Oregon’s Childhood Care and Education System

A Strategic Planning Guide

Prepared for:

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Preface

In 1993, the Oregon Legislature set a bold new direction for Oregon’s human services. In addition to providing vital safety net and intervention services at the state level, the legislators decided Oregon’s state government should do more to empower its communities to support children and their families.

Recognizing the need for a system where government, service providers, communities and families work together, the legislators created a framework for change through House Bill 2004. Under this legislation, the Oregon Commission on Children and Families (OCCF) was established to accomplish four primary goals to support wellness among all of Oregon’s children, youth, and families:

- Support healthy communities,
- Mobilize and support planning and decision making at the local level,
- Build collaborative partnerships among community groups, service providers, non-profits, government and individuals, and
- Develop policies and standards of accountability including performance measures, outcomes and benchmarks.

House Bill 2004 also created a commission on children and families in every Oregon county, with the requirement that a majority of members and a chair be lay citizens. Each county commission develops a comprehensive plan to achieve the goal of wellness for that community, with specific strategies aimed at the county’s areas of concern.

Together with the county commissions, OCCF has implemented a statewide Systems Change Initiative to create a responsive, accessible, comprehensive, and sustainable continuum of supports that promotes wellness among ALL of Oregon’s children, youth, and families. Achieving these supports depends on an integrated system with three essential components in place and running smoothly:

1. **Comprehensive planning** develops community goals and strategies through a collaborative process. The perspectives of all those who support children and families are incorporated into the process as collaborators identify community assets and needs, set goals, select strategies and plan for accountability.
2. **Community implementation** puts planning into action by convening, connecting and collaborating with important and diverse partners who are essential to the health and wellness of children, families, and communities.

3. **An accountability and performance measurement system** traces the efforts and successes of community planning and implementation. Decision-making for implementation and for future community planning is grounded in the information that is provided by performance measurement.

In 1997, the Oregon Commission on Children and Families contracted with the Family Policy Program at Oregon State University, the Oregon Center for Career Development in Childhood Care and Education, and the Oregon School Age Care, Enrichment and Recreation Project to develop a planning guide for using the Child Care and Development Fund allocation to increase quality childhood care and education.

This strategic planning guide is the result of that effort. Its purpose is to provide Oregon’s 36 county Commissions on Children and Families and other interested individuals with information and strategies to achieve a quality childhood care and education system across the state.
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Oregon’s Childhood Care & Education System

A Strategic Planning Guide

This strategic planning guide provides Oregon’s 36 county Commissions on Children and Families and other interested organizations and individuals with information and strategies to achieve a quality childhood care and education system across the state.

Designed to accompany the Oregon Commission on Children and Families (OCCF) publication, Building Results: From Wellness Goals to Positive Outcomes for Oregon’s Children, Youth, and Families, the planning guide is organized around seven components of a quality childhood care and education system:

- Community mobilization
- Continuum of childhood care and education choices
- Best practices and quality assurance mechanisms
- Professionalization and workforce development
- Adequate financing and resources
- Employer involvement and commitment
- Consumer education and public engagement

After an introduction that describes a quality childhood care and education system, the planning guide focuses on each of the seven components. For each, background information, goals and intended outcomes, suggestions for mapping assets and identifying needs, and strategies to reach intended outcomes are described. A table of linkages shows how each component relates to all others.

Funding resources are described in a final section. The appendices provide additional information that planners will find useful.

By systematically considering childhood care and education from a system perspective, the planning guide offers a way for communities to build a quality system that well serves children and families throughout Oregon.
A Quality Childhood Care and Education System

A quality childhood care and education system is a critical part of the continuum of supports that OCCF and the county commissions seek to achieve. Childhood care and education refers to:

- Programs and services for families and children from the prenatal period through age eight, and
- Programs for school age children and youth up to age 12 during their out-of-school hours.

The Quality 2000 Initiative

In 1992, a large group of childhood care and education practitioners, parents, policymakers, researchers and other advocates came together through the national Quality 2000 Initiative to develop an integrated, action approach to solving the quality crisis in early care and education. A full report of the initiative, Not by Chance: Creating an Early Care and Education System for America’s Children, was released in 1997.¹

The Not By Chance report argues that only when there is a concerted effort to build an infrastructure of indirect supports and services will quality programs proliferate and be accessible to all families who may choose to use them. Some of these supports and services may not be directly apparent, but the system cannot operate effectively without them. For example:

- Training and education are necessary to ensure an adequate supply of qualified staff.
- Parents benefit from information and support so they can make informed decisions when choosing programs for their children.
- An effective monitoring system can ensure that programs meet quality standards.²

These and other elements of the infrastructure support programs and create a quality system of childhood care and education.

Seven components

With this framework in mind, the planning guide identifies seven essential components of a quality childhood care and education system (see Figure 1). These components are intertwined, influencing each other either directly or indirectly.
The seven components, which include both programs and infrastructure, are as follows:

1. **Community mobilization**: Includes community commitment, planning, coordination, collaboration, action, implementation, and accountability to build and sustain a quality childhood care and education system.

2. **Continuum of childhood care and education choices**: Includes availability and accessibility of a diverse range of options that meet family needs and preferences for childhood care and education services.

3. **Best practices and quality assurance mechanisms**: Provides assurance that childhood care and education programs promote children’s safety, health and development with an effective system of state regulations and voluntary commitment to best practices and quality standards.

4. **Professionalization and workforce development**: Includes professional development of childhood care and education practitioners through a coordinated system of training in core knowledge, certification of practitioners through the Professional Development Registry, and mentoring and organizational support.
5. **Adequate financing and resources:** Includes recognizing and financing the full cost of quality programming, including adequate compensation for practitioners and equity in the accessibility of quality programs.

6. **Employer involvement and commitment:** Includes employer involvement in supporting and assisting employees to access quality dependent care, making the workplace more family friendly, and participating in community mobilization.

7. **Consumer education and public engagement:** Assists families with information and support so they can make informed decisions when choosing programs for their children; educates policymakers and legislators to make informed decisions; and educates and engages the public in the effort.

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**The Vision for Childhood Care and Education**

The Quality 2000 Initiative envisions a quality early care and education system for America’s young children where:

- High-quality early care and education programs are available and accessible to all children whose parents choose to enroll them.

- Services are supported by a well-funded, coherent and coordinated infrastructure.

- Linkages are established to community services such as health and family support that advance children’s healthy development.

In this system, chance is no longer a factor. Instead, “intentional, well-planned strategies” are adopted by communities and institutions to assure young children’s healthy development and learning.

Although the Quality 2000 Initiative focuses on young children, its vision and strategies are relevant to school age children as well. These children have as many needs for quality care as younger children do.

In 1995, an *Oregon Vision for School Age Care, Enrichment & Recreation* was adopted by the Child Care Division and the Oregon Commission for Children and Families. The *Oregon Vision* and its *Guiding Principles* (included in Appendix E) were crafted by child care providers, licensing staff, recreation specialists, community educators, parents, child care resource and...
referral staff, Extension 4-H youth agents, youth development specialists and employers from across the state.

The *Oregon Vision for School Age Care, Enrichment & Recreation* addresses positive youth development opportunities for children and youth during their out-of-school time:

> Professionals working with school age children and youth in Oregon support a vision of safe and healthy communities that value their young people by providing a variety of quality programs which:

- foster positive youth development;
- provide a safe and welcoming environment;
- meet the diverse needs of all children, youth and families;
- are accessible and affordable to everyone;
- are staffed by caring, well-trained, appropriately compensated professionals; and
- are well-supported by a broad base of resources.

Despite their different origins, there is a remarkable degree of consistency in the visions expressed by the *Quality 2000 Initiative* and the *Oregon Vision for School Age Care, Enrichment and Recreation*. Both consider quality programming and the infrastructure that supports quality programming. Both recognize the essential role parents and families play in the decision-making process. Finally, both recognize the critical importance of a community that values its children, youth, and families.

Translating these visions into reality for Oregon’s children and families will take commitment and hard work. This planning guide is dedicated to helping planners organize and coordinate the effort.

**Overview of the Issues**

Achieving quality childhood care and education programs is possible. In a 1998 national study of over 400 Head-Start programs, most were found to be of good or higher quality as measured by the Early Childhood Environment Rating Scales (ECERS).\(^4\) Nevertheless, data from a wide variety of sources suggest that across the country the quality of many childhood care and education programs is considerably below generally recognized standards.

For example, the 1995 Cost, Quality & Child Outcomes Study Team (CQCO) reported the following sobering statistics about quality in the nation’s child care centers:
86% of the centers in four states were rated mediocre to poor in quality on a variety of indicators; 40% of the infant-toddler rooms were not only mediocre to poor but were actually endangering the children’s health and safety.\(^5\)

Similar statistics characterize the quality of care in family child care homes. A multi-state study conducted by the Families and Work Institute in 1994 found that 89% of the homes provided inadequate to barely adequate care, based on a number of measures ranging from interactions with the caregiver to learning activities. Only 9% of the homes were rated as providing care that enhanced children’s development.\(^6\)

The educational credentials of childhood care and education practitioners are often inadequate relative to the skills required. The CQCO Study found that only 36% of the center teachers had a bachelor’s degree or higher. Further, staff turnover was high, ranging from 25% to 50% each year. Quality is eroded when children have to constantly adapt to new caregivers.\(^7\)

Compounding the issue is affordability. Most families must bear the cost of childhood care and education through out-of-pocket expenditures. While cost alone is not an indicator of quality, higher quality programs with trained staff tend to be more expensive than other programs.

How much families are able to pay, therefore, has a direct impact on their ability to access the higher quality programs that do exist. The result has been the evolution of a two-tiered system:

\[\text{a higher quality one for both affluent families and the poor, who get public support for child care, and a lower quality one for middle and lower income working families, who cannot pay for high quality care.}\] \(^8\)

A third issue in what has been called the “trilemma” of childhood care and education, relates to supply. In many communities, the number of quality care choices is inadequate to meet the demand, particularly care for infants and toddlers, and children with special needs. Supply issues are more likely to impact low-income families who may not be able to find care they can afford.
Herein lies the crux of the matter. Economically disadvantaged families cannot afford high quality childhood care and education and there are not enough slots in publicly-financed programs to serve all needy families, especially those with infants and toddlers.

What is Quality Childhood Care and Education?

Quality childhood care and education programs create a setting where children and youth thrive. Adults are warm and nurturing. They are sensitive, responsive and supportive to each child and family. Children and youth experience continuity in caregiver relationships over time. Family involvement is encouraged and family input is incorporated into program design and operation.

Within quality programs, children and youth have opportunities to learn social skills and appreciate human differences by interacting with others in a supportive setting. Environments are safe and healthy with a stimulating variety of learning materials, toys and games.

Adults encourage developmental advances and use positive guidance approaches. Learning experiences pique children’s interests and are appropriate to their ages and developmental level.

Quality opportunities for children and youth during their out-of-school hours reflect a combination of care, enrichment and recreation activities. Children, youth and families have a significant voice in planning and carrying out these programs.

**Structural elements.** Three key elements have been used traditionally to characterize quality programs: **group size**, **child-adult ratios**, and **caregiver qualifications**. None of these characteristics alone has been shown to be a predictor of quality care. However, taken together along with aspects of the work environment, these elements form the structural basis for quality childhood care and education.

Recently, the importance of the organizational climate has been recognized as a key element in quality. Factors such as opportunities for professional growth and adequate compensation affect the way practitioners feel about their work and, consequently, how they interact with children and families.
A 1997 position paper from the National Association for the Education of Young Children (NAEYC) defines quality programming as:

- small groups of children with a sufficient number of adults to provide sensitive, responsive caregiving;
- higher levels of general education and specialized preparation for caregivers or teachers as well as program administrators; and
- higher rates of compensation and lower rates of turnover for program personnel.

Other factors may also be important. Quality can be reflected by the sensitivity with which children and families from diverse cultures and ethnic backgrounds are served. Another characteristic of a quality setting relates to the selective, thoughtful use of electronic technologies, such as television and computer programs.

Finally, a variety of approaches to organizing staff and children can result in quality programs. These include balancing well-trained staff with different child-adult ratios, organizing children into mixed-age groups, and deploying staff on an “as-needed basis” throughout the program and throughout the day.

**Why Does Quality Matter?**

Quality childhood care and education programs foster healthy growth and development among children and youth. Research findings show that:

*Quality care and education programs offer this good start in life by helping children engage in relatively complex play, socialize comfortably with adults and other children, and develop important physical, language, and cognitive skills.*

New findings on brain development underscore the importance of children’s early experiences. High quality programs promote language, literacy, reasoning and problem-solving skills that are associated with increased cognitive abilities, positive classroom learning behavior, and long term school success. Children in higher quality programs tend to be more cooperative, have warmer relationships with their teachers, and have more advanced social skills.

The quality of childhood care and education programs is particularly important for children living in homes with few
economic advantages. For these children, who are at greater risk for poor outcomes, quality programs can supply elements of support and intellectual opportunities that may be missing at home.\textsuperscript{14}

**Using the Planning Guide**

This guide is designed to support comprehensive community planning for quality in Oregon’s childhood care and education system. The guide will assist communities to:

- map community assets and identify needs,
- set goals and identify intended outcomes,
- select appropriate strategies, and
- plan for accountability and performance measurement.

The guide discusses the system in terms of the seven inter-related components. Planners may find it useful to review the entire guide before focusing on specific components.

Each component is described in detail, beginning with an introductory section that provides information and an overview of the issues. Suggestions are offered for mapping community assets and needs for each area.

**Goal and outcomes**

To assist with accountability, goals and intended outcomes have been identified for each component. Many of the suggested outcomes are related to wellness goals and benchmarks through research linkages described in OCCF’s publication, *Building Results I*.\textsuperscript{15} In addition, these outcomes are numbered as they appear on the OCCF database to assist planners in reporting progress.

Outcomes identified under each component are *not meant to be inclusive* of all the outcomes that communities may seek. Note that an “other” category allows communities to identify outcomes that may be specific to a given strategy. Suggested “other” outcomes are listed for each component.

**Selecting strategies**

The planning guide identifies a series of strategies for each component that can be used to reach intended outcomes. In many cases, these strategies are ones that have worked for others in building a quality childhood care and education system.

Keep in mind that there are many ways to accomplish change. What works in one community may not be appropriate for another. The selection of strategies should be based on a prioritization and consensus of what is most needed for each community.
Figure 3
Building A Quality Childhood and Education System

Overall Goal:
QUALITY CHILDHOOD CARE AND EDUCATION SYSTEM

COMPONENT GOAL

So that

INTENDED OUTCOME

So that

SAMPLE STRATEGY


SYSTEM COMPONENT

Community Mobilization
Continuum of Childhood Care & Education Choices
Best Practices & Quality Assurance Mechanisms
Professionalization and Workforce Development
Adequate Financing & Resources
Employer Involvement & Commitment
Consumer Education & Public Engagement

COMMUNITY

ASSURE AVAILABILITY AND ACCESSIBILITY

INCREASE HIGH QUALITY SETTINGS

PROFESSIONALIZE THE WORKFORCE

ASSURE FINANCING AND RESOURCES

INCREASE EMPLOYER EFFORTS

INCREASE AWARENESS OF QUALITY CARE & EDUCATION

Increase community participation in the effort
Increase availability of quality infant and toddler care
Increase quality for family child care homes
Increase enrollment in the Professional Development Registry
Improve adequacy of facilities and equipment
Increase flexible personnel policies
Increase knowledge of quality childhood care and education

Convene a summit to bring key leaders together
Promote First By Five Infant & Toddler Training Program
Recognize programs who meet quality standards
Publicize the Professional Development Registry
Develop pending projects to improve & expand facilities
Educate employers about work/life issues
Promote regular, ongoing media involvement

INCREASE FLEXIBILITY & RESOURCES

INCREASE COMMUNITY PARTICIPATION IN THE EFFORT

INCREASE AWARENESS OF QUALITY CARE & EDUCATION

INCREASE ENROLLMENT IN THE PROFESSIONAL DEVELOPMENT REGISTRY

INCREASE QUALITY FOR FAMILY CHILD CARE HOMES

INCREASE AVAILABILITY OF QUALITY INFANT AND TODDLER CARE

INCREASE COMMUNITY PARTICIPATION IN THE EFFORT

INCREASE AWARENESS OF QUALITY CARE & EDUCATION

OVERALL GOAL:
QUICK CHILDHOOD CARE AND EDUCATION SYSTEM

Communities of Childhood Care & Education Choices
Best Practices and Quality Assurance Mechanisms
Professionalization and Workforce Development
Adequate Financing and Resources
Employer Involvement and Commitment
Consumer Education and Public Engagement

Oregon’s Childhood Care and Education System: A Strategic Planning Guide

10
Creating a logic model

A logic model is a graphic representation of the “theory of change” for a program. Logic models show how strategies will lead to interim outcomes and eventually, to long-term goals. Detailing the “chain” of these relationships is useful both for planning and accountability.16

A global logic model for building a quality childhood care and education system is shown in Figure 3. Sample strategies have been selected for each of the seven components and a measurable outcome has been identified for each strategy. However, the global model omits both the action steps necessary to implement the strategy and the specific activities and outputs.

Elements of a Logic Model

<table>
<thead>
<tr>
<th>STRATEGY</th>
<th>Action Steps</th>
<th>Activities &amp; Outputs</th>
<th>Interim Outcomes</th>
<th>Goal</th>
</tr>
</thead>
</table>

Build your own logic model by identifying the goal you intend to reach. Then consider the strategies you plan to adopt. Be sure these strategies reflect essential best practices and proven approaches that are known to lead to the long-term goal.

Implementation of strategies depends on taking action steps. For each strategy you select, detail a series of action steps to show what activities will be undertaken and what outputs will result. Subsequently, these activities and outputs can be documented to show the success of the program implementation.

Finally, specify what outcome(s) should occur when these activities and outputs occur. In defining outcomes, be sure that they are ones that will logically result from the proposed strategy. When measuring progress, it is important to assess only those outcomes that can be directly affected by your activities.

Developing a logic model can help planners organize and prioritize strategies to ensure that all components are covered. No one strategy will lead to a quality childhood care and education system by itself. Many strategies and efforts will be needed to effectively address the long-term goal of a quality childhood care and education system.
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COMMUNITY MOBILIZATION

Community mobilization brings people together to create a shared vision, agree on priorities and make a commitment to finance and implement the array of projects needed to build and sustain a quality childhood care and education system. Community mobilization involves planning, taking action to implement selected strategies and monitoring results for accountability.

