT OF GROUPS IN NON-WAIVERABLE TITLE XX FUNDED CENTERS BELOW HHS REQUIREMENTS)**

PERCENT OF GROUPS  
NOT MEETING HHS  
GROUP SIZE  
REQUIREMENTS

NUMBER OF  
STATES

NAMES OF STATES

0 - 10%

4

Ct.; Miss.; N.D.; Or.

11 - 15%

9

Ark.; Hawaii; Kan.; Mass.; N.C.; R.I.; S.D.; Tenn.; Vt.

16 - 20%

5

Colo.; D.C.; Ga.; Iowa; Ohio

21 - 25%

8

Fla.; Ky.; Mont.; N.H.; N.J.; Tex.; Utah; Va.

26 - 30%

6

Ala.; Ill.; Ind.; La.; Okla.; Wash.

More than 30%

4

Del.; Maine; Mich.; Nev.

TOTAL STATES

36

U.S. MEDIAN ACROSS STATES (%)

21.6%

REFERENCE: STATE TABLE 22

ratio of children to adults in day care center classrooms. Connecticut, however, does require that at least two staff be present in each classroom. Louisiana, while identifying ratios does not mandate that non-Title XX funded centers be licensed. Nearly all States (except Montana) require a larger number of children to be supervised by a single caregiver as the ages of the children increase.

As seen in Summary Table 7, large differentials in ratio requirements exist between the HHS requirement and the U.S. average staff/child ratio state licensing requirement for all regulatory age categories. (Although as seen in State Table 14, these differences tend to be smaller and in some cases non-existent, when states impose a different requirement for their Title XX funded centers--17 states currently impose different requirements.) The average minimum state licensing staff/child ratio for the under two's, two, three, four, five and six + year olds compared with the proposed HHS minimums are: 1:5.3 vs 1:3; 1:7.9 vs 1:4; 1:10.0 vs 1:9; 1:11.9 vs 1:9; 1:13.9 vs 1:9 and 1:16.7 vs 1:16, respectively. Only for the six + year old category is the relative stringency of the proposed HHS requirement less pronounced. The largest differential, in terms of proportionate child/caregiver differences, is observed for the under two and two year old children.

Among the states, only several have licensing codes as stringent as the proposed HHS requirement for specific age categories: one state for the under two year olds (Arkansas); two states for the two year olds (Massachusetts and New Hampshire); seven states for the three year olds (Alabama, Washington, D.C., Iowa, North Dakota, South Dakota, New York, and Tennessee); and three states for the four and five year olds (Alabama, New York and South Dakota). However, about one-third of the states are comparable to the HHS requirements for the school age children (six years and older). At the other end of the spectrum, Arizona, Arkansas, Delaware, Florida, Georgia, Hawaii, North Carolina, Ohio, South Carolina, Texas and Utah, have significantly less stringent staff/child ratios for most age categories.

#### Staff/Child Ratio Provider Practices in Title XX Funded Centers

Current day care center practices are much closer to the proposed HHS regulations than to the state licensing codes across all regulatory age categories. As seen in Summary Tables 8 and 9, the average ratio of caregiver hours to child hours across all states in scheduled enrollment centers is 1:3.7, 1:4.5 and 1:7.6 and in attendance based centers are 1:3.0, 1:4.4 and 1:6.8 for the under two, two and three-to-six year old age categories, respectively. In approximately 50% of the states, centers currently maintain average staff/child ratios comparable to, or better than, the HHS requirements for the under two and two-year-old age categories in both scheduled enrollment and attendance based centers. For the three-to-six year old category, the corresponding percentage of states whose centers perform comparably to the HHS requirements is much higher (90% -- scheduled enrollment and 78% -- attendance based). Only scheduled enrollment centers in Georgia and Louisiana and attendance based centers in Florida, Oklahoma, Utah and Virginia currently maintain ratios which, on the average, are lower (more children per caregiver than the HHS requirements for three-to-six year olds). Finally, as seen in State Tables 23 and 24, waiverable and non-waiverable center practices are approximately equal.

SUMMARY TABLE 7: STATES STAFF/CHILD RATIO LICENSING REQUIREMENTS FOR CENTERS BY AGE OF CHILD (PERCENT OF STATES REPORTING)

MINIMUM STAFF/CHILD RATIO REQUIREMENT (CHILDREN PER CAREGIVER)	AGE OF CHILD					
	UNDER TWO YEARS	TWO YEARS	THREE YEARS	FOUR YEARS	FIVE YEARS	SIX YEARS AND OLDER
3 or Lower	2	0	0	0	0	0
4 to 5	48	20	0	0	0	0
6 to 7	18	11	4	0	0	0
8 to 9	22	25	11	7	7	0
10 to 11	10	27	49	31	22	9
12 to 13	0	14	9	20	9	11
14 to 15	0	2	24	22	22	8
16 or Higher	0	0	2	20	40	62
ALL STATES (%)	40 (100%)	44 (100%)	45 (100%)	45 (100%)	45 (100%)	45 (100%)
MEDIAN STATE MINIMUM	5.3	7.9	10.0	11.9	13.9	16.7
HHS MINIMUM *	3	4	9(8)	9(8)	9(8)	16(14)

REFERENCE: STATE TABLE 14

\* NUMBERS IN PARENTHESES REFLECT ATTENDANCE REQUIREMENTS



SUMMARY TABLE 8: ACTUAL AVERAGE STAFF/CHILD RATIO PRACTICE IN SCHEDULED ENROLLMENT  
TITLE XX FUNDED NON-WAIVERABLE CENTERS (PERCENT OF STATES REPORTING)

ACTUAL AVERAGE STAFF/ CHILD RATIO (CHILDREN PER CAREGIVER)	UNDER TWO YEARS	TWO YEARS	THREE TO SIX YEARS*
3 or Lower	41	17	0
4 to 5	59	55	6
6 to 7		22	33
8 to 9		6	50
10 to 11			11
12 to 13			
14 to 15			
16 or Higher			
<hr/>			
ALL STATES (%)	18 (100%)	19 (100%)	19 (100%)
MEDIAN STATE PRACTICE	3.7	4.5	7:6
HHS MINIMUM	3	4	9

REFERENCE: STATE TABLE 23

\* STAFF/CHILD RATIO FIGURES FOR THE SIX AND OLDER AGE CATEGORIES ARE NOT REPORTED BECAUSE OF VERY SMALL SAMPLE SIZES

SUMMARY TABLE 9: ACTUAL AVERAGE STAFF/CHILD RATIO PRACTICE IN ATTENDANCE  
BASED TITLE XX FUNDED NON-WAIVERABLE CENTERS (PERCENT OF STATES REPORTING)

ACTUAL AVERAGE STAFF/CHILD RATIO (CHILDREN PER CAREGIVER)	UNDER TWO YEARS	TWO YEARS	THREE TO SIX YEARS*
3 or Lower	47	17	0
4 to 5	47	61	16
6 to 7	6	22	47
8 to 9			32
10 to 11			5
12 to 13			
14 to 15			
16 or Higher			
ALL STATES (%)	18 (100%)	18 (100%)	19 (100%)
MEDIAN STATE PRACTICE	3.0	4.4	6.8
HHS MINIMUM	3	4	8

REFERENCE: STATE TABLE 24

\* STAFF/CHILD RATIO FIGURES FOR THE SIX AND OLDER AGE CATEGORIES ARE NOT REPORTED BECAUSE OF VERY SMALL SAMPLE SIZES

## State Staffing Practices and Compliance Issues

Summary Table 10 and Figure 9 identifies the number and names of states that would need additional caregiver staff if the HHS regulations were in force. The measurement assumptions used to calculate these numbers approximate those reflected in both the regulations themselves and in the interim regulations guidelines. In order to be consistent with these measurement indices, separate figures are provided for the under two year old and the two year and older age groups.

Approximately 1,789 additional FTE caregivers would be needed to meet the HHS staffing requirements for the under two year olds, while an additional 2,455 caregivers would be needed for the two year and older children. These combined additional staff would represent about a seven percent increase in the number of FTE caregivers currently employed in Title XX funded centers throughout the U.S., at an estimated additional cost of approximately \$33 million (using a realistic \$8,000 per annum salary base). While these figures were calculated on appropriate survey data available from only 36 states, an examination of those states that were not included, revealed that only two (Arizona and South Carolina) had significantly less stringent staff/child ratio licensing codes than the HHS requirements.

Interestingly, four states alone (Florida, Illinois, Oklahoma and Texas), account for one-half of the additionally needed 2,455 caregiver staff for the two year and older population. On the other hand, over 50% of the states would each need less than 26 FTE caregivers statewide to meet the HHS requirements. For the under two year old population, three of the above four high deficit states (Florida, Oklahoma and Texas) account for well over one-half of the additionally needed 1,789 FTE caregiver staff.

Summary Table 11 (also Figure 9) identifies the number and names of states whose centers currently function with more caregiver staff than the minimum needed to meet the HHS requirements. An examination of this table reveals that there is a surplus of 8,201 FTE caregivers supervising children two years and older in Title XX funded centers across the U.S. This represents a figure more than three times the number of deficit caregivers identified earlier. Centers in over one-third of the states each have more than 200 FTE surplus caregiver staff. Interestingly, Florida, Illinois, Oklahoma, and Texas are among this one-third, thus signifying extreme variations in staffing patterns in those very large day care population states. The largest surplus states were California (863), Illinois (912), Massachusetts (739), Michigan (682) and Texas (749). For the under two year old population, only 550 surplus FTE caregivers are found, or approximately one-third the number of deficit caregivers identified earlier. This small number is not surprising considering the very stringent ratio requirement (1:3) for this regulatory age category.

Surplus caregivers (more staff than needed to meet the minimum staffing requirement in a center) cannot be used to offset the caregivers needed in another center. Centers are overwhelmingly privately operated and most operate independently. Budgets and decisions about staffing are therefore made on a center level. A center has a certain number of staff in relation to its definition of child care, its perception of need, and its financial situation.

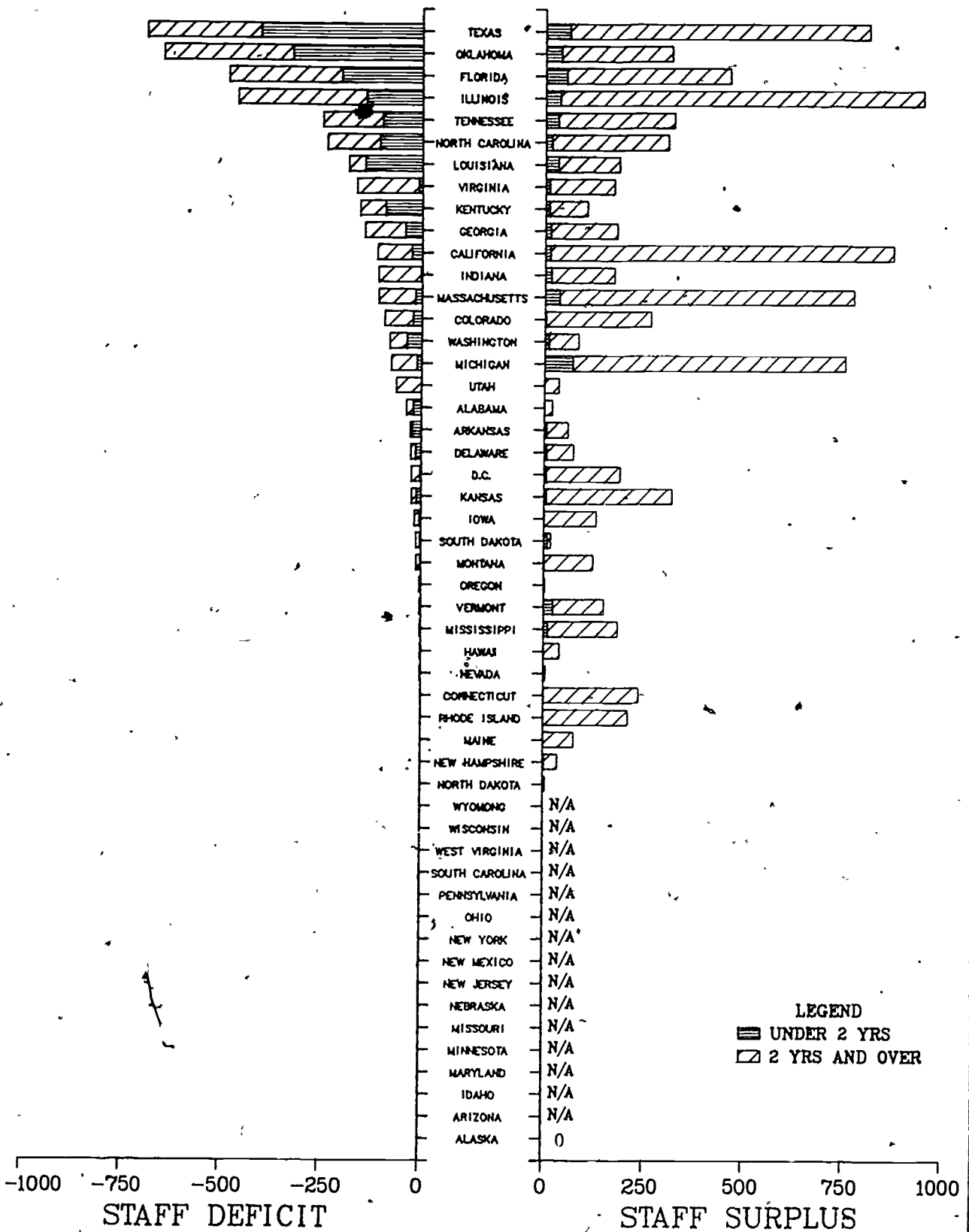
**SUMMARY TABLE 10: STATE STAFFING COMPLIANCE IMPLICATIONS (ADDITIONAL FTE CAREGIVERS NEEDED TO MEET HHS REQUIREMENTS IN NON-WAIVERABLE TITLE XX FUNDED CENTERS)**

ADDITIONAL FTE CAREGIVERS NEEDED	NUMBER OF STATES		NAMES OF STATES	
	CHILDREN UNDER TWO YEARS OLD	CHILDREN TWO YEARS AND OLDER	CHILDREN UNDER TWO YEARS OLD	CHILDREN TWO YEARS AND OLDER
0 - 25	22	19	Ala, Ark, Colo, CT, Del, DC, Ind, Iowa, Kan, Mass, MI, Miss, MT, NV, NH, ND, OH, Ore, SD, UT, VT, VA	Ala, Ark, CT, Del, DC, Hawaii, Iowa, Kan, ME, Miss, MT, NV, NH, ND, OH, Ore, RI, SD, VT
26 - 50	3	2	Cal, GA, WA	LA, WA
51 - 75	0	4	-----	Colo, KT, MI, UT
76 - 100	2	3	KT, TN	CA, GA, Mass
101 - 125	1	1	NC	Ind
126 - 150	2	2	Ill, LA	NC, TN
151 - 175	0	1	-----	VA
176 - 200	0	0	-----	-----
201 - 250	1	0	Fla	-----
251 - 300	0	2	-----	Fla, TX
More than 300	2	2	Okla, TX	Ill, Okla
<b>TOTAL STATES</b>	<b>33</b>	<b>36</b>		
<b>TOTAL DEFICIT STAFF</b>	<b>1,789</b>	<b>2,455</b>		

REFERENCE: STATE TABLE 25

Figure 9

# REPORT ON TITLE XX DAY CARE COMPARISON OF STAFF SURPLUS AND DEFICIT, BY STATE



SUMMARY TABLE 11: STATE STAFFING COMPLIANCE IMPLICATIONS (SURPLUS FTE CAREGIVERS)

SURPLUS FTE CAREGIVERS	NUMBER OF STATES		NAMES OF STATES	
	CHILDREN UNDER TWO YEARS OLD	CHILDREN TWO YEARS AND OLDER	CHILDREN UNDER TWO YEARS OLD	CHILDREN TWO YEARS AND OLDER
0 - 25	24	5	Ala, Ark, CA, Colo, CT, Del, DC, GA, Ind, Iowa, Kan, KT, Miss, MT, NV, NH, NC, ND, Ore, SD, UT, VT, VA, WA	Ala, NV, ND, Ore, SD
26 - 50	6	3	Ill, LA, Mass, OH, Okla, TN	Hawaii, NH, UT
51 - 75	3	2	Fla, MI, TX	Ark, Del
76 - 100	0	3		ME, WA, KT
101 - 125		1		MT
126 - 150		2		Iowa, VT
151 - 175		4		GA, Ind, LA, VA
176 - 200		2		DC, Miss
201 - 250		2		CT, RI
251 - 300		4		Colo, NC, Okla, TN
300+		8		CA, Fla, Ill, Kan, Mass, MI, OH, TX
TOTAL STATES	33	36		
TOTAL SURPLUS STAFF	550	8,201		

If centers exceeding minimum requirements chose to reduce surplus staff through expansion of child enrollment, natural attrition of staff over time, or other changes in staffing arrangements, substantial savings could certainly be realized. The reduction in the cost of care per child would be dramatic. The savings through such a reduction in staff would be significantly greater than the cost (\$33 million) of the additional staff required on both a nationwide as well as an individual state level.

#### GROUP COMPOSITION FOR FAMILY DAY CARE HOMES

The proposed HHS group composition requirement for family day care homes has less measurement assumptions and indices than for center-based programs; however, it contains complex multiple mixed-age provisions. For homes with one caregiver--the group size can never exceed five children at any given time if children of all ages are present (no more than two children can be under two years of age); or three if all children present are under two years of age; or six if all children present are two years of age or older. For homes with two or more caregivers--the group size can never exceed ten at any given time if children of all ages are present (no more than two children can be under two years of age); or twelve if all children present are two years and older. The requirement also contains rules governing the caregiver's own children under six years old and the number of additional school age children which can be cared for before and after school hours.

The complexity of these rules precluded any reliable survey assessment of Title XX funded home practices from a compliance perspective. It also precluded a clear tabular presentation of state licensing codes governing group composition for family day care homes. The only information which can be reported is found in State Table 27. This table presents a distribution of the numbers of children (ages 0 to 6) which attend Title XX funded family day homes during morning hours. As seen in this table, the median percentage distribution across all reporting states is: one child (6.6%); two to three children (26.8%); four to five children (38.2%); six children (10%); and seven to twelve children (8.5%). The modal percentage falls in the four to five children category.

## PART V: CONCLUSIONS AND IMPLICATIONS

The conclusions to be drawn from this assessment effort are based upon a fairly consistent pattern of findings associated with state and provider practices in Title XX day care. In order to better understand these conclusions and their resultant implications, it is important to make clear which issues were not addressed by the assessment and therefore could not be directly dealt with in this report. This was not a study of the effectiveness of the proposed HHS Day Care Regulations nor did it deal with the issue of which level of government should have regulatory authority. The former question would have required a different set of data collection and analyses procedures than were utilized. The latter question is not amenable to resolution through a direct study effort such as the one conducted. Neither did this study examine the appropriateness of state agency regulatory programs and funding practices and requirements. It simply reflected what practices state agencies are carrying out for Title XX federal programs and whether provider activities are consistent with these practices.

In interpreting the findings, the reader must recognize that this assessment was conducted during a single point in time; a point marked by much uncertainty regarding the future of the HHS regulations. State perceptions regarding the ultimate enactment of these regulations are divergent with some, but not all, maintaining special requirements for Title XX funded programs consistent with the rules that were published in March 1980. Whether these practices would continue at the same level should there be no HHS regulations cannot be determined with any certainty. Much would depend on whether reimbursement rates to providers change and the level of care that could be afforded as a result of this change.

### Administrative Practices

In the past the Federal government and state governments have shared the responsibility of assuring the health, safety, and normal age-appropriate development of Federally funded children in day care. It now appears that states will be given the primary responsibility for this assurance. The results of the assessment indicate that compared with expenditures for other social service programs, day care represents one of the three highest funded Title XX services in 42 states. Equally reflective of the importance held for day care by many states is their reported administrative efforts for assuring that providers adhere to minimum licensing standards. Nationally, licensing staff make at least one contact annually with day care centers and average approximately 15 FTE staff for this function. Title XX center monitoring occurs on average every ten months (every nine months for homes) with states devoting approximately nine FTE staff (six for homes) toward this activity. These Title XX facilities require monitoring at least once every 12 months and an on-site visit once every three years. Nearly every state reporting exceeded this minimum requirement.

### Non-Staffing Issues

A high degree of consistency was observed between state Title XX agency requirements and day care center provider practices in the health and provision of meals areas. Centers, however, well exceeded state agency requirements with respect to the training of caregivers (particularly, orientation of newly hired caregivers), social services information and parent involvement activities. Apparently, these provisions are viewed as being sufficiently important by providers to have them included as part of their day care operation regardless of whether states require them.



In light of these findings, states might want to re-examine their licensing standards with a view towards including such provisions. The Department can provide some assistance to states in this connection. During the past year, OHDS has been engaged in developing and evaluating caregiver training programs and exemplary management models as well as models which address various parent participation in day care approaches. Other prospective HDS activities might include: disseminating these models to interested states; and updating the 1973 model state licensing guides and offering them to states along with a training curricula being developed for state licensing personnel. Along with other information dissemination activities these efforts would constitute an important facilitative role by the Department to upgrade the level of day care provided.

### Staffing Issues

It was evident from the assessment findings on group size that day care center providers view this component as highly desirable--far more desirable than viewed by many state agencies. In fact the average group sizes of Title XX funded centers even exceeds the requirements of the HHS regulations for age categories two years and over, with smaller size groups being observed for these children. Waiverable centers maintain groups of comparable or lower size than non-waiverable centers, further suggesting that even without prescribed regulatory requirements, groups comprising small numbers of children are highly prized. Since these findings are compatible with previous research evidence which demonstrated consistent, statistically significant and developmentally meaningful impacts of small group size for children, with only negligible impact on total operating cost, those states which currently do not require group size might want to re-examine their position, while those states which currently prescribe higher ceilings than included in the proposed HHS regulations might consider lowering them.

Staff/child ratio practices reveal a similar but far more complicated regulatory picture than group size. Center performance is better than the HHS requirements for the three-to-six year old category in both waiverable and non-waiverable centers and is far better than state licensing standards across all age categories. The picture became more complex when the numbers of caregivers that would be needed to satisfy the HHS requirements were calculated. While an approximate U.S. total of 4,244 (with 36 states reporting) additional caregivers would be required, approximately 8,751 more caregivers than would be needed is also observed. In fact, for the two year and older children, the number of surplus staff exceed the number of deficit staff by a ratio of more than three to one.

A closer examination of the state by state picture revealed that wide divergency in the staffing practices of several key states accounts for much of this complexity. Florida, Illinois, Oklahoma and Texas, while alone accounting for one-half of the additionally needed caregiver staff, are also included in a cluster of states which have the most surplus staff. Any number of factors could be responsible for these extreme within-state variations--multiple reimbursement systems, significant numbers of both profit and non-profit centers, large day care populations, etc. It is beyond the scope of the present study data base, however, to precisely identify which factors are most responsible. Nevertheless the four states might want to examine their administrative practices in light of these findings in an effort to reduce these variations should they consider this desirable. There are several states which report having an exceptionally large number of surplus caregivers without corresponding large numbers of deficit caregivers--California, Massachusetts and Michigan are the most prominent states falling in this category. Two of these states (California and Massachusetts) also have among the highest maximum reimbursement rates of any state.

The issue of overcompliance was discussed earlier in the findings section of this report. Several suggestions were offered for reducing surplus staff which, if followed, could result nationwide in substantial cost savings and/or an increase in the number of children which would receive subsidized day care. The problem of under-compliance could be offset somewhat by revising the proposed HHS staff/child ratio requirements for the under two year olds from 1:3 to 1:4 and from 1:4 to 1:5 for the two year olds.

This assessment effort, while primarily serving as a study of current state and provider practices, has also yielded an additional benefit. Many states have indicated that the study procedures and compilation techniques used to measure group composition proved quite useful and will be incorporated in their own state licensing and monitoring systems.

APPENDIX A: STATE STATISTICAL TABLES.

TABLE 1: NUMBER AND TYPE OF TITLE XX FUNDED DAY CARE CENTERS AND HOMES

STATE	CENTERS							HOMES TOTAL
	TOTAL	PROFIT	NON-PROFIT	PUBLIC	WAIVERABLE*	NON-WAIVERABLE		
ALABAMA	230	4	226	0	0	230	983	
ALASKA			NO	TITLE	XX	DAY	CARE	
ARIZONA	282	188	94	0	NA	NA	1170	
ARKANSAS	109	34	72	3	52	57	57	
CALIFORNIA	505	0	29	476	0	505	NA	
COLORADO	383	202	155	26	168	215	1103	
CONNECTICUT	104	0	0	104	0	104	3900	
DELAWARE	49	4	42	3	1	48	99	
D.C.	104	7	67	30	5	99	35	
FLORIDA	394	107	247	40	7	387	319	
GEORGIA	290	NA	NA	NA	NA	NA	22	
HAWAII	18	0	18	0	0	18	0	
IDAHO	23	11	10	2	23	0	15	
ILLINOIS	1010	283	727	0	280	730	1000	
INDIANA	120	24	95	1	9	111	100	
IOWA	99	13	86	0	30	69	198	
KANSAS	240	45	169	26	72	168	608	
KENTUCKY	248	116	92	40	136	112	23	
LOUISIANA	323	216	97	10	111	212	84	
MAINE	29	0	21	8	0	29	113	
MARYLAND			REPORT	ATTACHED				
MASSACHUSETTS	371	71	300	0	59	312	1000	
MICHIGAN	611	153	458	0	271	340	2544	
MINNESOTA	358	NA	NA	NA	233	125	NA	
MISSISSIPPI	69	0	34	35	0	69	15	
MISSOURI			NO	REPORT				
MONTANA	61	NA	NA	NA	34	27	134	
NEBRASKA	144	76	68	0	NA	NA	600	
NEVADA	25	12	12	1	22	3	5	
NEW HAMPSHIRE	32	5	21	6	15	17	40	
NEW JERSEY	470	0	448	22	250	220	160	
NEW MEXICO			NO	REPORT				
NEW YORK	601	0	601	0	0	601	4476	
NORTH CAROLINA	334	17	204	113	35	299	130	
NORTH DAKOTA	6	0	3	3	4	2	6	
OHIO	275	NA	NA	NA	3	272	5000	
OKLAHOMA	587	346	194	47	217	370	615	
OREGON	18	3	15	0	15	3	45	
PENNSYLVANIA	563	0	563	0	0	563	1458	
RHODE ISLAND	53	20	26	7	8	45	434	
SOUTH CAROLINA	111	8	27	76	8	103	10	
SOUTH DAKOTA	49	49	0	0	23	26	563	
TENNESSEE	251	NA	NA	NA	140	111	265	
TEXAS	451	74	299	78	48	403	471	
UTAH	99	68	12	19	42	57	1499	
VERMONT	86	28	58	0	29	57	99	
VIRGINIA	194	69	104	21	99	95	1495	
WASHINGTON	224	53	153	18	162	62	469	
WEST VIRGINIA	91	22	69	0	17	74	1730	
WISCONSIN	NA	NA	NA	NA	NA	NA	NA	
WYOMING	79	26	53	0	63	16	140	

U.S. TOTAL 10,773 2,354a 5,969a 1,215a 2,691b 7,366b 29,329  
 PERCENT OF TOTAL 25% 62% 13% 27% 73%

\* WAIVERABLE MEANS A CENTER WITH NOT MORE THAN 20 PERCENT OR 10 (WHICHEVER IS LESS) HHS FUNDED CHILDREN

NA = NOT AVAILABLE

a = 5 STATES PROVIDING TOTAL NUMBER OF CENTERS, UNABLE TO PROVIDE DISTRIBUTION

b = 3 STATES PROVIDING TOTAL NUMBER OF CENTERS, UNABLE TO PROVIDE DISTRIBUTION

TABLE 2: ENROLLMENT BY AGE OF CHILDREN IN TITLE XX FUNDED FACILITIES

STATE	ALL CHILDREN IN CENTERS						NUMBER TITLE XX CHILDREN ONLY	
	TOTAL NUMBER	UNDER TWO YEARS (%)	TWO YEARS (%)	THREE TO SIX YEARS (%)	SIX TO TEN YEARS (%)	TEN TO FOURTEEN YEARS (%)	CENTERS	HOMES
ALABAMA	NA	16	80		4	0	8,658	2,608
ALASKA		NO	TITLE XX	DAY CARE				
ARIZONA	NA	NA	NA	NA	NA	NA	7,608	1,902
ARKANSAS	5,788	10	11	73	5	1	2,155	182
CALIFORNIA	42,799	1	6	56	32	5	NA	NA
COLORADO	26,054	2	10	74	13	1	4,437	2,665
CONNECTICUT	4,600	2	2	92	4	0	4,157	6,308
DELAWARE	2,512	14	16	61	8	1	1,727	225
D.C.	4,614	3	13	66	14	4	3,045	108
FLORIDA	18,182	16	18	55	9	2	17,100	1,061
GEORGIA	NA	9	10	70	9	2	8,930	77
HAWAII	765	0	3	87	8	2	676	-
IDAHO	711	5	15	77	3	0	62	25
ILLINOIS	68,000	4	10	70	14	2	21,500	1,700
INDIANA	9,173	2	11	79	7	1	4,497	225
IOWA	5,883	4	10	72	13	1	1,375	479
KANSAS	9,508	4	10	74	11	1	2,972	1,500
KENTUCKY	11,210	15	15	62	8	0	2,662a	161a
LOUISIANA	14,880	13	22	62	2	1	7,718	200
MAINE	1,165	0	1	91	7	1	972	580
MARYLAND			REPORT	ATTACHED				
MASSACHUSETTS	NA	3	7	76	11	3	11,852	1,812
MICHIGAN	34,656	4	13	71	12	0	6,092	5,736
MINNESOTA	3,286	6	13	63	18	0	NAb	NAb
MISSISSIPPI	3,051	5	9	86	0	0	3,051	75
MISSOURI			NO	REPORT				
MONTANA	1,579	0	10	84	6	0	345	69
NEBRASKA	NA	NA	NA	NA	NA	NA	1,900	100
NEVADA	2,074	10	14	67	9	0	148	12
NEW HAMPSHIRE	1,789	3	3	84	10	0	577	98
NEW JERSEY	14,600	3	9	62	18	8	13,390	207
NEW MEXICO			NO	REPORT				
NEW YORK	NA	NA	NA	NA	NA	NA	43,614	17,312
NORTH CAROLINA	12,380	10	16	66	7	1	8,987	431
NORTH DAKOTA	364	5	12	76	6	1	364	10
OHIO	NA	NA	NA	NA	NA	NA	7,795	22,844
OKLAHOMA	13,794	20	27	49	3	1	9,511	1,845
OREGON	959	12	12	66	8	2	78	70
PENNSYLVANIA	19,000		6	72		22	19,000	5,000
RHODE ISLAND	3,850	0	0	75	19	6	1,472	860
SOUTH CAROLINA	4,838	5	9	84	2	0	4,838	49
SOUTH DAKOTA	2,552	18	29	53	0	0	937	1,436
TENNESSEE	8,841	15	19	39	20	7	2,321	375
TEXAS	26,911		43	43		14	18,207	1,669
UTAH	6,119	0	12	80	8	0	2,157	2,339
VERMONT	4,017	3	10	75	11	1	979	273
VIRGINIA	13,554	2	17	64	12	5	7,019	8,207
WASHINGTON	15,779	9	15	56	18	2	1,436	1,157
WEST VIRGINIA	NA	3c	9c	50c	29c	9c	1,746	4,538
WISCONSIN	48,203d	NA	NA	NA	NA	NA	NA	NA
WYOMING	4,920	4	11	72	13	0	705	118
U.S. TOTAL	472,960						268,772f	96,768f
U.S. AVERAGE (%)		6%	13%	65%	14%	2%		

NA = NOT AVAILABLE  
 - = DOES NOT APPLY (NO CHILDREN SERVED)  
 a = ESTIMATED DISTRIBUTION OF CHILDREN IN CENTERS AND HOMES  
 b = 11,218 TOTAL XX CHILDREN IN CENTERS AND HOMES

c = TITLE XX CHILDREN ONLY  
 d = CHILDREN UNDER 7 YEARS OLD ONLY  
 e = 11 STATES NOT INCLUDED  
 f = 7 STATES NOT INCLUDED

TABLE 3: AVERAGE HOURLY WAGES OF PAID CAREGIVERS BY TYPE

STATE	LEAD TEACHER (\$)		TEACHER (\$)		TEACHER AIDE (\$)
	NO	TITLE	XX	DAY CARE	
ALABAMA		4.47		3.56	3.35
ALASKA					
ARIZONA		NA		NA	NA
ARKANSAS		3.93		3.60	3.33
CALIFORNIA		9.78		6.74	4.55
COLORADO		4.96		3.64	3.36
CONNECTICUT		5.90		5.68	3.97
DELAWARE		4.36		3.81	3.48
D.C.		5.88		4.87	4.04
FLORIDA		4.38		3.67	3.48
GEORGIA					
HAWAII		4.33		3.55	3.30
IDAHO		4.96		4.34	3.69
ILLINOIS		4.00			3.10
INDIANA		4.91		4.00	3.52
		4.67		3.74	3.43
IOWA					
KANSAS		4.58		3.92	3.43
KENTUCKY		4.60		3.89	3.46
LOUISIANA		3.80		3.51	3.37
MAINE		3.67		3.36	3.20
		4.97		4.45	3.50
MARYLAND					
MASSACHUSETTS		REPORT ATTACHED			
MICHIGAN		5.10		4.49	3.89
MINNESOTA		4.56		3.88	3.41
MISSISSIPPI		4.30		3.57	3.16
		5.20		4.95	3.65
MISSOURI					
MONTANA		NO REPORT			
NEBRASKA		4.60		2.67	2.30
NEVADA		NA		3.63	3.20
NEW HAMPSHIRE		4.85		3.96	3.50
		4.70		3.86	3.54
NEW JERSEY					
NEW MEXICO		5.93		4.56	3.68
NEW YORK		NO REPORT			
NORTH CAROLINA		NA		NA	NA
NORTH DAKOTA		4.26		4.24	3.34
		4.93		3.78	3.40
OHIO		4.51		4.06	3.45
OKLAHOMA		3.56		3.36	3.32
OREGON		5.48		3.80	3.39
PENNSYLVANIA		6.02		4.62	4.51
RHODE ISLAND		4.75		4.50	3.75
SOUTH CAROLINA					
SOUTH DAKOTA		5.70		4.45	3.87
TENNESSEE		4.40		3.65	3.41
TEXAS		4.23		3.65	3.39
UTAH		4.17		3.66	3.40
		4.14		3.53	3.15
VERMONT					
VIRGINIA		5.03		3.80	3.46
WASHINGTON		3.88		3.58	3.30
WEST VIRGINIA		4.54		3.73	3.23
WISCONSIN		NA		NA	NA
WYOMING		4.53		3.80	3.47
		4.97		4.13	3.94
U.S. AVERAGE		4.78		3.97	3.49

NA = NOT AVAILABLE

- - DOES NOT APPLY  
(NO CAREGIVERS IN THIS CATEGORY)

TABLE 4: DAILY RATE OF REIMBURSEMENT BY AGE OF CHILD (DOLLARS)

