



Oklahoma Child Care
RESOURCE & REFERRAL ASSOCIATION, INC.

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"The Foundation for Success: Strengthening the Child Care and Development Block Grant Program"
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Good morning. I want to thank the Chairman of the House Education & the Workforce Committee, Representative Kline, the Chairman of this subcommittee, Representative Rokita and the Ranking Member of the Subcommittee, Representative McCarthy, for inviting me to testify.

As Executive Director of the Oklahoma Child Care Resource & Referral Association, I am honored to be here today and I look forward to sharing my experiences and responding to any questions that you might have. My testimony will focus on the role Child Care Resource & Referral plays in Oklahoma (and across the nation) in supporting the importance of parent choice and in providing consumer education information so parents can make informed choices in selecting care for their children.

What is the role of Child Care Resource & Referral agencies? What challenges face parents as they look for and select child care? To answer those questions, I want to start with an overview of child care generally throughout the United States as well as child care resource and referral activities. Following that, I will focus on what Oklahoma has done to assist parents and providers to ensure that child care is safe and promotes a child's healthy development.

Child Care throughout the Country

First, child care is a way of life today for the majority of families. Times have changed over the years and more mothers are working today than 24 years ago when the Child Care and Development Block Grant (CCDBG) was first enacted. There are nearly 11 million children under age 5 in some type of child care setting an average of 36 hours every week. The average cost of care varies by state and ranges from \$4,863 per year for center-based care for an infant in Mississippi to \$16,430 per year for an infant in Massachusetts. In Oklahoma, center-based infant care costs about \$7,480 per year, which is certainly not as high as Massachusetts. As a percentage of state median income, however, it is hard for the majority of families to afford child care. One infant in child care in Oklahoma costs a family about 11 percent of state median income for married couples and 36 percent for single mother families.

Throughout the country, there are 107,286 licensed child care centers and 134,920 licensed family child care homes. Together, these programs employ about 2.3 million paid child care providers nationwide. Generally, these caregivers are young and enter their jobs with little training and education. On average, they earn slightly more than \$10 per hour. In 17 states, staff in a child care center classroom do not need a high school diploma or GED. Many more states do not require a high school degree for family child care home providers. The cost is compounded for families with more than one child.

Health and safety protections for children in child care and training requirements for child care providers vary by state. The accountability for children's safety and the expenditure of public dollars (which include inspections and monitoring oversight) are different in each state. I understand and support the need for state flexibility; however, at the same time, there needs to be some minimum core health and safety protections for all children in child care in our nation.

Parent Expectations versus State Policies

Over the past decade, there have been a number of parent polls with regard to child care. We continually look for every way to improve services to parents and better understand how we can best assist them.

National polling and the focus groups we have held with Child Care Aware of America have found that parents have very clear expectations about what they want from their child care provider and what they expect from the government when it comes to protecting their children in child care. Parents think that a child care license is some type of gold standard, in short, the state's seal of approval in order to offer child care. Parents assume a license means that adults providing child care have had a background check and training specific to child care. Parents believe there are required health and safety protections for their children, and some expert does inspections to ensure compliance with laws and policies for child care. Parents also assume that all child care settings are monitored when, in many states, large numbers of providers are legally exempt from oversight. The reality is that there is a large gap between parent expectations and state policies.

The Research on State Child Care Licensing Policies

Since 2005, Child Care Aware of America has conducted 7 comprehensive reviews of state licensing policies. Oklahoma has ranked among the top 5 states for centers and the top 2 states for family child care homes during this time. The research also shows:

Health & Safety Requirements:

- Only 16 states, including Oklahoma, address each of the 10 health and safety requirements recommended by pediatric experts to protect children in child care centers.
- Only 15 states, including Oklahoma, address each of the 10 health and safety requirements recommended by pediatric experts to protect children in family child care homes.

(Pediatric experts recommend a minimum of the following for child health protection: hand-washing, nutritious meals and snacks, immunizations, exclusion of ill children, following universal health precautions (for bodily fluids), medication administration, access to toxic substances, sanitation, weekend/evening care, and incident reporting. Pediatric experts recommend a minimum of the following for child safety protection: placing infants to sleep on their backs, appropriate discipline/child guidance, electrical hazards, water safety, fire drills, outdoor playground surfaces, emergency plans, supervision, transportation guidelines, and firearm access policies).