The Families and Work Institute has reviewed community mobilization efforts that have been occurring around the country.\(^\text{17}\) Despite different localities and orientations, communities appear to go through clearly defined stages (see box) as they work toward improving and coordinating services for children and families.

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STAGES OF COMMUNITY MOBILIZATION

Stage One: Creating A Vision

- **Getting started** by bringing together an inclusive group of stakeholders to create a vision for the community
- **Assessing community needs and resources**
- **Mobilizing the voice of parents** by involving parents and families in a substantive way
- **Involving business** since employers often possess both the know-how and the clout to bring about change

Stage Two: Implementing the Vision

- **Reforming communities** by linking and coordinating services at the local or program level and institutionalizing integrated services through governance structures
- **Improving and assuring the quality of services**

Stage Three: Sustaining the Vision

- **Maintaining momentum** through effective communication and acknowledgment and celebration of successes
- **Developing financing mechanisms**
- **Engaging the public**
- **Assessing results**

Oregon is highlighted as one of the states at the forefront of the community mobilization effort. The OCCF Systems Change Initiative incorporates three components critical to community mobilization:

- comprehensive planning,
- community implementation, and
- accountability.

All three components are essential since changing a system involves a continuing cycle of assessing needs, implementing action, assessing results, and re-evaluating strategies.

Measuring progress is important because it helps communities to evaluate strategies and make informed decisions about the next steps to take. Recognizing successes also helps to motivate and energize partners and maintain momentum.

Many communities in Oregon are well along into the community mobilization process under the leadership of the Oregon Commission on Children and Families and county Commissions. Others still may be in the early stages. Whatever the stage, the focus of the community mobilization effort is on not only offering programs, but changing systems to improve supports and services for Oregon’s children, youth, and families.

**Working Together for a Common Vision**

In many respects, childhood care and education is a local issue, since resources, needs and preferences vary markedly from community to community. Community partners are in the best position to identify those needs and resources and work together to fill in the gaps. Local partnerships are essential to a quality childhood care and education system.

Community partners come from both the public and private sectors. Parents, child care and social service providers, educators, early intervention specialists, business people, community advocates – all play a unique role in creating a quality system.

**Parents and families**

Involving parents and families in policy and decision-making at the outset is particularly important. As users of childhood care and education services, parents provide a unique perspective that is grounded in reality. Efforts that have widespread family support are more likely to be sustained over time.
Child care resource and referral agencies
With SB 1080, the 1988 Oregon legislature created a system of state-designated child care resource and referral programs (CCR&Rs). In each community, the local child care resource and referral organization is a special partner in the work to improve the childhood care and education system.

Under legislation, the CCR&Rs have been charged with a community planning role—one that focuses on the childhood care and education system. Because the CCR&Rs are continuously assessing the strengths and weaknesses of the local system, they play a key role in community planning efforts.

Organizations and agencies
Other agencies from the public and private sector also play an important role (see Figure 4). Some of the key organizational partners, in alphabetical order, include:

- Adult and Family Services Division, Department of Human Resources
- Center for Career Development in Childhood Care and Education
- Child Care Division, Department of Employment
- Colleges and universities
- Commission for Child Care
- Commission on Children and Families (OCCF) and county CCFs
- Department of Education and local school districts
- Developmental Disabilities Council
- Head Start Collaboration Project, Department of Education
- Health Division and local Health Departments, Department of Human Resources
- Housing and Community Services Department
- Professional organizations (such as Oregon Association for the Education of Young Children and local chapters; Oregon Association of Child Care Directors; Oregon Family Child Care Network and state and local support groups; Oregon Head Start Association; and Oregon School Age Coalition)

At the state level, an Interagency Child Care Group was formed in 1990 to coordinate the child care policy of state agencies and to develop Oregon's Child Care Development Block Grant state plan.

In September 1998, Interagency members unanimously decided that Oregon's child care planning efforts would be enhanced by including members of the private sector, parents and legislators, as well as the state agency representatives that made up the original group. The expanded membership will also provide a mechanism to link all statewide child care initiatives through a single planning process.
Figure 4

Childhood Care & Education in State Government

Other Childhood Care & Education Partners

- Oregon Center for Career Development in Childhood Care and Education
- Oregon Family Child Care Network
- Community Colleges
- Oregon Child Development Fund
- Oregon School Age Care, Enrichment & Recreation Project
- Oregon Association for the Education of Young Children
- Oregon Child Care Resource and Referral Network and member agencies
- Oregon Head Start Association
- Oregon Association of Child Care Directors
- Elementary School Principals Association

... AND MANY OTHERS
The new group is called the Childhood Care and Education Coordinating Council. Priorities will include assisting in the planning for the federal Child Care and Development Fund, developing legislative priorities for child care, and ensuring that all partners and stakeholders are informed about each other’s activities and accomplishments in building the child care system.

Successful community mobilization efforts begin with an inclusive group of all partners who share a commitment to meeting the needs of families for quality childhood care and education.

**Goal and Outcomes**

**GOAL:** Mobilize the community to develop collaborative partnerships, shared planning, decision-making, and accountability for the childhood care and education system.

<table>
<thead>
<tr>
<th>Intended Outcomes for Community Mobilization</th>
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<tbody>
<tr>
<td>Creation of collaborative partnerships (5.1.2)</td>
</tr>
<tr>
<td>Effective community planning and decision-making (5.1.3)</td>
</tr>
<tr>
<td>Shared accountability for processes and outcomes (5.1.4)</td>
</tr>
<tr>
<td>Other (5.1.5):</td>
</tr>
<tr>
<td>Inclusive participation in the childhood care and education effort</td>
</tr>
<tr>
<td>Parent and family involvement in decision-making</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

(Numbers in parentheses refer to the OCCF database.)

Outcomes for the Community Mobilization component focus on changing the system in order to improve access to quality childhood care and education for children and families. Therefore, outcomes describe results or changes in how services or other support for families are developed and delivered.
Mapping Assets and Identifying Needs

A comprehensive needs assessment can create a rationale for the changes that are needed, clarify goals, and identify strategies that are most likely to bring about results. The results of the needs assessment provide a way to inform the public and others of needs and planned actions.

**What is currently being done in your community?**

What efforts are currently underway to mobilize your community? Determine what stage of mobilization your county is in. Review and assess what has been accomplished to date. How are parents and families involved? How are business and community leaders involved?

**What is needed?**

Consider any gaps in service delivery that may exist in your community. What do families say they need? What partnerships need to be developed to meet those needs? Based on your assessment, set priorities and decide on action steps.

**Who can help?**

- Adult and Family Services
- Advocacy groups such as Children First, One Voice for Child Care, Oregon’s Child: Everyone’s Business
- Business leaders and local employers
- Child Care Division, Department of Employment
- Community leaders and advocates
- Housing and Community Services Department
- Oregon Child Care Resource & Referral Network and local resource and referral agencies (CCR&Rs)
- Oregon Head Start Collaboration Project, Department of Education
- Oregon Commission on Children and Families and county Commissions (CCFs)
- Parents and families
- Providers of childhood care and education services
- Public and private schools
- Public health, pediatricians, and other health care providers
- Public libraries
- Professional organizations such as Oregon Association of Child Care Directors, Oregon Association for the Education of Young Children, Oregon Family Child Care Network, Oregon Head Start Association and Oregon School Age Coalition
- Specialists in early intervention/early childhood special education and school age special education

See Appendix A for contact information.
Strategies

Create a vision for the local community

Work with an inclusive group of stakeholders to describe what the community childhood care and education system should look like in the future and what will be accomplished if efforts are successful. Creating a vision is a team-building process that establishes a positive, proactive stance among participants.

Consider techniques that others have used to create and build support for a vision such as:
- working with an outside facilitator who can provide an objective perspective,
- conducting community forums to solicit suggestions,
- using focus groups and key informant interviews to consult with stakeholders, or
- using newspapers, employer newsletters, radio, and TV to encourage broad participation in the process.

Involves parents and families

Sponsor town hall type meetings or summits and invite parents and families to speak out on childhood care and education issues.

Help parents to find realistic and substantive ways to be involved in the community mobilization effort that respect their limited time and busy lives. Some communities offer child care to help promote parent involvement. Others have reimbursed parents for expenses incurred in participation or provided transportation to and from meetings.

Provide parents with ongoing support by offering training and technical assistance to develop or sharpen leadership skills. Whenever possible, create a system where participating parents mentor new parents.

Develop and support parent advocacy organizations. Communities have found that empowering parents to use their advocacy and leadership skills can be a strong source of support for a quality childhood care and education system.
Identify key community leaders and engage them in the effort. A common barrier to the success of community mobilization efforts is a lack of buy-in by key community leaders. Attract these individuals through personal contacts and building relationships.

Convene a Childhood Care and Education Summit to bring key leaders together in community-wide discussions. Invite speakers from Oregon’s Child: Everyone’s Business to describe recent brain research. Making a strong case connecting quality childhood care and education programs with recent brain research and the long-term benefits of promoting positive child and youth development has proved to be successful in engaging community leaders.

Conduct a formal needs assessment to clarify goals for childhood care and education in the community. Decide what information would be most helpful. Consider the importance of assessing strengths as well as needs. Keep your purpose in mind to avoid becoming overwhelmed by all the possible data you may think of collecting.

Work with the local CCR&R to review existing sources of data that may already describe the assets and needs in your community. Other sources for information include local schools, health care and social service providers, the local chamber of commerce and law enforcement.

Survey representative groups and/or key informants. Use focus groups to gather information from those who use and those who provide childhood care and education services. Be sure to ask about families that face special barriers to child care. These include families of children with special needs, families with infants and/or toddlers and families from diverse ethnic and linguistic backgrounds.

Provide seed money to leverage funding for the needs assessment process. Conducting a needs assessment requires both financial and human resources. Some communities use trained volunteers or students to gather data. Others use residents to gain greater entry into “hard to reach” communities while at the same time, fostering local leadership development.
Secure technical assistance with planning and decision-making on how to target child care dollars most effectively. OCCF has developed a resource bank of individuals skilled in facilitation and mediation. Skilled facilitation can lead to community consensus on priorities and move plans forward. Communities may find it useful to employ an outside consultant who can approach the issues from a neutral position.

Seek out mentoring relationships with other communities engaged in mobilization efforts. Share information on barriers and successes.

Use a variety of communication approaches to keep people informed of progress. Community mobilization efforts are more successful when people are informed about progress. Try not to overwhelm people with information. Keep your updates brief. Short newsletters, events to celebrate successes, and other means of recognizing accomplishments all help to keep the momentum going. Change works best when those who are involved can see that effort pays off with tangible benefits.

Build public awareness of the benefits of high quality childhood care and education for the community at large through continuing communication and media events. Consider establishing a web page highlighting community accomplishments.
## Linkages to Other Components of a Quality System

### Continuum of Childhood Care and Education Choices
Communities must determine the need for various types of childhood care and education within their own localities. Working together, strategies can be selected to assure an adequate supply of childhood care and education choices.

### Best Practices and Quality Assurance Mechanisms
Community mobilization helps partners build a consensus that recognize the benefits of quality childhood care and education and its importance to the community at large.

### Professionalization and Workforce Development
Fostering professionalization and workforce development requires communities to plan for staff training and professional development in addition to planning programs and facilities.

### Adequate Financing and Resources
Community mobilization brings people together to agree on priorities that no single participant can finance. Community partners can make a commitment to finance the array of projects necessary to the vision, in addition to providing technical assistance.

### Employer Involvement and Commitment
Business leaders and employers are among the major community partners who have the ability to share information, pool resources, and establish a plan of action to address community needs for childhood care and education.

### Consumer Education and Public Engagement
Consumer and public awareness that everyone benefits when children are safe, healthy and well-educated is essential for the success of community mobilization efforts.
The availability of a wide range of childhood care and education choices is an important feature of the childhood care and education system. One of the key benchmarks used by the Oregon Progress Board to track the status of children and families in Oregon is the number of child care slots available for every 100 children under age 13.

Oregon has been making steady progress toward this benchmark. In 1990, the number of available child care slots stood at 14 per 100 children under age 13. By 1997 the number of slots had increased to 18.7. Nevertheless, there is still room for improvement if the goal of 25 slots is to be reached by 2010.19

Availability of Care

Created in 1985, the Oregon Commission for Child Care (OCCC) is an Advisory Board to the Governor and the Legislature on the issues, concerns, and alternative solutions that are critical to the development of accessible, affordable, and quality child care. In a 1998 report, the Oregon Commission for Child Care notes:

“There continues to be a need for all types of child care statewide, with a persistent need for specific areas of care that includes infant/toddler, special needs care, extended hour/odd hour, sick child care and school age care.” 20

Infant-toddler care

Families with infants and toddlers aged 0 to 2½ years tend to have a difficult time locating care. Some families are able to take extended parental leave after the birth or adoption of a child, while other families may not have that choice.

In Oregon, care and education for infants and toddlers is especially difficult to find. Family child care and group child care homes are more likely to serve this age group, and typically offer greater flexibility in schedules than other settings.21

When a family has an older child in addition to an infant or toddler, difficulties increase. Finding a single setting where both children can be accommodated is challenging. Mixed-age care arrangements in family child
care or group child care homes offer a means to provide quality care in a more financially viable way.

A pilot project aimed at increasing the number of infant/toddler slots by increasing the number of certified group child care homes throughout the state was recently conducted by the Child Care Division, the Oregon Commission on Children and Families, and Adult and Family Services Division. During this pilot, new group child care homes were established, resulting in the creation of 36 new slots for infant care.

**Care for children with special needs**

Passage of the Americans with Disabilities Act (1992) has significantly strengthened access to child care for children with special needs due to a physical, developmental behavioral mental or medical disability. Despite this, child care, as well as other services such as respite care, are in short supply for children and youth of all ages who have special needs. Families who live in rural settings face particular difficulties in finding appropriate child care.

Child care providers and families need ongoing training, technical assistance, mentoring and consultation to care for children with special needs, ranging from helping children with asthma or diabetes to assisting children in wheelchairs or those with developmental delays or disabilities. Caregivers may not realize that many children with special needs require little or no care beyond that needed by other children. With the assistance of early intervention specialists or other supports, most children with special needs can be integrated into existing childhood care and education settings as required by law.

However, very few caregivers currently have the expertise or willingness to accept children who may need higher levels of care, such as close monitoring and supervision, or special medical procedures. Training and on-going support for inclusion does not exist in many communities.

Providers and families also need information and resources concerning how the Americans with Disabilities Act will impact child care programs in areas such as inclusion of children with special needs in programs, eligibility for services, and removal of barriers in facilities.

**Care during extended or odd hours**

Employment constraints determine the days and times of day for which families need care. With more retail stores, restaurants, and other services being open on weekends than ever before, the need for care in non-traditional hours has greatly expanded.
Care during extended or non-traditional hours, and drop-in care for sick children are both in short supply across the state. Family child care homes and child care group child care homes are more likely to provide care during non-traditional hours than centers.

**Opportunities for children and youth during out-of-school time**

Children and youth in every community should have a wide variety of positive youth development opportunities and programs from which to participate during out-of-school time. Regardless of parent employment, these choices meet children’s developmental needs for care, enrichment, and recreation.

Choices for out-of-school time range from clubs and drop-in programs to lessons and sports teams to child care. These programs and activities are offered in a variety of locations, including child care centers, homes, community centers, churches, schools, parks and libraries.

In many communities, school age care programs that provide daily supervision to meet the needs of working families are in short supply. School age care is defined as registered, certified or legally exempt care for elementary and/or middle school children provided on a regular, ongoing basis according to a set schedule to meet the needs of working families.

School age care can include before school, after school, vacations and summer. Schedules are determined by the program operator. School age care programs are registered or certified by the Child Care Division, unless the operator is legally exempt (such as a school district, city or a park and recreation district).

**Family Preferences**

Parents typically consider childhood care and education arrangements both in terms of the advantages offered to the child and limitations imposed by the family’s schedule and resources. Balancing these needs is often hard. Practical issues, such as the cost, location and the suitability of nearby alternatives often limit the choices families consider.\(^\text{22}\)

Most parents say they want high quality care, especially as reflected by characteristics of the caregiver. In defining quality, parents focus on safety, cleanliness, nurturance and the trustworthiness of the provider.\(^\text{23}\)

A recent study found that parents were more likely to report caregiver characteristics, such as training or child development
knowledge, were important in choosing a child care arrangement than to say that cost and convenience were important.\textsuperscript{24}

When parents report a characteristic is very important, their children are likely to be in a primary arrangement with that characteristic, with one exception. Parents who indicate a preference for reasonable cost do not necessarily have less costly arrangements.\textsuperscript{25}

Statistics from the U.S. Census show that utilization of care in another home by a non-relative (family child care homes) has decreased over the past two decades. Approximately 22\% of the preschool-aged children with employed mothers experienced this type of care in 1977 in contrast to only 15\% in 1994 (see Figure 5). At the same time, participation in organized child care facilities increased from 13\% in 1977 to 29\% of the preschoolers in 1994.

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{figure5.png}
\caption{Primary Child Care Arrangements Used for Preschoolers by Families with Employed Mothers: Selected Years, 1977 to 1994}
\end{figure}

Care in the child’s own home has remained relatively stable. About one third of preschool-aged children are cared for in their own home by relatives or others while mothers work outside the home.

Family preferences tend to vary according to the age of the child:

- Parents of infants and toddlers usually prefer care that is similar to what they provide at home and tend to use relative care or family child care. They are most often concerned about the number of children cared for and whether sick child care is available.
Parents of older children are more likely to focus on the educational aspects of the setting and tend to use center-based programs. These parents are more often concerned about having a trained provider and whether English is spoken.

Parents are not the only family members with preferences. Older children are more than capable of expressing their own preferences regarding their care settings. By third or fourth grade, children begin “voting with their feet” and leaving programs that they feel are too “babyish” or do not meet their needs. Older elementary and middle school youth need to have a voice in designing and implementing programs if adults expect them to participate.

**Childhood Care and Education Settings**

Childhood care and education refers to programs and services for families and children from birth through age 12, and includes kindergarten-3rd grade classrooms in private and public schools. Settings run the gamut from center-based programs to home-based programs, such as family child care and group child care homes.