STATE	CENTERS		HOMES
	MAXIMUM <sup>a</sup> DAILY RATE FOR INFANTS AND 2 YEAR OLDS	MAXIMUM <sup>a</sup> DAILY RATE FOR CHILDREN 3 YEARS AND OLDER	MAXIMUM <sup>a</sup> DAILY RATE ALL AGES
ALABAMA	11.00	11.00	4.00
ALASKA			
ARIZONA	7.10 b,c	7.10 b,c	6.00 b,c
ARKANSAS	9.00 c	9.00 c	6.25
CALIFORNIA	19.97	15.36	NA
COLORADO	10.00	8.00	6.00 d
CONNECTICUT	7.00	7.00	7.00
DELAWARE	9.60 b	9.60 b	6.60 b
D.C.	19.67 b	12.50 b	7.00 b
FLORIDA	8.00	7.00	7.00
GEORGIA	11.45 b,e	9.80 b,e	11.25 b,e
HAWAII	11.37	11.37	
IDAHO	5.00 b	5.00 b	5.00 b
ILLINOIS	11.18	10.18	6.01
INDIANA	12.00	8.85	8.60 d
IOWA	21.31	13.06	8.00
KANSAS	7.80 c	7.20 c	5.75 c,d
KENTUCKY	7.00	7.00	7.00
LOUISIANA	7.00 e	8.00 e	3.71
MAINE	15.81	15.81	14.50 f
MARYLAND			
MASSACHUSETTS	20.60	14.65	5.50 c
MICHIGAN	10.50 b	7.00 b	5.50 b
MINNESOTA	14.02	11.05	NA
MISSISSIPPI	12.00	12.00	NA
MISSOURI			
MONTANA	6.00 b	6.00 b	6.00 b
NEBRASKA	8.85	7.31	4.90
NEVADA	12.00	12.00	NA
NEW HAMPSHIRE	14.82	6.75	6.50
NEW JERSEY	16.00	11.00	4.50 b
NEW MEXICO			
NEW YORK	15.50	15.50	NA
NORTH CAROLINA	9.45 g	7.24 g	5.30 g
NORTH DAKOTA	9.00 b,c	9.00 b,c	9.00 b,c
OHIO	10.14	10.14	7.00
OKLAHOMA	7.00	7.00	6.00
OREGON	11.45	10.50	7.30 b
PENNSYLVANIA	19.96	14.86	14.47
RHODE ISLAND		8.17	4.60
SOUTH CAROLINA	11.60	11.60	6.64
SOUTH DAKOTA	8.20 c	8.20 c	5.50 b,c
TENNESSEE	11.34 e	9.90 e	5.50 b
TEXAS	14.21	10.28	6.40
UTAH		6.75 b	5.65 b,d
Vermont	9.12 b	9.12 b	6.08 b
VIRGINIA	12.00	12.00	20.00 c
WASHINGTON	7.77	7.77	7.77
WEST VIRGINIA	6.50	6.50	6.50
WISCONSIN	14.00	14.00	11.75 c
WYOMING	8.10	8.10	6.00 b,c

NA = NOT AVAILABLE

- = DOES NOT APPLY

a = THE MAXIMUM CAN INDICATE THE TOP OF A RANGE. ACTUAL REIMBURSEMENT VARIES AS A FUNCTION OF THE REIMBURSEMENT SYSTEM USED. (EXAMPLES: FLAT RATE, MARKET PRICE, ACTUAL COSTS, NEGOTIATED RATE)

b = FLAT RATE ONLY, NO OTHER REIMBURSEMENT MECHANISMS USED

c = BASED ON 10 HOUR DAY

d = HIGHER RATE FOR INFANTS

e = CONTRACT FACILITIES ONLY

f = FAMILY HOME SYSTEMS ONLY

g = MEDIAN RATE

TABLE 5: TYPE OF REIMBURSEMENT (CENTERS AND HOMES)

STATE	SLIDING FEE SCALE	SCHEDULED*			ATTENDANCE	SUPPLEMENTAL ** RATES
		NO	TITLE	XX		
ALABAMA				X		
ALASKA					X	X
ARIZONA	X					
ARKANSAS				X	X	
CALIFORNIA	X			X		X
COLORADO	X			X		
CONNECTICUT	X				X	X
DELAWARE	X					
D. C.	X			X		
FLORIDA	X			X		
GEORGIA					X	
HAWAII	X			X		
IDAHO				X		
ILLINOIS	X				X	
INDIANA	X				X	
IOWA						
KANSAS	X				X	X
KENTUCKY	X		X			X
LOUISIANA	X		X		X	
MAINE	X		X		X	
MARYLAND						
MASSACHUSETTS	X		REPORT	ATTACHED		
MICHIGAN	X		X			X
MINNESOTA	X				X	
MISSISSIPPI	X				X	
MISSOURI			NO	REPORT		
MONTANA	X		X		X	X
NEBRASKA	X		NA		NA	NA
NEVADA			X			X
NEW HAMPSHIRE	X				X	X
NEW JERSEY			Xa		Xb	X
NEW MEXICO			NO	REPORT		
NEW YORK	X				X	X
NORTH CAROLINA	X		X			X
NORTH DAKOTA					X	X
OHIO			X		X	X
OKLAHOMA	X				X	X
OREGON					X	
PENNSYLVANIA	X		X			X
RHODE ISLAND					X	
SOUTH CAROLINA					X	
SOUTH DAKOTA					X	
TENNESSEE	X		X			X
TEXAS	X		X			X
UTAH	X				X	
VERMONT	X		X			X
VIRGINIA					X	X
WASHINGTON	X				X	X
WEST VIRGINIA	X		X		X	X
WISCONSIN	X				X	X
WYOMING			X		X	
U.S. TOTAL	32		24		29	25
U.S. PERCENT	63		51		63	54

\* REIMBURSED FOR CHILD ABSENCES

NA = NOT AVAILABLE

\*\* HANDICAPPED, SPECIAL EDUCATION, TRAINING, ETC.

a = CENTERS ONLY

b = HOMES ONLY

TABLE 6 : PROGRAM OF ACTIVITIES REQUIREMENT AND TECHNICAL ASSISTANCE PROVISION  
BY STATE AGENCY (TITLE XX FUNDED CENTERS AND HOMES)

STATE	CENTERS		HOMES	
	REQUIREMENT	PROVISION	REQUIREMENT	PROVISION
ALABAMA	X	X	X	X
ALASKA		NO TITLE XX DAY CARE		
ARIZONA	X	X		
ARKANSAS	X	X	X	X
CALIFORNIA	X	X		
COLORADO	X	X	X	X
CONNECTICUT	X	X	X	X
DELAWARE	X		X	
D.C.	X	X	X	X
FLORIDA	X	X	X	X
GEORGIA	X	X	X	X
HAWAII				
IDAHO	X	X		X
ILLINOIS	X	X	X	X
INDIANA	X	X		
IOWA	X	X	X	X
KANSAS	X	X	X	X
KENTUCKY	X			
LOUISIANA		X		
MAINE	X	X	X	X
MARYLAND		REPORT ATTACHED		
MASSACHUSETTS	X		X	
MICHIGAN	X	X	X	X
MINNESOTA	X	X	X	X
MISSISSIPPI	X	X	X	X
MISSOURI		NO REPORT		
MONTANA	X	X		X
NEBRASKA	X	X	X	X
NEVADA	X	X	X	X
NEW HAMPSHIRE	X	X	X	X
NEW JERSEY	X	X	X	
NEW MEXICO		NO REPORT		
NEW YORK	X	X	X	
NORTH CAROLINA	X	X	X	X
NORTH DAKOTA	X	X	X	X
OHIO	X	X	X	X
OKLAHOMA	X	X	X	X
OREGON	X		X	
PENNSYLVANIA	X		X	
RHODE ISLAND	X	X	X	X
SOUTH CAROLINA	X	X	X	X
SOUTH DAKOTA	X			
TENNESSEE	X	X	X	X
TEXAS	X	X	X	X
UTAH	X	X	X	X
VERMONT	X	X	X	X
VIRGINIA	X	X	X	X
WASHINGTON	X	X	X <sup>a</sup>	X <sup>a</sup>
WEST VIRGINIA	X	X	X	X
WISCONSIN	X		X	
WYOMING				
U.S. TOTAL	44	38	37	32
U.S. PERCENT	94%	81%	79%	68%

a = ONLY FOR HOMES WITH 7-12 CHILDREN



TABLE 7: CAREGIVER TRAINING REQUIREMENT AND PROVISION BY STATE AGENCY  
(TITLE XX FUNDED FACILITIES)

STATE	ORIENTATION REQUIREMENT	TRAINING REQUIREMENT	TRAINING PLAN
ALABAMA	X	X	X
ALASKA	NO	TITLE XX	DAY CARE
ARIZONA	X	Xa	Xa
ARKANSAS			X
CALIFORNIA			
COLORADO	X		
CONNECTICUT	X	X	X
DELAWARE			
D.C.	X	X	X
FLORIDA	X		X
GEORGIA	X	X	X
HAWAII		Xa	
IDAHO			
ILLINOIS	X	X	X
INDIANA	X		
IOWA			
KANSAS	X	X	X
KENTUCKY	X	X	X
LOUISIANA			X
MAINE			X
MARYLAND		REPORT ATTACHED	
MASSACHUSETTS	X	X	
MICHIGAN		X	X
MINNESOTA	X	X	X
MISSISSIPPI	X	X	X
MISSOURI		NO REPORT	
MONTANA			
NEBRASKA			
NEVADA			
NEW HAMPSHIRE			
NEW JERSEY	X		Xa
NEW MEXICO		NO REPORT	
NEW YORK	X		X
NORTH CAROLINA			X
NORTH DAKOTA		X	X
OHIO	X	X	X
OKLAHOMA	X	X	X
OREGON		X	X
PENNSYLVANIA		X	Xb
RHODE ISLAND	X	X	X
SOUTH CAROLINA	X	X	X
SOUTH DAKOTA			
TENNESSEE	X		X
TEXAS	X	X	X
UTAH	X	X	X
VERMONT			
VIRGINIA		X	X
WASHINGTON	X	X	Xb
WEST VIRGINIA			X
WISCONSIN		X	X
WYOMING	X	X	X
U.S. TOTAL	24	27	34
U.S. PERCENT	51	57	72

a = FOR CENTER CAREGIVERS ONLY

b = FOR HOME CAREGIVERS ONLY

TABLE 8 : NUTRITION REQUIREMENT AND PROVISION BY STATE AGENCY  
(TITLE XX FUNDED CENTERS AND HOMES)

STATE	CENTERS				HOMES				PARTICIPATION IN USDA	
	NUTRITION REQUIREMENT			CONSULTATION SERVICES	NUTRITION REQUIREMENT			CONSULTATION SERVICES	CENTERS (%)	HOMES (%)
	B	S	L	TITLE	B	S	L	CARE		
ALABAMA		x	x	x		x	x	x	35	45
ALASKA				NO	XX	DAY	CARE			
ARIZONA	x	x	x	x	x	x	x	x	25	100
ARKANSAS		x	x	x		x	x	x	58	81
CALIFORNIA	x	x	x	x	x	x	x		100	NA
COLORADO		x	x	x		x	x	x	47	60
CONNECTICUT		x	x	x		x	x	x	100	100
DELAWARE	x	x	x	x	x	x	x	x	92	46
D.C.	x	x	x	x	x	x	x	x	50	0
FLORIDA		x	x	x		x	x	x	75	100
GEORGIA		x	x	x		x	x	x	100	100
HAWAII				x				x	NA	
IDAHO										
ILLINOIS		x	x			x	x		67	32
INDIANA	x	x	x	x	x	x	x		96	69
IOWA	x	x	x	x	x	x	x	x	NA	NA
KANSAS	xa	x	x	x	xa	x	x	x	35	30
KENTUCKY		x	x	x		x	x	x	NA	NA
LOUISIANA		x	x	x		x	x		95	NA
MAINE		x	x	x		x	x	x	100	100
MARYLAND				REPORT	ATTACHED					
MASSACHUSETTS	x	x		x	x	x		x	78	95
MICHIGAN	xb	xb	xb	x	xb	xb	xb	x	61	50
MINNESOTA	x	x	x	x	x	x		x	63	NA
MISSISSIPPI	x	x	x	x	x	x	x	x	100	100
MISSOURI				NO	REPORT					
MONTANA	x	x		x	x	x		x	NA	NA
NEBRASKA		x	x	x		x	x		75	0
NEVADA										
NEW HAMPSHIRE	x			x	x			x	43	0
NEW JERSEY	x	x	x	x	x	x	x		100	0
NEW MEXICO				NO	REPORT					
NEW YORK		x	x	x		x	x		99	64
NORTH CAROLINA	x	x	x	x	x	x	x	x	100	63
NORTH DAKOTA	x	x	x	x	x	x	x	x	100	83
OHIO	x	x	x	x	x	x	x		50	10
OKLAHOMA		x	x	x		x	x	x	30	0
OREGON	x	x	x		x	x	x		100	71
PENNSYLVANIA		x	x			x	x		100	100
RHODE ISLAND		x	x	x		x	x	x	62	89
SOUTH CAROLINA	x	x	x	x	x	x	x	x	93	100
SOUTH DAKOTA	x	x	x	x	x	x	x	x	78	25
TENNESSEE	x	x	x	x	x	x	x	x	NA	NA
TEXAS		x	x			x	x		78	92
UTAH		x	x	x		x	x	x	32	27
VERMONT	x	x	x	x	x	x	x	x	50	50
VIRGINIA	x	x	x		x	x	x		NA	20
WASHINGTON	x	x	x	x	x	x	x	x	NA	NA
WEST VIRGINIA		x	x		x	x	x	x	62	32
WISCONSIN	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
WYOMING		x	x	x		x	x	x	75	52
U.S. TOTAL	21	48	42	38	21	43	42	32		
U.S. PERCENT	45	92	89	81	45	92	89	68	72.6%	52.5%

NA = NOT AVAILABLE  
 -- = DOES NOT APPLY (NO TITLE XX HOMES)  
 a = UPON REQUEST  
 b = PARENT OR PROVIDER PROVIDES WELL-BALANCED NUTRITIOUS MEAL

TABLE 9: HEALTH SERVICES REQUIREMENT AND PROMOTION OF INFORMATION BY STATE AGENCY (TITLE XX FUNDED CENTERS AND HOMES)

STATE	CENTERS					HOMES				
	IMMUNIZATION REQUIREMENT	HEALTH ASSESSMENT REQUIREMENT	EPSDT LEVEL ASSESSMENT	PROVIDE INFORMATION TO CENTERS	ASSURE CHILDREN RECEIVE SERVICE	IMMUNIZATION REQUIREMENT	HEALTH ASSESSMENT REQUIREMENT	EPSDT LEVEL ASSESSMENT	PROVIDE INFORMATION TO HOMES	ASSURE CHILDREN RECEIVE SERVICE
ALABAMA	X	X	X	X	X	X	X	X	X	X
ALASKA		NO TITLE XX	DAY CARE							
ARIZONA	X	X	X	X	X	X	X	X	X	X
ARKANSAS	X					X	X	X		X
CALIFORNIA	X	X	X	X	X	X	X	X		
COLORADO	X	X			X		X			X
CONNECTICUT	X	X	X	X	X	X	X	X	X	X
DELAWARE	X	X				X	X	X	X	X
D.C.	X	X	X	X	X	X	X	X	X	X
FLORIDA	X	X		X	X	X	X	X	X	X
GEORGIA	X	X	X	X	X	X	X	X	X	X
HAWAII	X	X	X							
IDAHO										
ILLINOIS	X	X				X	X			
INDIANA	X						X			
IOWA	X	X					X			
KANSAS	X	X	X	X	X	X	X	X	X	X
KENTUCKY		X	X				X			X
LOUISIANA	X	X				X	X			X
MAINE	X	X	X	X	X	X	X		X	X
MARYLAND			REPORT ATTACHED					REPORT ATTACHED		
MASSACHUSETTS	X	X				X	X			
MICHIGAN	X	X	X			X	X	X		
MINNESOTA	X	X		X	X	X	X	X	X	X
MISSISSIPPI	X	X	X	X	X	X	X	X	X	X
MISSOURI			NO REPORT					NO REPORT		
MONTANA	X	X			X					X
NEBRASKA	X					X				NA
NEVADA	X	X		X	X	X	X	X	X	X
NEW HAMPSHIRE	X	X	X	X	X	X	X	X	X	X
NEW JERSEY	X	X	X	X	X					X
NEW MEXICO			NO REPORT					NO REPORT		
NEW YORK	X	X			X	X	X			X
NORTH CAROLINA	X	X		X	X	X	X		X	X
NORTH DAKOTA	X	X				X	X			
OHIO	X	X			X	X	X			X
OKLAHOMA	X			X	X	X	X		X	X
OREGON	X	X		X	X	X	X		X	X
PENNSYLVANIA	X	X	X	X	X	X	X		X	X
RHODE ISLAND	X	X	X	X	X	X	X	X	X	X
SOUTH CAROLINA	X	X	Xa	X	X	X	X	Xa	X	X
SOUTH DAKOTA	X	X			X	X	X			X
TENNESSEE	X			X	X	X	X			X
TEXAS	X	Xa			X	X	Xa			X
UTAH	X	X	X	X	X	X	X		X	X
VERMONT	X	X			X	X	X			X
VIRGINIA	X	X	X	X	X	X	X	X	X	X
WASHINGTON	X	X		X	X	X	X	X	X	X
WEST VIRGINIA	X	X		X	X	X	X		X	X
WISCONSIN	X	X	X	X	X	X	X	X	X	X
WYOMING	Xb			X	X	Xb				X
U.S. TOTAL	45	40	20	26	33	37	33	14	19	32
U.S. PERCENT	96	85	43	55	70	79	70	30	40	68

- = DOES NOT APPLY (NO TITLE XX HOMES)  
a = TITLE XX CHILDREN ONLY  
b = CHILDREN OVER 18 MONTHS



TABLE 10: PHYSICAL ENVIRONMENT REQUIREMENT BY STATE AGENCY (TITLE XX FUNDED CENTERS AND HOMES)

STATE	CENTERS					HOMES				
	FIRE	SANITATION	TRANSPORTATION	SWIMMING	EQUIPMENT	FIRE	SANITATION	TRANSPORTATION	SWIMMING	EQUIPMENT
ALABAMA	X	X	X	X	X					X
ALASKA		NO TITLE	XX DAY CARE				NO TITLE	XX DAY CARE		
ARIZONA	X	X	X	X	X	X	X		X	
ARKANSAS	X	X	X	X	X	X		X	X	X
CALIFORNIA	X	X	X	X	X	X	X	X	X	X
COLORADO	X	X	X	X	X	X	X			
CONNECTICUT	X	X		X	X	X	X		X	X
DELAWARE	X	X		X	X	X	X			X
D.C.	X	X	X	X	X	X	X	X		X
FLORIDA	X	X	X	X	X	X	X	X	X	X
GEORGIA	X	X	X	X	X	X	X			X
HAWAII	X	X	X			X	X	X		
IDAHO	X	X				X	X			
ILLINOIS	X	X	X	X	X	X	X	X		X
INDIANA	X	X	X	X	X	X	X			
IOWA	X	X	X	X	X	X	X			X
KANSAS	X	X	X	X	X	X	X	X	X	X
KENTUCKY	X	X	X	X	X	X	X	X	X	X
LOUISIANA	X	X	X	X	X	X	X	X	X	X
MAINE	X	X	X	X	X	X	X			
MARYLAND		REPORT ATTACHED					REPORT ATTACHED			
MASSACHUSETTS	X	X	X	X	X				X	X
MICHIGAN	X	X	X	X	X	X	X	X	X	X
MINNESOTA	X	X	X	X	X	X	X			X
MISSISSIPPI	X	X	X	X	X	Ya	Ya	X		X
MISSOURI		NO REPORT					NO REPORT			
MONTANA	X	X			X	X				
NEBRASKA	X	X			X	X	X			X
NEVADA	X	X	X	X	X	X	X	Y	X	X
NEW HAMPSHIRE	X	X	X	X	X	X	X	X	X	X
NEW JERSEY	X	X	X	X	X					
NEW MEXICO		NO REPORT					NO REPORT			
NEW YORK	X	X	X	X	X	X	X			X
NORTH CAROLINA	X	X	X	X	X	X	X	X		X
NORTH DAKOTA	X	X	X	X	X	X	X	X	X	X
OHIO	X	X	X	X	X	X	X	X	X	X
OKLAHOMA	X	X	X	X	X	X	X	X	X	X
OREGON	X	X	X	X	X	X	X	X	X	X
PENNSYLVANIA	X	X	X	X	X	X	X	X	X	X
RHODE ISLAND	X	X	X	X	X	X	X	X	X	X
SOUTH CAROLINA	X	X	X	X	X	X	X	X		X
SOUTH DAKOTA	X	X	X	X	X	X	X			X
TENNESSEE	X	X	X	X	X	X	X			X
TEXAS	X	X	X	X	X	X	X	X	X	X
UTAH	X	X	X	X	X	X	X	X	X	X
VERMONT	X	X	X	X	X	X	X	X		X
VIRGINIA	X	X	X	X	X	X	X	X	X	X
WASHINGTON	X	X	X	X	X	X	X	X	X	X
WEST VIRGINIA	X	X	X	X	X	X	X	X	X	X
WISCONSIN	X	X	X	X	X	X	X	X	X	X
WYOMING	X	X	X	X	X	X	X			
U.S. TOTAL	47	47	41	26	44	42	43	27	19	39
U.S. PERCENT	100	100	87	55	94	89	92	57	40	83

\* - FOR HOMES WITH 6 OR MORE CHILDREN ONLY

TABLE 11: SOCIAL SERVICES REQUIREMENT AND PROVISION BY STATE AGENCY  
(TITLE XX FUNDED CENTERS AND HOMES)

STATE	CENTERS			HOMES		
	REQUIRE INFORMATION TO PARENTS	PROVIDE INFORMATION TO CENTERS	ASSURE CHILDREN RECEIVE SERVICES	REQUIRE INFORMATION TO PARENTS	PROVIDE INFORMATION TO HOMES	ASSURE CHILDREN RECEIVE SERVICES
ALABAMA	X	X	X		X	X
ALASKA		NO TITLE	XX DAY	CARE		
ARIZONA	X	Xa			Xa	
ARKANSAS						
CALIFORNIA		X			X	
COLORADO		X	X		X	X
CONNECTICUT	X	X	X	X	X	X
DELAWARE						
D. C.	X	X	X	X	X	X
FLORIDA	X	X	X		X	X
GEORGIA	X			X		
HAWAII			X			X
IDAHO						
ILLINOIS						
INDIANA						
IOWA			X			X
KANSAS	X	X	X	X	X	X
KENTUCKY	X		X	X	X	X
LOUISIANA			X			X
MAINE	X	X	X	X	X	X
MARYLAND			REPORT	ATTACHED		
MASSACHUSETTS	X			X		
MICHIGAN			X			X
MINNESOTA			X			X
MISSISSIPPI	X	X	X	X	X	X
MISSOURI		NO	REPORT			
MONTANA			X			X
NEBRASKA			X			X
NEVADA	X	X	X	X	X	X
NEW HAMPSHIRE	X	X	X	X	X	X
NEW JERSEY	X	X	X		X	X
NEW MEXICO		NO	REPORT			
NEW YORK	X		X			X
NORTH CAROLINA	X	X	X	X	X	X
NORTH DAKOTA	X					
OHIO	X	X	X	X	X	X
OKLAHOMA		X	X		X	X
OREGON			X			X
PENNSYLVANIA	X		X	X		X
RHODE ISLAND	X	X	X		X	X
SOUTH CAROLINA	X	X	X	X	X	X
SOUTH DAKOTA	X	X	X	X	X	X
TENNESSEE	X	X	X	X	X	X
TEXAS	X			X		
UTAH		X	X		X	X
VERMONT		X	X		X	X
VIRGINIA	X	X	X	X	X	X
WASHINGTON	X	X	X	X	X	X
WEST VIRGINIA		X	X	X	X	X
WISCONSIN			X		X	X
WYOMING		X			X	
U.S. TOTAL	26	26	35	19	27	35
U.S. PERCENT	55	55	75	40	57	75

a - AT PROVIDER REQUEST

TABLE 12: PARENT INVOLVEMENT REQUIREMENT AND PROVISION BY STATE AGENCY  
(TITLE XX FUNDED CENTERS AND HOMES)

STATE	CENTER REQUIREMENTS		CENTERS			HOMES
	OPPORTUNITIES TO PARTICIPATE IN PROGRAM POLICY MAKING	UNLIMITED ACCESS TO OBSERVE CHILDREN	PROVIDE INFORMATION AND T.A.	PROVIDE INFORMATION AND T.A.		
ALABAMA	X	X	X			
ALASKA		NO	TITLE	XX	DAY	CARE
ARIZONA		X				
ARKANSAS	X					X
CALIFORNIA						X
COLORADO		X				X
CONNECTICUT	X	X				X
DELAWARE	X					X
D. C.	X	X				X
FLORIDA						X
GEORGIA	X	X				X
HAWAII						X
IDAHO						X
ILLINOIS		X				
INDIANA						
IOWA	Xa					
KANSAS	X	X				X
KENTUCKY						X
LOUISIANA		X				X
MAINE		X				
MARYLAND			REPORT	ATTACHED		
MASSACHUSETTS	X	X				
MICHIGAN						X
MINNESOTA	Xa					X
MISSISSIPPI	X	X				X
MISSOURI						
MONTANA		NO	REPORT			
NEBRASKA		X				X
NEVADA		X				
NEW HAMPSHIRE	X					X
NEW JERSEY	X	X				X
NEW MEXICO		NO	REPORT			
NEW YORK						X
NORTH CAROLINA	X	X				X
NORTH DAKOTA	X	X				
OHIO	X	X				X
OKLAHOMA						X
OREGON		X				
PENNSYLVANIA	X	X				
RHODE ISLAND		X				X
SOUTH CAROLINA	X	X				X
SOUTH DAKOTA	X	X				
TENNESSEE	X	X				X
TEXAS	X					X
UTAH						X
VERMONT		X				X
VIRGINIA	X	X				X
WASHINGTON						X
WEST VIRGINIA						X
WISCONSIN		X				
WYOMING						X
U.S. TOTAL	22	27				33
U.S. PERCENT	47	57				70

a - IF 40 OR MORE CHILDREN

TABLE 13: STATE MAXIMUM GROUP SIZE REQUIREMENT FOR TITLE XX AND NON-TITLE XX FUNDED CENTERS BY CHILD (6 - 6+ YEARS OLD)

STATE	TITLE XX CENTERS							NON-TITLE XX CENTERS (STATE LICENSING REQUIREMENT)						
	UNDER ONE YEAR	ONE YEAR	TWO YEARS	THREE YEARS	FOUR YEARS	FIVE YEARS	SIX YEARS AND OLDER	UNDER ONE YEAR	ONE YEAR	TWO YEARS	THREE YEARS	FOUR YEARS	FIVE YEARS	SIX YEARS AND OLDER
ALABAMA	1a-6	6	6	18	18	18	16	1a-6	6	6	18	18	18	16
ALASKA		NO	TITLE	XX	DAY	CARE			NO	TITLE	XX	DAY	CARE	
ARIZONA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ARKANSAS	N	N	N	N	N	N	N	N	N	N	N	N	N	N
CALIFORNIA	6	6	12	16	16	16	14	N	N	N	N	N	N	N
COLORADO	N	N	N	N	N	N	N	N	N	N	N	N	N	N
CONNECTICUT	4	4	4	15	15	15	15	N	N	N	N	N	N	N
DELAWARE	4	4	4	15	20	20	25	5	8	15	15	20	20	25
D.C.	8	8	16	16	20	25	30	8	8	16	16	20	20	30
FLORIDA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
GEORGIA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
HAWAII	NC	NC	N	N	N	N	N	NC	NC	N	N	N	N	N
IDAHO	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ILLINOIS	6	6	8	20	20	25	25	6	6	8	20	20	25	25
INDIANA	8	10	15	15	15	15	N	8	10	15	15	15	15	N
IOWA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
KANSAS	6	12	12	15	18	15	15	9	12	12	20	20	20	32
KENTUCKY	N	N	N	N	N	N	N	N	N	N	N	N	N	N
LOUISIANA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
MAINE	N	N	N	N	N	N	N	N	N	N	N	N	N	N
MARYLAND			REPORT	ATTACHED						REPORT	ATTACHED			
MASSACHUSETTS	7	9	9	20	20	30	30	7	9	9	20	20	30	30
MICHIGAN	N	N	N	N	N	N	N	N	N	N	N	N	N	N
MINNESOTA	8	14	14	15	20	20	25	8	14	20	20	20	20	30
MISSISSIPPI	8	8	8	12	16	18	16	N	N	N	N	N	N	N
MISSOURI			NO	REPORT						NO	REPORT			
MONTANA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
NEBRASKA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
NEVADA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
NEW HAMPSHIRE	8	8	8	N	N	N	N	8	8	8	N	N	N	N
NEW JERSEY	6	6	12	18	18	18	16	N	N	N	N	N	N	N
NEW MEXICO			NO	REPORT						NO	REPORT			
NEW YORK	12	12	18	21	24	15	20	12	12	18	21	24	18	20
NORTH CAROLINA	5	6	7	18	20	25	25	25	25	25	25	25	25	25
NORTH DAKOTA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
OHIO	6	6	12	16	16	16	14	8	20	20	30	30	40	40
OKLAHOMA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
OREGON	6	6	12	12	12	18	18	8	8	20	20	20	30	30
PENNSYLVANIA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
RHODE ISLAND	NC	NC	NC	N	N	N	N	NC	NC	NC	N	N	N	N
SOUTH CAROLINA	N	N	N	18	18	18	16	N	N	N	N	N	N	N
SOUTH DAKOTA	20	20	20	20	20	20	20	20	20	20	20	20	20	20
TENNESSEE	8	8	12	18	18	18	18	10	16	16	20	20	25	25
TEXAS	8	8	12	18	18	18	16	12	35	35	35	35	35	35
UTAH	NC	NC	25	25	25	25	25	NC	NC	25	25	25	25	25
VERMONT	N	N	N	N	N	N	N	N	N	N	N	N	N	N
VIRGINIA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
WASHINGTON	10	10	20	20	20	20	20	10	14	20	20	20	20	20
WEST VIRGINIA	N	N	N	N	N	N	N	N	N	N	N	N	N	N
WISCONSIN	6	6	12	16	16	16	14	6	8	16	20	24	32	32
WYOMING	N	N	N	N	N	N	N	N	N	N	N	N	N	N
U.S. MEDIAN	6.0	7.6	11.4	17.8	18.3	18.4	18.6	8.4	10.0	16.8	19.6	19.9	21.5	25.0

N = NO GROUP SIZE REQUIREMENT  
 NC = NO CENTER CARE ALLOWED FOR THIS AGE CHILD  
 a = MAXIMUM GROUP SIZE FOR UNDER 6 WEEKS OLD



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TABLE 14: STATE MINIMUM STAFF/CHILD RATIO REQUIREMENTS FOR TITLE XX AND NON-TITLE XX FUNDED CENTERS BY CHILD AGE (CHILDREN PER CAREGIVER)

STATE	TITLE XX CENTERS							NON-TITLE XX CENTERS ( STATE LICENSING REQUIREMENT )						
	UNDER ONE YEAR	ONE YEAR	TWO YEARS	THREE YEARS	FOUR YEARS	FIVE YEARS	SIX YEARS AND OLDER	UNDER ONE YEAR	ONE YEAR	TWO YEARS	THREE YEARS	FOUR YEARS	FIVE YEARS	SIX YEARS AND OLDER
ALABAMA	1a-6	6	6	9	9	9	16	1a-6	6	6	9	9	9	16
ALASKA		NO	TITLE	XX	DAY	CARE		NO	TITLE	XX	DAY	CARE		
ARIZONA	8	10	10	15	20	25	25	8	10	10	15	20	25	25
ARKANSAS	6	6	6	5	6	6	7	6	6-9b	9	12	15	18	25
CALIFORNIA	3	3	4	8	8	8	14	4	4	12	12	12	12	12
COLORADO	5	5	5	7	10	10	13	5	5	5-8c	10	12	15	15
CONNECTICUT	4	4	4	7.5	7.5	7.5	15	b	b	b	b	b	b	b
DELAWARE	1a-4	4	4	5	7	7	10	5	8	8-15c	15	20	20	25
D.C.	4	4	4-8c	8	10	15	15	4	4	4-8c	8	10	15	15
FLORIDA	5	5	10	10	10	10	15	6	8	12	15	20	25	25
GEORGIA	3	3	4	5	5	5	N	7	9	10	15	18	18	N
HAWAII	NC	NC	10	15	20	25	25	NC	NC	10	15	20	25	25
IDAHO	6	6-8c	8	10	10	10	15	6	6-8c	8	10	10	10	15
ILLINOIS	6	6	8	10	10	25	25	6	6	8	10	10	25	25
INDIANA	4	4	5	10	12	15	20	4	4	5	10	12	15	20
IOWA	4	4	6	6	12	15	15	4	4	6	8	12	15	15
KANSAS	3	3	4-5c	9	9	9	16	3	3	5	10	10	10	10
KENTUCKY	6	6	8	10	12	15	15-20c	6	6	8	10	12	15	15-20c
LOUISIANA	6	8	12	14	16	20	25	6d	8d	12d	14d	16d	20d	25d
MAINE	NC	NC	10	15	15	10	10	NC	NC	10	15	15	10	10
MARYLAND		REPORT ATTACHED							REPORT ATTACHED					
MASSACHUSETTS	3	4	4	10	10	15	15	3	4	4	10	10	15	15
MICHIGAN	4	4	4-10c	10	12	12	20	4	4	4-10c	10	12	12	20
MINNESOTA	4	4-5c	5	7	7	7	15	4	4-7b	7	7-10c	10	10	25
MISSISSIPPI	4	4	4	6	8	9	9	N	N	N	N	N	N	N
MISSOURI		NO REPORT							NO REPORT					
MONTANA	10e	10e	10e	10e	10e	10e	10e	10e	10e	10e	10e	10e	10e	10e
NEBRASKA	4	4	5	10	10	10	12	4	4	5	10	10	10	12
NEVADA	4-6c	5-8c	10	13	13	13	20	4-6c	6-8c	10	13	13	13	20
NEW HAMPSHIRE	4	4	4	5	7	7	15	4	4	4	10	15	18	20
NEW JERSEY	3	3	4	9	9	9	16	N	N	10	10	15	16	16
NEW MEXICO		NO REPORT							NO REPORT					
NEW YORK	4	4-6c	5-6c	7	8	9	10	4	4-6c	5-6c	7	8	9	10
NORTH CAROLINA	5	6	7	7	12	15	20	8f	8f	12f	15f	20f	25f	25f
NORTH DAKOTA	4	4	5	7	10	12	12	4	4	5	7	10	12	12
OHIO	3	3	4	8	8	8	16	8	8-10c	10	15	15	20	20
OKLAHOMA	4-6b	6	8	12	15	15	20	4-6b	6	8	12	15	15	20
OREGON	4	4	4-10c	10	10	15	15	4	4	4-10c	10	10	15	15
PENNSYLVANIA	4	4	5	10	10	10	12	4	4	5	10	10	10	12
RHODE ISLAND	NC	NC	NC	10	10	10	14	NC	NC	NC	10	10	10	14
SOUTH CAROLINA	4-8g	5-8g	7-12g	11-15g	13-20g	15-25g	15-25g	8	8	12	15	20	25	N
SOUTH DAKOTA	5	5	5	8	8	8	10	5	5	5	8	8	8	10
TENNESSEE	4	4	4	9	9	9	18	5	5	8	8	15	25	25
TEXAS	4	4	4	9	9	9	16	6	10	13	17	20	24	26
UTAH	NC	NC	7	15	15	20	25	NC	NC	7	15	15	20	25
VERMONT	4	4	5	10	10	10	12	4	4	5	10	10	10	12
VIRGINIA	4	4	4	15	20	20	25	4	4	10	10	10	10	25
WASHINGTON	5	7	7-10c	10	15	15	15	5	7	7-10c	10	15	15	15
WEST VIRGINIA	4	4	8	10	12	15	16	4	4	8	10	12	15	16
WISCONSIN	3	3	4	8	8	8	14	3	4	6-8c	10	12	16	16
WYOMING	5	5	8	10	15	20	25	5	5	8	10	15	20	25
U.S. MEDIAN	3.7	4.1	5.8	9.6	9.9	10.0	14.7	4.6	5.3	7.9	10.0	11.9	13.9	16.7