Background Checks:

- Only 12 states require a comprehensive check for staff working in centers.
- For family child care home providers, only 11 states require a comprehensive check.
- State auditors conducting a cross-match in 4 states found 267 sex offenders in child care programs. (Illinois found 90 matches; Kentucky found 30, Massachusetts found 119 and Washington found 28).

A comprehensive background check for child care providers helps ensure that children are safe in child care. A comprehensive check includes: a fingerprint check against state and federal records, a check of the child abuse registry and a check of the sex offender registry.

Training:

- For child care centers, 43 states require an orientation training for new staff. 38 states require training in child abuse prevention and reporting. 34 states require training in safe sleep practices. 13 states require training in the dangers of shaken baby syndrome. 9 states require CPR training for all staff.
- For family child care homes, 22 states require training in child abuse prevention and reporting. 33 states require training in basic health and safety. 36 states require CPR training. Some states have no topics that are required in initial training before working with children.

Research clearly shows that training and education of the child care workforce is the single largest way to improve the quality of care, which includes measures to promote child safety.

Inspections

- 10 states do not inspect child care centers at least once a year. For example, California inspects child care programs once every five years. Oklahoma requires 3 inspections per year.
- 17 states do not inspect family child care homes at least once a year. For example, California and Montana inspect family child care homes once every 5 years. Michigan inspects family child care homes once every 10 years. Oklahoma requires 3 inspections per year.
- About half the states, including Oklahoma, post child care facility inspection reports on the internet, which enable parents to make informed choices.

Regular monitoring promotes child safety as well as accountability for the expenditure of public dollars.

Child Care Resource & Referral Services

Assisting Parents. In too many communities today, child care is hard for parents to find, hard to afford, and too often of questionable quality. For low income parents, the task is even more difficult. There are more than 600 Child Care Resource and Referral agencies throughout the country, serving nearly every zip code, assisting parents in finding child care. They help make a stressful and chaotic process calmer and more understandable and help parents make better informed choices about child care.

In Oklahoma, there are 193,000 children under age 6 with working parents and another 238,000 children between the ages of 6 and 12 with working parents. About 28 percent of our children under age 6 live in poverty, about 86,000 children. About 31 percent of our children, nearly 100,000 live in working families below 200 percent of the poverty level.

In Oklahoma, my agency, the Oklahoma Child Care Resource & Referral Association, is a private non-profit corporation that contracts with the Oklahoma Department of Human Services to guide and administer our statewide network of resource and referral agencies. Child Care Resource and Referral in the state has worked with parents for more than 30 years. We have eight agencies that serve families in all 77 counties to offer consumer education and referrals to help families make better informed child care choices. We **do not** make recommendations about child care programs to any family. However, we provide them with information so that they can make an informed decision that meets the needs of their family.

Families can contact us by phone, search for child care on our web site, read our consumer education materials (many of which are provided in English and Spanish), or new last year – use our Find Child Care

app through their smart phone. Our services to assist families are free because of the funding available from the Child Care and Development Block Grant, (CCDBG), to support quality related activities, including child care resource and referral services.

We receive many different types of parent requests. Over 50 percent of parents contacting us are looking for infant or toddler care. Nearly 88 percent of parents are looking for full-time care. An increasing number of parents contacting us are looking for non-traditional hour care – about 38 percent of parents last year sought care available at night or on the weekends. This is a 5 percent increase over the last two years and may reflect a shift in the economy and the types of jobs that parents are finding.

We also have a Hispanic Services Project, which provides referrals in Spanish for parents across the state. Bilingual referral specialists are employed in both Oklahoma City and Tulsa to cover metropolitan areas and referral services for the rural areas are provided by a state coordinator. The Hispanic Services project assists both parents and providers.

Oklahoma has had a quality rating and improvement system for child care since 1998, which is called Reaching for the Stars. It is a 3 Star, four level system, which seeks to provide parents with a better way to understand the quality of child care settings because the state has set criteria for each level. All child care programs accepting subsidy payments in Oklahoma are required to participate in the star rating system. Providers move up levels as they exceed licensing standards which is the baseline. Facilities that meet basic licensing standards are rated 1 star. Children whose care is paid for with subsidy must be in at least 1 star plus care. There are a few exceptions, but today, 94.6 percent of the children in Oklahoma whose care is paid for with a CCDBG subsidy are in 2 or 3 star care. Subsidy payments are tiered to align with star levels.