A variety of school age care, enrichment and recreation programs for children and youth during out-of-school hours are also included in the continuum of choices. The main types of care settings found in most communities include the following:

- **In-home care**
  - Provided in the child’s home
  - Relative or non-relative caregiver/nanny

- **Family child care**
  - Provided in the caregiver/provider’s home
  - Small group of children
  - Relative or non-relative caregiver

- **Group child care homes**
  - One or more caregivers
  - No more than 12 children at any one time
  - Care provided in a home setting

- **Centers and preschools**
  - Full or part-time care and education
  - Provided by caregivers/teachers
  - Located in building other than home

- **School age programs**
  - Before and after school care
  - Enrichment and recreation programs located in child care centers, schools, community centers, parks, churches and other community buildings
Many communities have special programs that are also part of the childhood care and education system:

- Community college and university early childhood education programs
- Early intervention programs and early childhood special education
- Head Start and Oregon Head Start Pre-Kindergarten, including Migrant and Indian programs
- High school child development and teen parent programs
- Montessori schools
- Parent cooperative preschools
- Public School District Title I and Migrant Education programs
- Religious schools and programs
- Respite care programs

In addition to school age programs providing before/after school and summer care, elementary and middle school age children need opportunities to participate in the following types of activities during their out-of-school time:

- Business internship programs for youth,
- Clubs and camps,
- Specialized classes, sports, art, drama and music,
- Scouts, Camp Fire, 4-H and other youth development programs,
- Library programs,
- Parks and recreation activities,
- Organized community service activities.

Virtually every community has a patchwork of child care. But in many places, providers function in isolation – with little opportunity to share ideas, learn new skills, or provide support and guidance to one another. Providers may not be aware of a variety of resources and supports in the community, such as the resource and referral agencies and the USDA food assistance program. This isolation is especially of concern for family child care and care by relatives – the types of care most popular for infants and toddlers.27
Child Care Resource and Referral

The Oregon Child Care Resource and Referral Network and its member agencies play a central role in assuring accessibility for families to the continuum of choices. The Oregon Child Care Resource and Referral Network oversees and coordinates the local CCR&R agencies. Funding for the CCR&R system comes from the federal Child Care and Development Fund (CCDF), other state and local sources, and private foundations. Local CCR&R programs are responsible for:

- assisting families with information on how to choose quality care, maintaining a database and providing referrals to registered family care homes, certified centers and school age programs;
- encouraging new child care businesses and coordinating professional development, training, and technical assistance for child care providers;
- providing employers with information on work/life programs that qualify for tax credits and that help employees balance work and family;
- providing technical assistance and coordination with state and local partners in building Oregon’s childhood care and education system.

Goal and Outcomes

**GOAL:** Assure the availability and accessibility of quality childhood care and education choices that meet the needs and preferences of children, youth and families in the community.

<table>
<thead>
<tr>
<th>Intended Outcomes for Continuum of Choices</th>
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<tbody>
<tr>
<td>Adequacy of choices for infants and toddlers (5.2.1)</td>
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<tr>
<td>Adequacy of choices for preschool-aged children (5.2.1)</td>
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<tr>
<td>Adequacy of choices for children with special needs (5.2.1)</td>
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<tr>
<td>Adequacy of choices for school age children and youth (5.3.3)</td>
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(Numbers in parentheses refer to the OCCF database)
Mapping Assets and Identifying Needs

**What is currently being done in your community?**

Work with your CCR&R office to report current information on childhood care and education services that are available in your community. Is there an adequate supply? Center-based? Family child care homes?

Are adequate services available in your community to meet the needs of families working non-traditional hours? Are adequate services available for infants and toddlers, preschoolers, school age, children with special needs? Respite care services?

**What is needed?**

Where are the gaps in the continuum of services in your community?

Does your community’s resource and referral agency have adequate funding to perform its essential functions?

**Who can help?**

See Appendix A for information on how to contact agencies and organizations.

- Parents and families
- Center for Career Development in Childhood Care & Education
- Child Care Division, Department of Employment
- Department of Education and local school districts
- Developmental Disabilities Council and Community Partnerships
- Early intervention/early childhood special education and school age special education programs
- Oregon Child Care Resource & Referral Network and local CCR&Rs
- Oregon School Age Care, Enrichment and Recreation Project
- Professional organizations such as Oregon Association of Child Care Directors, Oregon Association for the Education of Young Children, Oregon Family Child Care Network, Oregon Head Start Association, and Oregon School Age Coalition
- Providers of childhood care and education services
- Public and private schools
- Respite care programs
CONTINUUM OF CHOICES

Strategies

**Increase accessibility of quality childhood care and education choices**

Support the local resource and referral agency with supplemental funding, if needed, to assist them in their mission of providing parents with information about local options. Facilitate the involvement of other community organizations and employers to support the CCR&R.

Support improved technology for database management and/or on-line access to information about the continuum of choices within the community.

Work with the local CCR&R in “getting the word out” about the availability of quality choices. Consider creative strategies such as childhood care and education information bulletin boards in places where families gather, public service announcements in local media, mailings sent home through schools, and contact with new parents by providing information for “take-home” packets at hospitals.

**Increase availability of quality childhood care and education choices**

Publicize information about community needs for specific kinds of care. Use statewide training opportunities such as the First By Five Infant/Toddler Training Program to recruit providers for quality infant/toddler care.

Recruit providers in under-served areas and for under-served groups. Offer technical assistance, financial supports and other supports such as:

- Grants and zero or low interest loans to pay for start-up costs, equipment or renovations,
- Mentoring,
- Assistance with the business aspects of child care
- Access to a toy and equipment lending library, and
- Translation/interpretation services for non-English speaking providers.

Enable potential providers to take part in statewide training opportunities that will develop and/or increase skills and knowledge. “Mobile training units” that bring training to a potential provider or group of providers at a convenient place and time have proved to be successful for some communities. Training on caring for children with special needs can be included.
Support training and education for providers on how to work with groups of children who vary in terms of ages, abilities and interests.

Provide financial incentives, training and other supports to caregivers who may wish to start a group child care home. Incentives that have proven successful include:

- Financial assistance for equipment and minor remodeling;
- Assistance with inspection fees, liability insurance;
- Training scholarships;
- Mentoring from other group child care home providers; and
- Technical assistance from a project coordinator.

Advocate for abundant and diverse options for school age children’s activities, including different types of programs, locations and levels of supervision.

Allocate funds to increase the number of programs serving older elementary and middle school children. Involve community representatives from school districts, law enforcement, juvenile justice, parks and recreation, children’s services agencies, 4-H clubs, art centers and other community service organizations and businesses, such as the Chamber of Commerce or the Rotary Club.

Encourage cooperation and collaborative partnerships between schools and both private and public programs for school age care. Seek creative solutions to transportation and affordability problems that limit the participation of some children.

Provide information, mentoring and other technical assistance and supports including:

- mentoring and support for providers to develop and/or increase knowledge and skills in caring for children with special needs,
- grants and/or loans for equipment or minor facility remodeling, and
- lending “library” of specialized equipment for children who require a higher level of care.

Encourage parents of children with special needs to serve as mentors for child care providers in your community through the Oregon Developmental Disabilities Council project, Community Partnerships.
Support a training program for childhood care and education providers focused on how to provide quality services to children with special needs. Invite representations from programs serving children with special needs to meet with families and providers.

Make information and training on the care of older children and youth with special needs available to after school programs, clubs and other places where school age children are typically served.

Disseminate information on the requirements of the Americans with Disabilities Act within the context of childhood care to all childhood care and education programs. In particular, address the issues of accessibility, individual assessment and reasonable accommodation.

Provide programs with materials on the physical safety requirements of facilities, such as the required placement of ramps and railings in the child care setting.
Linkages to Other Components of a Quality System

COMMUNITY MOBILIZATION

Communities must determine the need for various types of childhood care and education within their own localities. Working together, strategies can be selected to assure an adequate supply of childhood care and education choices.

BEST PRACTICES AND QUALITY ASSURANCE MECHANISMS

Commitment to best practices, high standards and accreditation systems are necessary to increase the quality of care within the continuum of choices available to families and children.

PROFESSIONALIZATION AND WORKFORCE DEVELOPMENT

The need for competent and well trained staff is a key issue in all the diverse options and types of services available for children and families.

Well trained and informed professionals are better able to create safe, healthy and stimulating environments for children and youth.

ADEQUATE FINANCING AND RESOURCES

Increasing the number of child care slots to assure an accessible supply for families and children depends to a large extent on adequate financing and resources.

EMPLOYER INVOLVEMENT AND COMMITMENT

Local employers can help to expand the supply of choices by taking advantage of the tax benefits that accrue from assisting employees to access quality childhood care and education arrangements.

CONSUMER EDUCATION AND PUBLIC ENGAGEMENT

Having an array of choices is essential so that parents may act as informed decision-makers and select the best possible care for their children.

The more aware consumers and the public are of the benefits of high quality childhood care and education, the greater the likelihood that the necessary infrastructure and financial resources needed to build the supply will be supported within each community.
BEST PRACTICES AND QUALITY ASSURANCE MECHANISMS

Achieving quality childhood care and education programs that promote children’s safety and healthy development requires voluntary commitment to best practices and quality standards, and an effective system of state regulations.

The Essential Elements: An Oregon Approach to Quality

In 1995, a broad-based group of parents, childhood care and education professionals, business leaders and other Oregon citizens came together to address the issues of quality and continuity across programs for Oregon’s younger children and families. This project, entitled Forging the Link, sought to develop, articulate, and lay the foundation for implementation of a coordinated and collaborative childhood care and education system.

The Forging the Link project resulted in the identification of nine essential elements of quality childhood care and education programs. These essential elements of programming for children describe characteristics of safe and healthy childhood care and education environments, developmentally appropriate practices, family involvement, health promotion and professional staffing. The essential elements go beyond minimum standards to describe attributes of quality programs that are both necessary and achievable.

Standards are defined for each element with specific indicators that illustrate how the standard might be measured in a given setting. An outline of the nine essential elements follows with a summary of standards for each.

<table>
<thead>
<tr>
<th>ESSENTIAL ELEMENT</th>
<th>STANDARDS</th>
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<tbody>
<tr>
<td>1. Positive Relationships</td>
<td>The environment is characterized by warm, positive and respectful interactions among professional staff, children and families. Both the total number of children and the number of children per adult are limited. The program works in partnership with community agencies and neighborhoods to enhance the experiences of children and assist families in locating appropriate services.</td>
</tr>
<tr>
<td>2. Family Involvement</td>
<td>Family involvement includes regular communications, family participation, family input into program policies and evaluation and assistance to families with identified needs or interests.</td>
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</table>
3. Program for Child Development and Learning

The program is based on a statement of philosophy and goals; knowledge of child development and learning; and each individual child’s interests, needs and strengths. The program supports the social, emotional, physical and intellectual development of children. Assessments of children’s development and learning are used to plan an appropriate program.

4. Professional Staff

The professional staff is well-qualified by education, training and experience. Staff continually seek to advance their knowledge and skills, follow a code of ethics that includes respect for children, families, colleagues and community. Staff advocates for children and families. Compensation and benefits are comparable with other professional positions that have similar qualifications and responsibilities.

5. Environments for Learning, Health, and Safety

The physical environment and its furnishings support the development and learning of the children enrolled. The environment is planned to maximize health and safety, and helps to prevent accidents, injuries and unhealthy conditions for children and adults. The environment contains adequate indoor and outdoor space for children, and has adequate space for adult planning, management activities and privacy.

6. Health Promotion

Adults and children use important measures, such as regular hand-washing with anti-bacterial soap, to protect and promote physical and mental health. Healthful eating habits are encouraged through the provision of nutritious and culturally relevant foods eaten in a positive social atmosphere.

7. Inclusion Practices

Professional staff understands and commits to practices that build on each child’s culture and language and expose children to diverse cultures, languages, and ability levels. The program is individualized to reflect the diversity of the families and the community and to build awareness and respect for others. Children with special needs are integrated with more typically developing, same-age peers.

8. Effective Administration and Business Practices

The program complies with all applicable federal, state, and local standards, laws and codes. The program follows sound administrative and business practices, assures a professional working climate for professional staff and is evaluated at least annually.
9. Continuity for Children and Families

Professional staff and families work together to ensure a smooth transition for all children as they move from setting to setting within a day, between levels or grades in a program, and from program to program. Professionals across settings work to build relationships and participate in joint activities to strengthen ties. Community childhood care and education programs collaborate to develop a common mission and philosophy and inclusive, comprehensive services for children and families.

A core planning team continues to work on the Forging the Link effort. A document outlining recommendations or strategies, incentives, and supports necessary to make these “essential elements” achievable will be forthcoming.

Other Standards for Quality

Head Start Performance Standards
The Head Start program has a long tradition of delivering comprehensive and high quality services designed to foster healthy development in low-income children. Head Start has developed a set of detailed and comprehensive performance standards that provide a useful resource for all childhood care and education programs.

Head Start and Early Head Start serve children from birth to age 5, pregnant women and their families. The Head Start Program Performance Standards cover a variety of topics including:

- Child health and developmental services
- Education and early childhood development
- Child health and safety
- Child nutrition
- Child mental health
- Family partnerships
- Community partnerships
- Program governance
- Management systems and procedures
- Human resources management
- Facilities, materials and equipment

Childhood care and education programs that collaborate with Head Start to provide services to low-income children and their families must meet these performance standards.
National Health and Safety Guidelines for Out-of-Home Child Care Programs
Health and safety performance standards for out-of-home child care programs have been developed by the American Public Health Association and the American Academy of Pediatrics. These standards are intended for use by anyone working in the child care system in the United States, including those who direct or work in facilities and those involved in the licensing and regulation of facilities. Distinctions are made between standards that apply to child care centers, group child care homes and family child care homes.

The National Health and Safety Performance Standards for Out-Of-Home Child Care Programs address the following topics: staffing; program activities for healthy development; health protection and health promotion; nutrition and food service; facilities, supplies, equipment, and transportation; infectious diseases; children with special needs; administration; and recommendations for licensing and community action.

Standards for Quality School Age Care
Standards for high quality school age care programs have been defined by the National School Age Care Alliance (NSACA) in its 1998 publication, The NSACA Standards for Quality School Age Care (available from the Oregon School Age Coalition or the National School age Care Alliance. See Appendix A for contact information).

Standards are defined in areas of:

- Human Relationships
- Indoor Environment
- Outdoor Environment
- Activities
- Safety, Health and Nutrition
- Administration

These standards exceed the current minimums established by state regulations for staff-child ratios, group size, staff qualifications and training. Overall the standards seek to assure that school age children experience safe environments that offer are age appropriate activities and experiences.

Developmentally Appropriate Practice

While there is no one right way to care for children, there is a broad consensus among childhood care and education professionals that quality in programming comes from the consistent use of practices that reflect knowledge of children’s learning and developmental needs.
Research shows that developmentally appropriate practice is associated with better outcomes for children, including higher levels of cognitive functioning, social skills and healthy emotional development.\textsuperscript{31}

Developmentally appropriate practice is based on knowledge about how children develop and learn including knowledge of the social and cultural contexts within which children learn. This knowledge creates the foundation for responsive, respectful programming and positive interactions.

- **Knowledge of the social and cultural contexts in which children live** ensures that learning experiences are meaningful, relevant and respectful for the participating children and their families.

- **Knowledge of children’s individual strengths, needs and interests** allows caregivers to adapt to and be responsive to individual variation, including children’s individual learning styles, interests and preferences, personality and temperament, skills and talents and challenges and difficulties.

- **Knowledge of child development and learning** permits general predictions about what activities, materials, interactions or experiences will be safe, healthy, interesting, achievable and also challenging to children within an age range.\textsuperscript{32}

Understanding that play is an important vehicle for children’s social, emotional, and cognitive development is central to developmentally appropriate practice.

Play gives children opportunities to understand the world. Playing with objects, playing make-believe and playing together at various games allows children both to gain skills and to practice newly acquired skills.

Children benefit both from engaging in self-initiated, spontaneous play \textit{and} from adult-planned and adult-structured activities, projects and experiences.\textsuperscript{33}
To promote learning, children need opportunities for diverse modes of play including play with peers, solitary play, group activities and quiet times for reflection and rest.

Both appropriate and inappropriate practices for infants and toddlers, preschoolers and school age children are identified in NAEYC’s 1997 publication, *Developmentally Appropriate Practice in Early Childhood Programs*. Selected examples are reproduced below.

<table>
<thead>
<tr>
<th>Selected Examples</th>
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<tbody>
<tr>
<td><strong>Developmentally Appropriate Practice</strong></td>
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<tr>
<td><strong>Infants and Toddlers</strong></td>
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<tr>
<td><strong>Preschool Children</strong></td>
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<tr>
<td><strong>School Age Children</strong></td>
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</table>
Quality school age care, enrichment and recreation programs provide opportunities for children to engage in play and informal learning activities. Play continues to be an important component of school age children’s daily experiences, allowing time for rest and introspection, recreation and continuing physical development, developing hobbies, practicing social skills and strengthening friendships.

“For any skill to be deeply mastered, students must have substantial opportunity to create their own meanings and organize skills in their brains in their own ways. Learners need time to allow for new connections [in their brains] to be made. They need ‘space’ for reflection.”

In sum, quality school age care provides safe environments in which children can practice newly acquired academic skills, explore areas of interest, exercise decision-making skills, gain leadership experience through the design and implementation of program components, learn conflict resolution techniques, gain community service experience and have access to positive role models.

School age children need to be challenged according to their individual skills and interest. They feel devalued when choices provided for them are “jumped-up” activities originally designed for preschoolers. Instead, school age children and youth want to become competent at “real world” skills, to be of service to others in their community, to make meaningful decisions, and to develop leadership and problem-solving skills.

**Regulation**

Quality assurance mechanisms comes in two general forms: rules and regulations required by state and federal statutes, and voluntary accreditation systems based on standards adopted by professional organizations.

In 1993, the Oregon legislature established the Child Care Division in the Employment Department to combine child care regulatory and policy functions, and to highlight the importance of child care in promoting a healthy and vital workforce. The Child Care Division has regulatory responsibility for two types of child care programs.

- **Certified Facilities** (child care centers and group child care homes)
- **Family Child Care Homes** (registration without inspection)

Regulations provide a *minimum* foundation for the health and safety of children, but do not ensure quality programs. Under Oregon rules and regulations, non-relative childhood care programs are categorized as *certified, registered, or exempt from regulation.*
Group child care homes and center-based childhood care programs must be certified, a process that is sometimes called licensing. The Child Care Division conducts annual, on-site inspections of Oregon's child care centers and group child care homes and extensive pre-certification inspections of proposed new facilities.