N = NO STAFF/CHILD RATIO REQUIREMENT  
 NC = NO CENTER CARE ALLOWED FOR THIS AGE CHILD

a = STAFF/CHILD RATIO FOR UNDER 6 WEEKS OLD  
 b = AT LEAST 2 STAFF WITH EACH GROUP; NO RATIO REQUIREMENT  
 c = DIFFERENT AGE CATEGORY DESIGNATION

d = LICENSING OF CENTERS IS NOT MANDATORY  
 e = AT LEAST 2 STAFF MUST BE PRESENT IN THE CENTER  
 f = 1:10 RATIO REQUIREMENT FOR CENTERS WITH FEWER THAN 30 CHILDREN  
 g = RATIO VARIES WITH PERCENTAGE OF TITLE XX CHILDREN



TABLE 15: CAREGIVER TRAINING STATUS IN TITLE XX FUNDED CENTERS AND HOMES

STATE	CENTERS					HOMES								
	PROVIDE ORIENTATION (%)	AVERAGE TIME OF ORIENTATION (HOURS)			UNCREDENTIALLED CAREGIVERS RECEIVING TRAINING DURING PAST YEAR (%)	CAREGIVERS WITH CREDENTIALS (%)	CAREGIVERS RECEIVED TRAINING DURING PAST YEAR (%)			CAREGIVERS WITH CREDENTIALS (%)				
	NO	TITLE	XX	DAY	CARE	NO	TITLE	XX	DAY	CARE				
ALABAMA	100		14			97				49	10			
ALASKA		NO	TITLE	XX	DAY	CARE				NO	TITLE	XX	DAY	CARE
ARIZONA	NA		NA			NA				NA				NA
ARKANSAS	99		8			88				57				10
CALIFORNIA	100		8			87				NA				NA
COLORADO	94		8			26				48				9
CONNECTICUT	100		NA			100				100				0
DELAWARE	100		9			45				19				4
D.C.	100		20			36				100				0
FLORIDA	98		8			81				87				13
GEORGIA	NA		NA			NA				96				NA
HAWAII	100		15			92				62				-
IDAH0	96		8			NA				37				7
ILLINOIS	99		8			79				44				2
INDIANA	100		8			68				21				78
IOWA	95		9			61				41				29
KANSAS	91		8			85				35				87
KENTUCKY	100		4			85				18				50
LOUISIANA	100		8			55				20				11
MAINE	96		12			93				48				12
MARYLAND		REPORT	ATTACHED							REPORT	ATTACHED			0
MASSACHUSETTS	98		12			63				51				5
MICHIGAN	96		4			41				37				20
MINNESOTA	100		NA			100				31				NA
MISSISSIPPI	100		20			100				36				100
MISSOURI		NO	REPORT							NO	REPORT			
MONTANA	100		20+			55				45				46
NEBRASKA	NA		NA			NA				NA				6
NEVADA	100		8			67				25				NA
NEW HAMPSHIRE	97		15			70				55				17
NEW JERSEY	100		20+			68				46				43
NEW MEXICO		NO	REPORT							19				23
NEW YORK	NA		NA			NA				NA				4
NORTH CAROLINA	100		12			81				35				NA
NORTH DAKOTA	100		10			87				31				89
OHIO	98		8			54				25				33
OKLAHOMA	96		2			37				8				9
OREGON	89		20+			51				34				17
PENNSYLVANIA	100		40			95				NA				27
RHODE ISLAND	100		15			98				41				18
SOUTH CAROLINA	100		40			100				25				100
SOUTH DAKOTA	93		11			53				19				14
TENNESSEE	100		10			80				15				9
TEXAS	100		15			71				18				100
UTAH	99		12			44				29				86
VERMONT	95		5			60				48				35
VIRGINIA	100		16			50				32				57
WASHINGTON	95		16			65				41				48
WEST VIRGINIA	NA		NA			946				NA				12
WISCONSIN	100		NA			100				NA				48
WYOMING	87		10			14				26				100
U.S. MEDIAN	99.9%		12.8 HOURS			73%				35%				51%
														8%

NA = NOT AVAILABLE  
 - = DOES NOT APPLY (NO TITLE XX HOMES)  
 \* = EXCLUDES CREDENTIALLED CAREGIVERS  
 † = INCLUDES UNCREDENTIALLED AND CREDENTIALLED CAREGIVERS

TABLE 16 : MEALS AND SNACKS PROVIDED TO CHILDREN BY CENTER AND HOME  
(PERCENTAGE OF TITLE XX FUNDED CENTERS AND HOMES)

STATE	CENTERS (%)			HOMES (%)		
	BREAKFAST	SNACKS	LUNCH	BREAKFAST	SNACKS	LUNCH
ALABAMA	62	100	100	90	96	99
ALASKA		NO	TITLE XX	DAY	CARE	
ARIZONA	NA	NA	NA	100	100	100
ARKANSAS	72	100a	99	98	100	100
CALIFORNIA	67	100	100	NA	NA	NA
COLORADO	35	96	90	77	99	97
CONNECTICUT	30	100	100	NA	100	100
DELAWARE	96	100	100	74	96	96
D.C.	78	81	100	88	88	100
FLORIDA	77	95a	91	97	100	100
GEORGIA	96	100	100	100	100	100
HAWAII	83	100	100	-	-	-
IDAHO	22	100	61	47	93	87
ILLINOIS	46	100	96	15	95	100
INDIANA	97	95	100	78	94	95
IOWA	74	100	100	79	97	97
KANSAS	74	99	84	72	100	100
KENTUCKY	63	99a	100	83	94a	100
LOUISIANA	74	98a	100	45	94a	86
MAINE	70	100	100	81	98	99
MARYLAND			REPORT	ATTACHED		
MASSACHUSETTS	60	98a	78	74	94a	86
MICHIGAN	66	98a	91	75	94a	90
MINNESOTA	NA	100	100	NA	NA	NA
MISSISSIPPI	100	100	100	100	100	100
MISSOURI			NO	REPORT		
MONTANA	61	87	100	71	100	100
NEBRASKA	NA	NA	NA	NA	NA	NA
NEVADA	52	100	87	50	100	67
NEW HAMPSHIRE	69	88	72	78	95	98
NEW JERSEY	100	100	100	59	83a	80
NEW MEXICO			NO	REPORT		
NEW YORK	NA	NA	NA	NA	NA	NA
NORTH CAROLINA	73	99	73	83	97	98
NORTH DAKOTA	50	100	100	83	100	100
OHIO	81	98a	98	78	87a	88
OKLAHOMA	61	100a	100	22	97	100
OREGON	50	100	94	80	95	100
PENNSYLVANIA	0	91	91	NA	100	100
RHODE ISLAND	40	100	100	70	87	81
SOUTH CAROLINA	100	100	100	100b	100	100
SOUTH DAKOTA	80	98	100	39	94	87
TENNESSEE	100	100	100	100	100	100
TEXAS	86	100a	99	95	96	96
UTAH	39	100	99	63	99	95
VERMONT	42	92	59	61	98	92
VIRGINIA	65	100	100	64	89	78
WASHINGTON	59	100	100	82	100	100
WEST VIRGINIA	40	100	100	NA	NA	NA
WISCONSIN	NA	NA	NA	NA	NA	NA
WYOMING	27	3	93	48	96	96
U.S. MEDIAN %	68	97	94	77	96	94

NA = NOT AVAILABLE

a = P.M. SNACKS ONLY INCLUDED

- - DOES NOT APPLY  
(NO TITLE XX HOMES)

b = UPON PARENT REQUEST

TABLE 17. HEALTH SERVICES REQUIREMENT AND PROVISION BY CENTERS AND HOMES (PERCENTAGE OF TITLE XX FUNDED CENTERS AND HOMES)

STATE	CENTERS					HOMES			
	REQUIRE HEALTH ASSESSMENT (%)	REQUIRE IMMUNIZATION (%)	MAINTAIN HEALTH RECORDS (%)	ASSIST PARENTS OBTAIN SERVICES (%)	RECEIVED INFORMATION AND ASSISTANCE FROM TITLE XX AGENCIES (%)	REQUIRE HEALTH ASSESSMENT (%)	REQUIRE IMMUNIZATION (%)	NO TITLE XX	DAY CARE
ALABAMA	100	100	94	89	75	97	96		
ALASKA		NO	TITLE XX	DAY CARE		NO	TITLE XX	DAY CARE	
ARIZONA	100	100	100	NA	NA	100	100		
ARKANSAS	61	100	100	85	48	57	100		
CALIFORNIA	100	100	100	100	98	NA	NA		
COLORADO	100	100	97	78	39	95	89		
CONNECTICUT	100	100	100	100	100	100	100		
DELAWARE	100	100	100	92	31	99	100		
D.C.	100	100	100	99	100	100	100		
FLORIDA	100	100	100	94	80	100	100		
GEORGIA	100	100	NA	NA	NA	91	91		
HAWAII	100	100	78	100	83				
IDAHO	4	57	83	48	61	0	33		
ILLINOIS	99	100	100	91	45	99	100		
INDIANA	100	99	100	85	55	62	70		
IOWA	100	100	97	85	41	40	71		
KANSAS	100	100	100	93	83	100	100		
KENTUCKY	60	99	94	63	44	56	100		
LOUISIANA	100	100	100	80	41	100	100		
MAINE	100	100	100	96	26	92	99		
MARYLAND		REPORT	ATTACHED			REPORT	ATTACHED		
MASSACHUSETTS	98	97	94	92	17	69	68		
MICHIGAN	99	98	98	78	51	60	81		
MINNESOTA	100	100	100	NA	0	NA	NA		
MISSISSIPPI	100	100	100	100	50	100	100		
MISSOURI		NO	REPORT			NO	REPORT		
MONTANA	95	95	97	82	24	56	71		
NEBRASKA	NA	NA	NA	NA	NA	NA	NA		
NEVADA	100	100	100	91	100	100	100		
NEW HAMPSHIRE	100	100	100	88	53	93	93		
NEW JERSEY	98	89	98	90	39	35	35		
NEW MEXICO		NO	REPORT			NO	REPORT		
NEW YORK	NA	NA	NA	NA	NA	NA	NA		
NORTH CAROLINA	100	100	100	95	87	100	100		
NORTH DAKOTA	100	100	100	67	67	68	100		
OHIO	100	100	100	100	100	92	94		
OKLAHOMA	5	100	100	63	65	0	100		
OREGON	100	100	100	83	61	51	55		
PENNSYLVANIA	83	91	91	NA	NA	100	100		
RHODE ISLAND	100	100	100	100	100	100	100		
SOUTH CAROLINA	100	100	100	100	100	100	100		
SOUTH DAKOTA	93	100	98	77	77	46	54		
TENNESSEE	25	100	100	100	80	100	100		
TEXAS	95	98	100	96	88	100	98		
UTAH	100	100	100	78	44	82	84		
VERMONT	97	100	100	71	36	84	96		
VIRGINIA	100	100	100	90	73	93	90		
WASHINGTON	100	100	100	88	62	100	100		
WEST VIRGINIA	100	100	100	NA	100	100	100		
WISCONSIN	100	100	100	NA	NA	100a	100a		
WYOMING	67	93	87	89	53	63	92		
U.S. MEDIAN %	89	95	99	88	63	92	93		

NA = NOT AVAILABLE  
 - = DOES NOT APPLY (NO TITLE XX HOMES)  
 a = IF SERVING 4 OR MORE CHILDREN

TABLE 18 : SOCIAL SERVICES PROVISION BY CENTER (PERCENTAGE OF TITLE XX FUNDED CENTERS)

STATE	CENTERS			
	I&R FOR PARENTS(%)	ASSISTANCE TO PARENTS(%)	FOLLOW-UP TO ASSURE PROVISION OF SERVICES(%)	RECEIVED INFORMATION AND ASSISTANCE FROM TITLE XX AGENCY(%)
ALABAMA	93	88	80	75
ALASKA	NO	TITLE XX	DAY CARE	
ARIZONA	NA	NA	NA	NA
ARKANSAS	91	82	79	64
CALIFORNIA	100	99	92	98
COLORADO	95	73	65	34
CONNECTICUT	100	100	100	100
DELAWARE	98	88	80	41
D.C.	100	96	85	100
FLORIDA	95	89	80	77
GEORGIA	NA	NA	NA	NA
HAWAII	100	100	100	94
IDAHO	70	0	0	52
ILLINOIS	90	81	79	47
INDIANA	93	86	77	58
IOWA	93	89	84	72
KANSAS	98	88	84	88
KENTUCKY	93	81	74	49
LOUISIANA	91	79	83	47
MAINE	87	87	83	35
MARYLAND		REPORT	ATTACHED	
MASSACHUSETTS	98	95	94	46
MICHIGAN	82	67	64	52
MINNESOTA	NA	NA	NA	NA
MISSISSIPPI	100	100	100	50
MISSOURI		NO	REPORT	
MONTANA	82	68	58	32
NEBRASKA	NA	NA	NA	NA
NEVADA	96	70	91	100
NEW HAMPSHIRE	100	84	59	53
NEW JERSEY	97	87	76	43
NEW MEXICO		NO	REPORT	
NEW YORK	NA	NA	NA	NA
NORTH CAROLINA	NA	NA	NA	NA
NORTH DAKOTA	100	33	33	67
OHIO	100	100	100	100
OKLAHOMA	83	58	55	59
OREGON	89	89	83	67
PENNSYLVANIA	NA	NA	NA	NA
RHODE ISLAND	100	100	100	100
SOUTH CAROLINA	100	100	100	100
SOUTH DAKOTA	91	86	84	77
TENNESSEE	100	68	74	60
TEXAS	95	88	84	83
UTAH	85	75	74	49
VERMONT	90	65	64	44
VIRGINIA	98	91	72	74
WASHINGTON	100	87	74	64
WEST VIRGINIA	NA	NA	NA	100
WISCONSIN	NA	NA	NA	NA
WYOMING	93	67	73	73
U.S. MEDIAN %	94	85	79	63

NA - NOT AVAILABLE

TABLE 19: PARENT INVOLVEMENT IN CENTER AND HOME ACTIVITIES  
(PERCENTAGE OF TITLE XX FUNDED CENTERS AND HOMES)

STATE	CENTERS			HOMES
	UNLIMITED ACCESS TO OBSERVE CHILDREN	REGULAR EXCHANGE OF INFORMATION(%)	PARTICIPATION IN PROGRAM POLICY MAKING(%)	OPPORTUNITIES TO OBSERVE CHILDREN(%)
ALABAMA	100	100	75	99
ALASKA	NO	TITLE XX	DAY CARE	
ARIZONA	NA	NA	NA	NA
ARKANSAS	97	99	66	100
CALIFORNIA	100	100	99	NA
COLORADO	98	98	61	97
CONNECTICUT	100	100	100	100
DELAWARE	98	100	84	100
D.C.	100	100	82	100
FLORIDA	95	95	60	99
GEORGIA	NA	NA	NA	100
HAWAII	100	100	94	
IDAHO	91	100	48	100
ILLINOIS	96	99	64	85
INDIANA	NA	NA	NA	97
IOWA	97	98	85	98
KANSAS	99	100	90	97
KENTUCKY	98	99	56	100
LOUISIANA	98	100	62	100
MAINE	100	100	91	97
MARYLAND		REPORT	ATTACHED	
MASSACHUSETTS	98	100	72	88
MICHIGAN	100	97	54	95
MINNESOTA	NA	100	15	NA
MISSISSIPPI	100	100	90	100
MISSOURI		NO	REPORT	
MONTANA	NA	NA	NA	NA
NEBRASKA	NA	NA	NA	NA
NEVADA	100	100	30	100
NEW HAMPSHIRE	NA	100	NA	100
NEW JERSEY	70	99	90	83
NEW MEXICO		NO	REPORT	
NEW YORK	NA	NA	NA	NA
NORTH CAROLINA	100	99	79	97
NORTH DAKOTA	100	100	100	100
OHIO	100	100	NA	NA
OKLAHOMA	96	97	40	97
OREGON	100	100	100	75
PENNSYLVANIA	NA	95	NA	NA
RHODE ISLAND	100	100	100	100
SOUTH CAROLINA	100	100	93	100
SOUTH DAKOTA	100	100	65	100
TENNESSEE	100	100	77	100
TEXAS	98	100	81	100
UTAH	100	100	53	97
VERMONT	95	97	69	92
VIRGINIA	NA	NA	NA	NA
WASHINGTON	97	100	45	100
WEST VIRGINIA	NA	100	NA	100
WISCONSIN	100	100	NA	100
WYOMING	93	100	47	96
U.S. MEDIAN %	95	100	73	95

NA = NOT AVAILABLE

- = DOES NOT APPLY

TABLE 20: AVERAGE ACTUAL GROUP SIZE IN SCHEDULED ENROLLMENT\* CENTERS BY CHILD AGE (0-6)\*\*

STATE	NON-WAIVERABLE CENTERS			WAIVERABLE CENTERS ***		
	UNDER TWO YEARS		THREE TO SIX YEARS	UNDER TWO YEARS		THREE TO SIX YEARS
	7a	11a	11a	7a	11a	11a
ALABAMA						
ALASKA			NO	TITLE	XX	DAY CARE
ARIZONA						
ARKANSAS	8.7	8.3	9.8		6.9	15 11.8
CALIFORNIA(b)						
COLORADO	9.6	10.4	12.6		8.7	10.2 11.7
CONNECTICUT						
DELAWARE	7.4	9.6	11.0		I	I I
D.C.	8.1	8.4	11.9		I	I I
FLORIDA						
GEORGIA	7.7	10.9	14.3		9	8.7 12.4
HAWAII		9.8	13.2			
IDAHO						
ILLINOIS						
INDIANA						
IOWA						
KANSAS	5.9	8.9	10.5		4.8	7.5 11.6
KENTUCKY	8.7	12	11.5		6.6	9.3 12.4
LOUISIANA	8.7	10.9	12.7		7.3	10 11.3
MAINE		11	13			
MARYLAND				REPORT	ATTACHED	
MASSACHUSETTS	7.3	9.3	11.6		7.1	9.2 9.4
MICHIGAN						
MINNESOTA						
MISSISSIPPI						
MISSOURI				NO	REPORT	
MONTANA	6	8.6	12.4			4 9.8
NEBRASKA	NA	NA	NA		NA	NA NA
NEVADA	I	I	I		9.8	14.8 8.2
NEW HAMPSHIRE						
NEW JERSEY	9	13.3	16.3		NA	NA NA
NEW MEXICO				NO	REPORT	
NEW YORK						
NORTH CAROLINA	7.7	8	12.4		7.2	7.8 9.3
NORTH DAKOTA						
OHIO	9	9	10.3		6.3	8.4 11.1
OKLAHOMA						
OREGON						
PENNSYLVANIA	NA	NA	NA		NA	NA NA
RHODE ISLAND						
SOUTH CAROLINA						
SOUTH DAKOTA						
TENNESSEE	7.9	7.7	12.4		NA	NA NA
TEXAS	8	9.7	13.2		7.7	8 13.9
UTAH						
VERMONT	7.3	6.7	10.4		4	12.5 11.6
VIRGINIA						
WASHINGTON						
WEST VIRGINIA	NA	NA	NA		NA	NA NA
WISCONSIN						
WYOMING	I	I	I		I	I I
U.S. MEDIAN	8.0	9.6	12.2		7.2	9.2 10.9

\* HHS REQUIRED GROUP SIZE

UNDER TWO YEARS -- 6\*

TWO YEARS -- 12

THREE TO SIX YEARS -- 18

\*\*\*CENTER WITH NOT MORE THAN 20 PERCENT OR 10 (WHICHEVER IS LESS) HHS FUNDED CHILDREN,

\*\*\*REIMBURSE ON ATTENDANCE BASIS ONLY

\*\*SAMPLE SIZE FOR SCHOOL AGE CHILDREN TOO SMALL FOR RELIABLE ESTIMATE

NA = NOT AVAILABLE (DID NOT SURVEY)

- = DOES NOT APPLY (NO CHILDREN SERVED)

I = INSUFFICIENT SAMPLE SIZE

a = DID NOT SEPARATE WAIVERABLE AND NON-WAIVERABLE CENTERS

b = GROUP DEFINITION NOT COMPARABLE

TABLE 21: AVERAGE ACTUAL GROUP SIZE IN ATTENDANCE BASED\* CENTERS BY CHILD AGE (0-6)\*\*

STATE	NON-WAIVERABLE CENTERS			WAIVERABLE CENTERS***		
	UNDER TWO YEARS	TWO TO SIX YEARS	THREE TO SIX YEARS	UNDER TWO YEARS	TWO TO SIX YEARS	THREE TO SIX YEARS
ALABAMA	7a	10a	10a	7a	10a	10a
ALASKA			NO	TITLE	XX	DAY
ARIZONA	NA	NA	NA	NA	NA	NA
ARIZONA	NA	NA	NA	NA	NA	NA
ARIZONA	NA	NA	NA	NA	NA	NA
CALIFORNIA						
COLORADO						
CONNECTICUT	5	4	14			
DELAWARE						
D.C.						
FLORIDA	9.5	9.6	11.8	I	I	I
GEORGIA						
HAWAII						
IDAHO				4	9	13
ILLINOIS	6.6	9.2	11.6	5.3	8.5	13.8
INDIANA	7.7	9.4	14.8	I	I	I
IOWA	7.4	7.8	11.3	5.7	7.3	9.9
KANSAS						
KENTUCKY	6.6	11	14.5	10.5	11.7	12.8
LOUISIANA						
MAINE						
MARYLAND				REPORT	ATTACHED	
MASSACHUSETTS						
MICHIGAN	8.5	8	15.4	5.6	10.9	12.1
MINNESOTA	NA	NA	NA	NA	NA	NA
MISSISSIPPI	4.8	6.7	11.7			
MISSOURI				NO	REPORT	
MONTANA	NA	4.2	7.8	NA	3.7	8.5
NEBRASKA	NA	NA	NA	NA	NA	NA
NEVADA						
NEW HAMPSHIRE	4	8	13.4	3.6	5.8	11.2
NEW JERSEY						
NEW MEXICO				NO	REPORT	
NEW YORK	NA	NA	NA			
NORTH CAROLINA						
NORTH DAKOTA	9b	3b	7.5	5.5	7.5	13
OHIO	7.7	9.8	12.7	8.5	7.0	11.7
OKLAHOMA	6.9	9.6	12.4	7	10.9	14.6
OREGON	4	6	12.5	6.2	7.8	14.8
PENNSYLVANIA						
RHODE ISLAND			12.6			I
SOUTH CAROLINA	NA	NA	NA	NA	NA	NA
SOUTH DAKOTA	7	10	13	7	9	10
TENNESSEE						
TEXAS						
UTAH	7	9.5	14.2	NA	8	13.7
VERMONT						
VIRGINIA	8.6	12.5	15.5	7.2	9.3	13.1
WASHINGTON	8.6	9.6	11.2	7.2	8.5	10.1
WEST VIRGINIA	NA	NA	NA	NA	NA	NA
WISCONSIN	NA	NA	NA	NA	NA	NA
WYOMING	I	I	I	I	I	I
U.S. MEDIAN	6.8	8.0	12.6	6.7	8.0	12.6

\* HHS REQUIRED GROUP SIZE  
 UNDER TWO YEARS -- 8  
 TWO YEARS -- 12  
 THREE TO SIX YEARS -- 16

\*\*SAMPLE SIZE FOR SCHOOL AGE CHILDREN TOO SMALL FOR RELIABLE ESTIMATE

\*\*\*A CENTER WITH NOT MORE THAN 20 PERCENT OR 10 (WHICHEVER IS LESS) HHS FUNDED CHILDREN

\*\*\*REIMBURSEMENT ON ENROLLMENT BASIS ONLY

NA = NOT AVAILABLE (DID NOT SURVEY)  
 - = DOES NOT APPLY (NO CHILDREN SERVED)  
 I = INSUFFICIENT SAMPLE SIZE  
 a = DID NOT SEPARATE WAIVERABLE AND NON-WAIVERABLE CENTERS  
 b = ONLY ONE CENTER

TABLE 22: PERCENTAGE OF GROUPS IN NON-WAIVERABLE CENTERS BELOW HHS GROUP SIZE REQUIREMENTS

STATE	GROUPS BELOW (%)				
	NO	TITLE	XX	DAY	CARE
ALABAMA			27		
ALASKA					
ARIZONA			N		
ARKANSAS			13		
CALIFORNIA			31		
COLORADO			17		
CONNECTICUT			0		
DELAWARE			58		
D.C.			16		
FLORIDA			24		
GEORGIA			19		
HAWAII			13		
IDAHO			-		
ILLINOIS			26		
INDIANA			30		
IOWA			18		
KANSAS			12		
KENTUCKY			21		
LOUISIANA			28		
MAINE			89		
MARYLAND	REPORT		ATTACHED		
MASSACHUSETTS			12		
MICHIGAN			32		
MINNESOTA			NA		
MISSISSIPPI			5		
MISSOURI	NO		REPORT		
MONTANA			24		
NEBRASKA			NA		
NEVADA			56		
NEW HAMPSHIRE			25		
NEW JERSEY			22		
NEW MEXICO	NO		REPORT		
NEW YORK			NA		
NORTH CAROLINA			56		
NORTH DAKOTA			25		
OHIO			16		
OKLAHOMA			26		
OREGON			0		
PENNSYLVANIA			NA		
RHODE ISLAND			14		
SOUTH CAROLINA			NA		
SOUTH DAKOTA			12		
TENNESSEE			15		
TEXAS			22		
UTAH			24		
VERMONT			11		
VIRGINIA			24		
WASHINGTON			27		
WEST VIRGINIA			NA		
WISCONSIN			NA		
WYOMING			1		
U.S. MEDIAN (%)			21.6		

NA = NOT AVAILABLE (DID NOT SURVEY)  
 - = DOES NOT APPLY (NO NON-WAIVERABLE CENTERS)  
 I = INSUFFICIENT SAMPLE SIZE





TABLE 23: AVERAGE ACTUAL CENTER LEVEL STAFF/CHILD RATIOS IN SCHEDULED ENROLLMENT\*  
TITLE XX FUNDED CENTERS BY CHILD AGE (CHILDREN PER CAREGIVER AGES 0-6\*\*)

STATE	NON-WAIVERABLE CENTERS			WAIVERABLE CENTERS***		
	UNDER TWO YEARS	TWO YEARS	THREE TO SIX YEARS	UNDER TWO YEARS	TWO YEARS	THREE TO SIX YEARS
ALABAMA	4a	4-8a	8a	4a	4-8a	8a
ALASKA		NO	TITLE XX	DAY CARE		
**** ARIZONA						
ARKANSAS	5.3	5	6.4	5.3	5	10.5
CALIFORNIA	3.4	3.7	7.4	-	-	-
COLORADO	3.5	4.5	7.6	4.1	4.8	11.2
**** CONNECTICUT						
DELAWARE	3	2.7	6.8	6	5	6.9
D.C.	2.8	3.9	7.5	I	I	I
**** FLORIDA						
GEORGIA	4.2	5.2	9.7	7.4	7.2	13.5
HAWAII	-	2.4	6.1	-	-	-
**** IDAHO						
**** ILLINOIS						
**** INDIANA						
**** IOWA						
KANSAS	2.8	4.8	5.8	3.3	4.5	6.2
KENTUCKY	4.7	5.6	7.6	4.9	6.5	8.9
LOUISIANA	4.2	6.3	11	3.8	5.3	10
MAINE	2	5.7	8	-	-	-
MARYLAND			REPORT	ATTACHED		
MASSACHUSETTS	3.4	4.1	6.8	2.9	3.7	6.5
**** MICHIGAN						
**** MINNESOTA						
**** MISSISSIPPI						
MISSOURI			NO	REPORT		
MONTANA	3.8	3.6	8.4	-	2.6	3.8
NEBRASKA	NA	NA	NA	NA	NA	NA
NEVADA	I	I	I	4.4	7.1	10.5
**** NEW HAMPSHIRE						
NEW JERSEY	NA	NA	NA	NA	NA	NA
NEW MEXICO			NO	REPORT		
**** NEW YORK						
NORTH CAROLINA	4.3	5.6	7.8	7.4	7	10
**** NORTH DAKOTA						
OHIO	3.2	3.8	7.0	4.0	3.8	5.1
**** OKLAHOMA						
**** OREGON						
PENNSYLVANIA	NA	NA	NA	NA	NA	NA
**** RHODE ISLAND						
**** SOUTH CAROLINA						
**** SOUTH DAKOTA						
TENNESSEE	4.6	5.1	8.8	NA	NA	NA
TEXAS	5	4.9	9.2	2.3	4.4	8.3
**** UTAH						
VERMONT	2	3.2	5.3	2	2.4	7.3
**** VIRGINIA						
**** WASHINGTON						
WEST VIRGINIA	NA	NA	NA	NA	NA	NA
**** WISCONSIN						
WYOMING	I	I	I	I	I	I
U.S. MEDIAN	3.7	4.5	7.6	4.1	5.0	8.5

\* HHS REQUIRED RATIOS

UNDER TWO YEARS -- 1:3  
TWO YEARS -- 1:4  
THREE TO SIX YEARS -- 1:9

\*\*\* A CENTER WITH NOT MORE THAN 20 PERCENT OR 10 (WHICHEVER IS LESS) HHS FUNDED CHILDREN

\*\*\*\* REIMBURSE ON ATTENDANCE BASIS ONLY

\*\* SAMPLE SIZE FOR SCHOOL AGE CHILDREN TOO SMALL FOR RELIABLE ESTIMATE

NA = NOT AVAILABLE (DID NOT SURVEY)  
- = DOES NOT APPLY (NO CHILDREN SERVED)  
I = INSUFFICIENT SAMPLE SIZE  
a = DID NOT SEPARATE WAIVERABLE AND NON-WAIVERABLE CENTERS

TABLE 24: AVERAGE ACTUAL CENTER LEVEL STAFF/CHILD RATIOS ATTENDANCE BASED\* TITLE XX, FUNDED CENTERS BY CHILD AGE (CHILDREN PER CAREGIVER, AGES 0-6\*\*)

STATE	NON-WAIVERABLE CENTERS			WAIVERABLE CENTERS***		
	UNDER TWO YEARS	TWO YEARS	THREE TO SIX YEARS	UNDER TWO YEARS	TWO YEARS	THREE TO SIX YEARS
ALABAMA	3a	3-7a	7a	3a	3-7a	7a
ALASKA		NO	TITLE XX	DAY CARE		
ARIZONA	NA	NA	NA	NA	NA	NA
****ARKANSAS						
****CALIFORNIA						
****COLORADO						
CONNECTICUT	2.4	2.4	6.4	-	-	-
****DELAWARE						
****D.C.						
FLORIDA	4.2	5.9	8.6	I	I	I
****GEORGIA						
****HAWAII						
IDAHO	-	-	-	3	6	11
ILLINOIS	3.8	4.9	8	2.5	4.1	8.4
INDIANA	4.6	5	8.1	4.6	4.8	8.7
IOWA	3.0	3.5	6.5	3	2.9	6.8
****KANSAS						
KENTUCKY	4.3	5.6	7.2	5.2	6.1	7.8
****LOUISIANA						
****MAINE						
MARYLAND			REPORT	ATTACHED		
****MASSACHUSETTS						
MICHIGAN	2.4	3.5	6.5	2.5	4.2	6.8
MINNESOTA	NA	NA	NA	NA	NA	NA
MISSISSIPPI	2.8	3.2	5.5	-	-	-
MISSOURI			NO	REPORT		
MONTANA	-	2.2	3.9	I	2	4.7
NEBRASKA	NA	NA	NA	NA	NA	NA
****NEVADA						
NEW HAMPSHIRE	2.2	3.6	6.5	3.2	2.3	6
****NEW JERSEY						
NEW MEXICO			NO	REPORT		
NEW YORK	NA	NA	NA	-	-	-
****NORTH CAROLINA						
NORTH DAKOTA	2.4	3.6	7.2	3	4	5.6
OHIO*	2.3	2.9	4.9	2.6	1.3	6
OKLAHOMA	5.3	5.3	9.4	4.4	6	8.9
OREGON	5.3	4.5	4.6	3.2	3.9	6.5
****PENNSYLVANIA						
RHODE ISLAND	-	-	5.3	-	-	I
SOUTH CAROLINA	NA	NA	NA	NA	NA	NA
SOUTH DAKOTA	2.6	4	7.4	3.7	3.7	8.6
****TENNESSEE						
****TEXAS						
UTAH	6.3	5.4	10.4	3.5	5.2	10.8
****VERMONT						
VIRGINIA	3.5	6	9.2	3.2	5.2	9.3
WASHINGTON	4.2	4	7.7	3.4	4.3	7.8
WEST VIRGINIA	NA	NA	NA	NA	NA	NA
WISCONSIN	NA	NA	NA	NA	NA	NA
WYOMING	I	I	I	I	I	I
U.S. MEDIAN	3.0	4.4	6.8	3.2	4.0	6.9

\* HHS REQUIRED RATIOS

UNDER TWO YEARS -- 1:3  
 TWO YEARS -- 1:4  
 THREE TO SIX YEARS -- 1:8

\*\*\* A CENTER WITH NOT MORE THAN 20 PERCENT OR 10 (WHICHEVER IS LESS) HHS FUNDED CHILDREN

\*\*\*\* REIMBURSE ON ENROLLMENT ONLY

NA = NOT AVAILABLE (DID NOT SURVEY)  
 - = DOES NOT APPLY (NO CHILDREN SERVED)  
 I = INSUFFICIENT SAMPLE SIZE  
 a = DID NOT SEPARATE WAIVERABLE AND NON-WAIVERABLE CENTERS

\*\* SAMPLE SIZE FOR SCHOOL AGE CHILDREN TOO SMALL FOR RELIABLE ESTIMATE

TABLE 25: CENTER STAFF DIFFERENCES BETWEEN ACTUAL PRACTICE AND HHS REQUIREMENTS (ADDITIONAL PTE CAREGIVERS NEEDED)