We have found this does not restrict parent choice. Instead, it offers parents choices among quality providers and at the same time, ensures that there is accountability in the expenditure of public funds so that CCDBG is not a blank check with no protections for children or oversight.

Across the country, the most recent federal data shows that 1.5 million children on average every month are in CCDBG funded child care settings. About 17 percent (256,241) are in unlicensed care. In fact, in 11 states, 30 percent or more of the children whose care is subsidized by CCDBG money are in unlicensed care. Unlicensed is not necessarily illegal care, as the category includes care that is legally not required to get a license. For example, in 8 states, family child care home providers are not required to obtain a license until at least six children are in the home.

With regard to unlicensed care, very little is known about the settings for which the federal government provides support. In particular, such care typically means no comprehensive background checks, no minimum health and safety protections for children, no child care provider training, and no facility inspections. In some cases, there is “self-certification,” which means no external accountability, not a policy I would recommend. Thankfully, Oklahoma has taken a strong stance on accountability to protect children. In Oklahoma, all facilities, both centers and homes, must be licensed. There are a few exceptions to the licensing law, recognized as license-exempt. This includes care provided by a relative of the child or by a nanny or housekeeper in the child’s own home; care in a setting that operates less than 15 hours per week; care in a setting that takes children who attend on a drop-in basis while parents are nearby in the same building; and care by informal arrangements to care for children once in a while.

The parents that contact us have similar types of questions. They want to know where the “good” places are. They want to know the places with openings near their work or neighborhood. They want to know how much child care will cost. They want to know what questions to ask and what they should look for

in a good program. We do not make recommendations, but we do provide a list to parents that shows the star level under our quality rating system. Parents can make their own choices. No one in our child care resource and referral network has ever heard a parent say- can you give me a list of the places at the bottom of the Reaching for the Stars list? Quality and cost are parents' two top concerns. One of the most important aspects of our work is our consumer education work with parents. Our post-service evaluations overwhelmingly show that parents are thrilled with the assistance we offer them. Finding child care is a stressful time for parents and our services help to alleviate that stress.

Assisting Child Care Providers. In Oklahoma, there are 1,709 licensed child care centers and 2,372 family child care homes. Our agencies work with providers every day to offer safe settings that promote healthy child development in an age appropriate manner. We offer training, technical assistance and consultation to providers. Training is provided in both child-related and business requirements. From guiding people who are thinking about launching a child care business, to assisting providers to offer the best quality of care for children, we offer many services. In FY2012, our agencies responded to 7,682 requests from providers for technical assistance and administered nearly 1,500 hours of formal training.

It is important for the Subcommittee to understand the different services offered to providers. Training is related to strengthening the quality of the workforce – the competence and skills of the workforce. Technical assistance has many forms, but one of the most important is to ensure that those who have taken a training can translate that training to effective practice. What we know from the research is that child to staff interaction is one of the most important factors in improving child outcomes. Just because someone has attended a training, does not necessarily mean that they can effectively implement what they have learned.

Our agencies offer technical assistance or, TA, on the phone and on-site. One area of TA that I urge the committee to consider is business related technical assistance. There has been so much focus on child development, which we can all agree is extremely important, we often fail to recognize that almost all child care programs are a small business. In 2012, we commissioned a study, "The Economic Role of Oklahoma's Child Care Industry," which found that the state's 4,100 child care programs represented a network of small businesses, many of which are women owned and operated, that generate nearly \$500 million in revenue and provide employment for about 20,500 workers with earnings of \$290 million annually. This is on par with other sectors in Oklahoma such as the state's printing and ready-mix concrete manufacturing industries and employs about the same number of workers as the home health care, legal, and accounting industries statewide.

Child care is a business. Business related technical assistance can assist child care providers with operating more efficiently and effectively. When you think about quality programs, please think as well, about the ability of child care programs not just to offer trained and competent staff, but also to use sound fiscal and management practices, which are the foundation to quality programs and essential to their sustainability.

Consultation is similar to TA, but can best be described as assisting programs to better meet the needs of children. For example, helping the director and staff better meet the needs of a disabled child or design effective strategies for a child who exhibits challenging behaviors.