The certification process requires that programs meet specific minimum standards concerning facilities, staff-child ratios, immunizations, food preparation, staff qualifications and health and safety practices. Requirements also include specific discipline practices, parental rights, record keeping, and guidelines for curriculum. Teaching staff and providers must show that they have participated in a minimum of 15 hours of training related to child care each year.

Persons caring for more than three children from more than one family at any one time (other than their own) in their own homes, and for more than 70 days in a calendar year are required by law to register with the Child Care Division.

The registration process includes criminal history and Services for Children and Families (SCF) records checks on the provider and all household residents over the age of 18, but does not include any inspection of the premises unless a serious complaint is received about the facility.

Prior to becoming registered, family care providers must attend a 2-hour child care overview session and upon renewal of their registration (after 2 years), show proof that they have attended a 2-hour child abuse recognition training. Other than these, family child care providers are not required to have any special skill, training or experience.

Care by a relative or close friend is not regulated, unless the caregiver receives payment from the state. Exempt programs include those that are primarily educational and provide care for children 30 months old to age six for less than four hours a day. Child care programs operated by public school districts or other public agencies are also exempt from Child Care Division regulations.

Unfortunately, the public may mistake registration of a family child care home as an indicator for increased quality of care and education. Registered family childhood care and education settings are expected to meet minimum standards, but do not receive regular monitoring or inspection.
Oregon is one of only 6 states that does not conduct any periodic inspections of family child care facilities. Due to current funding limitations, only a serious complaint where children are considered to be in imminent danger results in an inspection by the Oregon Child Care Division.

<table>
<thead>
<tr>
<th>FAMILY CHILD CARE</th>
<th>CENTER CARE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Registered</strong></td>
<td></td>
</tr>
<tr>
<td>• No more than 10 children in care total. Only 6 children under school age, only 2 children under 2 years, including provider’s own children</td>
<td>• Certified by Child Care Division (CCD)</td>
</tr>
<tr>
<td></td>
<td>• Criminal check &amp; Services to Children &amp; Families (SCF) records check</td>
</tr>
<tr>
<td></td>
<td>• Eligible for USDA food program</td>
</tr>
<tr>
<td></td>
<td>• Signed agreement acknowledging state child care laws, rules and regulations</td>
</tr>
<tr>
<td></td>
<td>• Mandatory reporter of child abuse</td>
</tr>
<tr>
<td><strong>Exempt from regulation</strong></td>
<td><strong>Exempt from regulation</strong></td>
</tr>
<tr>
<td>• Fewer than three day care children in care</td>
<td>•Primarily educational and providing care for children from 30 months to six years and operating for less than 4 hours per day</td>
</tr>
<tr>
<td>• Provides care less than 70 days per year</td>
<td>• Operated by public school district or other public agency</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>GROUP CHILD CARE HOME</th>
<th>BEFORE/AFTER SCHOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Certified by Child Care Division</td>
<td>• Some programs are CCD certified and must meet inspections and other CCD requirements; some are exempt from CCD certification (see above)</td>
</tr>
<tr>
<td>• On-site inspections done</td>
<td>• Designed for school aged children, usually 5-12 year olds</td>
</tr>
<tr>
<td>• Up to 12 children</td>
<td>• If non-profit, eligible for USDA food program</td>
</tr>
<tr>
<td>• Criminal check &amp; SCF records check</td>
<td>• Mandatory reporter of child abuse</td>
</tr>
<tr>
<td>• Eligible for USDA food program</td>
<td></td>
</tr>
</tbody>
</table>
Accreditation

Accreditation is a voluntary system whereby childhood care and education programs are reviewed and receive recognition for quality services if they meet national standards, as established by national professional organizations. Accreditation also provides a mechanism for childhood care and education programs to work toward improving the quality of their service, and for families to identify programs committed to providing such service.

Accreditation for Center-Based Programs
The National Association for the Education of Young Children (NAEYC) established the National Academy of Early Childhood Programs in 1985 to conduct accreditation. The Academy provides a national, voluntary, professionally-sponsored accreditation system for all types of preschools, kindergartens and child care centers.

Across the country, over 6,000 programs are accredited but as of April, 1998, only 37 Oregon programs (listed in Appendix D) have achieved accreditation through this process. Program accreditation involves the following steps:

- **Self study.** The program engages in an extensive self-study based on the Academy’s Criteria for High Quality Early Childhood Programs.

- **Validation.** The accuracy of the program’s self-study is verified during a site visit to the program by a team of trained volunteer validators. The validated self-study, including the program director’s responses to the validation visit, is reviewed by a 3-member national commission composed of recognized experts in childhood care and education, judged to be in substantial compliance with the Academy’s criteria and granted accreditation for a three-year period.

- **Plans for improvement.** The program agrees to act upon the commission’s suggestions regarding areas needing improvement and to submit annual written reports documenting improvements and continued compliance.

The accreditation process generally takes between 9 and 12 months. Fees are borne by the program seeking accreditation and range from $425 to $825, depending on the number of children served. Non-profit programs applying for accreditation may request assistance from the Oregon Child Development Fund (see page 98 for further information).
Accreditation for Family Child Care
The National Association for Family Child Care (NAFCC) has an accreditation system, designed in 1987. There are over 1,050 accredited family child care providers across the nation. Only 4 reside in Oregon.

NAFCC accreditation candidates use a self evaluation checklist and are visited by a parent validator and by a NAFCC validator who use the same checklist. Seven dimensions of child care are assessed: safety, health, nutrition, interaction, learning environment, outdoor environment and professional responsibility.

Candidates write a plan for professional development to complete the process. Application fees are born by the provider seeking accreditation and are currently set at $225. NAFFC accreditation is granted for a three-year period.

The Child Development Associate (CDA) Credential is a certification process that many family child care providers in Oregon use. Although not a formal accreditation process, achievement of a CDA involves many similar activities. Further information about the CDA can be found in the professionalization and workforce development section of this guide.

Accreditation for School Age Care Centers
The National School-Age Care Alliance (NSACA) is currently in the process of establishing an accreditation program for school age care centers. NSACA Standards for Quality School Age Care form the basis of the national program accreditation for school age care centers that will start in 1999.

NSACA accreditation will involve a self study that will be verified by an on-site visit from a team of trained volunteer endorsers. Materials to help a school age program prepare for accreditation are available from NSACA in a kit entitled ARQ: Advancing and Recognizing Quality (see Appendix A for contact information).
Goal and Outcomes

GOAL: Increase the number of childhood care and education settings that meet high quality standards.

<table>
<thead>
<tr>
<th>Intended Outcomes for Best Practices and Quality Assurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child care quality: programs meet national or other quality standards or indicators (5.2.7)</td>
</tr>
<tr>
<td>Other (5.2.8): Knowledge of the Nine Essential Elements for childhood care and education programs</td>
</tr>
<tr>
<td>Demonstration of standards identified for the Nine Essential Elements</td>
</tr>
<tr>
<td>Registration of family child care providers</td>
</tr>
<tr>
<td>Other (5.2.8): Engagement in the accreditation process</td>
</tr>
<tr>
<td>Accreditation for childhood care and education programs</td>
</tr>
<tr>
<td>Childhood care and education programs linked to health and family support services</td>
</tr>
</tbody>
</table>

(Numbers in parentheses refer to the OCCF database)

Mapping Assets and Identifying Needs

**What is currently being done in your community?**
Determine the number of registered family care homes, child care centers, and school age care programs in your community. Estimate the number of unregistered family child care homes operating in your area. Are any programs accredited? Are there supports available to providers on health, mental health and disability issues?

**What is needed?**
Based on your assessment of quality assurance mechanisms, develop action steps with programs and providers in your communities for improving the quality of childhood care and education.
Who can help?
See Appendix A for contact information.

- Parents and families
- Child Care Division, Department of Employment
- Colleges and universities
- Oregon Center for Career Development in Childhood Care & Education
- Oregon Commission on Children and Families and county Commissions
- Oregon Child Care Resource & Referral Network and local CCR&Rs
- Oregon Department of Education and local school districts
- Oregon Head Start Collaboration Project
- Oregon Health Division and local Health Departments
- Oregon School Age Care, Enrichment & Recreation Project
- National accrediting organizations including the National Association for the Education of Young Children, the National Association for Family Child Care, and the National School-Age Care Alliance.
- Professional organizations such as Oregon Association of Child Care Directors, Oregon Association for the Education of Young Children, Oregon Family Child Care Network, Oregon Head Start Association, and Oregon School Age Coalition
- Public and private schools
- Specialists in early intervention/early childhood special education and school age special education

Strategies

*Increase quality for family child care homes*
Promote outreach recruitment programs to contact non-registered family child care homes. Recruitment efforts should involve the use of neighborhood networks with people who are representative of the communities in which providers live, and who speak their languages. Involve community agencies and CCR&Rs in the effort, as well as developing fliers, posters and ads.

Offer incentives, training and mentoring services to increase registration including:
- information on benefits of being a registered provider,
- toy-lending libraries and resource “mobiles” that bring toys, books and materials into the homes of providers,
- connections to support networks and family child care associations,
- training on USDA child care food program.
**BEST PRACTICES & QUALITY ASSURANCE**

<table>
<thead>
<tr>
<th>Increase quality for family child care homes (continued)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assist registered family child care providers to meet higher standards of care. Offer a variety of supports in addition to those mentioned above including:</td>
</tr>
<tr>
<td>• tuition assistance for workshops and other training opportunities,</td>
</tr>
<tr>
<td>• mentoring and technical assistance,</td>
</tr>
<tr>
<td>• grants or loans for equipment and renovation,</td>
</tr>
<tr>
<td>• support in an accreditation process.</td>
</tr>
<tr>
<td>Advocate for annual licensing of all family child care providers, including:</td>
</tr>
<tr>
<td>• pre-opening inspection,</td>
</tr>
<tr>
<td>• annual inspections based on enhanced standards similar to those currently used for group child care homes,</td>
</tr>
<tr>
<td>• one annual unannounced monitoring visit.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Support the linkage of family child care homes to centers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Create formalized linkages between family child care homes and support services at childhood care and education centers or family resource centers.</td>
</tr>
<tr>
<td>Networking family child care homes as satellites to centers promotes hiring of qualified providers, increases training opportunities for providers and facilitates family access to other services and supports. Keeping family child care providers from functioning in isolation while providing multiple routes for support will enhance quality and decrease turnover.⁴⁷</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Increase knowledge of best practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distribute the <em>Essential Elements of Programs for Children</em>, developed through the Forging the Link Project, to all childhood care and education practitioners in your community. Hold forums to review the elements and plan for their implementation.</td>
</tr>
<tr>
<td>Insure that necessary training on the <em>Essential Elements of Programs for Children</em> or other standards for quality childhood care and education are available to all providers. Recruit volunteer mentors to assist programs in implementation.</td>
</tr>
<tr>
<td>Establish a videotape lending library of training tapes on developmentally appropriate practice and other aspects of quality childhood care and education programming. Include the 1998 series, <em>The Leading Edge: NAEYC’s Teleconference/Seminar on Developmentally Appropriate Practice in Early Childhood Programs</em>.⁴⁸</td>
</tr>
</tbody>
</table>
Increase quality by providing tangible recognition to high quality programs

Develop a tangible means to recognize centers and family child care homes that meet quality standards or who have gained accreditation. The Caring Assistance with Resourceful Experience (CARE) Project in Jackson County uses trained volunteers to visit family child care providers who voluntarily participate, to determine whether providers are meeting local standards for care. CARE certified providers receive resource materials, safety equipment and other technical assistance as needed.

In Rochester, New York, the Children’s Collaborative has developed a logo, “Smart from the Start” that is displayed in all centers and family child care homes that have gained accreditation.

Promote participation in accreditation processes

Publicize accreditation opportunities and highlight the benefits for all childhood care and education programs.

Recruit local businesses to “adopt a program” for the purpose of assisting in the accreditation process. Assistance may be in the form of mentoring or financial help.

Provide supports and incentives to programs seeking accreditation. Supports may include:

- funding for accreditation fees and materials,
- grants or matching funds for improvements necessary to meet accreditation standards,
- financial assistance for time to participate in an accreditation self study,
- mentoring and a support network, and
- professional development opportunities.

Improve quality of school age care programs

Provide technical assistance, financial supports and other supports including:

- training scholarships for school age providers,
- grants and/or loans for equipment or to improve facilities,
- mentoring to team experienced school age providers with less experienced providers, and
- assistance to develop local chapters of the Oregon School Age Coalition.

Fund assistance for programs to apply and conduct a self-study when NSACA-sponsored accreditation becomes available.
Support use of standard and valid measures to assess the level of quality in childhood care and education programs. Josephine county administers the Family Day Care Rating Scale\(^40\) to assess quality among providers.

Train providers and others to use the Infant/Toddler Environment Rating Scale, the Family Day Care Rating Scale, the Early Childhood Environment Rating Scale and the School-Age Care Environment Rating Scale. This training may be supported by a lending library of videotapes on each rating scale.\(^41\)

Work with the Health Department to promote safe and healthy child care as outlined in the Healthy Child Care Oregon campaign, based on Healthy Child Care America campaign. Among suggested strategies are the following:\(^42\)

Conduct training sessions for providers on how to identify the needs and goals of families and children in childhood care and education programs and how to make appropriate referrals to health, nutrition and social services. Provide a list of local health and safety resources.

Promote and increase comprehensive access to health, dental and developmental screenings. Provide directories of local health services to child care providers for referring families and children for screening.

Disseminate immunization schedules and information to child care providers, families and employers. Ask local businesses to provide incentives to families/children who are immunized such as restaurant coupons for children with up-to-date immunizations.

Provide training and ongoing consultation to providers and families in the areas of social and emotional health. Create links between the childhood care and education community and local mental health providers who can provide consultation, referrals and resources.

Convene childhood care and education providers and health care providers to clarify the roles of health care consultants in child care programs. Create and disseminate a list of health care consultants who are available to assist local childhood care and education providers.
### Linkages to Other Components of a Quality System

<table>
<thead>
<tr>
<th>Component</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COMMUNITY MOBILIZATION</strong></td>
<td>Community mobilization helps partners build a consensus that recognize the benefits of quality childhood care and education and its importance to the community at large.</td>
</tr>
<tr>
<td><strong>CONTINUUM OF CHILDHOOD CARE AND EDUCATION CHOICES</strong></td>
<td>Commitment to best practices, high standards and accreditation systems are necessary to increase the quality of care within the continuum of choices available to families and children.</td>
</tr>
<tr>
<td><strong>PROFESSIONALIZATION AND WORKFORCE DEVELOPMENT</strong></td>
<td>Local, state and national licensing regulations, quality standards, and accreditation systems have identified training and professional development standards. Standards guide professionalization and workforce development efforts.</td>
</tr>
<tr>
<td><strong>ADEQUATE FINANCING AND RESOURCES</strong></td>
<td>In the absence of adequate resources, programs can not assure elements associated with good results for children. Livable wages are necessary to attract and retain well-qualified staff.</td>
</tr>
<tr>
<td><strong>EMPLOYER INVOLVEMENT AND COMMITMENT</strong></td>
<td>The involvement of businesses and employers in supporting higher standards for childhood care and education helps to ensure family access to higher quality programs.</td>
</tr>
<tr>
<td><strong>CONSUMER EDUCATION AND PUBLIC ENGAGEMENT</strong></td>
<td>Consumer and public awareness of the characteristics and importance of high quality childhood care and education will increase its prevalence by increasing the demand for quality services.</td>
</tr>
</tbody>
</table>
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One of the most important factors influencing the quality of children’s experiences within the childhood care and education system is the level of training and education of its practitioners. Training and education not only contributes to improved skills in interacting with children and designing educational environments and curriculum, but also builds a sense of professionalism. This sense of professionalism results in greater confidence and satisfaction with one’s daily work. In addition, practitioners become involved in a network of peers who may function as resources for support, problem-solving, peer mentoring and continuing professional development.

The professionalization of any workforce is based on workers acquiring standardized training or education. Therefore, goals for professionalization include supporting childhood care and education practitioners to:

- gain training in essential areas their work with children,
- actively engage in and commit to their profession, and
- increase their employment advancement and retention capabilities.

**Oregon’s Career Development System**

In 1992, a collaborative group of interested citizens, policy makers and professionals came together to develop plans for a comprehensive career development system. The result was a long-plan that addressed statewide coordination of education and training, delivery systems, compensation and licensing and certification of childhood care and education personnel.

The Oregon Center for Career Development in Childhood Care and Education was established in 1995 to implement Oregon’s long-term plan for professionalizing childhood care and education practitioners. This plan and its implementation are consistent with national efforts at professionalizing childhood care and education. Housed at Portland State University, the Center’s mission is to promote the quality of childhood care and education for Oregon’s children and families by providing a career development system for practitioners.

One of the goals of Oregon’s long-term professionalization plan is to establish a multi-tiered education and training system. This was considered important because there have been no consistent training and education standards for practitioners. One of the first steps towards creating this multi-
tiered education and training system was the selection of a core body of knowledge.

**Core Knowledge Categories**

Twelve Core Knowledge Categories have been adopted for childhood care and education practitioners and reflect the areas in which all practitioners should have training and education. These categories interconnect with the established guidelines (or Essential Elements) for creating programs for children and families.

<table>
<thead>
<tr>
<th>Childhood Care and Education Core Knowledge Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Human Growth &amp; Development</td>
</tr>
<tr>
<td>2. Diversity</td>
</tr>
<tr>
<td>3. Child Abuse</td>
</tr>
<tr>
<td>4. Learning Environments</td>
</tr>
<tr>
<td>5. Guidance and Discipline</td>
</tr>
<tr>
<td>6. Curriculum</td>
</tr>
<tr>
<td>7. Observing, Recording &amp; Assessing</td>
</tr>
<tr>
<td>8. Professionalization</td>
</tr>
<tr>
<td>9. Health, Safety &amp; Nutrition</td>
</tr>
<tr>
<td>10. Families &amp; Other Social Systems</td>
</tr>
<tr>
<td>11. Childhood Care &amp; Education Management</td>
</tr>
<tr>
<td>12. Interpersonal Development and Communications</td>
</tr>
</tbody>
</table>

After recent input and feedback from representatives of the childhood care and education community, a thirteenth Core Knowledge Category was approved. This category will cover the inclusion of children with special needs. Training and education requirements for this category will be added to the Professional Development Registry application packet.