STATE	NON-WAIVERABLE CENTERS	
	UNDER TWO YEARS	TWO YEARS AND OLDER
ALABAMA	21a	16a
ALASKA	NO TITLE	XX DAY CARE
ARIZONA	NA	NA
ARKANSAS	22	6
CALIFORNIA	26	86
COLORADO	22	72
CONNECTICUT	0	0
DELAWARE	15	11
D.C.	4	21
FLORIDA	202	284
GEORGIA	42	100
HAWAII	-	2
IDAHO	-	-
ILLINOIS	140	322
INDIANA	4	106
IOWA	5	12
KANSAS	12	12
KENTUCKY	92	63
LOUISIANA	142	43
MAINE	-	0
MARYLAND	REPORT	ATTACHED
MASSACHUSETTS	17	92
MICHIGAN	12	64
MINNESOTA	NA	NA
MISSISSIPPI	3	0
MISSOURI	NO	REPORT
MONTANA	2	10
NEBRASKA	NA	NA
NEVADA	2	0
NEW HAMPSHIRE	0	0
NEW JERSEY	NA	NA
NEW MEXICO	NO	REPORT
NEW YORK	NA	NA
NORTH CAROLINA	108	129
NORTH DAKOTA	0	0
OHIO	13	22
OKLAHOMA	325	324
OREGON	1	4
PENNSYLVANIA	NA	NA
RHODE ISLAND	-	0
SOUTH CAROLINA	NA	NA
SOUTH DAKOTA	4	9
TENNESSEE	100	148
TEXAS	405	286
UTAH	1	61
VERMONT	0	4
VIRGINIA	10	153
WASHINGTON	37	43
WEST VIRGINIA	NA	NA
WISCONSIN	NA	NA
WYOMING	1	1
U.S. TOTAL	1,789	2,455

NA = NOT AVAILABLE (DID NOT SURVEY)

I = INSUFFICIENT SAMPLE SIZE

- = DOES NOT APPLY  
(NO CHILDREN SERVED)

a = WAIVERABLE AND NON-WAIVERABLE COMBINED

TABLE 26: CENTER STAFF DIFFERENCES BETWEEN ACTUAL PRACTICE AND HHS REQUIREMENTS (SURPLUS FTE CAREGIVERS)

STATE	NON-WAIVERABLE CENTERS			
	UNDER TWO YEARS	TWO YEARS AND OLDER		
ALABAMA	0	19a		
ALASKA	NO TITLE	XX DAY CARE		
ARIZONA	NA	NA		
ARKANSAS	6	55		
CALIFORNIA	12	863		
COLORADO	2	265		
CONNECTICUT	1	236		
DELAWARE	6	69		
D.C.	5	187		
FLORIDA	54	409		
GEORGIA	13	170		
HAWAII	-	39		
IDAHO	-	-		
ILLINOIS	37	912		
INDIANA	15	161		
IOWA	1	130		
KANSAS	6	314		
KENTUCKY	10	96		
LOUISIANA	32	156		
MAINE	-	78		
MARYLAND	REPORT	ATTACHED		
MASSACHUSETTS	37	739		
MICHIGAN	73	682		
MINNESOTA	NA	NA		
MISSISSIPPI	11	177		
MISSOURI	NO REPORT			
MONTANA	1	122		
NEBRASKA	NA	NA		
NEVADA	0	5		
NEW HAMPSHIRE	3	32		
NEW JERSEY	NA	NA		
NEW MEXICO	NO REPORT			
NEW YORK	NA	NA		
NORTH CAROLINA	15	293		
NORTH DAKOTA	1	4		
OHIO	34	357		
OKLAHOMA	39	277		
OREGON	0	2		
PENNSYLVANIA	NA	NA		
RHODE ISLAND	-	212		
SOUTH CAROLINA	NA	NA		
SOUTH DAKOTA	9	8		
TENNESSEE	32	290		
TEXAS	63	749		
UTAH	0	36		
VERMONT	23	128		
VIRGINIA	10	165		
WASHINGTON	10	76		
WEST VIRGINIA	NA	NA		
WISCONSIN	NA	NA		
WYOMING	I	I		
U.S. TOTAL	550	8,201		

NA - NOT AVAILABLE (DID NOT SURVEY)

I - INSUFFICIENT SAMPLE SIZE

- = DOES NOT APPLY (NO CHILDREN SERVED)

a = WAIVERABLE AND NON-WAIVERABLE COMBINED; UNDER TWO-YEAR OLD AND TWO YEARS AND OLDER COMBINED

TABLE 27: PRE-SCHOOL CHILD ENROLLMENT IN HOMES DURING MORNING HOURS  
(PERCENTAGE OF TITLE XX HOMES)

STATE	ONE CHILD(%)	TWO TO THREE CHILDREN(%)	FOUR TO FIVE CHILDREN(%)	SIX CHILDREN(%)	SEVEN TO TWELVE CHILDREN(%)
ALABAMA. a	21	32	32	2	2
ALASKA	NO	TITLE XX	DAY CARE		
ARIZONA	NA	NA	NA	NA	NA
ARKANSAS	0	9	48	17	26
CALIFORNIA	NA	NA	NA	NA	NA
COLORADO	4	27	48	16	5
CONNECTICUT	NA	NA	NA	NA	NA
DELAWARE b	17	24	40	2	4
D.C.	7	48	45	0	0
FLORIDA	0	1	99	0	0
GEORGIA	0	9	48	35	8
HAWAII	-	-	-	-	-
IDAHO	13	20	20	27	20
ILLINOIS	2	20	42	23	13
INDIANA	0	13	26	9	52
IOWA	8	29	40	17	6
KANSAS	10	22	47	14	7
KENTUCKY	0	0	11	17	72
LOUISIANA	22	53	16	3	6
MAINE	1	27	43	17	12
MARYLAND		REPORT	ATTACHED		
MASSACHUSETTS	18	28	36	16	2
MICHIGAN a	14	38	29	8	5
MINNESOTA	NA	NA	NA	NA	NA
MISSISSIPPI	0	13	87	0	0
MISSOURI		NO	REPORT		
MONTANA	21	26	23	23	7
NEBRASKA	NA	NA	NA	NA	NA
NEVADA	0	0	33	50	17
NEW HAMPSHIRE	0	33	20	25	22
NEW JERSEY	13	34	23	4	26
NEW MEXICO		NO	REPORT		
NEW YORK	NA	NA	NA	NA	NA
NORTH CAROLINA	7	36	52	2	3
NORTH DAKOTA	0	33	50	17	0
OHIO	5	14	53	26	2
OKLAHOMA	5	38	56	0	0
OREGON b	8	33	22	8	11
PENNSYLVANIA	NA	NA	NA	NA	3
RHODE ISLAND a	14	25	20	0	1
SOUTH CAROLINA	0	0	100	0	0
SOUTH DAKOTA	22	20	24	10	24
TENNESSEE b	2	28	43	3	20
TEXAS	1	42	49	7	1
UTAH	1	31	36	19	13
VERMONT	13	23	40	11	13
VIRGINIA	24	53	13	6	4
WASHINGTON	7	26	38	12	17
WEST VIRGINIA	33	51	11	5	0
WISCONSIN	NA	NA	NA	NA	NA
WYOMING	4	30	33	18	15

U.S. MEDIAN

NA = NOT AVAILABLE

- = DOES NOT APPLY  
(NO CHILDREN SERVED)

a = DOES NOT EQUAL 100% SINCE HOMES SERVING SCHOOL AGE CHILDREN ONLY ARE NOT INCLUDED

b = DOES NOT EQUAL 100% SINCE SOME HOMES SERVED NO CHILDREN ON THE DAY OF THE SURVEY.

APPENDIX B

ADDITIONAL STATE INFORMATION

WISCONSIN

Comparison of New State Day Care  
Licensing Rules with HEWDCR and  
Estimates of the Fiscal Impact.

Division of Community Services

March, 1980

Many of the new federal regulations are not new to day care facilities. Wisconsin has recently revised the state's day care licensing requirements (HSS 55) which in many instances could satisfy the new federal regulations. If a facility meets the state's requirements for the following, the federal regulations will be met.

DAY CARE CENTERS

HEWDCR

71.10 Program Activities for Children

71.12 Training  
(a)(2).

71.14 Nutrition

71.16 Health and Safety  
a(i, ii, iii)  
(a)(2)

(a)(5)

71.18 Physical Environment  
(a)(1)  
(a)(2)  
(a)(3) Transportation  
Swimming  
Equipment

71.22 Parent Involvement  
(a) (-4)  
(a)(5)

71.20 Social Services

71.24 Group Composition

NEW STATE RULES (GROUP DAY CARE)

HSS 55.34(1)(a-i) Program; Essential  
Program Qualifications  
55.35(3)(a-e)  
55.36(3)

HSS 55.32(2)(a-c)  
55.32(1)(b)3b  
55.32(1)(c)3b  
55.32(1)(d)1c

HSS 55.34(4)  
55.35(4)(a-k)  
55.36(5)(a-c)

HSS 55.34(5)(h)  
55.34(5)(l)  
55.34(5)(g)  
55.33(1)(c)  
55.34(5)(e)

Don't think it is covered.

HSS 55.33(1)(a)1  
"Note"  
55.34(10)  
55.34(7)  
55.34(2)(a & b)

HSS 55.34(6)  
Note in Rules

DAY CARE HOME

HEWDCR

71.30 Program of activities  
(a)

71.32 Training  
(a)

NEW STATE RULES

HSS 55.24(1)(a-d)  
55.25(3)(a & b)

HSS 55.22(a)2

HSS 55.24(4)(a-1)

71.36 Health and Safety	
(a) (i, ii; iii)	HSS 55.24(5)(h)
(a) (2)	55.24(5)(g)
(a) (3)	55.24(5)(f)
(a) (4)	55.23(1)(b) 5-7
(a) (5)	55.24(5)(d)
	Not covered
71.36 Physical environment	
(a) (1)	HSS 55.23(1)(a)1
(a) (2)	"Note"
(a) (3) Transporration	55.24(8)
Swimming	55.24(9)
Equipment	55.24(2)
71.42 Parent involvement	
(a) (1-4)	HSS 55.24(6)
71.40 Social Services	Not Needed
71.44 Group Composition	Waiver (?)

While compliance with these regulations may indeed add additional cost to providing day care services, the cost should be attributed to the state's day care rules not the federal requirements. (Please see fiscal note for HSS 55.)

It must be made clear however, that the federal regulations list numerous services the state agency must provide day care facilities beyond licensing. In effect the revised licensing rules for a program of activities for children for example "will automatically" demonstrate facilities' compliance with the federal regulations but the state agency will be out of compliance if information and technical assistance is not granted to day care centers and homes.

5. It is assumed that the cost of the various training materials, pamphlets, fliers, manual materials, printing and public information dissemination will be absorbed within the Division's current operations budgets.

#### Cost Estimates

There are two separate costs incurred by the state that must be considered in estimating the total fiscal effect. First there is the cost generated by the additional responsibility laid on the state to offer consultation, technical assistance and additional regulation of day care facilities. Second, is the increased cost of day care service contracted for by county agencies. If an operator's costs increase, it's likely that these costs will be passed on in the form of higher charges for day care services.

#### State Agency Requirements

1. To meet the federal requirements in the areas of program of activities for children, training, health and safety, social services, and parental involvement, six regional staff consultants are necessary.

The regulation requires the state agency to:

- Provide information and technical assistance to day care centers on establishing a planned program of developmentally appropriate activities.



child health services and social services in the community and ensure that MHS funded children eligible for publically funded health services and/or social services receive those services.

-Provide information and technical assistance to day care centers on working with parents.

These functions cannot be carried out with current licensing/certification staff for the number of licensed facilities in general and day care facilities in particular have grown significantly in the last several years without any increase in licensing/certification staff resources. Any consultation that does occur is in direct reference to meeting and interpreting existing state regulations. Additional resources are needed to provide technical assistance and consultation services listed above and to:

- Coordinate region-wide training services.
- Coordinate delivery of nutrition services.
- Coordinate the development and delivery of health resources and program services.
- Coordinate the development of a social service resource system.
- Provide ongoing training services on the federal regulations to county social service department staff and regional licensing staff.

✓ Six Social Service Specialist I

Salary	\$125,300
Fringe	27,600
Supplies & Serv.	9,600
Travel	12,000
TOTAL	\$174,500 Per Year

2. The regulations require the state agency to establish and implement a statewide plan for providing or purchasing training for all center caregivers.

To implement this provision would require continuation of the current day care specialist in the Bureau of Children, Youth and Families, and authorization for the six regional consultants discussed above.

3. The initial implementation of the new regulations will require a short term intensive effort beyond current central office staff capability. The short term assignments will include:

- Oversight to provide timely and coordinated development of the HSS "correction" plan.
- Development of a uniform monitoring tool as required by the rules.
- Routinely make progress reports to the Division Administrator and Department Secretary.
- Coordinate the development of manual resource materials, and all training services including training for six regional consultants.
- Develop a system for monitoring ongoing compliance with the federal

4. The federal definition of "day care home"-a private residence in which day care is provided to 12 or fewer children-include many family day care centers under the state definitions. One effect is to include small family day care "centers" caring for 3 or fewer children who are certified by the counties to receive federal reimbursement. Therefore counties will be responsible for the provision of information and technical assistance on a program of activities for children, health and safety, social services, parent involvement and assessment of training for day care homes (federal definition) they certify. Unfortunately information is not readily available to project the burden on counties.

B Costs generated by the impact of the federal regulations on the operating costs of day care providers.

Most if not all of the federal regulations pertaining to day care centers and homes are currently met or exceeded by the recent revision of Wisconsin's day care rules (HSS 55).

There is one costly exception however-group composition. Wisconsin's staff/child ratio are higher than permitted under the federal regulations for children over the age of three. Wisconsin's maximum group size is also greater for children three years old and greater. The result is that an operator with more than 10 children or 20 percent of children in the center/home must increase his/her staff or decrease the capacity of the center. Both options will increase an operator's costs.

While cost projections have been provided by the Wisconsin Day Care Administrators Association (see Attachment 3), "guesstimating" increased cost passed on to state day care programs in the form of higher charges is much more difficult. The problems include:

1. The state need not pay the full cost of operations for any child receiving federal day care assistance. The state need only "consider" an operator's costs.
2. If the state chooses to reimburse for the full cost of providing day care services the total dollar allocation for day care will not necessarily increase. Service utilization may be cut back,
3. The number of facilities that qualify for the group composition waiver is not known. This prohibits any accurate cost projections.

As a result the increased cost due to higher day care facility operating costs cannot be estimated.

ASSESSMENT OF CURRENT PRACTICES  
IN INDIANA IN TITLE XX  
FUNDED DAY CARE

Introduction. In Indiana, Title XX funded day care is the responsibility of the Interdepartmental Board for the Coordination of Human Service Programs (Board) which operates as the Indiana Office of Social Services (IOSS). All day care centers or homes that the Board contracts with to provide Title XX day care services must be licensed by the Indiana State Department of Public Welfare to provide day care services.

Because states vary in the manner by which Title XX funds finance child day care services, it should be understood that to receive Title XX funds in Indiana requires that an agency express an interest in providing services; that the agency provide certain information pertaining to their service provision and costs; that the agency (or home) be licensed by the SDPW to provide child day care; and that the Board, through IOSS, enter into a contract for the provision of service. No Title XX funds are provided to an agency until services are actually provided.

Survey Methodology. The assessment was completed using information gathered from two telephonic surveys conducted during the month of March 1981 by IOSS staff. One survey was of a sample of day care homes licensed by SDPW and authorized via contract with the Board to provide Title XX day care services. The second survey was of a sample of 73 day care centers (60.83%) also licensed and authorized (via contract with the Board) to provide Title XX day care services. Other information reported was based upon IOSS file information and interviews with SDPW staff.

All references in the ASSESSMENT to Surveys refer to the two telephonic surveys conducted in March, 1981 by IOSS staff.

Findings. Parts I and II summarize identifying information and demographics.

Part III, Summary of Current Title XX Funded Day Care Practices/State Agency, indicates that the State does not require provision of information and referral to clients nor is parental involvement specifically mandated. However, the survey results found in Part IV, Summary of Current Title XX Funded Day Care Provider Practices Centers, indicate that at least 86.3% of the centers do provide I & R and, though we did not survey parental involvement questions, most centers also encourage and allow parental input and observation.

Findings in Part III vis a vis staff/child ratio, reveal the State's requirements to be less restrictive than the proposed federal ratios for every age group except 10-14 which has an identical ratio. Indiana's group size requirements are also less restrictive than proposed federal requirements with the exception of the preschoolers (ages 3-6). These differences lead to the finding that imposition of the federal staff/child ratios and group size requirements would call for a substantial increase in center staff.

Additional FTE Staff:  
In Non Waiverable Centers Only

Average Annual  
Salary

Additional Cost

109.5

8216<sup>1/</sup>

\$899,652

Items C on page 16 of the ASSESSMENT are noted above. Title XX day care costs would increase by \$900,000 to accommodate the staff/child and group composition guidelines.

Other, less significant, cost increases would result from implementation of the proposed guidelines. Examples of other cost increases include the need to remodel facilities to accommodate group composition standards or to add staff to provide information and referral services.

The findings of our survey certainly suggest that there would not be a minimal impact on the State of Indiana. The findings do suggest that Title XX providers are in compliance with State licensing standards and that most voluntarily provide ancillary services. We would view mandatory day care regulations as an unnecessary intrusion on the State's responsibility to set licensing requirements appropriate for Indiana facilities. The staff/child ratios and group composition standards would be extremely costly and other requirements are either duplicative of existing state standards or unnecessarily costly regulatory "add-ons" which cannot be demonstrated to be related to proper provision of day care services.

We were quite willing to participate in this ASSESSMENT and excited about the opportunity to obtain a profile of Title XX child day care in Indiana. The findings of this ASSESSMENT will be quite useful to us in our continued effort to improve Title XX services.

1/ Average wage of \$3.95/hour x 8 hours/day x 5 x 52 = \$8216.

AN  
ASSESSMENT  
OF  
CURRENT TITLE XX DAY CARE PRACTICES  
IN  
NEW YORK STATE

New York State Department of Social Services  
40 North Pearl St.  
Albany, New York  
April 1981

In December 1980, Congress passed the Omnibus Reconciliation Act of 1980 (PL 96-499) which delays implementation of the Department of Health and Human Services Day Care Regulations until July 1, 1981. The Act also requires the Department of Health and Human Services to assist each state in conducting a systematic assessment of current practices in Title XX funded day care programs and to provide a summary report of the assessments to Congress by June 1, 1981. What follows is New York State's assessment of current practices in Title XX funded day care programs and the potential impact of the Department of Health and Human Services Day Care Regulations on New York State programs.

New York State chose to utilize and analyze existing data sources since time restraints and limited resources did not permit the generation of new data from direct contacts with providers.

Part I, the State Agency Questionnaire, was completed by utilizing data maintained at the State Department of Social Services level and, insofar as possible, reflects statewide Title XX practices.

Part II, an analysis entitled Service Levels, Group Sizes, and Staffing Ratios in Publicly Funded Day Care in New York City, as indicated in the title, was limited to New York City. The Department acknowledges and appreciates the cooperation of the Agency for Child Development which supplied data critical to the analysis.

Outside of New York City, 57 county departments of social services may purchase day care center care, in accordance with Title XX purchase of service requirements, on an as-needed basis, from any not-for-profit licensed day care center. Consequently, such centers have a mix of publicly funded and private children. Generally, the percentage of Title XX children in centers outside of New York City as compared to the centers total capacity is relatively small.

### Reimbursement and Rate Setting

The State does not set rates for day care purchased by county departments of social services. Rather, the State has established a maximum reimbursement rate, i.e., ceiling, for day care center care. Each county department of social services is responsible for establishing a rate with those day care centers from which it is purchasing or proposing to purchase day care services. The process by which the rate is established is based on a fiscal review of the centers current or proposed operating budget. The county can then contract for an appropriate rate. Reimbursement rates above the State imposed ceiling may be granted only with the prior approval of the State Department of Social Services when the higher cost of care is attributable to the care of handicapped children, special diets, or infant care.

With respect to family day care rates, it is the responsibility of county departments of social services to negotiate and establish rates with their certified family day care homes. In New York City, this responsibility again rests with the Agency for Child Development.

### PROVIDER TRAINING

#### Day Care Centers

State day care licensing standards which apply to both private centers and those in receipt of public funds require that centers develop orientation programs for new staff and ongoing in-service training programs. Outside of New York City, State day care licensing staff assist centers in the development of such programs by providing direct technical assistance or by assisting the center to access community resources, e.g., courses offered by community colleges, material developed by day care councils, etc. In New York City, the Agency for Child Development performs similar functions as described above. In addition, caregivers can participate in relevant training programs sponsored by the State Department of Social Services with Title XX training funds and contracted out to various universities. The shrinking Title XX funds available for this activity, however, has further reduced the Department's ability to meet provider training needs.

## SERVICE LEVELS, GROUP SIZES, AND STAFFING RATIOS

### IN PUBLICLY FUNDED DAY CARE IN NEW YORK CITY,

#### Summary

A review was undertaken of current key characteristics of publicly funded day care in New York City. The purpose of this review was to determine if the care provided is in compliance with major day care standards contained in the proposed HHS Day Care Regulations: Group Size and Staff Ratio Standards.

For all age groups except two year olds, day care is below the proposed HHS standards for group sizes. For all age groups of three and older, day care is above the proposed standards for staff to child ratios. Since the proposed standards allow surplus caregiver hours for children ages 2 and above to be applied to other groups in that same age range, it is only for the under 2 age groups that day care is below standard on the proposed staff-to-child ratios. For children under 2, there is a deficit of 4.9 caregivers hours per day per group. As Table V shows, the ages of children in infant day care groups can go up to 2 years, 9 months. However, 18 to 25 months is the usual cutoff age.

For children age 2 and up, there is an average of .47 surplus caregiver hours per group, or 2.25 per center. The details on staff-child ratios are contained in Table III.

Three sources of information were used to develop the following tables:

Agency for Child Development - Day Care arm of New York City Human Resources Administration

- ACD computer system reports on capacity utilization, enrollment, and attendance as of January 1981 (the ACD 130P1 report).
- Data from the ACD Program and Field Operations divisions on the standard age groupings, numbers of groups, uniform group sizes, and staffing patterns.
- New York State Department of Social Services computer systems reports on the licensing of day care centers and certification of family day care providers.

The core methodology used to obtain from these source documents to the desired information was to take the standardized data on group sizes adjusted for both over-enrollment and for attendance, and thereby arrive at citywide averages for each age grouping of children.



## Family Day Care Homes

As indicated earlier, county departments of social services have responsibility for training their family day care providers. When available, providers may participate in Title XX State-sponsored skill training programs. In New York City, in addition to the training role of the Agency for Child Development and the training provided by approved child caring agencies which administer family day care programs, several "cluster" family day care providers can access the resources of participating day care centers.

## Miscellaneous

It should be noted that the answers that appear in the State Agency Questionnaire (Part I) have been answered from a statewide perspective. Some problems were encountered in answering questions which referenced "State Agency" responsibilities as defining this term as it applies to this State, which delegates substantial responsibilities to county agencies, is critical in understanding the full impact of responses. The analysis which comprises Part III has concentrated on New York City, where over 70% of the Statewide Title XX day care dollars are spent, and consequently where changes in Federal policy have had the most immediate fiscal impact.

## Service Levels and Attendance

Publicly funded day care was provided to 42,859 children in New York during January 1981, as shown on Table I. On this table we have shown the service levels for 11 types of day care. Day Care center care is broken down into two major categories - centers whose full enrollment is publicly funded children, and centers whose enrollment is up to one-half publicly funded children (limited purchase of service - LPOS). Family Day care is also broken down into two major categories - that which is provided by day care agencies, and that which is provided by voluntary child welfare agencies as a part of their range of support services to children and families.

For each of these four categories of day care, Table I, then shows service levels for the major age groupings - infants, pre-school and school-age. This yields 11 types of day care. For each type, Table I gives this information:

- Column A. - the citywide average attendance rate by all enrolled children during January 1981.
- Column B. - the number of children enrolled during the month of January 1981.
- Column C. - the number of children showing as new admissions during the past year.
- Column D. - the total number of children served during the past year.

Note that the total served over the past year does not equal those currently served plus new admissions over the past year. (See explanatory note (4) to Table I.

TABLE I

New York City Publicly Funded Day Care - Number of Children Served and Average Absence Rates

Type of Day Care	<u>A</u> (1) Average Attendance Rate 1/81 (2)	<u>B</u> Number of Children Enrolled 1/81	<u>C</u> New Admissions Over Past 12 Mos. (3)	<u>D</u> Total Served Past Year (4)
1. Center Pre-School	86.0%	26,088	18,449	44,566
2. Center School Age	87.0	9,042	3,584	2,283
3. Center Infant	79.1	205	171	35
4. Family Pre-School	93.8	1,162	823	1,921
5. Family School Age	94.6	1,521	566	2,114
6. Family Infant	(2)	2,324	1,648	3,844
7. Family Voluntary Pre-School	91.0	464	362	766
8. Family Voluntary School Age	94.2	570	170	700
9. Family Voluntary Infant	(2)	929	663	1,531
10. Center LPOS Pre-School	84.6	480	335	829
11. Center LPOS School Age	80.2	74	59	114
<b>Totals</b>		<b>42,859</b>	<b>26,830</b>	<b>69,021</b>

(1) Column A was derived from the ACD 130PL citywide totals of capacity, utilization and enrollment as follows: Capacity days were multiplied by the percentage of capacity actually enrolled during the month. This product was then divided into the number of days of actual attendance by all enrolled children.

(2) In Family Day Care the data for infants is included in the data for pre-school. We have estimated numbers served based upon the generally accepted rule-of-thumb that 2/3 of pre-school FDS enrollment is under 3 years of age. However, it is not appropriate to speculate or interpolate the attendance rate for infants in FDC.

- (3) New admissions are totals of "New" from Capacity, Utilization and Enrollment reports 2/80 - 1/81 inclusive.
  - (4) Total served during the year is total of 2/80 enrollment plus new admissions 3/80 - 1/81 inclusive.
- 


### Group Sizes

The size of care groups in publicly funded day care centers in New York City is standardized. In Table II the uniform group size for each age grouping of children is shown in Column C. In order to arrive at the average sizes of the groups based on children actually in attendance, it was necessary to adjust the uniform group sizes by both the over-enrollment factors and the attendance rates for January 1981. How this was done is shown in the technical addendum to Table II. That process yielded the attendance group sizes shown in Column D.

The group sizes based on attendance are then compared to the standards contained in the proposed HHS Day Care Regulations (Column E). These comparisons result in Column F showing all age groups to be below the proposed HHS standards, except two year olds. However, the age range served in two year old groups is from 18 months to 33 months, so the more stringent HHS standards for children under age two would apply to an unknown number of children in those groups.

Columns A and B on Table II are largely self-explanatory. For example, for children ages 3 - 6, there are 1,157 groups in 310 day care centers.

- (b) As stated previously, our state licensing regulations are comprehensive and cover most of the requirements in HHSDCR. Pennsylvania's regulations adequately protect the health and safety of children in both publicly and privately funded day care. I have not heard any convincing arguments which would support stricter and, therefore, more expensive regulations for Pennsylvania public sector child day care.
- (c) By enforcing one set of minimal regulations for all day care facilities, regardless of funding, we are closer to achieving our goal of maximum coordination of Title XX and the private sector. We do not believe that there should be different standards for publicly and privately funded children. Pennsylvania's child day care philosophy is that equitable comprehensive standards should be established and enforced for all children in care, regardless of income level.
- (d) Title XX is not a free service to the states. Each state legislature must appropriate a 25 percent match with state dollars (or raise the dollars locally, and this is no longer a realistic goal). We expect over \$16 million to support child care from the Pennsylvania legislature in fiscal year 1981-82. The taxpayers and the legislatures in individual states surely must be allowed to decide what they are willing to buy. We believe that it is not fair to force federal child care standards on a state and expect the state to use taxpayer dollars to support standards not acceptable to the constituents. Standards do have a direct impact on cost. Each state should be permitted to develop its own standards based on the child care commitment and philosophy of that state.
- (e) We do not feel that the staff/child ratios proposed in HHSDCR are minimal; rather they are optimal! Especially in the area of infant care, the cost of enforcing the HHSDCR ratios were unrealistic. Pennsylvania conducted a HHSDCR infant/toddler care impact study in late summer, 1980. We found that to serve the same number of infants/toddlers using HHSDCR in 1981-82, we would require:
- (1) an additional \$1,113,613 to continue service at our 1980-81 level for infants/toddlers in day care centers, and



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

April 8, 1981

HELEN B O'BANNON  
SECRETARY

TELEPHONE NUMBER  
(717) 787-2600/3600

The Honorable Richard S. Schweiker  
Secretary of Health and Human Services  
Hubert H. Humphrey Building  
Washington, D.C. 20201

Dear Secretary Schweiker:

Attached is Pennsylvania's Title XX child day care assessment. Because of limited staff, we were not able to package the assessment as suggested by the Department of Health and Human Services (HHS). However, we were able to complete the Reporting Form Section with information that was available.

In March, 1980 the Bureau of Child Development Programs conducted a survey of agencies operating family day care homes with Title XX funds. The purpose of this survey was to obtain a comprehensive picture of the administration of the Title XX family day care system in Pennsylvania. The survey summary, which is attached, includes the following subject areas: method and amount of payment, provision of fringe benefits, training, support services, and supervision.

I am also attaching a copy of the Child Development Program Evaluation Report 1978-1980. This report describes the history, progress, and current status of Pennsylvania's licensing system relating to levels of compliance with state day care regulations.

Since the status of the Health and Human Services Day Care Regulations (HHSDCR) is still uncertain, state licensing regulations will be applicable for our purchased Title XX child day care services for 1981-82 fiscal year (July 1, 1981 to June 30, 1982). I believe that enforcement of our state licensing regulations adequately protects the health and safety of children in federally funded facilities. Pennsylvania's licensing standards are comprehensive and have been widely accepted in the field.

We have applied state day care licensing regulations for the 1981-82 fiscal year for the following reasons:

- (a) Contract negotiations were begun in February, 1981 for the upcoming fiscal year. It was, therefore, necessary to decide in January which staff/child ratios would be used for each type of service.

## CURRENT TITLE XX DAY CARE PRACTICES IN NEW YORK STATE

### Introduction

In New York State, where programs of public assistance and services are State supervised but locally administered, there are two ways by which day care centers can become licensed, and two ways by which family day care homes can be certified.

### Day Care Centers

The New York State Department of Social Services licenses all day care centers outside of New York City. In New York City the day care licensing authority is the New York City Department of Health. Traditionally, licensing standards established by the New York City Department of Health have generally exceeded State day care licensing requirements in the area of staff qualifications.

### Family Day Care Homes

In New York State, there are two types of family day care homes. There are those which are directly certified by the State (New York State Department of Social Services) and which can best be described as private propriety family day care homes, and those which are certified by county departments of social services or approved child caring agencies. It is these locally certified family day care homes which are eligible to receive public funds. As indicated, the State Department of Social Services has delegated the authority to certify family day care homes which are willing to accept publicly funded children to county departments of social services and approved child caring agencies. Also transferred to such agencies is the responsibility to train family day care providers, monitor providers' ongoing compliance with family day care certification requirements, and supervise placements which includes providing case management to children placed into family day care homes and to their families. The State Department of Social Services in its supervisory capacity retains the right and responsibility to monitor locally certified family day care homes and the activities of the certifying agencies.

### Purchasing Title XX Day Care

It is important to be aware of distinctions between the method by which New York City purchases day care center care as opposed to the rest of the state. In New York City, the majority of day care is purchased from fully Title XX funded day care centers, i.e., the population served in fully funded centers is totally comprised of publicly funded children placed by the Human Resources Administration's Agency for Child Development (ACD). ACD monitors compliance standards of fully funded centers, provides technical assistance to these centers, and as the funding agency, may impose additional requirements and standards to ensure compliance with all applicable Title XX and Federal day care requirements.

TABLE II

## New York City Publicly Funded Day Care - Group Sizes in Fully Funded Agency for Child Development Centers (1)

Age of Children in Group	A No. of Groups in NYC	B No. of Centers in NYC	C Uniform Group Size(2)	D Attendance Group Size (3)	E HHS Group Size Standard	F Above or Below Compliance
Under 2	13	9	8-10	7.5	6	Below
2	6	NA	10	9.3	12	Above
3-6	1,157	310	15-20	17.0	16	Below
6-10	365	167	20-25	20.0	14	Below
10-14					18	Below

- (1) Data for Limited Purchase of Service Centers would involve speculative derivations, therefore it has been omitted.
- (2) Working data supplied by Agency for Child Development; refer to Table V.
- (3) Derived in Technical Addendum to this Table.

## Technical Addendum to Table II (Derivation of Attendance Group Sizes)

Age Group	A Averaged NYC Uniform Group Size	B Jan. 1981 Enrollment Percentage(1)	C AxB Enrollment (Group Size)	D Jan. 1981 Attendance Rate Percentage (6)	E CXD (Attendance Group Size)
Under 2	9 (2)	105.1%	9.5	79.1%	7.5
2	10 (3)	107.6	10.8	86.0%	9.3
3-6	18.4(4)	107.6	19.8	86.0	17.0
6-10	22.5(5)	106.6	23.0	87.0	20.0
10-14	22.5(5)	106.6	23.0	87.0	20.0

- (1) From 1/81 ACD Capacity Utilization and Enrollment Report
- (2) Average of Uniform Group Sizes for this age as provided by ACD (See Table V)
- (3) See Table V
- (4) Weighted average derived from group numbers and sizes supplied by ACD for these age ranges (See Table V).
- (5) Average of uniform group sizes range for these ages as supplied by ACD (See Table V)
- (6) From Table I.



## STAFF TO CHILD RATIOS

The examination of this standard in Table III starts with figures on the standard hours of care. This is likely an over-estimate of the actual hours in care. Field review experience shows that during the first hour of the day, and the last two, fewer children are in the day care centers. However, it was not possible to quantify this factor. Column B on Table III derives the number of child care hours scheduled by multiplying the average hours in care by the uniform group sizes, described earlier, for each age grouping of children. Once again, we adjust this data for both the overenrollment factor and attendance rates. The computations are given in the left half of the technical addendum to Table III. This yields, in Table III - Column C, the number of child care hours based on actual attendance. This is again a citywide average.

For children under age two, it is a straight-forward procedure to divide the number of child hours of care per staff hour (column D) into the column C figure and come up with the average number of care-giver hours required per group in column E. However, for children over age two, the procedure is more complex.

For children over two, column E shows the number of caregiver hours required for all the groups in New York City, and column F shows the actual number of caregiver hours scheduled for all groups in NYC. The computation of these figures is shown in the right half of the technical addendum to Table III. In that technical addendum we then totaled three caregiver hours, subtracted, and found that citywide there was a surplus of 743 hours per day over the proposed federal standard. This is an average surplus of .47 hours (28 minutes) per group, or 2.25 hours per day care center.

The actual ratios shown in Table III - Column H are derived by dividing the number of caregiver hours scheduled per group (Table V column D) into the number of child hours based on attendance (Table III - column C.) The ratio for two year olds is almost one hour below compliance; the ratio for 3-6 year olds is right at the compliance level. The degree to which staff levels for 6-14 year olds exceeds compliance is applied toward the shortfall for 2 year olds, resulting in the slight surplus of caregiver hours - 28 minutes per group.