Data. Our agency is the data hub for child care information in Oklahoma. From the location of centers and homes, to the cost of programs by the age level of the child, to supply and demand information, our agency operates a database that is continually updated and tapped to provide policymakers and others within the community with the information they need to address the needs of young children or better target services based on community needs and available resources.

The Children Who Helped Shape Oklahoma's Child Care Policies

Oklahoma does not have a perfect system, but rather, we have put a stake in the ground for safety, accountability, and quality. We look every day to figure out how we can continuously improve in all that we do. I would be remiss if I didn't share with you the stories of two boys in Oklahoma whose tragedies led to the strengthening of our child care system.

In May of 2007, two-year-old Joshua Minton died at Noah's Ark family child care home in Tulsa. The child care owner admitted to using masking tape to tape up his hands and mouth because he would not stop whining at nap time. She is serving a life sentence today for first degree murder. While horrific for the family, this story is critical for your consideration. The issue at hand was that years of inspection reports cited repeated violations for inadequate supervision, inoperable smoke detectors, citations for physical and verbal abuse to children, incomplete child records, leaving children in a running van unattended, non-compliance for fire and tornado drills, violations related to access to hazardous chemicals (bleach), lack of background checks for assisting caregivers, and many other things (some of which were related to hitting and spanking with wooden objects) were not adequately addressed. At several points, state licensing staff requested that the provider voluntarily close her family child care home but did not move to close the facility. The provider refused. She said that she needed the income and that the working families she served, needed her. On April 13, 2007, in a response to another request by the state licensing office to cease operating a child care program, she told the licensing staff she would enroll in anger management classes. On May 17, Joshua Minton died.

It's heart-wrenching that it took a tragedy like the death of a toddler for the state to revise its program closure policies and tighten up state background check requirements and inspection enforcement activities. The law enacted after Joshua Minton's death also included the creation of a new child abuse registry check for child care providers with substantiated child abuse cases.

The second boy, whose story I want to share with the subcommittee, did not die. Demarion Pittman, a 3 year-old boy, suffered heat stroke and extensive brain damage after being left in a stifling hot van by an employee of an uninsured child care program in August of 2007. He was in a coma for 2 months and was left unable to walk or talk and his family has already faced millions of dollars in medical costs. In 2008, state legislation was enacted to require all licensed child care programs to carry liability insurance. The measure also requires programs that are unable to obtain insurance to inform parents that they have no liability coverage.

Most states do not require child care programs (both center-based and family child care homes) to purchase liability insurance. Of the states that do, many are in response to tragedies.

Conclusion:

In conclusion, it's been 17 years since the Child Care and Development Block Grant was last reauthorized. We now have the benefit of research data that demonstrates clearly the disparity among state policies. Oklahoma's policies are not perfect, but we have laid out a framework for safety, accountability, and quality. I believe it's time to provide some minimum protections for all our children across this great country and to ensure that public dollars are spent in an accountable way. I urge the Subcommittee to give every consideration possible to:

- **Improve safety protections for children.** Require comprehensive background checks for child care providers and volunteers who care for unrelated children. Set minimum health and safety protections for all children in child care.
- **Strengthen the Child Care Workforce.** Require those who work in child care to have at least 30 hours of pre-service training and 24 hours of annual training. These are the recommendations from pediatric experts (see the National Resource Center for Health and Safety, Caring for Our Children recommendations).
- **Enhance Monitoring.** Insure that all child care programs are subject to inspection prior to licensure and at least once annually, especially when CCDBG dollars are used to pay for care.
- **Improve Quality.** Increase the quality set-aside for activities related to improving the quality of child care.
- **Subsidy Rates.** Child care is expensive. It is hard for most families to afford; it is not merely a challenge for families in poverty. Consider a study by the National Academy of Sciences to review the cost of child care and recommend ways to design a better system.

Thank you. I would like to submit the following documents for the hearing record:

- (1) A brief summary of state requirements on health and safety
- (2) The Economic Role of Oklahoma's Child Care Industry Report
- (3) State Summary 2012, Oklahoma Child Care & Early Education Portfolio
- (4) A brief summary of child tragedies in child care
- (5) The Oklahoma Commission on Children & Youth Office of Juvenile System Oversight Report (the investigation into Joshua Minton's death)
- (6) A brief summary of Child Care Resource & Referral services throughout the United States