Childhood care and education workers who receive training in the Core Knowledge Categories are better able to provide services that meet the Essential Elements of quality childhood care and education (see pages 35-37 for a further description).

Training in the Core Knowledge Categories is important because research indicates that trained and educated practitioners are better able to facilitate the development of children who are:

- ready to learn and more advanced intellectually,
- task persistent and involved in constructive activities,
- capable communicators,
• socially competent, cooperative and empathetic with others,
• likely to view themselves and others positively,
• likely to learn from and deal with life situations positively, and
• emotionally healthy.

Research further indicates that personnel who are trained and educated in childhood care and education are more likely to remain employed in the field. These personnel are more likely to create situations where children can develop stable, secure relationships with their caregivers and where children become more considerate, sociable, intelligent and task-oriented individuals.\(^43\) For example, a recent study by the Families and Work Institute found that, in Florida, increased staff training requirements were related to improvements in cognitive and emotional outcomes for children.\(^44\)

**Barriers to Training and Education**

Unfortunately, a number of barriers keep childhood care and education practitioners from receiving training and education:

• lack of available statewide training and education programs,
• limited financial resources to pay for this training,
• lack of financial incentives for completing this training,
• inadequate financial compensation, and
• isolation and lack of social and professional support.

To meet these challenges, a number of statewide initiatives have been developed to facilitate access to training and to encourage commitment to and retention in the profession. These initiatives operate in conjunction with professional organizations that seek to support connections to others in the field and to professional development opportunities.
**Goal and Outcomes**

**Goal:** Professionalize the childhood care and education workforce.

<table>
<thead>
<tr>
<th>Intended Outcomes for Professionalization and Workforce Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improved skills for childhood care and education practitioners (5.2.6)</td>
</tr>
<tr>
<td>Increased retention in the field (5.2.6)</td>
</tr>
<tr>
<td>Other (5.2.9): Utilization of local resources for training and education</td>
</tr>
<tr>
<td>Identification of training resources</td>
</tr>
<tr>
<td>Participation in statewide training opportunities</td>
</tr>
<tr>
<td>Creation of individualized professional development plans leading to a certificate, credential or degree</td>
</tr>
<tr>
<td>Increased awareness by families of linkages between the Professional Development Registry and quality childhood care and education programs</td>
</tr>
</tbody>
</table>

(Numbers in parentheses refer to the OCCF database)

Professionalizing the childhood care and education workforce will provide an indication of positive progress towards a quality childhood care and education system. Focus on intended outcomes should occur after careful consideration of type of evaluative information desired and the resources available for evaluation.
Mapping Assets and Identifying Needs

**What is currently being done in your community?**

Determine how community employers, parents, programs and providers are demonstrating their commitment to workforce development.

1. Locate and list the childhood care and education programs and providers in your communities.

2. Review and assess each childhood care and education program to determine their level of involvement in the following identified strategies:
   - Participation in the Professional Development Registry.
   - Participation in formal training and education programs.
   - Participation in the review and approval system for informal training.
   - Use of childhood care and education information dissemination systems.
   - Participation in statewide training initiatives.
   - Participation in a statewide mentoring program.
   - Membership and participation in professional organizations.
   - Pay and compensation levels are linked to participation in strategies identified above.

**What is needed?**

Based on your assessment of professionalization and workforce development, develop action steps with programs and providers in your communities for either implementing or for continuing their active participation in these strategies.

**Who can help?**

See Appendix A for contact information.

- The Oregon Center for Career Development in Childhood Care and Education
- Local community colleges, colleges, and universities
- Oregon Child Care Resource and Referral Network
- Professional organizations such as the Oregon Association for the Education of Young Children (OAEYC), the Oregon Association of Child Care Directors (OACCD), the Oregon Family Child Care Network (OFCCN), and the Oregon School Age Coalition (OSAC)
Who can help? (continued)

- Oregon State Extension Service
- The Early Childhood Training Center at Portland State University
- Teaching Research at Western Oregon University
- The American Red Cross
- USDA Food Programs

Strategies

To assist with actual review and planning, a supplement has been provided in Appendix I, entitled Guide To Professionalization, Training and Workforce Development Resources. This supplement provides detailed information on each strategy and answers questions regarding what it is, how it works, how it impacts quality services, what it costs, and whom to contact.

Support participation in the Oregon Childhood Care and Education Professional Development Registry

Publicize and promote participation in the Professional Development Registry.

The Professional Development Registry (PDR) is a voluntary statewide system that recognizes the professional achievements of people who work in childhood care and education. People who work in these settings can apply for one of six levels of professional development, representing various combinations of training and experience.

Individuals who apply to the Professional Development Registry put together a Professional Portfolio. This portfolio contains documentation of the individual’s work experience, training and education, personal qualifications and commitment to the field. The completed portfolio is verified and reviewed by a panel of childhood care and education professionals, who then assign the individual to the appropriate professional level.

Support participation in formal educational programs

Child Development Associate (CDA) Credential. The CDA is a nationally recognized credential for people who work in childhood care and education (birth - age 5). To obtain a CDA, practitioners must attain 120 hours of training across 8 content areas, collect questionnaires from the parents they serve, take an exam, and participate in an observation session and interview.
Support participation in formal educational programs (continued)

**Higher Education.** A number of community colleges, colleges and universities in Oregon offer programs or coursework in childhood care and education. Training and education offered through the higher education system is qualitatively different than not-for-credit training and education. Participants typically make a long-term commitment to the experience and are offered the opportunity to reflect on the knowledge they are gaining through tests, papers, supervised field experiences and other academic activities.

Support participation in the review and approval system for informal training

**The Oregon Certified Childhood Education Trainer (OCCET) program** is part of a national effort in the profession of childhood care and education to establish training review and approval systems for informal training programs. OCCET validates training programs in the informal sector, that is training which is not offered for academic credit.

The OCCET program certifies both the individual trainer and the individual training session. Certified trainers may train and certified at a specific training level and in specific Core Knowledge Categories. Individual training sessions are certified for specific Core Knowledge Categories and at a specific Professional Development Registry Level.

Support use of childhood care and education information dissemination systems

**The Oregon Child Care Resource and Referral Network** is a member organization for the child care resource and referral agencies in Oregon. The Network seeks to “strengthen child care resource and referral services throughout Oregon for a high quality child care system.”

The Network coordinates with the local agencies to: 1) assist families with child care information and referral; 2) assist employers with options for work/life programs; 3) assist child care businesses and practitioners with recruitment and training; and 4) provide communities with research for community planning.
The Oregon Childhood Care and Education Clearinghouse and Training Needs Assessment will be a system for providing effective and timely information regarding education and training opportunities in the field. The system, which is just being created, will include an on-going needs assessment for childhood care and education training and education. Its primary purpose will be to distribute information on training and education throughout the state.

The Consultant Database was created in 1994 by the State Commission on Children and Families and Linn Benton Community College. The database is currently in hard-copy form and provides information to the county commissions on how to access needed professional expertise pertinent to childhood care and education. One potential use of the Clearinghouse is to improve access to the consultant database.

Additional information about these training opportunities can be found in the companion Guide to Professionalization, training and Workforce Development Resources.

Oregon Child Care Basics (OCCB) consists of two four-hour classes. OCCB I covers Health, Safety and Nutrition; OCCB II covers Social and Emotional Development and Guidance. These classes are offered throughout the state.

First by Five Infant/Toddler Training Program. First by Five is a training program in Infant/Toddler caregiving for child care center staff, group care providers, and family child care providers. The program consists of four training modules: Social-Emotional Growth and Socialization; Group Care; Learning and Development; and Culture of Family and Providers. Each module is ten hours long. Classes are offered throughout the state.

Overview. Overview is required by the Child Care Division for individuals interested in becoming family child care providers. The training is two and a half hours in length and is offered at local child care resource and referral agencies. It covers aspects of childhood care and education management, CCD rules, and partner agencies (USDA, R&Rs, available training). This training helps potential family child care providers ask themselves, “Is this the job for you?”
Child Abuse and Neglect. Child Abuse and Neglect is a required two hour training offered through the Child Care Division. The training covers the identification and reporting of child abuse and neglect. Family child care providers are notified at the renewal of their registration that they must take the training.

Infant and Child First Aid/CPR. Infant and Child First Aid/CPR is offered through a variety of agencies statewide including local Red Cross agencies. The courses are generally 6 hours in length and lead to a certification. The certification for CPR must be renewed every year. First Aid is renewable every 3 years.

Love and Logic. Love and Logic is a twelve hour training offered at various locations around the state. The training provides information on guidance, discipline, and interpersonal development and communications.

Cherishing Our Children. Cherishing Our Children is six hours in length. The training covers guidance and discipline, learning environments, curriculum and professionalization.

Second Helping. Second Helping is designed for family child care providers. There are four modules of eight hours each covering “The Children”, “The Family”, “The Provider” and “The Business”.

Maximizing Oregon’s Brain Power. Maximizing Oregon’s Brain Power introduces people to the latest research involving the development of the brain and quality care environments. The training is offered statewide. The length of the training varies.

The Oregon Childhood Care and Education Mentoring Program is currently in the initial stages of its development and will link with local mentoring programs around the state. As envisioned, District Mentors will train County Mentors to work with less experienced practitioners in the field of childhood care and education. The mentoring will focus on encouraging personal and professional growth, facilitating career development including participation in the Professional Development Registry, and supporting commitment to and retention in the field.
Professional organizations can provide connection and support for people who work in childhood care and education, thus promoting retention. People who remain employed in the field for longer periods of time are more likely to provide quality care and education for the children they serve.

There are a number of professional organizations that serve people who work in childhood care and education. These professional organizations vary in terms of the portion of the field they serve and the services they provide to their members or constituents.

Many of the organizations hold regular meetings, publish newsletters or other bulletins and conduct yearly professional development conferences.

The following professional organizations serve the state of Oregon:

**Oregon Association for the Education of Young Children (OAEYC):** OAEYC is Oregon’s affiliate of the National Association for the Education of Young Children. Its purpose is to serve and to act on behalf of the needs and rights of young children with primary focus on the provision of educational services and resources. It promotes professional development for its members and is committed to the active support of children’s greatest social, emotional, physical and intellectual potential. OAEYC sponsors two statewide conferences annually as well as regional training opportunities through 21 local chapters.

**Oregon Association of Child Care Directors (OACCD):** OACCD is a professional organization for child care directors, assistant directors and program administrators. OACCD works to enhance the Oregon child care administrator’s ability to provide quality services by: (1) offering workshops, conferences and publications, (2) defending and supporting the needs of children in the center, home, community and state, and (3) providing a network for professional cooperation and a forum for communication via a quarterly newsletter.
Support participation and membership in professional organizations (continued)

Oregon Family Child Care Network (OFCCN): OFCCN is a communication network designed to inform family child care providers about what is happening in the childhood care and education field. It also provides a connection for providers to support and education organizations and to other providers in the field. Oregon has over 50 different support and education groups.

Oregon Head Start Association (OHSA): OHSA is a professional organization for directors, staff, and parents from both federal and state-funded Head Start Pre-kindergarten programs and the Together for Children programs. Its purposes are to: (1) facilitate sharing among members, (2) identify and act on common issues, (3) advocate for member programs and young children and their families, (4) link with other organizations and individuals who have similar concerns, and (5) promote comprehensive child development services.

Oregon School Age Coalition (OSAC): OSAC is a state affiliate of the National School-Age Care Alliance. It is a professional organization for directors, staff, recreation leaders, youth development workers, family child care providers and advocates who work with 5 to 14 year old children in out-of-school settings. OSAC sponsors an annual statewide conference as well as other training opportunities. OSAC also provides a quarterly newsletter and other written materials.
## Linkages to Other Components of a Quality System

<table>
<thead>
<tr>
<th>Component</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>COMMUNITY MOBILIZATION</strong></td>
<td>Fostering professionalization and workforce development requires communities to plan for staff training and professional development in addition to planning programs and facilities.</td>
</tr>
<tr>
<td><strong>CONTINUUM OF CHILDHOOD CARE AND EDUCATION CHOICES</strong></td>
<td>The need for competent and well trained staff is a key issue in all the diverse options and types of services available for children and families. Well trained and informed professionals are better able to create safe, healthy and stimulating environments for children and youth.</td>
</tr>
<tr>
<td><strong>BEST PRACTICES AND QUALITY ASSURANCE MECHANISMS</strong></td>
<td>Local, state and national licensing regulations, quality standards, and accreditation systems have identified training and professional development standards. Standards guide professionalization and workforce development efforts.</td>
</tr>
<tr>
<td><strong>ADEQUATE FINANCING AND RESOURCES</strong></td>
<td>Costs for training and professional development should be shared within the local or state community and should not be solely borne by childhood care and education practitioners. People working in the field should receive a worthy wage, that is, a living wage that is similar to what is earned by workers with similar levels of education and experience. Personnel policies and wages need to be tied to training and professional development.</td>
</tr>
<tr>
<td><strong>EMPLOYER INVOLVEMENT AND COMMITMENT</strong></td>
<td>Local employers in the community can be involved by sharing training resources in management, business, health, and safety. When providing or recommending childhood care and education services to families, employers should consider professionalization and provider training.</td>
</tr>
<tr>
<td><strong>CONSUMER EDUCATION AND PUBLIC ENGAGEMENT</strong></td>
<td>In order to value and support professionalization and workforce development, communities and families need information about the ways in which training for childhood care and education practitioners influences the quality of services provided to the children.</td>
</tr>
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</table>
ADEQUATE FINANCING AND RESOURCES

Today, families pay a majority of the costs of childhood care and education. For some families, these costs can be a large percentage of their income, often more than they can afford. The result is that children who are not eligible for government or other subsidies, or whose parents have limited incomes, tend to experience lower-quality programs.

Traditionally, government and communities have responded to the problem of ensuring quality and affordability by subsidizing childhood care and education services for families living in poverty. Public funding for childhood care and education, however, is provided through a patchwork of programs. Access to needed services is not universal for all families.

Further, parents alone are not paying for care. Practitioners also subsidize care by working for low wages and few benefits. Assisting both families and practitioners with adequate and equitable financing is essential if all children are to have access to quality childhood care and education services, and if families are to have adequate choices in types of services.

The Cost of Care

In 1995, the Cost, Quality and Child Outcomes Study Team (CQCO) calculated the full cost of childhood care as $2.83 per child hour. Families paid $2.11 or 74% of the full cost of care as shown in Figure 6. Some families receive direct subsidies to assist them with these child care payments. These subsidies include tax credits, scholarships and other financial assistance. These direct subsidies amount to about one third of actual family payments.

The full cost of care differs from what families actually pay because of hidden “subsidies.” The largest component of these hidden subsidies (19% of the full cost) is *foregone wages*, defined as the difference between the wages child care workers are paid and what other workers with similar education and experience are making.

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Figure 6

Who Pays for the Full Cost of Care?

- Actual Family Payment: 74%
- Donated Facilities: 5%
- Volunteer Time: 1%
- Donated Goods: 1%
- Foregone Wages: 19%
Other hidden subsidies are *donated goods* (1%), *volunteer time* (1%), and *donated occupancy or facilities* (5%). Together, these hidden subsidies account for the remaining $0.72 or 26% of the full cost of care.

Labor represents 70% of the actual cost of running a center. Child care programs often reduce the cost of labor through high child-to-staff ratios, low pay, and low educational requirements. Cost savings such as these, however, have a negative impact on program quality. The CQCO Study has concluded that if programs were to avoid these practices, cost per child hour would only be increased about 10%, yet quality would move from an average of mediocre to an average of good.

### Compensation for Providers

Childhood care and education staff continue to perform “worthy work for unlivable wages,” according to the 1998 National Child Care Staffing Study.\(^4\) Compensation remained relatively constant over the past decade with low wages being the norm. The range for teachers shows an average of $10.85 per hour or $18,988 per year at the highest end and only $7.50 per hour or $13,125 at the lowest end. The wages for assistant teachers are even lower, ranging from an average of $7.00 per hour for highest paid to approximately $6.00 per hour for the lowest paid assistants.

Key findings from the National Child Care Staffing Study follow:

1. Child care teaching staff continue to earn unacceptably low wages, *even in a sample of relatively high-quality centers*.

2. Child care centers continue to experience *high turnover of teaching staff*, threatening their ability to provide good-quality, consistent services to children.

3. More child care centers received public dollars in 1997 than in 1988, assisting more low-income families with child care costs. But because the increased funds were rarely targeted to quality improvements or increased compensation, these dollars have not resulted in better wages or lower staff turnover.
4. Programs accredited by the National Association for the Education of Young Children pay higher wages to staff, and report lower teacher turnover. Overall, accredited programs have retained twice as many staff over the past decade.

The 1994 Carnegie Report points out that the quality of childhood care and education is compromised by high turnover rates in the staffing of childhood care and education programs.

“Experienced child care providers who love their jobs leave them in large numbers because of low salaries and inadequate benefits. Studies show that annual turnover for child care providers is nearly 3 times the rate reported by U.S. companies, and nearly 5 times the rate reported for public school teachers.”

Experts agree that quality, compensation and affordability are closely interwoven. Efforts to establish a quality childhood care and education system must address all three issues together.

Making Child Care Affordable

In all 50 states, families struggle to afford childhood care and education, according to a 1998 report from the Children's Defense Fund. Most families are surprised when they realize how much care actually costs. The average cost of sending a 4-year-old to a child care center in urban areas is often higher than the average cost of tuition to a public college.

Paradoxically, the less families earn, the higher the proportion of their income that is spent on childhood care and education. Families with incomes under $15,000 per year spend 23% of their income on childhood care and education, whereas families with annual incomes of $50,000 or more devote only 6% for the same services.

Tax programs

Families can save money on childhood care and education expenses through several working family and child care oriented tax programs:

**Earned Income Tax Credit**

Working families with children whose annual income is less than $25,269 (with two or more children) or $23,755 (with one child) qualify for the Earned Income Tax Credit (EITC). The credit is subtracted from the amount of tax owed by the family. In some cases, families may receive refunds.
Working parents with taxable earnings are allowed to deduct a portion of child care expenses from their federal and state income taxes. To qualify for the credit, both parents in a dual-income family or the head of a single-parent household must be working.