New York City Publicly Funded Day Care

Working Data Supplied by the Agency for Child Development for Tables II, III and

	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>
Age Grouping of Children	No. of Groups in NYC Centers	Uniform Group Size	Staffing	Staff Hours
Infants: 8 wks to 6 mos - (1) over 6 mos	13	8 10	2 staff at all times	20 20
2	61	10	2½	19
3	321	15	2½	19
4	334	20	2½	19
5	343	20	2½	19
mixed 3-5	343	20	2½	19
6-14	365	20 or 25	2	6

(1) Infant care can be provided up to 2 years 9 months of age; however, the usual cut-off age is between 18 and 25 months.

Date Completed \_\_\_\_\_

ASSESSMENT OF STATE CURRENT PRACTICES IN TITLE XX FUNDED DAY CARE

Region 3 State Maryland

State Contact (primary source of information):

Name and Title Joan Hildebrand, Policy, Assessment and Training Manager,

Department of Child Day Care Services

Agency Social Service Administration

Address 11 South Street

City, State Baltimore, Maryland Zip, 21202

Telephone 301-383-4398

## INTRODUCTION

This form may be used to report the State assessment of current Title XX day care practices. The Administration for Children, Youth and Families, Department of Health and Human Services is responsible for receiving all State reports and preparing a summary report to be submitted to Congress by June 1, 1981.

The outline of the summary report will be similar to the outline of this reporting form. This form includes sections on:

- . State organization of Title XX day care administration;
- . State demographics;
- . State agency requirements, procedures, and practices;
- . Day care center - provider practices; and
- . Day care home - provider practices.

The questions in the provider practices' sections reference questions in the provider survey instruments since these instruments can be used to obtain missing information.

I. Organization and Administration

A. Name of agency with overall responsibility for administration of Title XX funded day care (please specify highest level of authority, e.g. Department of Human Services, Department of Welfare, etc.)

Department of Human Resources

B. Is the agency administration (Check one):

State administered (State performs planning, regulation, and administration of purchase of day care services)

State supervised (State performs centralized planning, policymaking and supervision but service delivery is administered on the county or local level)

C. Are there facilities receiving Title XX funds that are excluded from State licensing requirements? (e.g. church operated facilities, day care homes with only one child, etc.) Yes  No

If yes, how many centers: app. 2 homes: \_\_\_\_\_

For what reason are they excluded? One day care center on the Towson University Campus (State employees) and one center on a military base (no State control).

- (2) an additional \$365,244 to continue the same amount of service for infants/toddlers in family day care homes. The total impact of enforcing HHSDCR ratios on Pennsylvania's infant/toddler system would require an additional \$1,478,857 just to maintain our current level of service. This projected increase cost combined with the ever-increasing demand for infant/toddler care indicates how unrealistic enforcing HHSDCR infant/toddler ratios would be for Pennsylvania.

In summary, the imposition of the HHSDCR would greatly increase costs at a time of diminishing resources, without increased benefit to children.

Pennsylvania state licensing standards are reasonable, comprehensive, and enforceable. These standards are also affordable, both from a taxpayer's viewpoint and from the perspective of parents purchasing from the private sector. We strongly support the use of state licensing standards as the program requirements for Title XX purchase of child day care services.

If I can provide further assistance, please let me know.

Sincerely,

*Helen B. O'Bannon*

Helen B. O'Bannon

cc: Mr. Frank Wilson  
Ms. Donna Jeffers  
Ms. Martha Isler  
file

Bob Dieck/Claire Walker  
Regional Program Managers:  
circulate after signature

DISTRICT OF COLUMBIA

ASSESSMENT OF CURRENT STATE PRACTICES

IN

TITLE XX FUNDED DAY CARE

(FY-1981)

Submitted by

COMMISSION ON SOCIAL SERVICES

DEPARTMENT OF HUMAN SERVICES

122 C STREET, N. W.

WASHINGTON, D. C.

109126

STATE ASSESSMENT  
OF  
CURRENT PRACTICES IN TITLE XX FUNDED DAY CARE

The attached is an assessment of Day Care practices within the District of Columbia Title XX funded Day Care program. It has been completed in compliance with a Congressional mandate imposed via the Omnibus Reconciliation Act of 1980. The Act delayed the effective date of the Department of Health & Human Services' (DHHS) Title XX Day Care Regulations until July 1, 1981, and further required the DHHS to submit a report of State practices in Title XX funded Day Care programs by June 1, 1981.

The District's assessment was completed with the assistance of DHHS grant funds provided for its execution. The actual conduct of the assessment was performed by a Contractor, with technical assistance, utilizing an assessment tool developed expressly for this purpose by DHHS. Technical assistance for this effort was provided throughout the process by the Commissioner on Social Services' Day Care Chief and Social Services Planning and Development Team representative.

METHODOLOGY

A sampling frame was utilized which reflected the minimum numbers of provider surveys needed in order to project findings with reasonable confidence and an anticipated high level of accuracy. The frame was based upon the size of the population of centers and homes in the District's Title XX Day Care program. From a total of 104 centers and 35 licensed homes, we randomly selected 74 centers (13 of which provide before and after school care) and 33 homes for participation in the survey. The number of facilities selected exceeded the frame requirements to allow for possible drop-outs (ex. frame only required 66 samplings for centers). However, to our surprise there were no drop-outs.

In preparation for the actual survey, procedures were established and adhered to as follows:

HOMES

- Letters were mailed to Family Day Care Home Providers with a follow-up telephone call to ensure receipt of letter.
- Survey of home providers conducted by telephone.
- Follow-up telephone calls were made only to clarify information, with one exception where a substitute caregiver was available initially and follow-up was necessary to interview the provider first-hand.



### CENTERS:

- Letters were distributed to Directors of selected centers at their regularly scheduled Contractor Meeting.
- Cluster Orientation sessions were set up on four (4) different days for which Directors signed up for one (1) each.
- Orientation included introduction of the Contractor, briefing of survey purpose and data needs and review of survey instrument.
- Directors were divided into three (3) groups. Each group was scheduled for one three (3) hour session for execution of the survey.

### CONCLUSION

Upon completion of the survey process, sampling participants indicated that anticipated frustrations were non-existent and viewed the overall success of the sessions as being attributable to the small work groups which allowed for individualized assistance to respondents in completing the survey.

The results of the assessment indicate that the District's practices within the Title XX Day Care Program are exemplary. This conclusion is supported by summary data which shows the program to exceed the requirements of the proposed DHHS regulations in many areas with only one expected exception in the area of group size for infant care. This discrepancy was addressed early on in the fiscal year through a request by the Mayor to the Secretary of DHHS for a two (2) year waiver for compliance of proposed standards.

Upon reviewing the assessment data it is significant to note that unique to our center sample is the inclusion of 13 before and after school programs where Title XX reflects a small percentage of enrollment, and one center for handicapped children reflecting a staff/child ratio of 1:1. This should be kept in mind for example in reviewing Table 5, which denotes staffing patterns/hours, as it shows a significant percentage of surplus hours which is a reflection of staffing for Title XX only.

The summary data includes sections on State Organization of Title XX Day Care Administration, State Demographics, State Agency requirements and practices; center provider practices; and day care home provider practices.

## STATE PRACTICES:

### Numbers of Children

These figures represent only the sampling population and not the entire District funded population.

In the State Demographic Section, we noted that of a total of 104 Title XX funded centers, there are only five (5) waiverable centers, e.g., centers with not more than 20% or 10 HHS funded children. Also, of 3,276 children attending Title XX funded Day Care centers, 66.1% are 3 to 6 years old.

In the center provider practices, over 82% of parents are involved in the general program policymaking activities of the center and 55% of parents participate in staff selection. As addressed earlier, for children under 2 years old 40% of the non-waiverable centers have deficit hours (i.e. have more children per caregiver than guidelines), and indicated a need of 4.4 additional (FTE) full time employee caregivers to satisfy the cited guidelines. In contrast to the under 2 year olds, for children 2 years and older, 78% of non-waiverable centers have surplus hours (i.e. have less children per caregiver than cited guidelines).

For group sizes you will note a difference between the District's and the new regulations' group sizes. The District's groups are larger than the federal, however the District's staffing is basically adequate.

We feel the successful completion of this assessment and its results provided the District with a useful document for future planning in the Day Care program.

## FINDINGS AND IMPLICATIONS FOR NEW YORK STATE

New York State would be in general compliance with the provisions of the proposed Federal regulations in the areas of health, safety and program requirements. Three areas would require changes in practice, however, if the regulations were in force. These areas are (1) child/staff ratios, (2) group size, and (3) training requirements.

- (1) Child/Staff ratios: for groups of children under the age of 2 years, the Federal requirement would be for one staff person for every 3-children. In New York City, our study showed an average of 3.7 children of this age for each staff person. Outside New York City, licensing requires one staff person for each 4 children of this age.

The imposition of the proposed Federal regulations would require increased staffing for young children without necessarily increasing the quality of care. It should be noted that our experience indicates that there is increasing demand for day care programs for this age group which includes infants and toddlers. There is concern that enriched staffing would result in prohibitive costs and greatly impede the growth of day care resources for very young children.

For children over the age of 2, the proposed regulations permit "averaging" of staff across age groups. This provision would appear to mitigate the impact of the variations in child/staff ratios currently in place vis-a-vis those proposed.

- (2) Group Size: The maximum group sizes contained in the proposed Federal regulations would pose serious problems for New York State. The problems would differ between New York City and the rest of the State, but in both cases would be severe.

In New York City, our study shows that, with the exception of groups of 2-year olds, the Federal regulations would require a reduction in the size of existing groups. Since the majority of these programs have been long established in current facilities, this would result in a less efficient use of existing space. This fact, coupled with the fact that smaller groupings would require additional staff to serve the same number of children, would escalate the cost of care.

The rest of the State is subject to licensing regulations which were issued in March of 1980 following a long period of development. Public hearings held during this process clearly indicated that the public demanded a single licensing standard for all centers whether or not they were in receipt of public funds.

In developing this single standard, recognition was given to the Federal study which found that smaller groupings of children appear to be more beneficial to the children than larger ones. All centers, therefore, were provided alternatives for staffing and grouping of children. Basically, smaller groups would be staffed with fewer staff. For example: three-year-olds in groups of 18 would require 3 staff (6-1) but in smaller groups of 14 would require only 2 staff (7-1).

The proposed Federal regulations do not compare exactly with these groupings. Imposition of these regulations would require somewhat different group sizes forcing the State to again be implementing two sets of standards in this area. Again, there is no evidence that children would benefit by the Federal requirements over the more flexible standard developed by New York State with input from the general public as well as experts in the field.

- (3) Training: Although the training requirements contained in the proposed regulations were not directly dealt with in this assessment, New York State continues to be concerned about this component. Our concern was reflected in our testimony in the Regional Hearings in 1979. We support the need for training for service providers and have provided extensive training for both group and family providers through Title XX training contracts in the past. These programs have been drastically curtailed as a result of cuts in Title XX training funds.

This State is uniquely equipped to provide training in terms of available curricula and qualified trainers.

It has been estimated that it would cost in excess of \$20 million to assure that specialized, on going training be provided for all family day care providers and group caregivers on a statewide basis. There are no funds provided for this requirement; in fact, Federal training funds have been reduced. New York State will continue to provide such training as is possible in all services within the resources available, but would be unable to comply completely with the training requirements contained in these regulations.

Table III (6)

New York City Publicly Funded Day Care Center Staffing Compilation in Fully Funded Agency for Child Development Centers

	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>	<u>H</u>
Age of Children in Group	Average Hours in Care(1)	Number of Scheduled Child Hours(2)	Number of Child Hours Based Upon Attendance(3)	HHS Ratio Guidelines	Caregiver Hours Required(3)	Actual Caregiver Hours Scheduled	Surplus of Deficit Hours	Actual Ratios
Under 2	10	90	74.8	3	24.9	20	-4.9	3.7
2	10	100	92.5	4	1410.6	1159(4)		4.9
3-6	10	184	170.3	9	21,893	21,983(4)		9
6-10	3	67.5	62.6	16	714.0	1095(4)		11.6
10-14	3	67.5	62.6	20	571.2	1095(4)		11.6
Total							+2.25 per center + .47 per group	

- (1) Full-time care from 8:00 a.m. - 6:00 p.m. - 10 hours. Part-time (school age) from 3-6 p.m. - 3 hours.  
 (2) - Product of uniform group size and average hours in care  
 (3) Derived in technical addendum to this table.  
 (4) Product of Number of Groups in NYC (Column E on technical addendum) and Staff Hours supplied by Agency for Child Development (Column D on Table V).

Technical Addendum to Table III

(Derivation of Child Hours Based upon Attendance)

(Computation of Surplus of Deficit - 2 years)

Age Group	<u>A</u> Number of Scheduled Child Hours	<u>B</u> Jan. 1981 Enrollment Percentage	<u>C</u> Jan. 1981 Attendance Rate Percentage	<u>D</u> No. of Child Hours Attendance (AxBxC)	<u>E</u> No. of Groups in NYC(1)	<u>F</u> FIDCR Ratio Guidelines	<u>G</u> Caregiver Hours Required (E X D / F)	<u>H</u> Caregiver Hours Scheduled X E (2)
Under 2	90	105.1	79.1	74.0				
2	100	107.6	86.0	92.5	61	4	1,410.6	1,159
3-6	184	107.6	86.0	170.3	1,157	9	21,893	21,893
6-10	67.5	106.6	87.0	62.6	182.5	16	714.0	1,095
10-14	67.5	106.6	87.0	62.6	182.5	20	571.2	1,095
Total					1,583		24,589	25,332

25,332	
-24,589	2.25
743	330/743
	.47
	1583/743

- (1) See Table V
- (2) See Table III, Column F



FAMILY DAY CARE SERVICE LEVELS

There are an average of 3.8 children in care per certified family day care home in New York City. This is shown in Table IV on line 10 as the number in "regular" family day care homes. The column labeled Regular is information on the 55 family day care programs operated by day care agencies. Thirty-five of these are day care centers that also supervise a cluster of family day care homes. Twenty are agencies that only operate a family day care program:

The column labeled Voluntary is information on the eleven voluntary child welfare agencies that provide family day care as well as a range of other support services for children and families. In the voluntary programs there is an emphasis on providing day care as a part of a protective or preventive service plan for families. There may be a matching - one provider serving only one family. These factors account for the lower average number of children per provider.

The number of children enrolled per provider is shown on line 6 of Table IV. Adjusting this for the attendance rates shown on lines 8 and 9 yields the final figures on line 10.

TABLE IV New York City Publicly Funded Family Day Care - Providers, Enrollment, Attendance Levels

<u>Category</u>	<u>Type of Family Day Care</u>		
	<u>Regular</u>	<u>Voluntary</u>	<u>Total</u>
1) Number of Certified Providers	1239	826	2065
2) Number of Children Enrolled 1/81 / 50		1963	6970
3) under 3 years	2	929	3253
4) 3-6 years	1162	464	1626
5) 6-14 years	1521	570	2091
6) Average number of children per provider (Line 2 divided by Line 1)	4.0	2.4	3.4
7) Average Attendance Rate:			
8) 8 weeks to 6 yrs	93.8	91.0	
9) 6 to 14 years	94.6	94.2	
10) Average number of children in home based on attendance (Line 6 x Line 8 + Line 9)	3.8	2.2	

## WORKING DATA

Table V can be usefully reviewed by the reader who desires a more detailed understanding of the source data that was used in reaching the findings on group size and staff ratios. This table gives a more complete breakdown of the prevailing age groupings in day care in NYC and the numbers of groups, group sizes, and staffing levels in each.

This table is largely self-explanatory except for columns C and D regarding staffing. For the infant groups, staffing is staggered so that there are two staff present at all times during the ten-hour day. This usually requires three full-time staff: at 7½ hours each, that would be 22½ staff hours per day per care group. We have used the lower figure of 20 hours in Column D based on the assumption that 2 staff at all times is adhered to, and that the other 2½ available staff hours are used for other caregiving functions.

For groups of children age two and over, a standard staffing pattern is followed: Group-Head Teacher-7½ hours; Assistant Teacher-7½ hours, Teacher Aide-4 hours.

For children age 6-14 two staff at 3 hours each are scheduled. The data on service patterns for these older, school-age children was not sufficient for our needs. We have, therefore, arbitrarily used it in two ways:

- In order to derive group size data for Table II we used the mid-point of 22/5 children per group since groups were described to us as being of from 20 to 25 children each.
- Data provided to us was aggregated for all school-age children age 6-14, in order to derive the staff ratio data for table III, the total number of school-age groups, 365, was split in half, 182.5 were treated as groups aged 6-10; 182.5 as groups aged 10-14.



D. Responsibilities for Title XX Funded Day Care Center Administration

<u>Function</u>	<u>Responsibility (agency or bureau)</u>	<u>Staff (full time equivalents)</u>	<u>Frequency</u>
Licensing	Department of Health and Mental Hygiene	N/A	once a year
Certification/ Registration			
Monitoring	Department of Human Resources		once a year
Purchase of Service Contracts	Department of Human Resources		once a year
Training of Caregivers	Department of Human Resources	This function is completed by workers in other areas.	once a year

E. Responsibilities for Title XX Funded Day Care Home Administration

<u>Function</u>	<u>Responsibility (agency or bureau)</u>	<u>Staff (full time equivalents)</u>	<u>Frequency</u>
Licensing	Department of Human Resources		once a year
Certification/ Registration			
Monitoring	Department of Human Resources		once a year
Purchase of Service Contracts	Department of Human Resources		once a year
Training of Caregivers	Department of Human Resources	This function is to provide by family day care workers who then train providers	once a year

120

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II. Demographics (Note the source of information, i.e. State law or regulations, licensing report, purchase of services contract, monitoring reports, provider survey, and the date, if possible.)

Facilities

Source of Information

Total # Title XX Funded Centers 96 & 26 State operated

Center Contract List.

#For-profit Title XX Funded Centers

28

\* This information not available in our statistics.

~~private~~ #Non-Profit Title XX Funded Centers

65

#Public Title XX Funded Centers

29 (included 26 state operated)

\* #Waiverable Title XX Funded Centers \*

--

Total # Title XX Funded Homes

1976

\*Waiverable means a center with not more than 20 percent or 10 (whichever is lower) HHS funded children.

Families

What are the State criteria used in determining if a family is eligible to receive day care services funded by Title XX?

40 from Code of Maryland Regulations 07.02.09.09 Eligibility for Day Care Services

Eligibility for Day Care Services (see attached)

07.02.09.11 Priorities (see attached)

.09 Eligibility for Day Care Services

A. Need. A family is eligible for Day Care Services for Children if no adult member of the family is available to care for the child and no other child care plan can be arranged and for one or more of the following situations:

- (1) The family situation involves abuse or neglect (Protective Services for Children);
- (2) The family situation involves the risk of institutionalization of the child;
- (3) An AFDC parent or caretaker relative of the child is, on a full-time basis, employed, completing high school, college or vocational training or during the first month of seeking employment;
- (4) An AFDC parent or caretaker relative of the child is, on a part-time basis, employed, completing high school, college or vocational training;
- (5) The parent or caretaker relative of the child is, on full-time basis, employed and within the income limits for eligibility for day care services.

- A. Provision of day care services is subject to the following order of priority:
1. Prevention of out-of-home placement and reunification of family and/or relative, such as protective service participants and children at risk of institutionalization.
  2. Income Maintenance Status and Income Eligible less than 40% median income, full-time working.
  3. Income Maintenance Status and Income Eligible less than 40% median income, completing high school.
  4. Income Eligible, working full-time, in the following order:
    - a. 40 - 49% median income
    - b. 50 - 59% median income
    - c. 60 - 69% median income
    - d. 70 - 80% median income
  5. Income Eligible 40 to 80% of median income, completing high school.
  6. Income Maintenance Status and Income Eligible less than 40% median income, full-time undergraduate college or vocational training.
  7. Income Eligible, 40 to 80% of median income full-time undergraduate college or vocational training.
  8. Income Maintenance Status and Income Eligible less than 40% median income, part-time working parent.
  9. Income Maintenance Status and Income Eligible less than 40% median income, part-time completing high school parent.
  10. Income Eligible, 40 to 80% of median income part-time working.
  11. Income Maintenance Status and Income Eligible less than 40% median income, part-time undergraduate college or vocational training for parent.
  12. Income Eligible, 40 to 80% median income part-time undergraduate college or vocational training.

Average hourly wages for caregivers in Title XX funded day care centers:

Source of Information

Lead Teacher \$4.43 Teacher Aide \$3.23  
Teacher \$3.90

Questionnaire

(Note: Day Care Center Survey question #B3.1 data can be used if this information is not available.)

Rates of Reimbursement for Title XX Centers and Homes

Are rates of reimbursement based on: (Check as many as are appropriate.)

Flat Rate \_\_\_ Negotiated Rate X Market Price X\* Actual Cost \_\_\_ \*up to State maximum

Does the State have a sliding fee scale? Yes X No \_\_\_

Daily Rate of Reimbursement for: (Indicate range of reimbursement if appropriate)

<u>AGE RANGE</u>	<u>CENTERS</u>	<u>HOMES</u>	<u>FAMILY HOME SYSTEMS</u>
Under 2 Year Olds			
2 Year Olds	Up to \$8.40 a day	\$ 5.25 a day	N/A
3 - 6 Year Olds			
6 - 10 Year Olds			
10 - 14 Year Olds			

Does the State reimburse on a scheduled enrollment or attendance basis or are both systems used within the State? (Please explain.)

Scheduled enrollment - The child is allowed 25% of scheduled days of enrollment for absences per month. If more - the worker is informed and investigates absences.

Supplemental Rates (handicapped, special education, training, etc. Please explain.)

Family day care homes - \$6.99 per day - Regulations for use being developed.

Source of Information

How many children (XX and non-XX funded) attend Title XX funded centers?

N/A

What percentage of children in Title XX funded centers are under 2 years old?

0

What percentage of children in Title XX funded centers are 2 years old?

4.5%

What percentage of children in Title XX funded centers are 3 to 6 years old?

91%

What percentage of children in Title XX funded centers are 6 to 10 years old?

4.2%

What percentage of children in Title XX funded centers are 10 to 14 years old?

0

QUESTIONNAIRE

(Note: If the percentage of children in age categories is unknown, Day Care Center Survey question #87 can be used.)

How many total Title XX funded children attend centers and homes?

CENTERS  
4150

HOMES  
3093

Source of Information  
Budget requests

Caregivers

Total # paid caregiver staff in Title XX funded centers and homes

CENTERS  
562

HOMES  
1976

Source of Information  
Questionnaire

Percentage of credentialed caregivers\*

35%

9%

\*Credentialed means a caregiver having a nationally recognized credential such as:

- . A.A. in nursing or education
- . Bachelor or graduate degree in infant psychology, early childhood education, child development, elementary education or home economics
- . Montessori teaching credential
- . Child Development Associates certification (CDA)
- . State Early Childhood Education teaching certificate

(Note: Day Care Center Survey question #C3 and Family Day Care Home question #16 data can be used if information is not available.)

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IHS Funded Day Care Services - State FY 1982 - Budget Figures

<u>Source</u>	<u>Total \$</u>	<u>Federal \$</u>	<u>State Match \$</u>	<u>Local Match \$</u>
Title XX				
Title IV-A (AFDC)		SEE ATTACHED INFORMATION		
Title IV-B				
WIN				
Developmental Disabilities				

III. Summary of Current Title XX Funded Day Care Practices/ State Agency

The following questions are designed to provide a summary of current State agency requirements and practices related to Title XX funded day care. Please indicate the source of information where requested. The word facility refers to day care centers and family day care homes.

A. Program of Activities

1. Does the State currently require Title XX day care providers to have a developmentally appropriate program of activities? Yes, both centers and homes  Centers only  Homes only  No
2. Is the State agency providing information and/or technical assistance regarding a program of developmentally appropriate activities to Title XX day care providers? Yes, both centers and homes  Centers only  Homes only  No

B. Training

1. Does the State currently require all newly hired day care center caregivers to receive an orientation? Yes  No
- \* 2. Does the State have a plan for providing or purchasing training for caregivers of Title XX funded centers and homes? Yes, both centers and homes  Centers only  Homes only  No
3. If the State has a training plan, does it specify the nature and extent of the training required? Yes  No

\* In Baltimore City only - program is to expand this year.

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TOTAL DAY CARE APPROPRIATIONS  
FY 1981

	TOTAL	FEDERAL	STATE	LOCAL
1 TITLE XX	7,217,931	1,077,133	6,146,060	300,540
2 TITLE XX-TNG	2,816,662	2,175,077	249,110	394,445
3 TITLE IV-C	1,763,755	1,587,338	176,377	
4 ARC	8,546,111	5,442,238	1,910,588	1,193,155
5 US DAg	569,779	569,779		
7	18,587,558	11,748,793	68,794,665	459,380
15 NUMBER OF CHILDREN SERVED:				
20 FAMILY		3,093		
21 GROUP		2,424		
22 CENTERS		1,531		
23 MANT' CTY L/F		1,95		
25		7,243		



If yes, what is the quantity and type or types of training offered? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

4. If the State does not have a training plan, have any of the following planning activities been performed?  
Needs assessment, Yes \_\_\_ No X (A small attempt at a needs assessment for center providers was made.)  
Identification of priority target groups Yes \_\_\_ No \_\_\_  
Inventory of training resources (financial and/or programmatic) Yes \_\_\_ No X

Can you estimate how many Title XX caregivers received training in 1980?

Source of Information

Yes X No \_\_\_

If yes, how many? Title XX funded center caregivers 1,076  
Title XX funded home caregivers 1,659

Purchase of Service Contracts

C. Nutrition

1. Does the State have nutrition requirements for Title XX funded centers and homes? Yes, both centers and homes X  
Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

If yes, are Title XX funded day care facilities required to provide: \* The regulation only states that the provider just see that an adequate lunch and snacks are provided.

	<u>CENTERS*</u>	<u>HOMES*</u>
Breakfast	_____	_____
Snacks	_____	_____
Lunch	_____	_____

2. What percentage of Title XX funded facilities currently participate in the USDA Child Care Food Program?

Percent

Source of Information

Centers  
Homes

\* not available but a very small proportion

3. Is the State currently making consultative services on nutrition and food services available to:

	<u>Yes</u>	<u>No</u>
Title XX funded centers	<u>X</u>	___
Title XX funded homes	<u>X</u>	___

D. Health and Safety

1. Does the State currently require age appropriate immunizations for Title XX and non-Title XX funded children in Title XX funded day care facilities? Yes, both centers and homes  Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

Are any children in day care facilities not required to receive immunizations? (please specify)

If a parent provides a written statement of religious objections (centers only).

2. Does the State currently require health assessments for Title XX and non-Title XX funded children in Title XX funded day care facilities? Yes, both centers and homes  Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

Are any children in day care facilities not required to receive health assessments? (please specify)

If a parent provides a written statement of religious objections (centers only).

3. Are the health assessments required to be at the level recommended by the American Academy of Pediatrics or EPSDT? (see page 8A) Yes \_\_\_ No

4. Are day care center and home providers required to provide information to parents, as needed, concerning child health services available in the community? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No

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5. Are day care center providers required to assist parents in obtaining health services? Yes \_\_\_ No

6. Are day care home providers required to refer parents to appropriate health care agencies? Yes \_\_\_ No

7. Does the State agency provide information to all Title XX funded day care facilities about the availability of child health services in the community and about how the services may be obtained? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No

8. Does the State agency ensure that HHS funded children receive the Federal, State, or locally funded services for which they are eligible? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No

How is that accomplished? \_\_\_\_\_

# A GUIDE TO ROUTINE HEALTH SUPERVISION

(CHECK SHEET)

Reproduced with permission of The American Academy of Pediatrics from Standards of Child Health Care, third edition, 1977, P.P. 13, 14.

## RECOMMENDATIONS FOR PREVENTIVE HEALTH SCREENING

The "Recommendations for Preventive Health Care of Children and Youth" represents a guide for the care of well children who receive competent parenting, who have not manifested any important health problems, and who are growing and developing satisfactorily. Circumstances which may indicate the need for additional visits are outlined in the accompanying text.

SHADED AREA INDICATES ACTIVITY IS TO BE PERFORMED - \*INDICATES NOT TO BE PERFORMED BEFORE 15 MONTHS

ACTIVITY		AGE:	2-4	2-3	4-5	6-7	9-10	12-15	16-19	23-25	36-37	5-6	8-9	11-12	13-15	16-21
			Weeks	Months	Months	Months	Months	Months	Months	Months	Months	Years	Years	Years	Years	Years
HISTORY	INITIAL															
	INTERVAL															
MEASUREMENTS	HEIGHT AND WEIGHT															
	HEAD CIRCUMFERENCE															
	BLOOD PRESSURE															
SENSORY SCREENING	SIGHT											O	R			
	HEARING											O	R			
DEVELOPMENTAL APPRAISAL																
PHYSICAL EXAMINATION																
PROCEDURES	<b>IMMUNIZATION</b> A - Measles     DTP - Diphtheria B - Mumps        Tetanus C - Rubella        Pertussis OP - Oral Polio TD - Diphtheria, Tetanus		DTP	DTP	DTP		A B C	DTP		DTP	OP	B				TD
	HEMATOCRIT OR HGB											O	R			
DISCUSSION AND COUNSELLING  Safety, nutrition, elimination, behavior, family and school relationships																
DENTAL SCREENING																
INITIAL DENTIST'S EXAM																

For copies of Standards of Child Health Care (Peaerbeck), write American Academy of Pediatrics, P.O. Box 1034, Evanston, Ill. 60201. CY 43 8-8C



E. Physical Environment

1. Does the State have requirements that day care facilities must meet concerning:

	<u>CENTERS</u>	<u>HOMES</u>
Fire	<u>X</u>	<u>X</u>
Sanitation	<u>X</u>	<u>X</u>
Transportation	<u>X</u>	<u>X</u>
Swimming	<u>X</u>	<u>X</u>
Equipment	<u>X</u>	<u>X</u>

For those State requirements which you do not have, do you require each county or local jurisdiction to set their own requirements? (please specify) \_\_\_\_\_

F. Social Services

1. Does the State require Title XX funded day care facilities to provide information to parents, as needed, concerning social services available in the community? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No X

2. Are Title XX funded day care centers required to assist parents in obtaining social services? Yes \_\_\_ No X

3. Are Title XX funded day care homes required to refer parents to appropriate social service agencies? Yes \_\_\_ No X

4. Does State agency provide information to all Title XX funded facilities about the availability of social services in the community and how they may be obtained? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No X

How is this information provided? \_\_\_\_\_

5. Does the State agency help to ensure that HHS funded children receive the Federal, State, or locally funded services for which they are eligible? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No X

How is that accomplished? \_\_\_\_\_

G. Parent Involvement

1. Are Title XX funded day care centers required to provide parents with opportunities to participate in general program policymaking? Yes \_\_\_ No X
2. Are Title XX funded day care centers required to allow parents:
  - a. unlimited access to observe their children? Yes \_\_\_ No X
  - b. to review upon request any monitoring reports or evaluations of the center? Yes X No \_\_\_
  - c. to observe the center and discuss their children's needs before enrollment? Yes X No \_\_\_
3. Does the State agency provide information and technical assistance to Title XX funded day care providers on working with parents? Yes, both centers and homes ~~X~~ Centers only \_\_\_ Homes only \_\_\_ No X  
 How is that information provided? \_\_\_\_\_  
 \_\_\_\_\_
4. Does the State agency offer parents a choice of a day care facility whenever administratively possible? Yes X No \_\_\_

H. Group Composition

1. What are the State staff/child ratio requirements for each of the following age groups in Title XX funded centers: (please fill in ages as specified in State requirements)
- | <u>AGES</u>               | <u>REQUIRED RATIOS</u>         |
|---------------------------|--------------------------------|
| Infants ( - ) not allowed |                                |
| Toddlers (2 yr - )        | <u>1 - 6</u>                   |
| Preschoolers ( 3 - 4 )    | <u>1 - 10</u> (5 yr.) - 1 - 13 |
| School Age (.6 - 14)      | <u>1 - 13</u>                  |

Do these requirements differ from the State licensing requirements? Yes \_\_\_ No X

If yes, please specify that difference: \_\_\_\_\_  
 \_\_\_\_\_

2. Is there any group of Title XX funded children in centers for whom there are no staff/child ratio requirements? Yes X No \_\_\_

If yes, please specify: One program that is part of the university system and one program on a military base are not under the Maryland State Health Department regulations.

3. Does the State currently have requirements for group size for children in Title XX funded centers? Yes \_\_\_ No \_\_\_

If yes, specify those requirements below: (fill in appropriate ages)

AGES

REQUIRED GROUP SIZES

Infants ( - ) N/A

Toddlers (2 yr- )

Preschoolers ( 3 - 6 )

School Age ( - )

12
20
26

5 yr. - 26

Do these requirements differ from the State licensing requirements? Yes \_\_\_ No X

If yes, please specify that difference: \_\_\_\_\_

4. What are the caregiver/child ratios and group sizes for Title XX funded family day care homes? (please state requirements)

1:4 if over 2 years

1:2 if under 2 years

Do these requirements differ from the State licensing/registration requirements? Yes \_\_\_ No X

If yes, please specify that difference: \_\_\_\_\_

5. May a volunteer be counted as a caregiver in a Title XX funded day care centers? Yes \_\_\_ No X

Under what circumstances? \_\_\_\_\_

6. May a staff member who normally performs non-caregiving duties (such as the director, cook, bus driver, etc.) be counted as a caregiver in a Title XX funded center? Yes \_\_\_ No X

Under what circumstances? \_\_\_\_\_

7. Does the State determine compliance with staffing requirements on an actual attendance or scheduled enrollment basis or are both systems used within the State? Please specify: Scheduled enrollment.

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I. State Agency Advisory Council

- \* 1. Does the State have a Day Care Advisory Council? Yes \_\_\_ No \_\_\_ Forming one now
2. Does the Council include:
- a. parents of Title XX funded children? Yes X No \_\_\_
  - b. operators of Title XX funded centers? Yes X No \_\_\_
  - c. operators of Title XX funded homes? Yes X No \_\_\_
  - d. representatives of appropriate agencies? Yes X No \_\_\_
3. Whom does the Council advise? Office of Child Day Care, Social Services Administration
4. Who appoints the Council? Executive Director, Social Services Administration

#### IV. Summary of Current Title XX Funded Day Care Provider Practices/ Centers

The following questions are designed to provide a summary of current Title XX funded day care center provider practices. Please indicate the source of information for all responses. If the source of information is a provider survey, please include the sample size and the date of the survey. Noted in parenthesis following each question is the section and number of the item in the day care center provider telephone survey which should provide the needed information if it is not already available to you.

##### A. Training

##### Source of Information

1. What percentage of Title XX funded day care centers provide an orientation to all newly hired caregivers? (C,1) 89%
2. What is the average length of time of that orientation? (C,2) 7.5 hours
3. Of those caregivers without a nationally recognized child development credential, what percentage have taken courses, seminars, or specialized in-service training related to child care during the past year? (C,4) 59%

##### B. Nutrition

1. What percentage of centers provide each of the following meals: (B,30)
  - a. breakfast 65%
  - b. snacks 100%
  - c. lunch 94%

##### C. Health and Safety

1. What percentage of centers require children to have a health assessment? (B,29) 100%
2. What percentage of centers require children to have age appropriate immunizations? (B,29) 100%
3. What percentage of centers maintain health records for enrolled children? (D,1) 100%
4. What percentage of centers have written plans for responding to illnesses and emergencies? (D,2) 91%
5. What percentage of centers provide information to parents as needed concerning child health services available in the community? (D,3) 94%



6. What percentage of centers assist parents in obtaining health services?  
(D,4) 83%

7. During the past year, what percentage of centers have received information and assistance from the State Title XX Agency about the availability of child health services in the community? (D,5) 29%

D. Social Services

1. What percentage of centers: (E,1)

a. provide information and referral for parents to needed social services?

72%

b. provide assistance to parents in obtaining needed social services?

72%

c. follow-up to see that parents received social services? 46%

2. During the past year, what percentage of centers have received information and assistance from the State Title XX Agency regarding the availability of social services? (E,2) 33%

E. Parent Involvement

1. What percentage of centers allow parents the opportunity to (F,1) \* - We cannot answer this question since it was not part of the questionnaire. We would guess

a. have unlimited access to observe their children? \_\_\_\_\_ that a and b were high while c and d

b. regularly exchange information with parents about their children and the center's day care program? \_\_\_\_\_ were low.

c. participate in general program policymaking activities of the center?

d. participate in staff selection? \_\_\_\_\_

F. Group Size (Tables 3a and/or 4a)

For the questions in this section please respond using the following group size guidelines:

<u>Age of Child</u>	<u>Maximum Group Size/Scheduled Enrollment</u>	<u>Maximum Group Size/Attendance</u>
Birth to 2 years	6	6
2 years	12	12
3 to 6 years	18	16
6 to 10 years	16	14
10 to 14 years	20	18

(Note: Waiverable means a center with not more than 20 percent or 10 (whichever is lower) HHS funded children.)

1. What percentage of groups in non-waiverable centers are below (i.e. larger than) the cited guidelines?

23%

Source of Information

- 2. What percentage of groups in waiverable centers are below (i.e. larger than) the cited guidelines? 1%
- 3. What percentage of non-waiverable centers have groups below (i.e. larger than) the cited group size guidelines? 36%
- 4. What percentage of waiverable centers have groups below (i.e. larger than) the cited group size guidelines? 3%
- 5. What is the State's average group size in non-waiverable centers for each of the following age categories:

Questionnaire

Questionnaire

<u>Age</u>	<u>Scheduled Enrollment</u>	<u>Attendance</u>
Under 2 year olds	<u>N/A *</u>	<u>          </u>
2 year olds	<u>10.5</u>	<u>          </u>
3 to 6 year olds	<u>15.1</u>	<u>          </u>
6 to 10 year olds	<u>17</u>	<u>          </u>
10 to 14 year olds	<u>—</u>	<u>          </u>

\* Centers are not allowed by State law to take children and 2 years of age

Questionnaire

- 6. What is the State's average group size in waiverable centers for each of the following age categories:

<u>Age</u>	<u>Scheduled Enrollment</u>	<u>Attendance</u>
Under 2 year olds	<u>—</u>	<u>          </u>
2 year olds	<u>6</u>	<u>          </u>
3 to 6 year olds	<u>15.4</u>	<u>          </u>
6 to 10 year olds	<u>—</u>	<u>          </u>
10 to 14 year olds	<u>—</u>	<u>          </u>

Questionnaire

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G. Staffing (Tables 7a and/or 8a)

For the questions in this section please respond using the following staff/child ratio guidelines:

<u>Age of Child</u>	<u>Staffing Ratio/Scheduled Enrollment</u>	<u>Staffing Ratio/Attendance</u>
Birth to 2 year	1:3	1:3
2 years	1:4	1:4
3 to 6 years	1:9	1:8
6 to 10 years	1:16	1:14
10 to 14 years	1:20	1:18

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(Note: Waiverable means a center with not more than 20 percent or 10 (whichever is lower) HHS funded children.)

- 1. For children under 2 years old:

Source of Information

- a. What percentage of non-waiverable centers have deficit hours (i.e. have more children per caregiver than the above listed guidelines)? N/A

*Full time equivalent*

Source of Information

- b. What percentage of non-waiverable centers have surplus hours (i.e. have less children per caregiver than the cited guidelines)?, N/A
- c. What number of additional FTE caregivers in non-waiverable centers would the State need to satisfy the cited guidelines? N/A
- d. What percentage of waiverable centers have deficit hours (i.e. have more children per caregiver than the cited guidelines)? N/A
- e. What percentage of waiverable centers have surplus hours (i.e. have less children per caregiver than the cited guidelines)? N/A
- f. What number of additional FTE caregivers in waiverable centers would the State need to satisfy the cited guidelines? N/A

2. For children 2 years and older:

- a. What percentage of non-waiverable centers have deficit hours (i.e. have more children per caregiver than the above listed guidelines)? 6% Questionnaire
- b. What percentage of non-waiverable centers have surplus hours (i.e. have less children per caregiver than the cited guidelines)? 79%
- c. What number of additional FTE caregivers in non-waiverable centers would the State need to satisfy the cited guidelines? 7.6
- d. What percentage of waiverable centers have deficit hours (i.e. have more children per caregiver than the cited guidelines)? 0
- e. What percentage of waiverable centers have surplus hours (i.e. have less children per caregiver than the cited guidelines)? 11%
- f. What number of additional FTE caregivers in waiverable centers would the State need to satisfy the cited guidelines? 0

3. What is the State's average actual ratio in non-waiverable centers for the following age categories:

<u>Age</u>	<u>Scheduled Enrollment</u>	<u>Attendance</u>
Under 2 years	<u>—</u>	<u>—</u>
2 years	<u>3.9</u>	<u>—</u>
3 to 6 years	<u>6.3</u>	<u>—</u>
6 to 10 years	<u>6.9</u>	<u>—</u>
10 to 14 years	<u>—</u>	<u>—</u>

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4. What is the State's average actual ratio in waiverable centers for the following Source of Information age categories:

<u>Age</u>	<u>Scheduled Enrollment</u>	<u>Attendance</u>	<u>Source of Information</u>
Under 2 years	—	—	Questionnaire
2 year olds	3.1	—	
3 to 6 year olds	7.1	—	
6 to 10 year olds	—	—	
10 to 14 year olds	—	—	

V. Summary of Current Title XX Funded Day Care Provider Practices/ Homes

The following questions are designed to provide a summary of current Title XX funded day care home provider practices. Please indicate the source of information for all responses. Noted in parenthesis following each question is the number of the item in the family day care provider survey which could provide the needed information if it is not already available to you.

A. Training

Source of Information

1. What percentage of home caregivers have taken in the past year any courses, seminars or in-service training related to child care? (7) 20%

B. Nutrition

1. What percentage of homes provide each of the following meals: (11)

- a. breakfast 58%
- b. snacks 93%
- c. lunch 87%

C. Health and Safety

1. What percentage of homes require children to have: (8)

- a. a health assessment 97%
- b. age appropriate immunizations 96%

D. Parent Involvement

1. What percentage of homes regularly offer parents opportunities to observe their children and talk about their children's needs? (10) 95%

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E. Group Composition

Source of Information

1. What percentage of homes have: (13, 14)

- a. 1 child 5%
- b. 2-3 children 49%
- c. 4-5 children 39%
- d. 6 children 1%
- e. 7-12 children 1%

Questionnaire

2. Of those homes serving more than 6 children, what percentage have more than one caregiver? (12, 15) None

3. What percentage of those homes serving only children under 2 years old have more than 3 children attending at any one time? (12,13) 25%\* There were only 4 homes in the sample who served only under 2 year olds.

4. What percentage of homes provide after-school care for children who attend full day school? (4) 81%

5. In those homes serving children who attend full day school, what is the average number of such children served? 2.5

F. Status

1. What percentage of homes are: (16)

- a. independent 90%
- b. part of a family day care home system 10%

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APPENDIX C

TECHNICAL ASSISTANCE PACKAGE

## TABLE OF CONTENTS

- I. Reporting Form for Assessment of State Current Practices  
in Title XX Funded Day Care
- II. Sampling for Provider Surveys
- III. Family Day Care Home Survey Materials
  - . Sample Advance Letter
  - . Interviewer Instructions
  - . Survey Questionnaire
- IV. Day Care Center Survey Materials
  - . Sample Advance Letter
  - . Interviewer Instructions
  - . Survey Questionnaire
- V. Center Group Size and Staff/Child Ratio Compilation  
Instructions and Tables

## INTRODUCTION

The effective date of the Health and Human Services Day Care Regulations (HHSDCR) has been delayed by Congress until July 1, 1981, under a provision of the Omnibus Reconciliation Act of 1980. This provision also mandates the Department of Health and Human Services to "assist each State in conducting a systematic assessment of current practices in Title XX funded day care programs and provide a summary report of the assessment to Congress by June 1, 1981." Title XX funded day care programs include all day care centers and homes receiving any Title XX funds.

This package has been developed as a technical assistance tool to aid States in conducting that assessment. The package includes:

- a form which can be used to report Title XX day care information on State Agency practices and organization and center, and home provider practices;
- suggested sampling procedures and sample sizes for conducting provider surveys;
- sample advance letters to family day care home and center providers to notify them of the survey;
- telephone survey questionnaires with interviewer instructions for home and center surveys; and
- center group size and staff/child ratio compilation instructions with illustrated tables as well as table shells.

### NOTICE OF PENDING OMB APPROVAL

THESE INFORMATION COLLECTION INSTRUMENTS HAVE BEEN SUBMITTED TO THE OFFICE OF MANAGEMENT AND BUDGET (OMB) FOR APPROVAL, BUT HAVE NOT YET RECEIVED OMB APPROVAL. IF THESE INSTRUMENTS ARE APPROVED BY OMB, THE FINAL APPROVED VERSIONS MAY OR MAY NOT DIFFER FROM THESE VERSIONS. SINCE THESE INSTRUMENTS HAVE NOT YET BEEN APPROVED BY OMB, THERE IS NO REQUIREMENT THAT THEY BE USED TO PROVIDE INFORMATION TO ACYF. STATES MAY USE THEM, HOWEVER, FOR THEIR OWN PURPOSES. WHEN OMB APPROVAL IS RECEIVED, ACYF WILL NOTIFY STATES AND SEND THEM THE FINAL APPROVED INSTRUMENTS.

Regional Office staff are available to provide assistance in the conduct of the State assessment. If there are specific technical questions regarding any part of this package, please contact Allen Smith or Ann Segal at (202) 755-8774 in the Day Care Division, Administration for Children, Youth and Families, Department of Health and Human Services, Washington, D. C.



Date Completed \_\_\_\_\_

ASSESSMENT OF STATE CURRENT PRACTICES IN TITLE XX FUNDED DAY CARE

Region \_\_\_\_\_ State \_\_\_\_\_

State Contact (primary source of information):

Name and Title \_\_\_\_\_

Agency \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

## INTRODUCTION

This form may be used to report the State assessment of current Title XX day care practices. The Administration for Children, Youth and Families, Department of Health and Human Services is responsible for receiving all State reports and preparing a summary report to be submitted to Congress by June 1, 1981.

The outline of the summary report will be similar to the outline of this reporting form. This form includes sections on:

- . State organization of Title XX day care administration;
- . State demographics;
- . State agency requirements, procedures, and practices;
- . Day care center - provider practices; and
- . Day care home - provider practices.

The questions in the provider practices' sections reference questions in the provider survey instruments since these instruments can be used to obtain missing information.

I. Organization and Administration

A. Name of agency with overall responsibility for administration of Title XX funded day care (please specify highest level of authority, e.g. Department of Human Services, Department of Welfare, etc.)

---

B. Is the agency administration (Check one):

State administered (State performs planning, regulation, and administration of purchase of day care services)

State supervised (State performs centralized planning, policymaking and supervision but service delivery is administered on the county or local level)

C. Are there facilities receiving Title XX funds that are excluded from State licensing requirements? (e.g. church operated facilities, day care homes with only one child, etc.) Yes \_\_\_ No \_\_\_

If yes, how many centers: \_\_\_\_\_ homes: \_\_\_\_\_

For what reason are they excluded? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



D. Responsibilities for Title XX Funded Day Care Center Administration

<u>Function</u>	<u>Responsibility</u> (agency or bureau)	<u>Staff</u> (full time equivalents)	<u>Frequency</u>
Licensing			
Certification/ Registration			
Monitoring			
Purchase of Service Contracts			
Training of Caregivers			

E. Responsibilities for Title XX Funded Day Care Home Administration

<u>Function</u>	<u>Responsibility</u> (agency or bureau)	<u>Staff</u> (full time equivalents)	<u>Frequency</u>
Licensing			
Certification/ Registration			
Monitoring			
Purchase of Service Contracts			
Training of Caregivers			

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II. Demographics (Note the source of information, i.e. State law or regulations, licensing report, purchase of services contract, monitoring reports, provider survey, and the date, if possible.)

Facilities

Source of Information

Total # Title XX Funded Centers \_\_\_\_\_  
#For-profit Title XX Funded  
Centers \_\_\_\_\_  
#Non-Profit Title XX Funded  
Centers \_\_\_\_\_  
#Public Title XX Funded Centers \_\_\_\_\_  
#Waiverable Title XX Funded  
Centers \* \_\_\_\_\_  
Total # Title XX Funded Homes \_\_\_\_\_

\*Waiverable means a center with not more than 20 percent or 10 (whichever is lower) HHS funded children.

Families

What are the State criteria used in determining if a family is eligible to receive day care services funded by Title XX?

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Children

Source of Information

How many children (XX and non-XX funded) attend Title XX funded centers?

\_\_\_\_\_

What percentage of children in Title XX funded centers are under 2 years old?

\_\_\_\_\_

What percentage of children in Title XX funded centers are 2 years old?

\_\_\_\_\_

What percentage of children in Title XX funded centers are 3 to 6 years old?

\_\_\_\_\_

What percentage of children in Title XX funded centers are 6 to 10 years old?

\_\_\_\_\_

What percentage of children in Title XX funded centers are 10 to 14 years old?

\_\_\_\_\_

(Note: If the percentage of children in age categories is unknown, Day Care Center Survey question #B7 can be used.)

How many total Title XX funded children attend centers and homes?

CENTERS

HOMES

Source of Information

\_\_\_\_\_

\_\_\_\_\_

Caregivers

Total # paid caregiver staff in Title XX funded centers and homes

CENTERS

HOMES

Source of Information

\_\_\_\_\_

\_\_\_\_\_

Percentage of credentialed caregivers\*

\_\_\_\_\_

\_\_\_\_\_

\*Credentialed means a caregiver having a nationally recognized credential such as:

- . A.A. in nursing or education
- . Bachelor or graduate degree in infant psychology, early childhood education, child development, elementary education or home economics
- . Montessori teaching credential
- . Child Development Associates certification, (CDA)
- . State Early Childhood Education teaching certificate.

(Note: Day Care Center Survey question #C3 and Family Day Care Home question #6 data can be used if information is not available.)

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Average hourly wages for caregivers in Title XX funded day care centers:

Source of Information

Lead Teacher \_\_\_\_\_ Teacher Aide \_\_\_\_\_

Teacher \_\_\_\_\_

(Note: Day Care Center Survey question #B31 data can be used if this information is not available.)

Rates of Reimbursement for Title XX Centers and Homes

Are rates of reimbursement based on: (Check as many as are appropriate.)

Flat Rate \_\_\_ Negotiated Rate \_\_\_ Market Price \_\_\_ Actual Cost \_\_\_

Does the State have a sliding fee scale? Yes \_\_\_ No \_\_\_

Daily Rate of Reimbursement for: (Indicate range of reimbursement if appropriate)

AGE RANGE

CENTERS

HOMES

FAMILY HOME SYSTEMS

Under 2 Year Olds

2 Year Olds

3 - 6 Year Olds

6 - 10 Year Olds

10 - 14 Year Olds

Does the State reimburse on a scheduled enrollment or attendance basis or are both systems used within the State?  
(Please explain.)

Supplemental Rates (handicapped, special education, training, etc. Please explain.) \_\_\_\_\_

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HHS Funded Day Care Services

<u>Source</u>	<u>Total \$</u>	<u>Federal \$</u>	<u>State Match \$</u>	<u>Local Match \$</u>
Title XX				
Title IV-A (AFDC)				
Title IV-B				
WIN				
Developmental Disabilities				

III. Summary of Current Title XX Funded Day Care Practices/ State Agency

The following questions are designed to provide a summary of current State agency requirements and practices related to Title XX funded day care. Please indicate the source of information where requested. The word facility refers to day care centers and family day care homes.

A. Program of Activities

1. Does the State currently require Title XX day care providers to have a developmentally appropriate program of activities? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No \_\_\_
2. Is the State agency providing information and/or technical assistance regarding a program of developmentally appropriate activities to Title XX day care providers? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

B. Training

1. Does the State currently require all newly hired day care center caregivers to receive an orientation? Yes \_\_\_ No \_\_\_
- 189 2. Does the State have a plan for providing or purchasing training for caregivers of Title XX funded centers and homes? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No \_\_\_
3. If the State has a training plan, does it specify the nature and extent of the training required? Yes \_\_\_ No \_\_\_



If yes, what is the quantity and type or types of training offered? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4. If the State does not have a training plan, have any of the following planning activities been performed?  
 Needs assessment Yes \_\_\_ No \_\_\_  
 Identification of priority target groups Yes \_\_\_ No \_\_\_  
 Inventory of training resources (financial and/or programmatic) Yes \_\_\_ No \_\_\_

5. Can you estimate how many Title XX caregivers received training in 1980? Source of Information  
 Yes \_\_\_ No \_\_\_  
 If yes, how many? Title XX funded center caregivers \_\_\_\_\_  
 Title XX funded home caregivers \_\_\_\_\_

C. Nutrition

1. Does the State have nutrition requirements for Title XX funded centers and homes? Yes, both centers and homes \_\_\_  
 Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

If yes, are Title XX funded day care facilities required to provide:

	<u>CENTERS</u>	<u>HOMES</u>
Breakfast	_____	_____
Snacks	_____	_____
Lunch	_____	_____

2. What percentage of Title XX funded facilities currently participate in the USDA Child Care Food Program? Source of Information
- |         | <u>Percent</u> |
|---------|----------------|
| Centers | _____          |
| Homes   | _____          |

3. Is the State currently making consultative services on nutrition and food services available to:
- |                         | <u>Yes</u> | <u>No</u> |
|-------------------------|------------|-----------|
| Title XX funded centers | _____      | _____     |
| Title XX funded homes   | _____      | _____     |



D. Health and Safety

1. Does the State currently require age appropriate immunizations for Title XX and non-Title XX funded children in Title XX funded day care facilities? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

Are any children in day care facilities not required to receive immunizations? (please specify)

---

2. Does the State currently require health assessments for Title XX and non-Title XX funded children in Title XX funded day care facilities? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

Are any children in day care facilities not required to receive health assessments? (please specify)

---

3. Are the health assessments required to be at the level recommended by the American Academy of Pediatrics or EPSDT? (see page 8A) Yes \_\_\_ No \_\_\_

4. Are day care center and home providers required to provide information to parents, if needed, concerning child health services available in the community? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

5. Are day care center providers required to assist parents in obtaining health services? Yes \_\_\_ No \_\_\_

6. Are day care home providers required to refer parents to appropriate health care agencies? Yes \_\_\_ No \_\_\_

7. Does the State agency provide information to all Title XX funded day care facilities about the availability of child health services in the community and about how the services may be obtained? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

8. Does the State agency ensure that HHS funded children receive the Federal, State, or locally funded services for which they are eligible? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

How is that accomplished? \_\_\_\_\_

---

# A GUIDE TO ROUTINE HEALTH SUPERVISION

(TICK SHEET)

Reproduced with permission of The American Academy of Pediatrics from Standards of Child Health Care, third edition, 1977, P.P. 12, 14.

## RECOMMENDATIONS FOR PREVENTIVE HEALTH SCREENING

The "Recommendations for Preventive Health Care of Children and Youth" represents a guide for the care of well children who receive competent parenting, who have not manifested any important health problems, and who are growing and developing satisfactorily. Circumstances which may indicate the need for additional visits are outlined in the accompanying text.

SHADED AREA INDICATES ACTIVITY IS TO BE PERFORMED - # INDICATES NOT TO BE PERFORMED BEFORE 15 MONTHS

ACTIVITY		AGE:	2-4	2-3	4-5	6-7	9-10	12-15	16-19	23-25	36-37	5-6	8-9	11-12	13-15	18-21
		Weeks	Months	Months	Months	Months	Months	Months	Months	Months	Months	Years	Years	Years	Years	Years
HISTORY	INITIAL															
	INTERVAL															
MEASUREMENTS	HEIGHT AND WEIGHT															
	HEAD CIRCUMFERENCE															
	BLOOD PRESSURE															
SENSORY SCREENING	SIGHT															
	HEARING															
DEVELOPMENTAL APPRAISAL																
PHYSICAL EXAMINATION																
PROCEDURES	IMMUNIZATION A - Measles DTP - Diptheria B - Mumps Tetanus C - Rubella Pertussis OP - Oral Polio TD - Diptheria, Tetanus															
	HEMATOCRIT OR HGB															
DISCUSSION AND COUNSELLING  Safety, nutrition, elimination, behavior, family and school relationships																
DENTAL SCREENING																
INITIAL DENTIST'S EXAM																

For copies of Standards of Child Health Care (Paperback), write American Academy of Pediatrics, 530 North Dearborn Street, Chicago, Illinois 60610.

P.O. Box 1034, Evanston, Illinois 60201

CY 43 6-80

E. Physical Environment

1. Does the State have requirements that day care facilities must meet concerning:

	<u>CENTERS</u>	<u>HOMES</u>
Fire	_____	_____
Sanitation	_____	_____
Transportation	_____	_____
Swimming	_____	_____
Equipment	_____	_____

For those State requirements which you do not have, do you require each county or local jurisdiction to set their own requirements? (please specify) \_\_\_\_\_

F. Social Services

1. Does the State require Title XX funded day care facilities to provide information to parents, as needed, concerning social services available in the community? Yes, both centers and homes \_\_\_\_\_ Centers only \_\_\_\_\_ Homes only \_\_\_\_\_ No \_\_\_\_\_

2. Are Title XX funded day care centers required to assist parents in obtaining social services? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Are Title XX funded day care homes required to refer parents to appropriate social service agencies? Yes \_\_\_\_\_ No \_\_\_\_\_

4. Does the State agency provide information to all Title XX funded facilities about the availability of social services in the community and how they may be obtained? Yes, both centers and homes \_\_\_\_\_ Centers only \_\_\_\_\_ Homes only \_\_\_\_\_ No \_\_\_\_\_

How is this information provided? \_\_\_\_\_

5. Does the State agency help to ensure that HHS funded children receive the Federal, State, or locally funded services for which they are eligible? Yes, both centers and homes \_\_\_\_\_ Centers only \_\_\_\_\_ Homes only \_\_\_\_\_ No \_\_\_\_\_

How is that accomplished? \_\_\_\_\_

G. Parent Involvement

1. Are Title XX funded day care centers required to provide parents with opportunities to participate in general program policymaking? Yes \_\_\_ No \_\_\_
2. Are Title XX funded day care centers required to allow parents:
  - a. unlimited access to observe their children? Yes \_\_\_ No \_\_\_
  - b. to review upon request any monitoring reports or evaluations of the center? Yes \_\_\_ No \_\_\_
  - c. to observe the center and discuss their children's needs before enrollment? Yes \_\_\_ No \_\_\_
3. Does the State agency provide information and technical assistance to Title XX funded day care providers on working with parents? Yes, both centers and homes \_\_\_ Centers only \_\_\_ Homes only \_\_\_ No \_\_\_

How is that information provided? \_\_\_\_\_  
\_\_\_\_\_

4. Does the State agency offer parents a choice of a day care facility whenever administratively possible? Yes \_\_\_ No \_\_\_

H. Group Composition

1. What are the State staff/child ratio requirements for each of the following age groups in Title XX funded centers: (please fill in ages as specified in State requirements)

<u>AGES</u>	<u>REQUIRED RATIOS</u>
Infants ( - )	_____
Toddlers ( - )	_____
Preschoolers ( - )	_____
School Age ( - )	_____

Do these requirements differ from the State licensing requirements? Yes \_\_\_ No \_\_\_

If yes, please specify that difference: \_\_\_\_\_  
\_\_\_\_\_

2. Is there any group of Title XX funded children in centers for whom there are no staff/child ratio requirements? Yes \_\_\_ No \_\_\_

If yes, please specify: \_\_\_\_\_

3. Does the State currently have requirements for group size for children in Title XX funded centers? Yes \_\_\_ No \_\_\_

If yes, specify those requirements below: (fill in appropriate ages)

AGES

Infants ( - )

Toddlers ( - )

Preschoolers ( - )

School Age ( - )

REQUIRED GROUP SIZES

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do these requirements differ from the State licensing requirements? Yes \_\_\_ No \_\_\_

If yes, please specify that difference: \_\_\_\_\_  
\_\_\_\_\_

4. What are the caregiver/child ratios and group sizes for Title XX funded family day care homes? (please state requirements)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do these requirements differ from the State licensing/registration requirements? Yes \_\_\_ No \_\_\_

If yes, please specify that difference: \_\_\_\_\_  
\_\_\_\_\_

5. May a volunteer be counted as a caregiver in a Title XX funded day care centers? Yes \_\_\_ No \_\_\_

Under what circumstances? \_\_\_\_\_

6. May a staff member who normally performs non-caregiving duties (such as the director, cook, bus driver, etc.) be counted as a caregiver in a Title XX funded center? Yes \_\_\_ No \_\_\_

Under what circumstances? \_\_\_\_\_

7. Does the State determine compliance with staffing requirements on an actual attendance or scheduled enrollment basis or are both systems used within the State? Please specify: \_\_\_\_\_  
\_\_\_\_\_

200



I. State Agency Advisory Council

1. Does the State have a Day Care Advisory Council? Yes \_\_\_ No \_\_\_

2. Does the Council include:

a. parents of Title XX funded children? Yes \_\_\_ No \_\_\_

b. operators of Title XX funded centers? Yes \_\_\_ No \_\_\_

c. operators of Title XX funded homes? Yes \_\_\_ No \_\_\_

d. representatives of appropriate agencies? Yes \_\_\_ No \_\_\_

3. Whom does the Council advise? \_\_\_\_\_

4. Who appoints the Council? \_\_\_\_\_

#### IV. Summary of Current Title XX Funded Day Care Provider Practices/ Centers

The following questions are designed to provide a summary of current Title XX funded day care center provider practices. Please indicate the source of information for all responses. If the source of information is a provider survey, please include the sample size and the date of the survey. Noted in parenthesis following each question is the section and number of the item in the day care center provider telephone survey which could provide the needed information if it is not already available to you.

##### A. Training

##### Source of Information

1. What percentage of Title XX funded day care centers provide an orientation to all newly hired caregivers? (C,1) \_\_\_\_\_
2. What is the average length of time of that orientation? (C,2) \_\_\_\_\_
3. Of those caregivers without a nationally recognized child development credential, what percentage have taken courses, seminars, or specialized in-service training related to child care during the past year? (C,4) \_\_\_\_\_

##### B. Nutrition

1. What percentage of centers provide each of the following meals: (B,30)
  - a. breakfast \_\_\_\_\_
  - b. snacks \_\_\_\_\_
  - c. lunch \_\_\_\_\_

##### C. Health and Safety

1. What percentage of centers require children to have a health assessment? (B,29) \_\_\_\_\_
2. What percentage of centers require children to have age appropriate immunizations? (B,29) \_\_\_\_\_
3. What percentage of centers maintain health records for enrolled children? (D,1) \_\_\_\_\_
4. What percentage of centers have written plans for responding to illnesses and emergencies? (D,2) \_\_\_\_\_
5. What percentage of centers provide information to parents as needed concerning child health services available in the community? (D,3) \_\_\_\_\_



6. What percentage of centers assist parents in obtaining health services?  
(D,4) \_\_\_\_\_

7. During the past year, what percentage of centers have received information and assistance from the State Title XX Agency about the availability of child health services in the community? (D,5) \_\_\_\_\_

D. Social Services

1. What percentage of centers: (E,1)
  - a. provide information and referral for parents to needed social services?
  - b. provide assistance to parents in obtaining needed social services?
  - c. follow-up to see that parents received social services? \_\_\_\_\_
2. During the past year, what percentage of centers have received information and assistance from the State Title XX Agency regarding the availability of social services? (E,2) \_\_\_\_\_

E. Parent Involvement

1. What percentage of centers allow parents the opportunity to (F,1)
  - a. have unlimited access to observe their children? \_\_\_\_\_
  - b. regularly exchange information with parents about their children and the center's day care program? \_\_\_\_\_
  - c. participate in general program policymaking activities of the center? \_\_\_\_\_
  - d. participate in staff selection? \_\_\_\_\_

F. Group Size (Tables 3a and/or 4a)

For the questions in this section please respond using the following group size guidelines:

Age of Child	Maximum Group Size/Scheduled Enrollment	Maximum Group Size/Attendance
Birth to 2 years	6	6
2 years	12	12
3 to 6 years	18	16
6 to 10 years	16	14
10 to 14 years	20	18

(Note: Waiverable means a center with not more than 20 percent or 10 (whichever is lower) HHS funded children.)

1. What percentage of groups in non-waiverable centers are below (i.e. larger than) the cited guidelines?  
\_\_\_\_\_

2. What percentage of groups in waiverable centers are below (i.e. larger than) the cited guidelines? \_\_\_\_\_
3. What percentage of non-waiverable centers have groups below (i.e. larger than) the cited group size guidelines? \_\_\_\_\_
4. What percentage of waiverable centers have groups below (i.e. larger than) the cited group size guidelines? \_\_\_\_\_
5. What is the State's average group size in non-waiverable centers for each of the following age categories:

Age	Scheduled Enrollment	Attendance
Under 2 year olds	_____	_____
2 year olds	_____	_____
3 to 6 year olds	_____	_____
6 to 10 year olds	_____	_____
10 to 14 year olds	_____	_____

6. What is the State's average group size in waiverable centers for each of the following age categories:

Age	Scheduled Enrollment	Attendance
Under 2 year olds	_____	_____
2 year olds	_____	_____
3 to 6 year olds	_____	_____
6 to 10 year olds	_____	_____
10 to 14 year olds	_____	_____

G. Staffing. (Tables 7a and/or 8a)

For the questions in this section please respond using the following staff/child ratio guidelines:

Age of Child	Staffing Ratio/Scheduled Enrollment	Staffing Ratio/Attendance
Birth to 2 year	1:3	1:3
2 years	1:4	1:4
3 to 6 years	1:9	1:8
6 to 10 years	1:16	1:14
10 to 14 years	1:20	1:18

(Note: Waiverable means a center with not more than 20 percent or 10 (whichever is lower) HIS funded children.)

1. For children under 2 years old:

Source of Information

- a. What percentage of non-waiverable centers have deficit hours (i.e. have more children per caregiver than the above listed guidelines)? \_\_\_\_\_

- b. What percentage of non-waiverable centers have surplus hours (i.e. have less children per caregiver than the cited guidelines)? \_\_\_\_\_
- c. What number of additional FTE caregivers in non-waiverable centers would the State need to satisfy the cited guidelines? \_\_\_\_\_
- d. What percentage of waiverable centers have deficit hours (i.e. have more children per caregiver than the cited guidelines)? \_\_\_\_\_
- e. What percentage of waiverable centers have surplus hours (i.e. have less children per caregiver than the cited guidelines)? \_\_\_\_\_
- f. What number of additional FTE caregivers in waiverable centers would the State need to satisfy the cited guidelines? \_\_\_\_\_

2. For children 2 years and older:

- a. What percentage of non-waiverable centers have deficit hours (i.e. have more children per caregiver than the above listed guidelines)? \_\_\_\_\_
- b. What percentage of non-waiverable centers have surplus hours (i.e. have less children per caregiver than the cited guidelines)? \_\_\_\_\_
- c. What number of additional FTE caregivers in non-waiverable centers would the State need to satisfy the cited guidelines? \_\_\_\_\_
- d. What percentage of waiverable centers have deficit hours (i.e. have more children per caregiver than the cited guidelines)? \_\_\_\_\_
- e. What percentage of waiverable centers have surplus hours (i.e. have less children per caregiver than the cited guidelines)? \_\_\_\_\_
- f. What number of additional FTE caregivers in waiverable centers would the State need to satisfy the cited guidelines? \_\_\_\_\_

3. What is the State's average actual ratio in non-waiverable centers for the following age categories:

Age	Scheduled Enrollment	Attendance
Under 2 years	_____	_____
2 years	_____	_____
3 to 6 years	_____	_____
6 to 10 years	_____	_____
10 to 14 years	_____	_____

4. What is the State's average actual ratio in waiverable centers for the following age categories:

Source of Information

<u>Age</u>	<u>Scheduled Enrollment</u>	<u>Attendance</u>
Under 2 years	_____	_____
2 year olds	_____	_____
3 to 6 year olds	_____	_____
6 to 10 year olds	_____	_____
10 to 14 year olds	_____	_____

V. Summary of Current Title XX Funded Day Care Provider Practices/ Homes

The following questions are designed to provide a summary of current Title XX funded day care home provider practices. Please indicate the source of information for all responses. Noted in parenthesis following each question is the number of the item in the family day care provider survey which could provide the needed information if it is not already available to you.

A. Training

Source of Information

1. What percentage of home caregivers have taken in the past year any courses, seminars or in-service training related to child care? (7) \_\_\_\_\_

B. Nutrition

1. What percentage of homes provide each of the following meals: (11)

- a. breakfast \_\_\_\_\_
- b. snacks \_\_\_\_\_
- c. lunch \_\_\_\_\_

C. Health and Safety

1. What percentage of homes require children to have: (8)

- a. a health assessment \_\_\_\_\_
- b. age appropriate immunizations \_\_\_\_\_

D. Parent Involvement

1. What percentage of homes regularly offer parents opportunities to observe their children and talk about their children's needs? (10) \_\_\_\_\_

210

211

163

E. Group Composition

Source of Information

1. What percentage of homes have: (13, 14)
  - a. 1 child \_\_\_\_\_
  - b. 2-3 children \_\_\_\_\_
  - c. 4-5 children \_\_\_\_\_
  - d. 6 children \_\_\_\_\_
  - e. 7-12 children \_\_\_\_\_
2. Of those homes serving more than 6 children, what percentage have more than one caregiver? (12, 15) \_\_\_\_\_
3. What percentage of those homes serving only children under 2 years old have more than 3 children attending at any one time? (12,13) \_\_\_\_\_
4. What percentage of homes provide after-school care for children who attend full day school? (4) \_\_\_\_\_
5. In those homes serving children who attend full day school, what is the average number of such children served? \_\_\_\_\_

F. Status

1. What percentage of homes are: (16)
  - a. independent \_\_\_\_\_
  - b. part of a family day care home system \_\_\_\_\_

SAMPLING FRAME FOR  
PROVIDER SURVEYS

Tables 1 and 2 identify the size of the survey sample recommended for selection-- Table 1 for centers and table 2 for homes. These tables reflect minimum numbers needed in order to project findings to the State level with reasonable confidence. They are based upon the size of the population of centers and homes in the State and an anticipated high level of accuracy ( $\pm .075$  for centers,  $\pm .10$  for homes) when making these projections.