The child in care must be younger than 13 and parents must include the Social Security number or taxpayer identification number of their child care provider on their tax form. Payments to “off-the-books” providers do not qualify for the tax credit.

Currently, allowable child care expenses are limited to $2,400 for one child or $4,800 for two or more children. The credit starts at 30% of expenses for families earning less than $10,000, and shrinks one percentage point for every additional $2,000 of income until a minimum level of 20% is reached.

The 1997 Oregon Legislature established the Working Family Child Care Credit as a non-refundable credit, calculated as a declining percentage of qualified child care expenses. For taxpayers under 150% of federal poverty level, credit is calculated as 40% of qualified child care expenses. Credit phases out for taxpayers over 200% of federal poverty level and cannot exceed tax liability.

Dependent Care Assistance Programs (DCAPS) are initiated through employers. Also known as flexible spending accounts, DCAPs allow employees to set aside up to $5,000 of pretax earnings to pay for child care for dependents younger than 13. The amount withheld is not subject to federal, state, and Social Security taxes. To qualify, employees enroll in the program during an established registration period each year and designate an amount to be deducted from each paycheck.

Child care bills are submitted to the DCAP administrator at the place of employment, who then either reimburses the employee or pays the child care provider directly using the employee withholdings. The Social Security number or taxpayer identification number of the child care provider then must be included on the employee’s tax forms.
Financial assistance
In addition to the above tax programs that reduce the cost of childhood care and education, some families receive direct financial assistance. Examples of financial assistance include vouchers and direct payment to providers, eligibility in Head Start programs and scholarships.

Financial assistance is primarily targeted toward helping moderate and low-income families pay for childhood care and education. In Oregon, over 70% of the federal Child Care Development Fund dollars is dedicated to providing subsidized child care for low-income working parents and student parents. Most of these subsidies are dispersed through the Department of Human Resources to Adult and Family Services (AFS) clients as they move from public assistance to self-sufficiency.

AFS is required by law to conduct a market rate study every two years that shows what providers charge for different types of child care. After consideration of this information, provider payment rates are established through the state budget process. The current AFS payment rate is based on a 1994 market survey implemented in 1995. Since then, there have been two cost-of-living raises.

Families who receive AFS subsidies are limited somewhat in their choice of care since the payment rate is currently set at the 75th percentile of the rate charged by providers within a given geographic area. This payment rate means that low income families are able to access 75% of the child care market in their area. They are not able to access the top 25% of providers who charge higher rates than the others.

Families who receive subsidies through AFS must pay part of the cost out of their own pockets. This payment is referred to as a co-payment. The co-payment increases as family income levels increase.

Currently, co-payments required by Adult and Family Services (AFS) for Employment or Education Related Day Care subsidies range from just under 4% of family income for those at the very lowest income levels to 10% for families whose income puts them at 120% of the federal poverty level. At the upper end of the income range, families with $20,000 annually pay approximately 30% of their income.

In conclusion
For service providers to be able to offer quality childhood care and education programs, and families to be able to have access and pay for these services, adequate financing and resources must be available. A quality childhood care and education system must include funding resources both to support subsidies for families and to reduce the hidden subsidies. Additional information on family finances and child care costs is provided in Appendix J.
Goal and Outcomes

Goal: Assure adequate and equitable financing so all children have access to quality childhood care and education services.

<table>
<thead>
<tr>
<th>Intended Outcomes for Adequate Financing and Resources</th>
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<tbody>
<tr>
<td>Childcare: quality, affordability, and accessibility (1.1.5)</td>
</tr>
<tr>
<td>Sliding fee scale or other &quot;affordability&quot; strategies (5.2.2)</td>
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<tr>
<td>Other (5.2.8): Compensation tied to professionalization</td>
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<tr>
<td>Improved reimbursement rate structure for publicly purchased child care</td>
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(Numbers in parentheses refer to the OCCF database)

Mapping Assets and Identifying Needs

What is currently being done in your community?

Contact the CCR&R in your area and ask for their assistance to identify available financial resources for families and providers in your community.

- Are child care subsidies available to all eligible families?
- Are there loan or grant programs in place for facility and equipment costs?
- Are there scholarships or other financial aids available for training and/or program accreditation?

What is needed?

Identify families in need of financial resources to help offset childhood care and education costs. In addition, identify the needs of providers in supplying quality childhood care and education. This can be done by contacting your local CCR&R and AFS offices in your area and ask for their help, or by conducting a survey of parents, family service agencies, employers, care and education centers, Head Start programs, public and private schools, and service providers.
Who can help?

See Appendix A for contact information:

✓ Adult and Family Services, Department of Human Resources
✓ Charitable giving groups and foundations such as the Oregon Child Development Fund
✓ Commission for Child Care
✓ Child Care Division, Department of Employment
✓ Local Businesses and Employers
✓ Oregon Child Care Resource and Referral Network and local resource and referral agencies
✓ Oregon Commission on Children and Families and county CCFs
✓ Oregon Community Development Organizations
✓ Oregon Head Start Collaboration Project, Department of Education

Strategies

**Promote equitable access for all families**

Support families to use existing tax credits, available DCAPs, and other direct subsidies. Work with CCR&Rs to disseminate information about dependent care tax credits and other direct subsidies that help to make childhood care more affordable for families.

Advocate for the Working Family Child Care Credit to be made refundable to provide tax relief to low income families with no tax liability.

Support efforts by AFS to place a limit on co-payments so that fees required from families eligible for public subsidies will be no more than 10% of family income.

Support increasing the current student childhood care funding to serve more eligible student parents. Currently, the Student Child Care Block Grant Program serves about 250 students per month, yet there are over 900 students on a waiting list.
Advocate for increasing the reimbursement rate to child care providers. Rate enhancement means that childhood care providers will not turn away families receiving AFS subsidies.

Advocate for a higher reimbursement rate to family child care providers when they meet specified standards or achieve accreditation.

Provide financial incentives to programs for hiring and keeping experienced administrators and skilled staff. The North Carolina TEACH project is an example of a public-private partnership that ties increased wages to training and a commitment to stay on the job. Wage increases, retention grants, or bonuses are provided upon completion of an agreed upon number of course hours or a credential.

Develop a short-term loan or subsidy program to assist families who face transitional childhood care needs. For example, the Rose Community Development Corp. in Portland awards mini-grants or subsidies up to $700 to help families with needs such as:

- deposits required by new childhood care providers,
- funds to avoid pulling a child out of care due to short-term financial problems, or
- transitional grants needed after leaving welfare for work.

Establish a scholarship fund for practitioners who may not be able to afford the costs of pursuing professional development goals. Use seed money to leverage support from a variety of sources, such as businesses, community groups, and parents and families.

Provide resources as needed for providers to participate in the Professional Development Registry. The Oregon Center for Career Development in Childhood Care and Education estimate the current average expenditures for applying are approximately $44. This figure does not include the applicant’s time or training expenses.
Improve adequacy of facilities and equipment

Develop “micro-lending projects” with local banks to improve and expand facilities. Work with CCR&Rs to help providers do a self-assessment as to their readiness for a business loan.

Award grants and loans for equipment and facility needs. The Rose Community Development Corp. of Portland awards small grants to providers for toys and equipment.

Enlist businesses to set space aside for child care centers. For example, California and Maryland require space allocation in new state buildings for this type of use. Massachusetts allows the child care portion of a site to be taxed at the residential rate rather than the commercial rate charged to the rest of the building.

Support the creation of a statewide fund specializing in loans to non-profit agencies for building and renovating quality child care facilities. This fund would be modeled on the Illinois Facilities Fund that blends state, foundation and other funds to design and construct facilities specifically for childhood care and education.

Support the Oregon Community Development and Child Care Initiative to explore new mechanisms to finance child care start-ups and improvements. The initiative is a collaboration between the Oregon Child Care Resource and Referral Network and the Association of Oregon Community Development Organizations. See Appendix A for contact information.

Increase the availability of technical assistance with childhood care financing

Create a mentoring system where business people, including successful child care providers, can advise service providers on practices to enhance and stabilize their operations.

Develop a listing of financial and business people who can offer training and or share expertise on such matters as employee compensation, funding and financial advising, starting a child care center, business training, or marketing.
Document model approaches and educate local employers on ways to fund paid parental leave. Examples of approaches may include: expanding unemployment insurance or temporary disability insurance systems to cover working parents for child care; or requiring additional employer contributions to fund paid parental leave.

Increase employer awareness of Oregon’s Dependent Care Assistance Programs (DCAPs). Also known as flexible spending accounts, DCAPs allow employees to save money because DCAP withholdings reduce their taxable income. Companies save money because they do not pay their portion of Social Security taxes that would otherwise be due on the amount withheld.

Use the Employer Tool Kit for creative ideas on how employers can assist with dependent care costs. Also apply these ideas to school age care.

Educate local employers about available tax incentives. In 1987 Oregon established a 50% tax credit for corporations providing or paying for childhood care and education services for their employees. Employees can choose any certified provider, and after the services are paid the corporations are allowed a credit up to $1,250 per full-time employee (1987, OR. Laws, Chap. 682).
## Linkages to Other Components of a Quality System

<table>
<thead>
<tr>
<th>Component</th>
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<tbody>
<tr>
<td><strong>COMMUNITY MOBILIZATION</strong></td>
<td>Community mobilization brings people together to agree on priorities that no single participant can finance. Community partners can make a commitment to finance the array of projects necessary to the vision, in addition to providing technical assistance.</td>
</tr>
<tr>
<td><strong>CONTINUUM OF CHILDHOOD CARE AND EDUCATION CHOICES</strong></td>
<td>Increasing the number of child care slots to assure an accessible supply for families and children depends to a large extent on adequate financing and resources.</td>
</tr>
<tr>
<td><strong>BEST PRACTICES AND QUALITY ASSURANCE MECHANISMS</strong></td>
<td>In the absence of adequate resources, programs can not assure elements associated with good results for children. Livable wages are necessary to attract and retain well-qualified staff.</td>
</tr>
<tr>
<td><strong>PROFESSIONALIZATION AND WORKFORCE DEVELOPMENT</strong></td>
<td>Costs for training and professional development should be shared within the local or state community and should not be solely borne by childhood care and education practitioners.</td>
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<td>People working in the field should receive a worthy wage, that is, a living wage that is similar to what is earned by workers with similar levels of education and experience. Personnel policies and wages need to be tied to training and professional development.</td>
</tr>
<tr>
<td><strong>EMPLOYER INVOLVEMENT AND COMMITMENT</strong></td>
<td>In order to support the childcare needs of working families, communities need the help of employers to implement and fund family friendly policies.</td>
</tr>
<tr>
<td><strong>CONSUMER AND PUBLIC EDUCATION</strong></td>
<td>As consumers become more educated on the value of investing in quality child care, they will be willing to pay more for a quality care setting. Educating the public on the benefits of a quality childhood care and education system will lead to increased interest and support for funding a quality system.</td>
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</table>
Employer Involvement and Commitment

Employers play an important role in the childhood care and education systems because they have a direct impact on families through their employment policies. In addition, employers often have the ability to provide families with assistance for their childhood care and education needs. Businesses with a commitment to their communities have found creative ways to directly support local childhood care and education programs and providers.

The U.S. Bureau of Labor Statistics reported that 61% of women with children under 6 were working outside the home in 1997. The percentage increased to 75% for those with children ages 6 to 17. Balancing work and family is not just a women’s issue. Approximately 90% of fathers with children under age 18 work and the number of single fathers has tripled since 1975. 51

Balancing Work and Family Life

Employers are increasingly recognizing the intersection of the workplace and family life. Two primary issues that motivate employers are concerns for workplace productivity and concerns about adequately educating tomorrow’s workforce. 52

For a growing number of workers and their employers, taking care of business also means taking care of family needs:

“Well, life benefits don’t just lure valuable employees. Employers who help employees balance work and family are reporting higher morale, less turnover, lower training costs, and greater productivity in their workplaces. Investment in a work/life program can also mean tax benefits for employers.” 53

Policies that assist families to balance work and family life include:

- flexible work arrangements,
- leaves of absence to take care of family needs such as maternity or bereavement leave,
- education services on balancing work and family life,
- financial policies such as cafeteria plan benefits, and
Employer involvement & commitment

- assistance with dependent care needs for children, the elderly or other family members who are dependents of the employee and physically or mentally incapable of taking care of themselves.

Employer supported benefits can assist with childhood care and education needs. Specific policies that help employees access quality childhood care and education include:

- providing services by operating childhood care facilities or supporting in various ways the availability of childhood care at or near the work site,
- providing employees with child care resource and referral services through contracts with local information and referral services,
- making cash payments or vouchers to employees to help pay for childhood care and education, and
- implementing flexible personnel policies.

Tax Advantages for Employers

Under 1988 legislation, Oregon employers have been given a tax advantage for assisting employees to meet their dependent care needs and expenses. Employers can claim tax credits for providing any one or more of three types of dependent care assistance to employees:

- Information and referral services
- Dependent care assistance
- Dependent care facility

Information and referral services (which includes child care, elder care and special needs care) are a relatively low-cost option that can reduce the hassles of locating appropriate care. Oregon employers can receive a tax credit equal to 50% of their costs for providing such services up to a maximum of $2,500 per assisted employee in each taxable year.

Cash payments or vouchers for purchasing dependent care are another type of assistance for which employers can receive tax credits. Employers may take a tax credit of 50% of the amount paid or incurred through the voucher up to a maximum of $2,500 per assisted employee in each taxable year.

A third provision of the law permits tax credits for dependent care facilities. Facilities may be acquired, constructed, reconstructed, renovated or otherwise
improved real property, to be used primarily for the purpose of a dependent care facility serving employees. Dependent care may be in the form of family or group child care homes, a center-based facility, involve school age and/or sick dependent care and care for children with special needs.

Employers who provide a childhood care and education facility, either alone or in collaboration with others, may take a tax credit equal to the smallest of the following:

(a) 50% of the amount paid for acquisition, construction, or improvement of the property,
(b) $2,500 times the number of full-time equivalent employees, or
(c) $100,000. Unused tax credits may be carried forward for five years.  

Educating Employers

Designed through a collaborative project of the Oregon Commission on Children and Families, the Oregon Commission for Child Care and various other organizations and agencies that provide essential services for communities, families and employers, Oregon’s Employer Tool Kit provides an outstanding educational resource. The Tool Kit details proven business strategies based on cutting edge practice in Oregon and elsewhere in the country.

Because every workplace is not the same, the Tool Kit offers options for any size employer and any size budget. Topics addressed by the Tool Kit include the following:

- Oregon’s Dependent Care Tax Credits for Employers
- Employee Needs Assessment
- Cost Benefit Analysis
- Dependent Care Subsidies
- Resource & Referral and Other Family Support Services
- Direct Dependent Care
- Flexible Personnel Policies
- Business and Community Partnerships
Goal and Outcomes

Goal: Increase employer awareness, involvement and commitment to high quality childhood care and education for employees and communities.

Intended Outcomes for Employer Involvement and Commitment

| Workplace benefits to support families (5.4.6) | Other (5.3.8): Support of resource and referral services for employees |
| Knowledge of benefits accruing from access to quality childhood care and education | Provision of dependent care subsidies for employees |
| Knowledge of tax benefits from supporting quality childhood care and education | Provision of facilities or programs for childhood care and education |
| Flexible personnel policies that support work/life issues |

(Numbers in parentheses refer to the OCCF database)

Mapping Assets and Identifying Needs

**What is currently being done in your community?**

Identify current levels of involvement by the business community and local employers. What representatives are involved in the community mobilization effort? What work/life services are currently provided?

**What is needed?**

Based on your assessment of current employer involvement, target specific employers or businesses and develop action steps to increase their involvement and commitment.

**Who can help?**

- Chamber of Commerce
- Families and Work Institute
- Local human resources personnel
- Local business groups such as Rotary and associations of retired business people.
- Oregon Commission for Child Care
- Oregon Commission on Children and Families and county Commissions
- Oregon Child Care Resource & Referral Network and local CCR&Rs
Strategies

**Support efforts to inform and engage employers**

Work with the local CCR&R agencies to educate employers about strategies for balancing work/life issues. Use personal contacts to distribute and discuss the *Employer Tool Kit*.

Enlist the help of employers who have already become involved, and are offering childhood care and education assistance. Employers are particularly interested in the attitudes and experiences of other employers.

Arrange for employers and business people in the local community to receive the “Smart Moves” newsletter on family friendly policies, published by the Oregon Commission on Children and Families and the Oregon Commission for Child Care through the Campaign for Business & Family.

**Publicize employer involvement**

Provide publicity for model employer programs. Emphasize the benefits of increased quality childhood care and education services, both tangible and intangible, to children, employees and employers. Include dollar amounts invested, collaborations that may have been involved and testimonials representing all viewpoints.

Establish a *Families in Good Company* program for your community. Sponsored by OCCF and Children First for Oregon, *Families in Good Company* is a recognition and awareness program for businesses that incorporate family friendly policies into their workplace. Awards are given each year to those recognized companies that have displayed excellence and leadership as family friendly businesses.

**Create community-business partnerships**

Enlist local business associations in the work of improving the local childhood care and education system. Focus on educating and gaining the support of one or more local business associations, such as the Chamber of Commerce or the Rotary Club. Offer to speak at their meetings regularly, to provide information and motivational talks and to publicize involved employers.

Hold leadership roundtables to inform business leaders and employers of the issues in childhood care and education. Link business concerns about productivity and workforce development with the need to improve childhood care and education.
Provide technical assistance to interested employers to help with an assessment of needs, resources and a cost-benefit analysis. The *Employer Tool Kit* is an excellent resource for this process.

Provide employers with help to facilitate decision-making regarding what type of assistance to provide employees, based on:
- employee needs
- employer, employee and community resources
- desired benefits for all.

Establish a fund to provide employers with low-cost loans or grants for start-up costs involved in buying or remodeling facilities for a dependent care program.