The sample sizes reflect completed interviews with eligible centers and homes and not the number of telephone calls to be made. Some facilities may refuse to be surveyed or may not be eligible for the survey. In order to assure that information for the necessary number of facilities are used to prepare a States report, States should initially identify a larger number of facilities to call than indicated by each of the tables. A rule of thumb to follow for centers is to select a number approximately 30% greater than depicted in Table 1; while for homes select a number approximately twice the Table 2 indicated size.

Once the number to be called is identified, the next step is to randomly select those respective facilities from a population list of Title XX centers (and a population list of Title XX homes. These procedures are outlined below:

1. First, identify the number of calls to be made; e.g. in a State whose Title XX population of centers is 193, the minimum number of completed center interviews from Table 1 would be 94; adding 30% (or 28) to that figure, results in a total of 122 calls to be made.
2. Next, identify the selection ratio to be used for choosing 122 centers from the center population list. In this example the selection ratio is approximately 12:19 (i.e. 12 centers from each 19 on the list would be chosen).
3. Finally, choose the actual centers to be called. Any of several acceptable methods could be used to assure randomness in the selection process--one is to skip the first 7 centers and choose the next 12, repeating the process for all 193 centers on the list until 122 centers are chosen; another would be to choose every other center until 7 of 14 are chosen and then choose the next 5, again repeating this process until 122 centers are chosen.

### Code Numbers

A code number should be assigned to each chosen center and home. Code numbers are used for compilation purposes only. Interviewers need to have these code numbers so they could be recorded on each questionnaire face sheet. Code numbers consist of 5 digits. The first 2 digits identify the State (See Table 3 for State identifiers). The remaining 3 digits identify the facility and should be assigned to each chosen facility using a consecutive numbering system, as facilities appear on the list i.e. 001, 002, 003, 004, and so on. Use a separate consecutive numbering system for the center list and home list.

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TABLE I

## DAY CARE CENTER SAMPLING FRAME

<u>Population (Total No. of Title XX Centers)</u>	<u>Sample Size (Minimum No. of Completed Interviews)*</u>	<u>Sample Size (Minimum No. of Title XX Centers)</u>	<u>Sample Size (Minimum No. of Completed Interviews)*</u>
Under 50	90%	250 - 259	103
50 - 54	41	260 - 269	105
55 - 59	44	270 - 279	107
60 - 64	47	280 - 289	108
65 - 69	50	290 - 299	109
70 - 74	53	300 - 324	111
75 - 79	55	325 - 349	114
80 - 84	57	350 - 374	117
85 - 89	59	375 - 399	120
90 - 94	61	400 - 449	123
95 - 99	63	450 - 499	128
100 - 109	66	500 - 599	132
110 - 119	69	600 - 699	137
120 - 129	73	700 - 999	145
130 - 134	77	1,000 and over	150
140 - 149	80		
150 - 159	83		
160 - 169	86		
170 - 179	87		
180 - 189	89		
190 - 199	94		
200 - 209	96		
210 - 219	97		
220 - 229	98		
230 - 239	99		
240 - 249	100		

\*Parts A and B



TABLE 2

## FAMILY DAY CARE HOME SAMPLING FRAME

<u>Population (Total No. of Title XX Homes)</u>	<u>Sample Size (Minimum No. of Completed Interviews)</u>
Under 50	80%
51 - 99	42
100 - 199	59
200 - 299	71
300 - 399	75
400 - 499	77
500 - 599	79
600 - 699	82
700 - 799	86
800 - 899	88
900 - 999	89
1,000 - 1,499	91
1,500 - 1,999	92
2,000 - 2,999	95
3,000 - 3,999	97
4,000 - 4,999	99
5,000 and above	100

TABLE 3

## STATE IDENTIFICATION CODE

<u>CODE</u>	<u>STATE</u>
01	Connecticut
02	Maine
03	Massachusetts
04	New Hampshire
05	Rhode Island
06	Vermont
07	New York
08	New Jersey
09	Delaware
10	Maryland
11	Pennsylvania
12	Virginia
13	West Virginia
14	District of Columbia
15	Alabama
16	Florida
17	Georgia
18	Kentucky
19	Mississippi
20	North Carolina
21	South Carolina
22	Tennessee
23	Illinois
24	Indiana
25	Michigan
26	Minnesota
27	Ohio
28	Wisconsin
29	Arkansas
30	Louisiana
31	New Mexico
32	Oklahoma
33	Texas
34	Iowa
35	Kansas
36	Missouri
37	Nebraska
38	Colorado
39	North Dakota
40	South Dakota
41	Utah
42	Wyoming
43	Arizona
44	California
45	Hawaii
46	Nevada
47	Idaho
48	Oregon
49	Washington

SAMPLE ADVANCED LETTER TO FAMILY DAY  
CARE HOME BEFORE TELEPHONE SURVEY.

Dear \_\_\_\_\_:

We have been asked by Congress to conduct a systematic assessment of current practices in Title XX funded day care programs. As you know, Congress has delayed the new Title XX Federal Day Care Regulations until July 1, 1981. Before Congress decides whether these regulations will go into effect on that date, they want to learn a great deal more about what is going on in each State. We feel this is a worthwhile effort and are cooperating with them.

Interviewing family day care home providers like yourself, is one of the best ways to obtain this information. We will be calling a random sample of day care providers throughout the State in the next few weeks to learn more about their family day care home operation.

Your participation in this survey would be completely voluntary and your refusal to participate or how you answer any of the questions, would you decide to participate, will not affect your eligibility for present or future Title XX funding.

I should add that all home-identifying information collected by this survey will be treated as confidential. None of the information collected will in any way be used to determine whether a home is complying with specific State or Federal standards. Data will be compiled based on the totalled responses of all homes surveyed in (State) and will not reveal the identities of the individual questionnaire responses of the surveyed homes.

We are looking forward to speaking with you.

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## INSTRUCTIONS TO FAMILY DAY CARE HOME INTERVIEWERS

### I. Introduction to Survey

Each state has been asked by Congress to conduct a systematic assessment of its Title XX day care practices. As part of this assessment, a sample of day care centers and family day care homes are being interviewed by telephone in the next few weeks to learn more about their day care practices. This information, along with state agency information, will be compiled into a state report and sent to the Department of Health and Human Services (DHHS) in Washington, D.C. The DHHS will then prepare a summary report of all state reports and deliver that summary to Congress by June 1, 1981.

The procedures contained in this package are instructions for interviewers who will be surveying family day care homes using the Family Day Care Home Telephone Survey. The home questionnaire contains questions covering eligibility, child enrollment patterns, health and safety and nutrition practices.

### II. General Administration Information

- What information and documents will you need for conducting each interview?
  - The name and telephone number of the family day care home, the day care home providers name, if available and each home's 5 digit ID number.  
(Obtain these code numbers from the State Assessment Coordinator.)
- Who should be interviewed at the home?
  - The survey is to be conducted with the provider only.
- When should the survey be conducted?
  - Make telephone calls on weekdays between the hours of 9 a.m. and 4 p.m. Children generally arrive before 9 a.m. and depart after 4 p.m. These times would not be appropriate for conducting a survey.
- What should I do if I'm requested to call back?
  - There might be any number of situations arising which will require you to call back at some other time: e.g. the provider may not be at home when you call or may be involved in some other activity. Simply, schedule a convenient call-back time and make a note of this on the "Call Record" sheet which is located on the face of the questionnaire.
  - The bottom of the "Call Record" sheet must also be completed to reflect the final status of the interview.

● How many attempts should I make to reach the provider?

- Do not make more than 3 attempts.

● What is the first thing I say when I call?

- Read the introductory statement. It is particularly important in the beginning, that you appear relaxed and confident. Rehearsing and becoming familiar with this statement will be a definite advantage to the successful conduct of the interview. Because of its length, familiarization with the contents of the statement is even more significant if the provider had not received (or read) the advanced letter describing the survey. Record check marks (✓) in the appropriate places on the statement before beginning the interview (or before terminating the interview, if the provider does not want to participate).

● How do I record responses?

- There are basically three different types of response formats. Yes or no responses; requests for a specific number(s); and a choice of one of several alternatives. The following are illustrations of each type:

(1) Do you ... ?

□

YES	1
NO	2

If the response is yes -- record a "1" in the response box above, if the response is no -- record a "2".

(2) What is the number of children ... ?

□ □

If the respondent says 3 children, record as 

0	3
---	---

. There must be an entry in each box, with a zero (0) recorded in the first box, if the response is one digit less than the number of response boxes available.

220

(3) Which one of the following is ... ?

3 days 1

4 days 2

5 days 3

6 days 4

If the response is 4 days -- record a "2" in the response box above;  
if the response is 6 days -- record a "4", and so on.

- What if the respondent does not know the answer to a question?
  - Questions where this would occur have a special "don't know" code number. Simply record that number in the response box. If there are "don't know" answers to questions which don't have a special code number appearing, record the following in the response box -- an 8 for one box response; a 9/8 for two box responses; and a 9/9/8 for three box responses.
- Why do numbers appear above, inside or next to these response boxes?
  - This questionnaire has been formatted for both machine analysis and hand analysis. These numbers are simply card column identifiers for the key punch operator.

III. Specific Questions

Questions #1-3 are designed to screen out facilities that are not eligible to participate in this assessment survey. If the provider answers "no" or "don't know" to either questions #1, 2 or 3, terminate the interview by reading the statement on the bottom of the page. Next, record the appropriate code on the record sheet.

#3 Obtain the name of the appropriate Title XX agency from the State Assessment Coordinator, before the interview.

#4 We are only interested in school age children.

STATE TITLE XX DAY CARE ASSESSMENT

FAMILY DAY CARE HOME TELEPHONE SURVEY

Name of State \_\_\_\_\_

CARD 1

Name of Interviewer \_\_\_\_\_

(1-5)

Home ID # \_\_\_\_\_

--	--	--	--	--

CALL RECORD

Start CD 1  
ID #(1-5)

RESULT OF ATTEMPT

Attempt #	Date	No Answer	Provider Away From Home	Date & Time of Requested Call-Back	Provider Requested Call-Back	Date & Time of Requested Call-Back	Provider Refused	Provider Completed Interview	Comments
1									
2									
3									

FINAL STATUS <

Final Status:	6
Completed	<input type="checkbox"/>
Refused	<input type="checkbox"/>
Terminated/ Did not pass screening	<input type="checkbox"/>
Never Contacted	<input type="checkbox"/>
Wrong Number	<input type="checkbox"/>
Home No Longer Operating	<input type="checkbox"/>

FAMILY DAY CARE HOME TELEPHONE SURVEY

Introduction

Hello, is this Ms. (Mr.) \_\_\_\_\_ (Provider) \_\_\_\_\_? My name is \_\_\_\_\_ with the State Title XX Program, in \_\_\_\_\_ (City) \_\_\_\_\_. Did you receive the letter in the mail about the statewide Title XX day care survey we are conducting for Congress?

Yes \_\_\_\_\_ (If Yes) would you be willing to participate in this interview?

Yes \_\_\_\_\_

No \_\_\_\_\_

No \_\_\_\_\_ (IF NO, READ THE FOLLOWING)

We've been asked by Congress to conduct a systematic assessment of current practices in Title XX funded day care programs. As you know, Congress has delayed the new Title XX Federal Day-Care Regulations until July 1, 1981. Before Congress decides whether these regulations will go into effect on that date, they want to learn a great deal more about what is going on in each State. We feel this is a worthwhile effort and are cooperating with them.

Interviewing day care providers, like yourself, is one of the best ways to obtain this information. We are calling a random sample of day care providers throughout the State to learn more about their operation.

Your participation in this survey is completely voluntary and your refusal to participate or how you answer any of the questions, should you decide to participate, will not affect your eligibility for present or future Title XX funding.



I should add that all home-identifying information collected by this survey will be treated as confidential. None of the information collected will in any way be used to determine whether a family day care home is complying with specific State or federal standards. Data will be completed based on the totalled responses of all homes surveyed in \_\_\_\_\_ (State) \_\_\_\_\_ and will not reveal the identities or the individual questionnaire responses of the surveyed centers.

Would you be willing to participate in this telephone survey?

Yes \_\_\_\_\_

No \_\_\_\_\_

1. Do you provide day care services at this location?

7  
[ ]

Yes	1
No	2

2. Is your home registered, certified or licensed to serve less than 13 children?

8  
[ ]

Yes	1
No	2
Don't Know	8

3. Do you currently receive income from a "Title XX Agency"? (INSERT NAME OF STATE. TITLE XX AGENCY OR APPROPRIATE OTHER LOCAL TITLE XX AGENCY)

9  
[ ]

Yes	1
No	2
Don't Know	8

IF THE RESPONDENT ANSWERED "No" TO ANY ONE OF THE ABOVE QUESTIONS SAY:  
 "I have no more questions to ask you. I appreciate your help very much."

4. How many children in full day school, do you usually care for in the afternoon?\*

10/11

--	--

Children

5. How many children enrolled have their tuition or fees paid by the Title XX Agency?

12/13

--	--

Children

Don't Know	98
------------	----

6. Do you have one of the following child development credentials? (READ LIST IF YES, SKIP TO QUESTION 8)

- . . A.A. in nursing or education
- . . Bachelor or graduate degree in infant psychology, early childhood education, child development, elementary education or home economics
- . . Montessori teaching credential
- . . CDA Certification
- . . States Early Childhood Education teaching certificate

14

--

Yes	1
No	2

7. Have you taken in the past year any courses, seminars or in-service training related to child-care?

15

--

Yes	1
No	2

8. Do you require children to have a:

Health Assessment?

Age-Appropriate Immunization?

Yes	No
1	2
1	2

16

17

9. Do you maintain health records for enrolled children?

18

Yes	1
No	2

10. Do you regularly offer parents opportunities to observe their children and talk about their children's needs?

19

Yes	1
No	2

11. Which of the following meals and snacks do you regularly provide children at your home: (READ ONE AT A TIME)

Breakfast?

Morning Snack

Lunch?

Afternoon Snack?

Yes	No
1	2
1	2
1	2
1	2

20

21

22

23

12. What was the largest number of children, including your own, at your home yesterday morning between 9 and 12 a.m. (or Friday morning if survey is conducted on Monday)?

29/25  
[ ] [ ]

Children

13. How many of these children, including your own, were: (READ ONE AT A TIME)

Under 2 years old?

26/27  
[ ] [ ]

2-6 years old and not yet in full day school?

22/24  
[ ] [ ]

14. How many of these children, not including your own, were 6 years or older?

20/31  
[ ] [ ]

Children

15. Was there another caregiver in the home with you yesterday morning between 9:00 and 12:00 noon?

32  
[ ]

Yes	1
No	2

16. Is your home independent or part of a family day care home system?

33  
[ ]

Independent?

[ 1 ]

System?

[ 2 ]

SAY: "This is the end of the interview and I appreciate your help very much."

SAMPLE ADVANCED LETTER TO CENTER BEFORE  
TELEPHONE SURVEY

Dear (Director):

We have been asked by Congress to conduct a systematic assessment of current practices in Title XX funded day care programs. As you know, Congress has delayed the new Title XX Federal Day Care Regulations until July 1, 1981. Before Congress decides whether these regulations will go into effect on that date, they want to learn a great deal more about what is going on in each State. We feel this is a worthwhile effort and are cooperating with them.

Interviewing day care directors, like yourself, is one of the best ways to obtain this information. We will be calling a random sample of day care directors throughout the State in the next few weeks to learn more about their center's operation.

Your participation in this survey will be completely voluntary and your refusal to participate or how you answer any of the questions, should you decide to participate, will not affect your eligibility for present or future Title XX funding.

I should add that all center-identifying information collected by this survey will be treated as confidential. None of the information collected will in any way be used to determine whether a center is complying with specific State or federal standards. Data will be compiled based on the totalled responses of all centers surveyed in (State) and will not reveal the identities or the individual questionnaire responses of the surveyed centers.

Should you participate in the survey, there will be some information needed which you might not have available at your fingertips. This information relates to your daily child and staffing rosters.

1. We will be asking one set of questions which address the number and age distributions (under 2 yrs., 2 yrs., 3-6 yrs., 6-10 yrs., 10-14 yrs.) of children "scheduled" for each of your groups during a given morning's planned group activity period. (Numbers reflecting "attendance" patterns rather than "schedules" will be requested if your Title XX reimbursement rate is currently based on the number of children in "attendance" only.)

We are defining a group for this survey as, "a cluster of children assigned to one or more caregivers. It is possible for more than one group to occupy a single room provided that each has its own clearly defined space with its own principally responsible caregiver."

2. We also will be asking a related set of questions for the center and not the group level. These deal with:
  - o the total number (across groups) of children "scheduled";
  - o the total number of child hours "scheduled";
  - o the total number of paid caregiver and volunteer hours (including substitutes) "scheduled" to work directly with these children on a specific day. (Again, "attendance" numbers and hours will be asked if your Title XX reimbursement rate is based on the number of children in "attendance" only.)

Center level information on numbers and hours of children and direct caregiver hours will be requested for each of the above age categories. We recognize that caregivers might be assigned to groups comprising mixed age categories of children and that calculating these caregiver hours at the center level for each of these age categories would be difficult. However, since this is only a survey we would like your rough estimates of this distribution.

All other questions are fairly routine and should require no advance preparation on your part. Thank you for your cooperation. We look forward to speaking with you.

## INSTRUCTIONS TO CENTER DAY CARE INTERVIEWERS

### I. Introduction to Survey

Each state has been asked by Congress to conduct a systematic assessment of its Title XX day care practices. As part of this assessment, a sample of day care centers and family day care homes are being interviewed by telephone in the next few weeks to learn more about their day care practices. This information, along with state agency information, will be compiled into a state report and sent to the Department of Health and Human Services (DHHS) in Washington, D.C. The DHHS will then prepare a summary report of all state reports and deliver that summary to Congress by June 1, 1981.

The procedures contained in this package are instructions for interviewers who will be surveying day care centers using the Day Care Center Director Telephone Survey. The center questionnaire contains 6 parts:

Part A: is a sequence of 4 eligibility questions to identify those centers eligible to participate in this survey.

Part B: is a series of questions primarily covering child and caregiver characteristics and daily staffing patterns.

Parts C, D, E, & F: cover clusters of questions relating respectively, to caregivers training practices, health and safety practices, social service practices and parent involvement practices.

Some states will only administer Parts A and B. Others will administer combinations of the other parts as well. You will need to know which parts of the questionnaire your state has selected for this survey. ONLY ASK QUESTIONS CONTAINED IN THOSE PARTS.

### II. General Administration Information

- What information and documents will you need for conducting each interview?
  - The name and telephone number of the day care center, the day care center director's name, if available and each center's 5 digit ID number. (Obtain these code numbers from the State Assessment Coordinator.)



- Who should be interviewed at the center?
  - The survey is to be conducted with the director of the center. However, if you discover that the director is unavailable for a week or more, the assistant director or head teacher (whichever is acting for the director) would be an appropriate substitute.
- When should the survey be conducted?
  - Make telephone calls on weekdays between the hours of 9a.m. and 4p.m. Children and staff generally arrive before 9a.m. and depart after 4p.m. These times would not be appropriate for conducting a survey
- What should I do if I'm requested to call back?
  - There might be any number of situations arising which will require you to call back at some other time: e.g. the director may not be at the center when you call or may be involved in some other activity. Simply, schedule a convenient call-back time and make a note of this on the "Call Record" sheet which is located on the face of the questionnaire.
  - The bottom of the "Call Record" sheet must also be completed to reflect the final status of the interview.
- How many attempts should I make to reach the director?
  - In most instances, one attempt will be sufficient. However, do not make more than 3 attempts.
- What do I do if the director does not want to participate?
  - Politely thank her for her time and record the appropriate code on the questionnaire record sheet.
- What is the first thing I say when I call?
  - Read the introductory statement. It is particularly important in the beginning, that you appear relaxed and confident. Rehearsing and becoming familiar with this statement will be a definite advantage to the successful conduct of the interview. Because of its length, familiarization with the contents of the statement is even more significant if the director had not received (or read) the advanced letter describing the survey. Record check marks ( / ) in the appropriate places on the statement before beginning the interview (or before terminating the interview, if the director does not want to participate).

• How do I record responses?

There are basically three different types of response formats. Yes or no responses; requests for a specific number(s); and a choice of one of several alternatives. The following are illustrations of each type:

(1) Do you ... ?

YES	1
NO	2

If the response is yes -- record a "1" in the response box above, if the response is no -- record a "2".

(2) What is the number of children ... ?

If the respondent says 1 3 3 children, record as -- one digit

1	3	3
---	---	---

per box. If the respondent says 3 3 children, record as . There

0	3	3
---	---	---

must be an entry in each box, with a zero (0) recorded in the first box, if the response is one digit less than the number of response boxes available.

(3) Which one of the following is ... ?

3 days

4 days

5 days

6 days

If the response is 4 days -- record a "2" in the response box above; if the response is 6 days -- record a "4", and so on.

- What if the respondent does not know the answer to a question?
  - Questions where this would occur have a special "don't know" code number. Simply record that number in the response box. If there are "don't know" answers to questions which don't have a special code number appearing, record the following in the response box -- an 8 for one box response; a 9/8 for two box responses; and a 9/9/8 for three box responses.
- Why do numbers appear above, inside or next to these response boxes?
  - This questionnaire has been formatted for both machine analysis and hand analysis. These numbers are simply card column identifiers for the key punch operator.

### III. Specific Questions

#### Part A: Eligibility

Questions #1-4 are designed to screen out facilities that are not eligible to participate in this assessment survey.

- #1 If the respondent says "no" - that day care services are provided at some other location, ask for the directors name, address and telephone number of that other location. (Record this information on the interviewer record sheet.)
- #3 Obtain the name of the appropriate Title XX Agency from the State Assessment Coordinator before the interview and record this on each questionnaire. Different agencies might be appropriate for different centers depending upon their geographic location in the state.

If the respondent answers "no" or "don't know" to either #1, 2, 3 or 4, terminate the interview by reading the statement at the bottom of the page. Next, record the appropriate code on the record sheet.

#### Part B: Enrollment and Staffing

- #8 If the respondent does not know the exact number of children whose tuition is paid by the Title XX agency, ask for an approximate number.
- #10 If the respondent says that there are different rates depending on whether the agency pays the total cost of tuition or only part of the tuition, say: We are interested in the former situation, i.e. in those cases where the total cost is paid.
- #12 Sometimes the scheduled enrollment on a given day is less than the total enrollment because not all children attend the center 5 days a week.

- #13 The number of children absent is calculated by subtracting the actual attendance number (question 12) from the scheduled attendance number (question 11). Calculate the percent after the interview, by dividing the attendance number by the scheduled number.
- #14 If the respondent does not know or does not understand the question, say: "Reimbursement on the basis of children scheduled for attendance means that payment is made even for children absent. Reimbursement on the basis of children actually in attendance means reimbursement is not provided for children who are absent." This is very important question. Be sure that the respondent completely understands it before you record the response.
- #15 After you read the definition of a "group", determine whether the respondent understands the definition before asking question 15. It is important that the respondent completely understands the definition before the question is asked.

Centers generally carry out different activities with children at different times of the day. For your reference, the following is a schedule of activities typical of most centers:

7:00 a.m.	-	9:00 a.m.	Arrival time (free play, breakfast)
9:00 a.m.	-	11:30 a.m.	Planned group activities (learning activities; storytime, singing)
11:30 a.m.	-	12:30 p.m.	Lunch
12:30 p.m.	-	2:30 p.m.	Nap Time
2:30 p.m.	-	4:00 p.m.	Free play (outdoor activities, indoor activities)
4:00 p.m.	-	6:00 p.m.	Departure time (free play)

In this question we are only interested in the number of groupings during the morning planned group activity period (usually 9 - 11:30 a.m.)

- #16 and 17. Since the group size requirement differs depending on whether a center is reimbursed or not for child absences by the Title XX agency, ask questions 16 and 17, only if the answer to question 14 was "scheduled for attendance". If the answer to question 14 was "actually in attendance", ask questions 18 and 19 only.

If the survey is conducted on a Monday, "yesterday" would refer to "Friday". Use Friday instead of yesterday, if appropriate.

When asking this question identify only those age categories revealed by question 7 to be relevant for this center. In other words, if the response to question 7 revealed that only 2 year olds and 3-6 year olds are enrolled in the center, only ask this question for those two age categories. DO NOT MAKE ANY ENTRIES IN THE BOXES FOR THE OTHER AGE CATEGORIES.

- #20 The staff in a center are made up of different people who perform different functions. Most are caregivers (or teachers) who work directly with children in classrooms (these caregivers are usually paid for their work but in some centers, volunteers are also used). Other staff consist of cooks, drivers, social workers, administrators, clerks, etc.
- #23 - 28 The same discussion on relevant age categories for questions 16 and 17 also applies to these questions.
- #29 The time when the child actually had this health assessment or these immunizations is not relevant for this question. Centers may have these requirements prior to enrollment or soon after enrollment.

STATE TITLE XX DAY CARE ASSESSMENT  
 DAY CARE CENTER DIRECTOR TELEPHONE SURVEY

Name of State \_\_\_\_\_

CARD. 1

Name of Interviewer \_\_\_\_\_

Start CD 1  
 ID #(1-5)

Center ID-# \_\_\_\_\_

--	--	--	--	--

CALL RECORD

RESULT OF ATTEMPT

Attempt #	Date	No Answer	Director Away From Center	Date & Time of Requested Call-Back	Director Requested Call-Back	Date & Time of Requested Call-Back	Director Refused	Director Completed Interview	Comments
1									
2									
3									

FINAL STATUS

FINAL STATUS:	<input type="checkbox"/> 6																									
COMPLETED	<input type="checkbox"/> 1																									
REFUSED	<input type="checkbox"/> 2																									
TERMINATED/PART A ONLY	<input type="checkbox"/> 3																									
NEVER CONTACTED	<input type="checkbox"/> 4																									
WRONG NUMBER	<input type="checkbox"/> 5																									
CENTER NO LONGER OPERATING	<input type="checkbox"/> 6																									
		<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> <th></th> </tr> </thead> <tbody> <tr> <td>Completed Part B.</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Completed Part C</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Completed Part D.</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Completed Part E</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Completed Part F</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/></td> </tr> </tbody> </table>		Yes	No		Completed Part B.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	Completed Part C	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	Completed Part D.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	Completed Part E	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	Completed Part F	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>
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Completed Part F	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>																							

DAY CARE CENTER TELEPHONE SURVEY

Introduction

Hello, is this the \_\_\_\_\_ Day Care Center?

My name is \_\_\_\_\_ with the State Title XX Program,  
in \_\_\_\_\_ (City) \_\_\_\_\_

May I speak to Ms. (Mr.) \_\_\_\_\_ (Director) \_\_\_\_\_ please?

Hello, Ms. (Mr.) \_\_\_\_\_, my name is \_\_\_\_\_

with the State Title XX Program, in \_\_\_\_\_ (City) \_\_\_\_\_. Did

you receive the letter in the mail about the statewide Title XX day care survey

we are conducting for Congress?

Yes \_\_\_\_\_ (IF YES) would you be willing to participate?

Yes \_\_\_\_\_ (START THE INTERVIEW)

No \_\_\_\_\_

No \_\_\_\_\_ (IF NO, READ THE FOLLOWING)

We've been asked by Congress to conduct a systematic assessment of current practices in Title XX funded day care programs. As you know, Congress has delayed the new Title XX Federal Day Care Regulations until July 1, 1981. Before Congress decides whether these regulations will go into effect on that date, they want to learn a great deal more about what is going on in each State. We feel this is a worthwhile effort and are cooperating with them.

Interviewing day care directors, like yourself, is one of the best ways to obtain this information. We are calling a random sample of day care directors throughout the State to learn more about their center's operation.

Your participation in this survey is completely voluntary and your refusal to participate or how you answer any of the questions, should you decide to participate, will not affect your eligibility for present or future Title XX funding.

I should add that all center-identifying information collected by this survey will be treated as confidential. None of the information collected will in any way be used to determine whether a center is complying with specific State or federal standards. Data will be completed based on the totalled responses of all centers surveyed in \_\_\_\_\_ (State) \_\_\_\_\_ and will not reveal the identities or the individual questionnaire responses of the surveyed centers.

Would you be willing to participate in this telephone survey?

Yes \_\_\_\_\_

No \_\_\_\_\_

IF THE RESPONDENT IS WILLING TO PARTICIPATE IN THE SURVEY, FIRST DETERMINE ELIGIBILITY BY ASKING QUESTIONS 1-4 ON PART A. IF ELIGIBLE SAY:

In the letter that was sent out we identified two sets of information we would be asking which might require some advance preparation. Let me now describe this information to you.

One set of questions address the number and age distribution (under 2 Yrs, 2 yrs, 3-6 yrs, 6-10 yrs, 10-14 yrs) of children "scheduled" for each of your groups during a given morning's planned group activity period. (Numbers reflecting "attendance" patterns rather than "schedules" will be requested if your Title XX reimbursement rate is currently based on the number of children in "attendance" only.) We are defining a group for this survey as, "a cluster of children assigned to one or more caregivers. It is possible for more than one group to occupy a single room provided that each has its own clearly defined space with its own principally responsible caregiver."



Another is a related set of questions for the center and not the group level. These deal with (a) the total number (across groups) of children "scheduled"; (b) the total number of child hours "scheduled"; and (c) the total number of paid caregiver and volunteer hours (including substitutes) "scheduled" to work directly with these children on a specific day. (Again, "attendance" numbers and hours will be asked if your Title XX reimbursement rate is based on the number of children in "attendance" only.)

AFTER READING THIS DESCRIPTION, ASK:

"Is this information readily available to you now or would you prefer that I call back."

Available Now \_\_\_\_\_ START THE INTERVIEW

Call back \_\_\_\_\_ RECORD ON THE COVER PAGE

240

PART A: ELIGIBILITY

1. Do you provide day care services at this location?

7

Yes	1
No	2

2. Does your center have the capacity for at least 13 children?  
(PROBE: Is your licensed capacity at least 13 children?)

8

Yes	1
No	2

3. Do you currently receive income from a Title XX Agency?--(INSERT NAME OF STATE  
TITLE XX AGENCY OR APPROPRIATE OTHER LOCAL TITLE XX AGENCY)

9

Yes	1
No	2

4. Do you provide day care services less than 14 hours a day?

10

Yes	1
No	2

IF THE RESPONDENT ANSWERED "No" TO ANY ONE OF THE ABOVE QUESTIONS SAY:  
"I have no more questions to ask you. I appreciate your help very much."

PART B: ENROLLMENT AND STAFFING

5. What is your centers current license capacity in numbers of children?

11/12/13

--	--	--

Capacity

Don't Know	998
------------	-----

6. Approximately how many children are currently enrolled at your center?

14/15/16

--	--	--

# of Children Enrolled

7. How many of these enrolled children are currently: (READ ONE AT A TIME)

17/18

Under 2 years old? . . . . .

--	--

19/20

2 years old? . . . . .

--	--

21/22

3 - 6 years old? . . . . .

--	--

23/24

6 - 10 years old? . . . . .

--	--

25/26

10 - 14 years old? . . . . .

--	--

8. How many children enrolled at your center have their tuition or fees paid either totally or partially by the Title XX Agency?

37/29/29

--	--	--

Title XX paid

DO NOT ASK
------------

30/31

--	--

Percent

9. Of those children whose fees are paid totally by the Title XX Agency, what is the daily amount paid per full-time child?

\$

32/33

--	--

34/35

--	--

per-child daily amount

Don't Know	9998
------------	------

10. How many children enrolled at your center have their "total" tuition or fees paid by their parents?

36/37/38

--	--	--

Parent fees

Don't Know	998
------------	-----

11. Earlier you said that (SEE Q.6) children are currently enrolled at your center. How many were scheduled to attend the center yesterday?

39/40/41  
[ ] [ ] [ ]

# Scheduled

Don't Know 998

12. How many children actually attended the center yesterday?

42/43/44  
[ ] [ ] [ ]

# Attended

Don't Know 998

13. (ESTIMATE THE NUMBER OF CHILDREN ABSENT YESTERDAY AND ASK:) By my calculations \_\_\_\_\_ children were absent yesterday; how many children are typically absent on a given day?

Don't Know 98

44  
[ ] [ ]

# Absent

DO NOT ASK

47/48  
[ ] [ ]

% Absent

14. Are you now reimbursed from your State Title XX Agency on the number of children "scheduled for attendance" or the "number of children" actually in attendance"? (RECORD ONLY ONE RESPONSE)

49  
[ ]

Scheduled for attendance? . . . . .

1

Actually in attendance? . . . . .

2

Don't Know 8

The following set of questions is about groupings of "children" and staff scheduling, which was discussed in the advanced letter. If you have yesterday's child and staffing roster, it would be helpful to get it to assist you.

Before I ask you the next questions dealing specifically with groupings of children, I would like to read the definition of a group that we are using for this survey. We are defining a group as:

"A cluster of children assigned to one or more caregivers. It is possible for more than one group to occupy a single room provided that each has its own clearly defined space with its own principally responsible caregiver."

(PROBE: Would you like me to repeat this definition?)

15. Using the definition I just read: how many different groups of children did you have in your center yesterday during the morning planned group activity period?

50/51

--	--

# groups

ASK ONLY Q. 16 AND 17, IF THE ANSWER TO Q. 14 WAS "SCHEDULED FOR ATTENDANCE".  
ASK ONLY Q. 18 AND 19, IF THE ANSWER TO Q. 14 WAS "ACTUALLY IN ATTENDANCE".

"I would like you to continue to focus only on yesterday mornings planned group activity period. Starting with the group containing the youngest children:

- 16. How many children were scheduled for that group?
- 17. How many children scheduled for that group were the following ages: (ASK ONLY FOR THOSE AGES REVEALED BY QUESTION 7 TO BE RELEVANT FOR THIS CENTER.)

(REPEAT BOTH QUESTIONS FOR EACH GROUP)

Groups	Number of Children	
1	(54)	(55)
2	(54)	(57)
3	(76)	(77)
4	(6)	(7)
5	(28)	(29)
6	(40)	(41)
7	(52)	(53)
8	(64)	(67)
9	(76)	(77)
10	(74)	(77)

Start CD 2  
Dup. (1-5)

Start CD 3  
Dup. (1-5)

	Under 2 yrs.	2 yrs.	3-6 yrs.	6-10 yrs.	10-14 yrs.				
(54)	(55)	(54)	(57)	(57)	(6)	(7)	(62)	(63)	
(64)	(67)	(61)	(69)	(70)	(71)	(72)	(73)	(74)	(75)
(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)
(1)	(1)	(2)	(2)	(22)	(23)	(24)	(25)	(26)	(27)
(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)
(42)	(43)	(44)	(45)	(46)	(47)	(48)	(49)	(50)	(51)
(54)	(55)	(56)	(57)	(58)	(59)	(60)	(61)	(62)	(63)
(64)	(67)	(68)	(69)	(70)	(71)	(72)	(73)	(74)	(75)
(1)	(1)	(1)	(1)	(10)	(11)	(12)	(13)	(14)	(15)
(1)	(1)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)

DO NOT ASK

Total 

38/29/30
----------

Totals 

31/32/32	34/35/36	37/38/39	40/41/42	43/44/45
----------	----------	----------	----------	----------

END CD 1 78/79/80-001  
END CD 2 78/79/80-002

SKIP TO QUESTION 20

"I would like you to continue to focus only on yesterday mornings planned group activity period. Starting with the group containing the youngest children:

18. How many children were in attendance for that group?      19. How many children in attendance for that group were the following ages: (ASK ONLY FOR THOSE AGES REVEALED BY QUESTION 7 TO BE RELEVANT FOR THIS CENTER.)

(REPEAT BOTH QUESTIONS FOR EACH GROUP)

Groups	Number of Children	
	(46)	(47)
1		
2	(57)	(57)
3	(70)	(71)
4	(80)	(81)
5	(22)	(23)
6	(34)	(35)
7	(46)	(47)
8	(57)	(57)
9	(70)	(70)
10	(80)	(81)

Start CD 4  
Dup. (1-5)

Start CD 5  
Dup. (1-5)

Under 2 yrs.		2 yrs.		3-6 yrs.		6-10 yrs.		10-14 yrs.	
(48)	(49)	(50)	(51)	(52)	(53)	(54)	(55)	(56)	(57)
(60)	(61)	(62)	(63)	(64)	(65)	(66)	(67)	(68)	(69)
(72)	(73)	(74)	(75)	(76)	(77)	(78)	(79)	(80)	(81)
(82)	(83)	(84)	(85)	(86)	(87)	(88)	(89)	(90)	(91)
(94)	(95)	(96)	(97)	(98)	(99)	(100)	(101)	(102)	(103)
(104)	(105)	(106)	(107)	(108)	(109)	(110)	(111)	(112)	(113)
(120)	(121)	(122)	(123)	(124)	(125)	(126)	(127)	(128)	(129)
(140)	(141)	(142)	(143)	(144)	(145)	(146)	(147)	(148)	(149)
(172)	(173)	(174)	(175)	(176)	(177)	(178)	(179)	(180)	(181)
(202)	(203)	(204)	(205)	(206)	(207)	(208)	(209)	(210)	(211)

DO NOT ASK

Total 

22/23/24
----------

 Totals

25/26/27	28/29/30	31/32/33	34/35/36	37/38/39
----------	----------	----------	----------	----------

END CD 3 78/79/80-003  
END CD 4 78/79/80-004



20. What is the total number of paid staff in your center paid either by the center or by an outside agency?

Don't Know	98
------------	----

48/41	

# Paid Staff

21. Of this number, how many primarily work directly with children in groups?

Don't Know	98
------------	----

42/43	

# Work with children

22. How many volunteers do you have who work directly with children 10 or more hours per week?

Don't Know	98
------------	----

44/45	

# Volunteers

ASK ONLY Q.23,24 AND 25 IF ANSWER TO Q.14 WAS SCHEDULED FOR ATTENDANCE.  
 ASK ONLY Q.26,27 AND 28 IF ANSWER TO Q.14 WAS ACTUALLY IN ATTENDANCE.

"Would you now go through yesterday's scheduled child and staffing roster and give me the following information":

23. The total number of children "scheduled for attendance" yesterday who were: under 2 yrs. old (RECORD); 2 yrs. old (RECORD); 3-6 yrs. old (RECORD); 6-10 yrs. old (RECORD); 10-14 yrs. old (RECORD)?
24. Now tell me the total number of child hours "scheduled" yesterday for children who were: under 2 yrs. (RECORD); 2 yrs. (RECORD); 3-6 yrs. (RECORD); 6-10 yrs. (RECORD); 10-14 yrs. (RECORD)?
25. What were the total number of both paid caregiver and volunteer hours that were "scheduled" yesterday to work directly with children under 2 years of age (RECORD). Next, tell me the total number of both paid caregiver and volunteer hours that were "scheduled" yesterday to work directly with children 2 yrs. and older? (RECORD IN LAST-ROW) Finally, distribute the caregiver hours, as best you can, by the following age categories: 2 yrs. (RECORD); 3-6 yrs. (RECORD); 6-10 yrs. (RECORD); 10-14 yrs. (RECORD)?

(ASK ONLY FOR THESE AGES INDICATED BY QUESTION 7 TO BE RELEVANT FOR THIS CENTER)

Age of Child	No. of Children Scheduled		
	(23)	(24)	(25)
Under 2 yrs	(23)	(24)	(25)
2 yrs	(23)	(24)	(25)
3-6 yrs	(23)	(24)	(25)
6-10 yrs	(23)	(24)	(25)
10-14	(23)	(24)	(25)

No. of Child Hours Scheduled		
(24)	(25)	(26)
(24)	(25)	(26)
(24)	(25)	(26)
(24)	(25)	(26)
(24)	(25)	(26)
(24)	(25)	(26)

Start CD 6  
 Dup. (1-5)

No. of Caregiver Hours Scheduled		
(27)	(28)	(29)
(27)	(28)	(29)
(27)	(28)	(29)
(27)	(28)	(29)
(27)	(28)	(29)
(27)	(28)	(29)
(27)	(28)	(29)

2 yrs. and older

249

250

201

END CD 5  
 79/80 -05

SKIP TO QUESTION 29



"Would you now go through yesterday's attendance child and staffing roster and give me the following information":

26. The total number of children "in attendance" yesterday who were: under 2 yrs. old (RECORD); 2 yrs. old (RECORD); 3-6 yrs. old (RECORD); 6-10 yrs. old (RECORD)? 10-14 yrs. old (RECORD)?

27. Now tell me the total number of child "attendance" hours yesterday for children who were: under 2 yrs. (RECORD) 2 yrs. (RECORD); 3-6 yrs. (RECORD); 6-10 yrs. (RECORD); 10-14 yrs. (RECORD)?

28. What were the total number of both paid caregiver and volunteer hours that were "in attendance" yesterday working directly with children under 2 years of age (RECORD).

Next, tell me the total number of both paid caregiver and volunteer hours that were "in attendance" yesterday working directly with children 2 yrs. and older?

(RECORD IN LAST ROW)  
Finally, distribute the caregiver hours, as best you can, by the following age categories: 2 yrs. (RECORD); 3-6 yrs. (RECORD); 6-10 yrs. (RECORD); 10-14 yrs. (RECORD)?

(ASK ONLY FOR THOSE AGES INDICATED BY QUESTION 7 TO BE RELEVANT FOR THIS CENTER)

-13-

202

Age of Child	No. of Children In Attendance			No. of Child Attendance Hours			No. of Caregiver Attendance Hours		
	(31)	(32)	(33)	(34)	(35)	(36)	(37)	(38)	(39)
Under 2 yrs									
2 yrs									
3-6 yrs									
6-10 yrs									
10-14 yrs									
2 yrs. and older									

251

252

29. Do you require children to have had: (READ ONE AT A TIME)

A Health Assessment?

Yes	No
1	2
1	2

69	
70	

Age-Appropriate Immunizations?

30. Which of the following meals and snacks are regularly provided to children at your center? (READ ONE AT A TIME)

Breakfast?

Morning Snack?

Lunch?

Afternoon Snack?

Yes	No
1	2
1	2
1	2
1	2

71	
72	
73	
74	

31. What hourly rate do you pay, to each of your following classroom staff: (READ ONE AT A TIME)

Start CD 7 Dup. (1-5)

Lead teachers?	\$	<sup>75/76</sup> <table border="1"><tr><td></td><td></td></tr></table>			.	<sup>77/78</sup> <table border="1"><tr><td></td><td></td></tr></table>			per hour
Teachers?	\$	<sup>4/7</sup> <table border="1"><tr><td></td><td></td></tr></table>			.	<sup>1/9</sup> <table border="1"><tr><td></td><td></td></tr></table>			per hour
Teachers-aides?	\$	<sup>18/11</sup> <table border="1"><tr><td></td><td></td></tr></table>			.	<sup>12/12</sup> <table border="1"><tr><td></td><td></td></tr></table>			per hour

32. Is the legal status of your center profit, public non-profit or private non-profit? (RECORD ONLY ONE RESPONSE)

	<table border="1"><tr><td>14</td></tr></table>	14
14		
Profit	<table border="1"><tr><td>1</td></tr></table>	1
1		
Public Non-Profit	<table border="1"><tr><td>2</td></tr></table>	2
2		
Private Non-Profit	<table border="1"><tr><td>3</td></tr></table>	3
3		
Don't Know	<table border="1"><tr><td>8</td></tr></table>	8
8		

IF NO MORE PARTS TO THIS SURVEY WILL BE ADMINISTERED, SAY: "This is the end of the interview. I appreciate your help very much."

END CD 6  
79/80 -06



PART C: TRAINING

"The next group of questions I would like to ask you relate to the training of your caregivers."

1. Do you provide orientation on specific center practices and procedures to all newly hired caregivers who work directly with children?

15  
[ ]

Yes	1
No	2

2. How much time do you, on the average, spend orienting each of these caregivers? (DO NOT READ LIST. RECORD CLOSEST RESPONSE)

16  
[ ]

- Less than 1 hour
- 1-3 hours
- 3-5 hours
- 5-10 hours
- 10-20 hours
- 20 or more hours
- Don't Know

1
2
3
4
5
6
8

3. Approximately how many of your paid and volunteer caregivers who work directly with children have at least one of the following credentials? (READ LIST)

- . . . A.A. in nursing or education
- . . . Bachelor or graduate degree in infant psychology, early childhood education, child development, elementary education or home economics
- . . . Montessori teaching credential
- . . . Child Development Associate (CDA) certification
- . . . States Early Childhood Education teaching certificate

Don't Know	98
------------	----

DO NOT ASK

19/20

[ ]	[ ]
-----	-----

PERCENT

17/18

[ ]	[ ]
-----	-----

Credentialed

4. Of the caregivers who do not have one of the above credentials, approximately how many have in the past year taken courses, seminars, or specialized in-service training related to child care?

Don't Know	'98
------------	-----

3/22

--	--

DO NOT ASK

Credentialed

23/24

--	--

PERCENT

PART D: HEALTH AND SAFETY

"The next group of questions relate to health and safety practices at your center."

1. Do you maintain health records for enrolled children?

35

[ ]

Yes	1
No	2

2. Does your center have written plans for responding to illnesses and emergencies?

36

[ ]

Yes	1
No	2

3. Does your center provide information to parents as needed concerning child health services available in the community?

37

[ ]

Yes	1
No	2

4. Does your center assist parents in obtaining health services?

38

[ ]

Yes	1
No	2

5. Has your center received information and assistance from the State Title XX agency about the availability of child health services in the community during the past year?

39

[ ]

Yes	1
No	2

250

PART E: .SOCIAL SERVICES.

"The next group of questions relate to social services practices at your center."

1. Do you provide any of the following services: (READ ONE AT A TIME)

Information and Referral for Parents?

Actively assisting parents in obtaining needed services?

Follow-up to see that parents received social services?

Yes	No
1	2
1	2
1	2

30	
31	
32	

2. Has your center received information and assistance from the State Title XX Agency regarding the availability of social services during the past year?

33

--

Yes	1
No	2



INSTRUCTIONS FOR COMPILING GROUP SIZE  
AND STAFFING INFORMATION

I. Group Size (Center Survey Instrument: Questions 16-17 or 18-19)

Tables 1 and 2 should be used for compiling information at the center level -- Table 1 for centers reimbursed on a "scheduled enrollment" basis (see Question 14) and Table 2 for centers reimbursed on an "attendance" basis. One table (either Table 1 or 2) should be prepared for each center surveyed. Tables 3, 3a, 4 and 4a should be used for profiling the group size practices of all centers in the State -- Table 3 and 3a for centers reimbursed on a "scheduled enrollment" basis and Tables 4 and 4a for centers reimbursed on an "attendance" basis.

Table 1 - Center Group Size Compilation Sheet (Scheduled Enrollment)

1. Enter the center's ID number. Example: '15001' is recorded in the illustration. The first 2 digits is the State code (Alabama) and the last 3 digits is the center code.
2. Columns A - F: Record all information from the completed questionnaire (Questions 16 and 17).
3. Column G: Record the guideline/maximum number of children appropriate for each group. If all children scheduled for a particular group comprise a single age category (e.g. groups 2 and 3 in the illustration table), simply record the appropriate maximum group size numbers using the following guidelines:

Age of child	Maximum group size (Scheduled Enrollment)
Under 2 years .....	6
2 years .....	12
3 to 6 years .....	18
6 to 10 years .....	16
10 to 14 years .....	20

If, however, a group is comprised of children which cover more than one age category (e.g. groups 1 and 4), use the following mixed-age rule for recording the appropriate maximum number to be recorded for that group:

"For mixed age groups, a day care center shall meet the group size requirements for the age of the youngest child in the group, if children in the youngest age category make up 20% or more of the group. If children in the youngest age category make up less than 20% of the group, the group size requirement for the next highest age category must be met."

In the illustration table, the recorded number in Column G for group 1 was 12. Since the youngest children in group 1 (2 year olds) made up more than 20% of that group, the guidelines for the 2 year old group were used as the determining age category. The recorded number in Column G for group 4 was 16. Since the youngest children in group 4 (6-10 year olds) made up more than 20% of that group, the guidelines for the 6-10 year old group were used as the determining age category.

NOTE: For each group, mark an identifying asterisk (\*) in the determining age category box for later computation ease. Also, transfer into that box the total number of children scheduled (from Column F) and place parenthesis around that number as shown in the illustration. Check to see that only 1 box for each group has a number in parenthesis.

4. Columns H and I: Place a check (✓) in Column H for each group where the total number of children scheduled in Column F is the same or smaller than the "guidelines/maximum" group size number in Column G. Place a check in Column I for each group where the number in Column F is larger than the number in Column G.
5. Total Number of Groups At/Above Guidelines (Row XX): Simply add the check marks in Column H.
6. Total Number of Groups Below Guidelines (Row XX): Simply add the check marks in Column I.

7. Average Group Size (Row Z): These numbers are obtained separately for each age category appropriate to a center. To calculate average group size numbers: (a) first, record the total number of determining age groups (row X) for each age category (i.e. add the numbers of asterisk boxes in each age column); (b) next, record the total number of children (row Y) associated with these determining age groups (i.e. add all the numbers in parenthesis for each age column); (c) finally, divide row Y by row X to obtain the average group size for each age category.

8. Waiverable/Non-waiverable Centers: Identify whether the center is waiverable or non-waiverable. A waiverable center is one in which not more than 20% of the children enrolled or 10 children (whichever is less) have Title XX funding (see Question 8).

Table 2 - Center Group Size Compilation Sheet (Attendance)

Follow the same instructions described for Table 1 above (using information from Questions 18 and 19), with one exception. For Column G record the appropriate maximum group size numbers using the following guidelines:

Age of child	Maximum group size (Attendance)
Under 2 years .....	6
2 years .....	12
3 to 6 years .....	16
6 to 10 years .....	14
10 to 14 years .....	18

Table 3 - State Group Size Profile Sheet (Scheduled Enrollment)

Center summary information (row XX and row Z) from Table 1 should be recorded in the appropriate columns on Table 3 (see illustration for center #15001). Use as many Table 3 profile sheets as needed to record all the "scheduled enrollment" centers surveyed in the state. Finally, record and compile information separately for waiverable and non-waiverable centers.

1. Enter the state's name.
2. Subtotal Number of Groups (Row X): For each Table 3 profile sheet, add the figures in Column A and Column B separately.

3. Subtotal Number of Centers (Row Y): Only the subtotal number of centers that are below the guidelines (Column B) should be recorded. For each Table 3 profile sheet, simply add the number of centers in Column B that do not have zero (0) entries
4. Subtotal Group Size Sum (Row Z): For each Table 3 profile sheet, add the average group size figures in Column C separately for each age category.

Table 3a - State Group Size Summary Sheet (Scheduled Enrollment)

For each column listed in this table, record the information from the appropriate column in Table 3.

1. Column A (Total Groups Below Guidelines): Add the row X subtotals from each Table 3 profile sheet for Column B and record. Next, divide that number by the total number of groups for all centers surveyed in the state and record. The total number of groups is obtained by adding the Column A and Column B subtotals. In the Table 3a illustration, 14 groups were below the guidelines, while a total of 63 groups were surveyed in the state (14 below plus 49 above):  
 $\frac{14}{63} = 22\%$
2. Column B (Total Centers Below Guidelines): Add the row Y subtotals from each Table 3 profile sheet for Column B and record. Next, divide that number by the total number of centers surveyed in the state and record. In the Table 3a illustration, 5 centers were below the guidelines, while a total of 10 centers were surveyed in the state:  $\frac{5}{10} = 50\%$
3. Column C (Average Group Size): For each age category in Column C, add the row Z subtotals from each Table 3 profile sheet to obtain the total group size sums. Next, divide that number for each age category by the total number of centers that have groups of that age (i.e. centers that have entries for those age groups), to obtain the average group size for each age category. In the Table 3a illustration, the subtotal group size for 10-14 year olds was 60, with only 3 centers having groups of that age category:  $\frac{60}{3} = 20$

Table 4 - State Group Size Profile Sheet (Attendance)

Record information from Table 2. Follow all instructions described for Table 3.

Table 4a - State Group Size Summary Sheet (Attendance)

Record information from Table 4. Follow all instructions described for Table 3a.

II. Staffing (Center Survey Instrument: Questions 23-25 or 26-28)

Tables 5 and 6 should be used for compiling information at the center level -- Table 5 for centers reimbursed on a "scheduled enrollment" basis (see Question 14) and Table 6 for centers reimbursed on an "attendance" basis. One table (either 5 or 6) should be prepared for each center surveyed. Tables 7, 7a, 8, and 8a should be used for profiling and summarizing staffing practices of all centers in the state -- Tables 7 and 7a for centers reimbursed on a "scheduled enrollment" basis and Tables 8 and 8a for centers reimbursed on an "attendance" basis.

Table 5 - Center Staffing Compilation Sheet (Scheduled Enrollment)

1. Enter the center's ID number.
2. Columns A, B and E: Record all information from the completed questionnaire (Questions 23 - 25).
3. Column C: The guidelines/staff-child ratios are already recorded.
4. Column D: Calculate the caregiver hours required by dividing the number of child hours scheduled (Column B) by the guidelines/ratio number; for each age category (Column C). Next, round-off fractional numbers using the following rule: round-up to the next whole number for the under 2 year age category; round-off to the nearest whole number for all other age categories.
5. Columns F and G: Record separately for the under 2 year age category and the 2 year and older age category. If the actual caregiver hours scheduled (Column E) exceeds the caregiver hours required (Column D), record the difference in Column F as "surplus hours" (also record a 0 in Column G). If this resultant number is lower, record the difference in Column G as "deficit hours" (also record a 0 in Column F). If Column D and Column E are the same, record a 0 in both Columns F and G. If there were no children under 2, record a (-) in both Columns F and G.
6. Column H: Calculate these actual ratios by dividing the number of child hours scheduled (Column B) by the actual caregiver hours scheduled (Column E) for each age category.

Table 6 - Center Staffing Compilation Sheet (Attendance)

Follow the same instructions for completing Table 5 above using information from Questions 26 - 28.

Table 7 - State Staffing Profile Sheet (Scheduled Enrollment)

Record center summary information from Table 5 in the appropriate columns (Columns A, B, and C) on Table 7. (See illustration for center #15001.) Use as many Table 7 profile sheets as needed to record all the "scheduled enrollment" centers surveyed in the State. Record the subtotals for each sheet used. Finally, record and compile information separately for waiverable and non-waiverable centers.

1. Enter the state's name.
2. Subtotal Number of Centers (Row X): For each Table 7 profile sheet, add the number of centers with surplus hours and the centers with deficit hours, separately for the under 2 year (Column A) and the 2 year and older (Column B) age categories, and record in row X. A center is counted as having surplus hours, if there is a numerical entry in the surplus hours box and a zero (0) entry in the deficit hours box. The reverse is true for counting a center as having deficit hours.
3. Subtotal Number of Caregiver Hours (Row Y): For each Table 7 profile sheet, add the actual number of surplus caregiver hours and the actual number of deficit caregiver hours, separately for each of the two age categories, and record in row Y.
4. Subtotal Actual Ratio Sums (Row Z): For each Table 7 profile sheet, add the individual actual ratios for each age category in Column C and record in row Z.

Table 7a - State Staffing Summary Sheet (Scheduled Enrollment)

For each column in this table, record from the corresponding columns in Table 7.

1. Enter the state's name.
2. Total Number of Centers (Row X): Add the corresponding subtotals from each Table 7 profile sheet for Columns A and B and record in row X. "Above Guidelines" relates to centers with surplus hours; "Below Guidelines" relates to centers with deficit hours; "At Guidelines" relates to the remaining centers having neither surplus nor deficit hours -- zero (0) entries in both boxes.
3. Percent of Centers (Row Y): Divide each of the row X figures by the total number of centers surveyed in the State that had numerical entries for that age category.

4. Total Number of Caregiver Hours (Row Z): Add the corresponding subtotals from each Table 7 profile sheet for Columns A and B and record in row Z -- calculations or entry is needed for the "At Guideline" subcolumns.
5. Total Sampled FTE Caregivers (Row XX): Divide the total number of caregivers hours (row Z) recorded in each of Columns A and B by 8 caregiver hours, to obtain the Full Time Equivalent (FTE) caregiver staff for the sampled centers in the state, that are above and/or below the guidelines.
6. Total State FTE Caregivers (Row YY): Divide each FTE figure in row XX by the percentage of Title XX centers sampled in the state to obtain the total FTE caregiver staff for that state. For example, if the state's sample size was 35%, then the total state figure for Column A (Above Guidelines) is  $\frac{10.0}{.35} = 28.6$  FTE staff. This figure would represent the number of FTE caregivers in the state that exceed the ratio guidelines for the under 2 year old children.
7. Average Actual Ratios (Row ZZZ): Add the corresponding actual ratio sum subtotals from each Table 7 profile sheet to obtain total actual ratio sums and record in row ZZ. Next, divide these totals for each age category by the actual number of centers that had entries for that age category and record in row ZZZ: e.g.  $\frac{107.5}{7} = 15.4$  for the 6-10 year olds.

Table 8 - State Staffing Profile Sheet (Attendance)

Record information from Table 6. Follow all instructions described for Table 7.

Table 8a - State Staffing Summary Sheet (Attendance)

Record information from Table 8. Follow all instructions described for Table 7a.

CENTER GROUP SIZE COMPILATION SHEET (SCHEDULED ENROLLMENT)

GROUPS	(1)					Total Number of Children Scheduled	(2)		
	(A)	(B)	(C)	(D)	(E)		(G)	(H)	(I)
	Age of Children						Guidelines/Maximum Group Size	At/Above Guidelines (F ≤ C)	Below Guidelines (F > C)
	Under 2 yrs	2 yrs	3-6 yrs	6-10yrs	10-14 yrs				
1		* 4 (16)	12			16	12		✓
2			* 16 (16)			16	18	✓	
3			* 18 (18)			18	18	✓	
4				* 20 (24)	4	24	16		✓
(X) No. of Determining Age Groups	0	1	2	1	0		(XX) Total No. of Groups	2	2
(Y) No. Children in Determining Age Groups		16	34	24					
(Z) Average Group Size		16	17	24					

216

Waiverable \_\_\_\_\_  
 Non-waiverable ✓

(1) Obtained directly from Survey Questionnaire (Questions 16-17)  
 (2) Compiled from Survey Responses

255\* Determining Age Category







STATE NAME: ALABAMA

TABLE 3a (ILLUSTRATION)

STATE GROUP SIZE SUMMARY SHEET (SCHEDULED ENROLLMENT)

Non-Waiverable Centers

(A)		(B)			(C)				
Total Groups Below Guidelines		Total Centers Below Guidelines			Actual Group Size				
No.	Percent	No.	Percent		Under 2 yrs	2 yrs	3-6 yrs	6-10 yrs	10-14 yrs
14	22%	5	50%	Total Group Size Sums	24	117	178	164	60
				Average Group Size	8	11.7	17.8	16.4	20.0

Waiverable Centers

(A)		(B)			(C)				
Total Groups Below Guidelines		Total Centers Below Guidelines			Actual Group Size				
No.	Percent	No.	Percent		Under 2 yrs	2 yrs	3-6 yrs	6-10 yrs	10-14 yrs
				Total Group Size Sums					
				Average Group Size					

218

269

270

CENTER STAFFING COMPILATION SHEET (SCHEDULED ENROLLMENT)

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	
Age of Child	Number of Children Scheduled	Number of Child Hours Scheduled	Guidelines/ Staff-Child Ratios	Caregiver Hours Required (Rounded-off)	Actual Caregiver Hours Scheduled	Surplus Caregiver Hours	Deficit Caregiver Hours	Actual Ratios
				(B÷C)		(D<E)	(D>E)	(B÷E)
Under 2 yrs	15	106	3	36	29	0	7	3.7
2 yrs	22	180	4	45	43			4.2
3-6 yrs	93	939	9	104	109			8.6
6-10 yrs	32	112	16	7	7			16.0
10-14 yrs	-	-	20	-	-			-
2 yrs and older	147	1,231		156	159	3	0	

219

271

275

Waiverable   
 Non-waiverable

STATE STAFFING PROFILE SHEET (SCHEDULED ENROLLMENT)

Non-Waiverable Centers						Waiverable Centers														
Center ID#	(A) Under 2yrs		(B) 2yrs and older		(C) Actual Ratios					Center ID#	(A) Under 2yrs		(B) 2yrs and older		(C) Actual Ratios					
	Surplus Caregiver Hours	Deficit Caregiver Hours	Surplus Caregiver Hours	Deficit Caregiver Hours	Under 2yrs	2yrs	3-6yrs	6-10yrs	10-14yrs		Surplus Caregiver Hours	Deficit Caregiver Hours	Surplus Caregiver Hours	Deficit Caregiver Hours	Under 2yr	2yrs	3-6yrs	6-10yrs	10-14yrs	
15001	0	7	3	0	3.7	4.2	8.6	16.0	-											
15002	20	0	16	0	2.1	4.3	8.2	10.0	18.0											
15003	0	15	0	5	4.2	4.0	9.2	-	-											
15004	30	0	0	0	1.8	4.0	9.0	-	-											
15005	25	0	0	0	1.8	4.0	9.0	16.0	20.0											
15006	0	0	5	0	3.0	3.5	7.0	11.0	-											
15007	10	0	12	0	2.4	3.2	2.8	14.5	18.0											
15008	0	0	0	0	3.0	4.0	9.0	16.0	20.0											
15009	3	0	0	0	2.9	4.0	9.0	16.0	20.0											
15010	12	0	0	2	2.3	4.0	9.2	-	-											
(X) Sub-total No. of Centers	8	2	4	2						(X) Sub-total No. of Centers										
(Y) Sub-total No. Caregiver Hours	80	22	46	6						(Y) Sub-total No. Caregiver Hours										
(Z) Sub-total Actual Ratio Sums					28.1	37.2	88.0	102.5	97.0	(Z) Sub-total Actual Ratio Sums										

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STATE NAME: ALABAMA

(ILLUSTRATION)

STATE SURVEYING SUMMARY SHEET (SCHEDULED ENROLLMENT)

Non-Waiverable Centers

	(A) Under 2yrs			(B) 2yrs and older		
	Above Gdln. (Sur. plus Hrs.)	Below Gdln. (Deficit Hours)	At Guide-lines	Above Gdln. (Sur. plus Hrs.)	Below Gdln. (Deficit Hours)	At Guide-lines
(X) Total No. of Centers	6	2	2	4	2	4
(Y) Percent of Centers	60%	20%	20%	40%	20%	40%
(Z) Total No. Caregiver Hours	80	22		46	6	
(XX) Total Sampled FTE Caregivers	10.0	2.8		5.8	0.8	
(YY) Total State FTE Caregivers	28.8	8.0		16.6	2.3	

	(C) Actual Ratios				
	Under 2yrs	2yrs	3-6yrs	6-10yrs	10-14yrs
(ZZ) Total Actual Ratio Sums	28.2	39.2	88.0	107.5	97.0
(ZZZ) Average Actual Ratios	2.8	3.9	8.8	15.4	19.4

Waiverable Centers

	(A)			(B)		
	Above Gdln. (Sur. plus Hrs.)	Below Gdln. (Deficit Hours)	At Guide-lines	Above Gdln. (Sur. plus Hrs.)	Below Gdln. (Deficit Hours)	At Guide-lines
(X) Total No. of Centers	275					
(Y) Percent of Centers						
(Z) Total No. Caregiver Hours						
(XX) Total Sampled FTE Caregivers						
(YY) Total State FTE Caregivers						

	(C) Actual Ratios				
	Under 2yrs	2yrs	3-6yrs	6-10yrs	10-14yrs
(ZZ) Total (Actual Ratio)					
(ZZZ) Average Actual Ratio					

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CENTER ID# : \_\_\_\_\_

TABLE 2

CENTER GROUP SIZE COMPILATION SHEET (ATTENDANCE)

GROUPS	(1)					Total Number of Children Attending	(G) Guidelines/ Maximum Group Size	(2)	
	(A)	(B)	(C)	(D)	(E)			(H) (√) At/Above Guidelines (F ≤ C)	(I) (√) Below Guidelines (F > C)
	Age of Children								
	Under 2 yrs	2 yrs	3-6 yrs	6-10yrs	10-14 yrs				
(X) No. of Determining Age Groups							(XX) Total No. of Groups		
(Y) No. Children in Determining Age Groups									
(Z) Average Group Size									

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Waiverable \_\_\_\_\_  
 Non-waiverable \_\_\_\_\_

(1) Obtained directly from Survey Questionnaire (Questions 18-19)  
 (2) Compiled from Survey Responses.





## STATE GROUP SIZE SUMMARY SHEET (SCHEDULED ENROLLMENT)

Non-Waiverable Centers

(A)		(B)			(C)				
Total Groups Below Guidelines		Total Centers Below Guidelines			Actual Group Size				
No.	Percent	No.	Percent		Under 2 yrs	2 yrs	3-6 yrs	6-10 yrs	10-14 yrs
				Total Group Size Sums					
				Average Group Size					

Waiverable Centers

(A)		(B)			(C)				
Total Groups Below Guidelines		Total Centers Below Guidelines			Actual Group Size				
No.	Percent	No.	Percent		Under 2 yrs	2 yrs	3-6 yrs	6-10 yrs	10-14 yrs
				Total Group Size Sums					
				Average Group Size					

225

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STATE GROUP SIZE SUMMARY SHEET (ATTENDANCE)

Non-Waiverable Centers

(A)		(B)			(C)				
Total Groups Below Guidelines		Total Centers Below Guidelines			Actual Group Size				
No.	Percent	No.	Percent		Under 2 yrs	2 yrs	3-6 yrs	6-10 yrs	10-14 yrs
				Total Group Size Sums					
				Average Group Size					

Waiverable Centers

(A)		(B)			(C)				
Total Groups Below Guidelines		Total Centers Below Guidelines			Actual Group Size				
No.	Percent	No.	Percent		Under 2 yrs	2 yrs	3-6 yrs	6-10 yrs	10-14 yrs
				Total Group Size Sums					
				Average Group Size					

227

287

288

CENTER ID# \_\_\_\_\_

TABLE 5

CENTER STAFFING COMPILATION SHEET (SCHEDULED ENROLLMENT)

	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
Age of Child	Number of Children Scheduled	Number of Child Hours Scheduled	Guidelines/ Staff-Child Ratios	(B÷C) Caregiver Hours Required (Rounded-off)	Actual Caregiver Hours Scheduled	(D<E) Surplus Caregiver Hours	(D>E) Deficit Caregiver Hours	(B≠E) Actual Ratios
Under 2 yrs			3					
2 yrs			4					
3-6 yrs			9					
6-10 yrs			16					
10-14 yrs			20					
2 yrs and older								

228

283

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Waiverable \_\_\_\_\_

Non-waiverable \_\_\_\_\_



CENTER STAFFING COMPILATION SHEET (ATTENDANCE)

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	
			(B÷C)		(D>E)	(D>E)	(B≠E)	
Age of Child	Number of Children Attending	Number of Child Attendance Hours	Guidelines/ Staff-Child Ratios	Caregiver Hours Required (Rounded-off)	Actual Caregiver Attendance Hours	Surplus Caregiver Hours	Deficit Caregiver Hours	Actual Ratios
Under 2 yrs			3					
2 yrs			4					
3-6 yrs			9					
6-10 yrs			16					
10-14 yrs			20					
2 yrs and older								

229

291

292

Waiverable \_\_\_\_\_

Non-waiverable \_\_\_\_\_





STATE NA. \_\_\_\_\_

TABLE a

STATE STAFFING SUMMARY SHEET (SCHEDULED ENROLLMENT)

Non-Waiverable Centers

	(A) Under 2yrs			(B) 2yrs and older		
	Above Gdln. Sur. plus Hrs.	Below Gdln. (Deficit Hours)	At Guide-lines	Above Gdln. Sur. plus Hrs.	Below Gdln. (Deficit Hours)	At Guide-lines
(X) Total No. of Centers						
(Y) Percent of Centers						
(Z) Total No. Caregiver Hours						
(XX) Total Sampled FTE Caregivers						
(YY) Total State FTE Caregivers						

	(C) Actual Ratios				
	Under 2yrs	2yrs	3-6yrs	6-10yrs	10-14yrs
(ZZ) Total Actual Ratio Sums					
(ZZZ) Average Actual Ratios					

Waiverable Centers

	(A)			(B)		
	Above Gdln. Sur. plus Hrs.	Below Gdln. (Deficit Hours)	At Guide-lines	Above Gdln. Sur. plus Hrs.	Below Gdln. (Deficit Hours)	At Guide-lines
(X) Total No. of Centers						
(Y) Percent of Centers						
(Z) Total No. Caregiver Hours						
(XX) Total Sampled FTE Caregivers						
(YY) Total State FTE Caregivers						

	(C) Actual Ratios				
	Under 2yrs	2yrs	3-6yrs	6-10yrs	10-14yrs
(ZZ) Total Actual Ratio					
(ZZZ) Average Actual Ratio					





STATE STAFFING SUMMARY SHEET (ATTENDANCE)

Non-Waiverable Centers

	(A) Under 2yrs			(B) 2yrs and older		
	Above Gdln. Sur plus Hrs.	Below Gdln. (Deficit Hours)	At Guide-lines	Above Gdln. Sur plus Hrs.	Below Gdln. (Deficit Hours)	At Guide-lines
(X) Total No. of Centers						
(Y) Percent of Centers						
(Z) Total No. Caregiver Hours						
(XX) Total Sampled FTE Caregivers						
(YY) Total State FTE Caregivers						

	(C) Actual Ratios				
	Under 2yrs	2yrs	3-6yrs	6-10yrs	10-14yrs
(ZZ) Total Actual Ratio Sums					
(ZZZ) Average Actual Ratios					

Waiverable Centers

	(A)			(B)		
	Above Gdln. (Sur plus Hrs.)	Below Gdln. (Deficit Hours)	At Guide-lines	Above Gdln. (Sur plus Hrs.)	Below Gdln. (Deficit Hours)	At Guide-lines
(X) Total No. of Centers						
(Y) Percent of Centers						
(Z) Total No. Caregiver Hours						
(XX) Total Sampled FTE Caregivers						
(YY) Total State FTE Caregivers						

	(C) Actual Ratios				
	Under 2yrs	2yrs	3-6yrs	6-10yrs	10-14yrs
(ZZ) Total (Actual Ratio)					
(ZZZ) Average Actual Ratio					

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