Reward employers who begin or upgrade an assistance program. Such incentives need not be monetary. For example, individuals or groups in the community may be willing to provide free publicity or other perks to involved businesses. Such perks might include free donuts from a bakery, or free well-child visits to a pediatrician for lucky raffle ticket holders.
### Linkages to Other Components of a Quality System

<table>
<thead>
<tr>
<th>Component</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COMMUNITY MOBILIZATION</strong></td>
<td>Business leaders and employers are among the major community partners who have the ability to share information, pool resources, and establish a plan of action to address community needs for childhood care and education.</td>
</tr>
<tr>
<td><strong>CONTINUUM OF CHILDHOOD CARE AND EDUCATION CHOICES</strong></td>
<td>Local employers can help to expand the supply of choices by taking advantage of the tax benefits that accrue from assisting employees to access quality childhood care and education arrangements.</td>
</tr>
<tr>
<td><strong>BEST PRACTICES AND QUALITY ASSURANCE MECHANISMS</strong></td>
<td>The involvement of businesses and employers in supporting higher standards for childhood care and education helps to ensure family access to higher quality programs.</td>
</tr>
<tr>
<td><strong>PROFESSIONALIZATION AND WORKFORCE DEVELOPMENT</strong></td>
<td>Local employers in the community can be involved by sharing training resources in management, business, health, and safety. When providing or recommending childhood care and education services to families, employers should consider professionalization and provider training.</td>
</tr>
<tr>
<td><strong>ADEQUATE FINANCING AND RESOURCES</strong></td>
<td>In order to support the childhood care needs of working families, communities need the help of employers to implement and fund family friendly policies.</td>
</tr>
<tr>
<td><strong>CONSUMER EDUCATION AND PUBLIC ENGAGEMENT</strong></td>
<td>Families who are knowledgeable consumers of quality childhood care and education can better advocate for employer involvement in adopting dependent care and family friendly work policies.</td>
</tr>
</tbody>
</table>
CONSUMER EDUCATION AND PUBLIC ENGAGEMENT

Quality childhood care and education not only benefits children and their families but also entire communities. The investment and support of families, business, government and community organizations are all necessary to the effort. Consumer and public education focuses on the value of investing in good quality childhood care and education. Topics fall into four general categories:

1. The importance of good quality childhood care and education to children’s healthy, positive development and well-being.
2. The characteristics of good quality childhood care and education.
3. The critical infrastructure that assures a quality childhood care and education system.
4. Consumer information on accessing quality childhood care and education.

Consumer Education

Consumer education provides parents with information to assess their needs, locate services, evaluate quality and choose the best possible care for their children. Since parents of all incomes are using childhood care in increasing numbers, consumer education and multi-media public awareness campaigns are critical to improving access to quality, affordable care.

Parents benefit from support while they engage in the process of choosing and evaluating care for their children. This support includes information, personal attention and access to financial assistance:

<table>
<thead>
<tr>
<th>INFORMATION</th>
<th>PERSONAL ATTENTION</th>
<th>ACCESS TO SUPPORT</th>
</tr>
</thead>
<tbody>
<tr>
<td>What choices are available?</td>
<td>One-on-one discussions with a referral counselor</td>
<td>Information about childhood care subsidies at state and local level</td>
</tr>
<tr>
<td>How to identify quality elements that ensure the health and safety of the children</td>
<td>Information tailored to unique needs of family</td>
<td>Materials about the Earned Income Tax Credit and the Child and Dependent Care Tax Credit</td>
</tr>
<tr>
<td>Strategies to develop a partnership with the caregiver</td>
<td>Respect for parents’ perspective</td>
<td></td>
</tr>
</tbody>
</table>

The Oregon Child Care Resource and Referral Network is Oregon’s clearinghouse on child care information for parents, employers, providers and communities. The Network also provides support, training and coordination...
for its membership of local nonprofit childhood care resource and referral agencies. The Network and its member agencies typically provide most of the following services:

- Information on how to choose quality care and referrals to registered family care homes, certified group child care homes and centers, and school age programs.

- Provider recruitment and training including offering small loan programs and other resources that encourage new childhood care and education businesses. Agencies also coordinate professional development, training and technical assistance for childhood care providers.

- Resource and referral services to employers for work/life programs that qualify them for tax credits and help employees balance work and family.

- Data collection for community planning including information about childhood care and education demand, supply and cost to identify and address the ongoing needs of families.

The benefits of consumer and public education are far-reaching. Public interest and support will assist in advancing quality childhood care and education. Consumers of childhood care and education will be better able to access quality situations for their children. Businesses and employers will be able to make knowledgeable decisions about investing in programs or infrastructure, such as resource and referral activities.

**Public Engagement**

The Child Care Action Campaign (CCAC) is a national coalition of individuals and organizations that support the development of policies and programs to increase the availability of quality, affordable child care. CCAC’s study of media coverage and public opinion shows that public support for government assistance with early care and education services to working parents has remained steady since 1988. Information provided by the media affects individual and public attitudes.

Public attitudes can create serious barriers to developing support for a quality childhood care and education system. These issues must be addressed by any consumer and public education effort if social change is to occur. In a 1992 media conference at the Columbia University School of Journalism, the following attitudinal barriers were identified:
The public tends to view children as being primarily the responsibility of their families; they tend to worry about violating family sanctity by intrusive social policies.

People are less sympathetic to supporting programs and services for children they perceive as poor than for children in general. There is a tendency to equate public programs with welfare and to see “children’s issues” as code words for tax increases.

People are concerned that funds targeted for children will become mired in bureaucracy, inefficiency and waste.

Addressing these attitudes will take careful thought and a strong measure of commitment from families, service providers, committed community leaders and other interested advocates. CCAC uses the following strategies to “increase the volume” of the voices supporting quality childhood care and education, and to get information disseminated to consumers, business leaders, policy makers and others through the media and through community engagement efforts:

- **Child care financing symposia** to focus on the number and impact of community-business partnerships working to improve child care.

- **Business leadership roundtables** to inform business leaders of the issues in childhood care and education.

- **Editorial board visits** to local newspapers to call attention to community-business partnerships and to discuss the need for public and private investment in childhood care and education.

- **An information press kit** is provided for reporters and other who need to be informed of the breadth of childhood care and education issues and the views of experts in the field.  

Public awareness campaigns such as *Oregon’s Child: Everyone’s Business* are also important. This campaign is the state counterpart of the national *I Am Your Child* campaign, launched in 1996 by a coalition of entertainment leaders, children’s organizations, elected officials, health professionals, foundations and corporations.

*Oregon’s Child: Everyone’s Business* was designed to increase public awareness of compelling new research findings, which indicate that the first three years of a child’s life are more important for emotional and intellectual growth than previously thought.
While *Oregon’s Child: Everyone’s Business* does not directly address the attitudes listed above, the campaign’s key messages are successful in that they are directed toward motivating family, business and community action to ensure young children’s healthy development:

- Recent research on brain development reinforces the crucial importance of the early years. What happens or does not happen can affect children’s success in the future. Failure to invest in support for children’s early development has long term costs and consequences.

- The parent-child relationship is the key to success. Parents benefit from information, resources, and support in order to help their children thrive and prosper.

- Healthy children are everyone’s responsibility and everyone can do something to help.

### Goal and Outcomes

**Goal:** Increase consumer and public awareness of the importance and characteristics of high quality childhood care and education throughout childhood and adolescence.

<table>
<thead>
<tr>
<th>Intended Outcomes for Consumer Education and Public Engagement</th>
<th>Other (5.2.9): Public knowledge of the importance and characteristics of high quality childhood care and education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent knowledge of, use of, and satisfaction with resource and referral systems (5.2.3)</td>
<td>Public support for high quality childhood care and education</td>
</tr>
<tr>
<td>Parent knowledge of quality characteristics of childhood care and education (5.2.4)</td>
<td></td>
</tr>
<tr>
<td>Parent knowledge of, use of, and satisfaction with care options for school age children and youth (5.3.8)</td>
<td></td>
</tr>
</tbody>
</table>

(Numbers in parentheses refer to the OCCF database)
Mapping Assets and Identifying Needs

**What is currently being done in your community?**

Identify the consumer and public education activities and resources already existing in your community. What information is available? How is information distributed? Do parents receive personal attention from resource and referral agencies?

**What is needed?**

Based on your assessment of current efforts, identify areas that need improvement and local strengths that can be employed in the effort. Develop action steps to increase access to information, improve consumer education and increase public engagement.

**Who can help?**

See Appendix A for contact information:

- Advocacy organizations including Children First, One Voice for Child Care, and Oregon’s Child: Everyone’s Business
- Community colleges and universities
- Media, including local newspapers, radio, TV
- Oregon Center for Career Development in Childhood Care and Education
- Oregon Commission on Children and Families and county Commissions
- Oregon Child Care Resource & Referral Network and local CCR&Rs
- Oregon Department of Education and local school districts
- Oregon Head Start Collaboration Project
- Parents and families
- Professional organizations such as Oregon Association of Child Care Directors, Oregon Association for the Education of Young Children, Oregon Family Child Care Network, Oregon Head Start Association, and Oregon School Age Coalition
- Providers of childhood care and education services
- Public health, pediatricians, and other health care providers
- Public libraries
Strategies

Support resource and referral agencies

Ensure that the local resource and referral agency is well-funded and publicized. Disseminating information is a key element of the consumer education process. An effective way to make appropriate materials readily available to consumers in your community is through the local CCR&R agency.

Improve access to childhood care and education information

Create opportunities for parents and families to experience quality settings. Child Care Aware, a national consumer education effort, suggests:

- partnering parents searching for childhood care with parents whose children are in quality programs, and
- arranging a personal visit or video tour of quality family child care homes and centers.

Set up informational displays at grocery stores, libraries or other community locations where families and children gather. Draw parents in by combining displays with activities for children.

Provide funds to make videos on quality childhood care and education available at local stores and libraries. Produce displays on the availability of the videos to be used in stores at the “point of purchase.”

Look for creative ways to disseminate information. In Washington County, messages about child development were printed on bags in collaboration with Safeway stores. In Hampton, Virginia, information about child development is periodically included as an insert with utility bills.

Educate parents and the public about quality childhood care and education. Disseminate information about the Professional Development Registry (see 58) and practitioners who meet local or national standards for quality.

Use local media (radio stations, newspapers) to acknowledge specific providers or programs dedicated to high quality services. Highlight the program of an exemplary “quality childhood care and education provider of the month.”
**Improve access to childhood care and education information (continued)**

Alert parents and other interested community members to the Oregon Parent Information and Resource Center (PIRC). Federally funded through a Title 4 grant and coordinated by the Northwest Regional Educational Laboratory, PIRC provides a lending library of parenting resources and puts articles on “hot topics” of interest to parents and other information on the world wide web at http://www.nwrel.org/pirc/index.html. PIRC has physical locations in Portland, Wolf Creek, Klamath Falls, Enterprise and Forest Grove/Hillsboro.

**Support quality presentations on childhood care and education issues**

Develop a Speakers’ Bureau by enlisting local experts who have good speaking skills and knowledge of issues. Identify specific key audiences within the community to educate about quality in childhood environments (i.e., business and professional clubs, service clubs, babysitting cooperatives) and offer the services of a speaker.

Make presentations on the benefits to the community of quality childhood care and education. Utilize trained speakers from *Oregon’s Child: Everyone’s Business* to present findings from recent brain research.

**Promote regular, ongoing media involvement**

Enlist the major media resources of the community in consumer and public education efforts, including newspapers, radio stations and local television stations.

Conduct a communications audit that reviews the capabilities of all those who are part of the childhood care and education network. The audit assesses existing media skills, functions and activities including publications, newsletters, information kits, media outreach efforts and contacts with journalists.

Establish working relationships with specific individuals within the community’s various mass media resources. A plan should be made for supplying these contacts regularly with educational resources, such as:

- informational articles and photos that can be related to current events,
- public service radio spots,
- offers of participation as a guest on local radio talk shows, or
- videotape clips of educational events or positive adult-child interactions that illustrate one or more aspects of high quality childhood care and education.
Support advocacy groups

Create or support existing local chapters of advocacy groups, such as Children First for Oregon. Assure that advocates have necessary information to be effective in their efforts. Identify ways advocacy groups can support children and families in your community.

Support public engagement initiatives

Work to promote and publicize public awareness and private sector involvement in initiatives at the local level. Distribute materials, provide information to local media, convene conferences or summit meetings. Involve local businesses in supporting the campaigns.

Oregon’s Child: Everyone’s Business is Oregon’s part in the national media awareness campaign entitled “I Am Your Child.” This public engagement campaign promotes the healthy development of young children. A variety of displays and resources are available from OCCF including:

- Child development picture cards with information in English and Spanish,
- Straight Shooting photo exhibit, and
- the I Am Your Child video.

The Big Change is a business and family initiative spearheaded by the Oregon Commission for Child Care. The initiative is designed to promote business involvement in dependent care issues. Sponsors are working with communities interested in developing local business and family initiatives (see strategy under Employer Involvement and Commitment).
Linkages to Other Components of a Quality System

COMMUNITY MOBILIZATION

Consumer and public awareness that everyone benefits when children are safe, healthy and well-educated is essential for the success of community mobilization efforts.

CONTINUUM OF CHILDHOOD CARE AND EDUCATION CHOICES

Having an array of choices is essential so that parents may act as informed decision-makers and select the best possible care for their children.

The more aware consumers and the public are of the benefits of high quality childhood care and education, the greater the likelihood that the necessary infrastructure and financial resources needed to build the supply will be supported within each community.

BEST PRACTICES AND QUALITY ASSURANCE MECHANISMS

Consumer and public awareness of the characteristics and importance of high quality childhood care and education will increase its prevalence by increasing the demand for quality services.

PROFESSIONALIZATION AND WORKFORCE DEVELOPMENT

In order to value and support professionalization and workforce development, communities and families need information about the ways in which training for childhood care and education practitioners influences the quality of services provided to the children.

ADEQUATE FINANCING AND RESOURCES

As consumers become more educated on the value of investing in quality child care, they will be willing to pay more for a quality care setting. Educating the public on the benefits of a quality childhood care and education system will lead to increased interest and support for funding a quality system.

EMPLOYER INVOLVEMENT AND COMMITMENT

Families who are knowledgeable consumers of quality childhood care and education can better advocate for employer involvement in adopting dependent care and family friendly work policies.
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FUNDING STREAMS

Communities may draw upon various funding streams as they work toward a quality childhood care and education system.

The Child Care and Development Fund (CCDF)

Under the federal Welfare Reform Act of 1996, the existing Child Care & Development Block Grant was consolidated with Title 4-A child care funding (ERDC, at-risk and transitional care) to create a single funding stream. This flow of federal dollars is known as the Child Care and Development Fund (CCDF).

For FY 1998, Congress appropriated additional funds for child care resource and referral activities, school age care, and activities to increase the supply of care for infants and toddlers. CCDF dollars are directed to childhood care supports and services for children aged 0 to 13.

As the lead agency for the CCDF, the Child Care Division is responsible for developing a comprehensive statewide system of safe and accessible childhood care services to support families, encourage self-sufficiency, and ensure the health, safety, and well being of children in care. Programs include:

- **Certification, registration, training and regulation** of childhood care providers.

- **Direct support** to local Child Care Resource and Referral agencies and Commissions on Children and Families to build childhood care supply, provide consumer education and provide technical assistance to providers.

- **Direct subsidies** to at-risk populations including teen parents, parents in substance abuse treatment and migrant/seasonal farm workers.

The Division's priorities are developed in collaboration with community stakeholders and other state agencies. The division works with:

- Adult and Family Services and other partners to promote family self-sufficiency;
- the Commission on Children and Families, the Health Division and others to promote healthy child development;
- the Department of Education and public/private groups to promote early childhood learning; and
- the Commission for Child Care and advocacy groups to develop coordinated, inclusive policies.
FUNDING STREAMS

Over 70% of the CCDF dollars is dedicated to providing subsidized care for low-income working parents and student parents. Most of these subsidies are dispersed through the Department of Human Resources to Adult and Family Services clients as they move from public assistance to self-sufficiency.

Under federal regulations, the state is obligated to spend at least 4% of the funds on activities to increase the supply and improve the quality of childhood care. These funds are dispersed as follows:

1. **The Oregon Child Care Resource and Referral Network and the local CCR&Rs** receive matching grants. Funds are used for start-up, expansion, and/or operation of “core” services to parents, providers, communities and employers.

2. **The Oregon Commission on Children and Families** administers a county childhood care and education program focused on stabilizing and increasing the availability of quality early childhood and school age care programs. Emphasis is on infant and toddler care, school age care, non-traditional care and extended day child care linked with Head Start, Oregon pre-kindergarten or other part-time preschool programs. Use of CCDF funds to contract for child care slots for low-income children is not allowed. Funds may be used to provide:

   - grants and/or contracts to child care providers of all types for start-up and/or ongoing operation of programs; and
   - grants and/or contracts to child care resource and referral agencies for activities, such as recruitment and resource management, that will increase and stabilize the supply of childhood care.

3. **The Department of Education** awards grants to school districts for the purpose of starting and/or operating on-site child development centers serving primarily the children of teen parents.

   In addition, the Department of Education awards grants to community-based programs, educational institutions and other non-sectarian organizations through an open competitive process for the state-funded Head Start Prekindergarten and Together for Children programs. The state and federal Head Start Prekindergarten programs are administered jointly through a collaborative system outlined in a written intergovernmental agreement between the Department of Education and the Region X federal Head Start office.
4. **The Oregon Center for Career Development in Childhood Care and Education**, housed at Portland State University, receives funds for provider training and career development services. The Center is responsible for coordinating the implementation of Oregon’s Childhood Care and Education Career Development Plan, the Mentoring Project, and the Oregon Certified Childhood Education Trainer (OCCET) program. The center also administers provider training opportunities through Oregon’s Child Care Basics, First by Five and other training programs.

5. **The School Age Child Care Enrichment and Recreation Project** at the Oregon Center for Career Development in Childhood Care and Education receives funds to offer technical assistance and support to providers of out-of-school time opportunities for elementary and middle school children and youth, as well as to communities interested in developing those programs.

6. **The Developmental Disabilities Council** receives funds to oversee the implementation of a state strategic plan for inclusion of children with special needs in childhood care settings.

7. **The Child Care Division** receives funds to improve compliance with state licensing and child care registration laws. Included are responsibilities for screening of providers, technical assistance and support to providers meeting standards, work with provider support organizations and collaborative projects with other groups to build public awareness and commitment to childhood care quality.

   The Child Care Division also funds child care programs for migrant workers, teen parents, and mothers in residential alcohol and drug treatment programs.

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**Great Start**

Under HB 3466, the 1989 Oregon legislation established the Great Start Fund to assist counties in developing resources and services for all children from the prenatal period to age 6 and their families. The goal of the Great Start program is to ensure that all children living in Oregon reach the first grade with good physical, social, emotional, and language development.

Great Start focuses on promoting healthy growth and development through **prevention** as well as early intervention. Planning for the use of Great Start funds involves an understanding of a wide variety of issues affecting young children and their families.
Great Start makes funds available for services to children prenatal to age six and their families in any one or all of the following five program areas:

- Programs and services that promote child care and child development
- Programs and services that promote health
- Programs and services that promote mental health
- Parent education and support
- Programs that improve access to services

The Oregon Commission on Children and Families is responsible for administering approximately $8 million in Great Start funds each biennium. Great Start funds address Oregon’s Ready-for-School benchmark and can be used for a wide range of programs.

In the past, Great Start funds have been used for direct payment/subsidy of preschool or child care services, respite care, child care for very poor non-working families, mentoring programs, family health clinics, child abuse and domestic violence prevention, parenting education and support, child care resource and referral, early intervention and treatment and family literacy programs.

**Oregon Child Development Fund**

The Oregon Child Development Fund (OCDF) was incorporated and granted fund status in 1989 by the Oregon Community Foundation, a 501(c)(3) charitable foundation. OCDF was established through grass root efforts by business leaders, parents, advocates and public officials who believe private financing for improvement of the childhood care and education system is essential to meet the crisis proportions of workforce need for quality child care. OCDF invests in four target areas:

- Provider recruitment and training initiatives,
- Caregiver accreditation scholarship fund,
- Capital expansion and facility improvement, and
- Consumer and business education programs.
APPENDICES
Agencies and Organizations

OREGON

Adult and Family Services
Oregon Department of Human Resources
Contact: Larry Shadbolt
500 Summer Street, NE
Salem, OR 97310
Phone: (503) 945-6072

Child Care Division
Oregon Employment Department
875 Union Street N.E.
Salem, OR 97311
Tom Olson, Director
Phone: (503) 947-1409
Linda Stern, Licensing Manager
Phone: (503) 947-1408
Gary Scott, Budget and Grants Manager
Phone: (503) 947-1422
Marguerite Kenagy, Support Services Manager
Phone: (503) 947-1410

Children First for Oregon
921 S.W. Morrison, Suite 418
Portland, OR 97205
Phone: (503) 294-1456, (800) 544-0376

Community Partnerships
Project of the Developmental Disabilities Council
540 24th Place N.E.
Salem, OR 97301-4517
Phone: (800) 435-8362

Early Childhood Training Center
School of Extended Studies
Portland State University
Cari Olmsted, Director
P.O. Box 1491
Portland, OR 97207-1491
Phone: (503) 725-8528

Office of Community College Services
Public Service Building
255 Capitol St. N.E.
Salem, OR 97310
Even Start: Cathy Lindsley
Phone: (503) 378-8648, x371

One Voice for Child Care
Oregon Association for the Education of Young Children
P.O. Box 1455
Tualatin, OR 97062
Phone: (503) 288-3646, (800) 452-3610

Oregon Association for the Education of Young Children
Merrily Haas, Executive Director
P.O. Box 1455
Tualatin, OR 97062
Phone: (800) 452-3610, (503) 288-3646

Oregon Association of Child Care Directors
Contact: Ingrid Amerson
P.O. Box 70322
Eugene, OR 70322

Oregon Center for Career Development in Childhood Care and Education
P.O. Box 751-OCCD
Portland, OR 97207
Phone: (503) 725-8535
Carol Morgaine, Coordinator
Phone: (503) 725-8529
Christyn Dundorf, Project Coordinator for PDR
Phone: (503) 725-8536
Joann Contini, Project Coordinator for OCCET
Phone: (503) 725-8527

Oregon Child Care Resource and Referral Network
3533 Fairview Industrial Drive
Salem, OR 97302
Phone: (503) 375-2644, (800) 342-6712

Oregon Child Development Fund
Contact: Roberta Wood
621 S.W. Morrison, Suite 725
Portland, OR 97205
Phone: (503) 227-4288

Oregon Commission for Child Care
Wendy Willet, Executive Officer
875 Union St. N.E.
Salem, OR 97311
Phone: (503) 947-1245, (800) 435-4127
AGENCIES & ORGANIZATIONS

Oregon Commission on Children and Families  
Donna Middleton, Executive Director  
530 Center Street N.E., Suite 300  
Salem, OR 97310  
Contact: Janell Welker  
Phone: (503) 373-1570, x261

Oregon Community Development & Child Care Initiative  
Marnie Vlahos, Project Coordinator  
3132 NE 9th  
Portland, OR 97212  
Phone: (503) 493-5953

Oregon Department of Education  
Public Service Building  
255 Capitol St. N.E.  
Salem, OR 97310  
Phone: (503) 378-3598  
ECE Coordinator: Anita McClanahan  
Phone: (503) 378-5585, x 665  
Early Intervention: Jane Mulholland  
Phone: (503) 378-3598, x 642  
Head Start Collaboration: Dell Ford  
Phone: (503) 378-5585, x 662  
Teen Parent Program: Donna Bolt  
Phone: (503) 378-3606, x 600

Oregon Developmental Disabilities Council  
Contact: Katherine Weit  
Terry Butler, Special Needs Project  
540 24th Place N.E.  
Salem, OR 97301-4517  
Phone: (503) 945-9941, (800) 292-4154

Oregon Family Child Care Network  
Contact: Faye Zepeda  
1131 Ferry Road, SE  
P.O. Box 12752  
Salem, OR 97309  
Phone: (503) 362-3175

Oregon Family Support Network  
P.O. Box 13820  
Salem, OR 97309-1820

Oregon Head Start Association  
President: Annie Soto  
Lane County Head Start  
221 B Street  
Springfield, OR 97477  
Phone: (541) 747-2425

Oregon Health Division  
Debra Orman, Child Care Coordinator  
800 N.E. Oregon St., #800  
Portland, OR 97232  
Phone: (503) 361-2438

Oregon Health Sciences University  
Child Development and Rehabilitation Center (CDRC)  
Contact: Kathy Renkin  
3181 S.W. Sam Jackson Park Road  
Portland, OR 97201  
Phone: (503) 494-6961

Oregon Lifespan Respite Care Program  
Department of Human Resources  
Contact: Debbie Bowers  
500 Summer St., N.E., 4th Floor  
Salem, OR 97310  
Phone: (503) 945-6815

Oregon Progress Board  
725 Summer St., N.E.  
Salem, OR 97311  
Phone: (503) 986-0173

Oregon School Age Coalition  
Contact: Colleen Dyrud  
P.O. Box 1524  
Portland, OR 97207  
Phone: (503) 725-8528

Oregon School Age Training Specialists  
Portland State University  
Contact: Colleen Dyrud  
P.O. Box 751-occ  
Portland, OR 97207-0751  
Phone: (503) 725-8528

Oregon State University Extension Services  
4-H Youth Development Education  
Jim Rutledge, State 4-H Program Leader  
105 Ballard Hall  
Oregon State University  
Corvallis, OR 97331-5151  
Phone: (541) 737-1737

Oregon State University  
Family Policy Program  
Family Study Center, Bates 202  
Oregon State University  
Corvallis, OR 97331-5151  
Clara C. Pratt, Chair  
Phone: (541) 737-1084
AGENCIES & ORGANIZATIONS

School Age Care, Enrichment and Recreation Project
Portland State University
Contact: Colleen Dyrud
P.O. Box 751-occ
d Portland, OR 97207-0751
Phone: (503) 725-8528

Teaching Research
Western Oregon University
Contact: David Wright
345 N. Monmouth Ave.
Monmouth, OR 97361
Phone: (541) 838-8741

NATIONAL ORGANIZATIONS

Center for the Child Care Workforce
733 15th Street, N.W., Suite 1037
Washington, DC 20005
Phone: (202) 737-7700, (800) 879-6784
Fax: (202) 737-0370

Center for Career Development in Early Care and Education
Wheelock College
200 The Riverway
Boston, MA 02215
Phone: (617) 734-5200, x 211
Fax: (617) 738-0643

Child Care Action Campaign
330 Seventh Avenue, 17th floor
New York, NY 10001
Phone: (212) 239-0138
Fax: (212) 268-6515

Child Care Resource Center, Inc.
130 Bishop Allen Dr.
Cambridge, MA 02139
Phone: (617) 547-9861

Child Care Aware
1319 F Street, NW, Suite 810
Washington, DC 20004
Phone: (202) 393-5501, x 111
Fax: (202) 393-2533

Child Care Bureau
Administration for Children and Families
330 C Street, S. W.
Washington, DC 20201
Phone: (800) 616-2242

Families and Work Institute
330 Seventh Avenue
New York, NY 10001
Phone: (212) 465-2044

National Association for Family Child Care
206 Sixth Ave, Suite 900
Des Moines, IA 50309-4018
Phone: (800) 359-3817

National Association of Child Care Resource and Referral Agencies
2116 Campus Drive S.E.
Rochester, MN 55904
Phone: (507)-287-2220

National Association for the Education of Young Children
1509 16th Street, N.W.
Washington, D.C. 20036
Phone: (202) 232-8777, (800) 424-2460
Email: naeyc@naeyc.org

National Center for Early Development & Learning
Frank Porter Graham Child Development Center
University of North Carolina at Chapel Hill
Chapel Hill, NC 27599-8185
Phone: (919) 966-0867

National Early Childhood Technical Assistance
500 Nations Bank Plaza,
137 East Franklin Street
Chapel Hill, NC 27514-3628
Phone: (919) 962-2001
Fax: (919) 966-7463

National Institute on Out-of-School Time
Center for Research on Women
Wellesley College, 106 Central Street
Wellesley, MA 02181
Phone: (781) 283-2547

National School-Age Care Alliance
1137 Washington Street
Boston, MA 02124
Phone: (617) 298-5012
Email: staff@nsaca.org; www.nsaca.org

School-Age NOTES
P.O. Box 40205
Nashville, TN 37204
Phone: (800) 410-8780
World Wide Web Sites

Administration for Children and Families, Department of Health and Human Resources

American Academy of Pediatrics
http://www.aap.org/

Bureau of Labor Statistics
http://www.bls.gov

Center for Career Development in Early Care and Education at Wheelock College
http://ericps.crc.uiuc.edu/ccdece/ccdece.html

Center for the Child Care Workforce
http://www.ccw.org/

Center for the Future of Children
http://www.futureofchildren.org/

Child Care Action Campaign
http://www.usakids.org/sites/ccac.html

Child Care Aware
http://www.targetstores.com

Child Care Bureau
http://www.acf.dhhs.gov/programs/ccb/

Children’s Defense Fund
http://www.childrensdefense.org/index.html

Child Welfare League of America
http://www.cwla.org

Department of Education
http://www.ed.gov

Department of Labor
http://www.dol.gov

Early Childhood Research Quarterly
http://www.udel.edu/ecrq/

ERIC Clearinghouse on Elementary and Early Childhood Education
http://ericps.crc.uiuc.edu/ericeece.html

Families and Work Institute
http://www.familiesandworkinst.org

Kids Campaigns
http://www.kidscampaigns.org/

Indian Health Service
http://www.his.gov

Maternal and Child Health Bureau
http://www.hhs.gov/hrsa/mchb/default.html

National Academy of Early Childhood Programs
http://www.america-tomorrow.com/naeyc

National Association of Child Care Resource and Referral Agencies
http://www.childcarerr.org

National Association for the Education of Young Children
http://naeye.org/naeye

National Association for Family Child Care
http://www.nafcc.org

National Black Child Development Institute
http://www.nbcdli.org

National Center for Children in Poverty
http://cpmcnet.columbia.edu/dept/nccp

National Center for Early Development and Learning
http://www.fpg.unc.edu/~ncedl

National Child Care Information Center
http://ericps.crc.uiuc.edu/nccic/nccichome.html

National Early Childhood Technical Assistance System
http://www.nectas.unc.edu

National Head Start Association
http://www.nhsa.org

National Information Center for Children and Youth with Disabilities
http://www.nichcy.org

National Institute on Out-of-School Time
http://www.wellesley.edu/WCW/CRW/SAC/training.html

National Network for Child Care
http://www.nncc.org

National Parent Information Network
http://ericps.crc.uiuc.edu/npin/npinhome.html
Native Web
http://www.nativeweb.org

Oregon Center for Career Development in Childhood Care and Education
http://www-adm.pdx.edu/user/psy/ccecrdev/homepage.htm

Oregon Child Care Resource and Referral Network
http://www.open.org/~occrrn/

Oregon Commission for Child Care
http://www.emp.state.or.us/occc/

Oregon Commission on Children and Families
http://www.ccf.state.or.us

Oregon Employment Department, Child Care Division
http://www.emp.state.or.us/childcare

Oregon Department of Human Resources, Adult and Family Services
http://www.afs.hr.state.or.us/

Oregon Family Child Care Network
http://www.open.org/ofccn/

Oregon Parent Information and Resource Center
http://www.nwrel.org/pirc/

National Resource Center for Health and Safety in Child Care
http://nrc.uchsc.edu/index.html

The Soho Center for Quality Child Care

Stand for Children Action Center
http://www.stand.org

The Urban Institute
http://www.urban.org

U.S. Bureau of the Census
http://www.census.gov

Zero to Three
http://www.zerotothree.org
## Glossary of Commonly Used Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AAP</td>
<td>American Academy of Pediatrics</td>
<td>DCAP</td>
<td>Dependent Care Assistance Program</td>
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<td>ACYF</td>
<td>Administration on Children, Youth and Families</td>
<td>DHR</td>
<td>Department of Human Resources</td>
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<td>ADA</td>
<td>Americans with Disabilities Act</td>
<td>DOE</td>
<td>Department of Education</td>
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<td>AFS</td>
<td>Adult &amp; Family Services, Department of Human Resources</td>
<td>ERDC</td>
<td>Employment Related Day Care</td>
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<td>AOCDO</td>
<td>Association of Oregon Community Development Organizations</td>
<td>EQUIP</td>
<td>Early Education Quality Indicators Project</td>
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<tr>
<td>APHA</td>
<td>American Public Health Association</td>
<td>IEP</td>
<td>Individualized Education Plan</td>
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<tr>
<td>CCD</td>
<td>Child Care Division, Department of Employment</td>
<td>IFSP</td>
<td>Individualized Family Service Plan</td>
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<td>CCDF</td>
<td>Child Care Development Fund</td>
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<td>National Association for the Education of Young Children</td>
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<td>CCR&amp;R</td>
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<td>Child Development Associate</td>
<td>NSACA</td>
<td>National School-Age Care Alliance</td>
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<td>CDC</td>
<td>Community Development Corporation</td>
<td>OACCD</td>
<td>Oregon Association of Child Care Directors</td>
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<td>CDF</td>
<td>Children’s Defense Fund</td>
<td>OAEYC</td>
<td>Oregon Association for the Education of Young Children</td>
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<td>COPE</td>
<td>Coalition in Oregon for Parent Education</td>
<td>OCC</td>
<td>Oregon Commission for Child Care</td>
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<tr>
<td>ACRONYMS</td>
<td>FULL FORM</td>
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<tr>
<td>OCCB</td>
<td>Oregon Child Care Basics</td>
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<td>OCCET</td>
<td>Oregon Certified Childhood Education Trainer</td>
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<td>OCCF</td>
<td>Oregon Commission on Children and Families</td>
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<td>OCCRRN</td>
<td>Oregon Child Care Resource and Referral Network</td>
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<td>OCDF</td>
<td>Oregon Child Development Fund</td>
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<td>OFCCN</td>
<td>Oregon Family Child Care Network</td>
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<td>OHSA</td>
<td>Oregon Head Start Association</td>
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<td>OSAC</td>
<td>Oregon School Age Coalition</td>
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<td>OSATS</td>
<td>Oregon School Age Training Specialists</td>
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<tr>
<td>PIRC</td>
<td>Parent Information and Resource Center</td>
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<td>PDR</td>
<td>Professional Development Registry</td>
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<td>PRO</td>
<td>Provider Resource Organization</td>
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<td>SCF</td>
<td>State Office for Services to Children and Families</td>
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<tr>
<td>SSI</td>
<td>Supplemental Security Income</td>
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<tr>
<td>TANF</td>
<td>Temporary Assistance to Needy Families</td>
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<td>USDA</td>
<td>U. S. Department of Agriculture</td>
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<tr>
<td>WIC</td>
<td>Special Supplemental Nutrition Program for Women, Infants and Children</td>
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National Association for the Education of Young Children (NAEYC)
National Academy of Early Childhood Programs
Accredited Centers List in Oregon

Total number of accredited centers in Oregon as of April 1, 1998: 37

Valid Until: 6/30/00
A Child's Way Kindergarten-Preschool
12755 N.W. Dogwood Street
Portland, OR 97229
Phone: 503/644-8407

Valid Until: 5/31/98
Ascension Early Childhood Education Center
1440 SE 182nd Avenue
Gresham, OR 97233-5007
Phone: 503/667-6750

Valid Until: 7/31/99
Aslcc Child Care Co-op
4000 East 30th Avenue
Eugene, OR 97405
Phone: 503/747-4501 2025

Valid Until: 3/31/00
Benedictine Nursing Center
Child Development Center
980 South Main Street
Mt. Angel, OR 97362
Phone: 503/845-2662

Valid Until: 5/31/00
Chemeketa Community Child Care Center
Building 50/125
P.O. Box 14007
Salem, OR 97309
Phone: 503/399-5174

Valid Until: 3/31/98
Chemeketa Community College
Child Development Center
4000 Lancaster Drive, NE
Building 39, PO Box 14007
Salem, OR 97309-7070
Phone: 503/399-5174

Valid Until: 8/22/98
Children's Holladay Center
911 N.E. 11th, PO Box 3621
Paula Higuera
Portland, OR 97212
Phone: 503/230-4114

Valid Until: 7/31/00
Children's World Learning Center
10501 S.E. Sunnyside Road
Clackamas, OR 97015
Phone: 503/698-5040

Valid Until: 12/31/00
Community Arts Preschool, Inc.
368 South State Street
Lake Oswego, OR 97034
Phone: 503/636-3429

Valid Until: 6/30/00
Congregational Preschool
1050 East 23rd Avenue
Eugene, OR 97405
Phone: 541/343-5730

Valid Until: 6/30/99
Early Childhood Learning Center
6651 S W Capitol Hwy
Rhoda M. Golden
Portland, OR 97219
Phone: 503/244-0111

Valid Until: 2/28/00
Educational Environments, Inc.
5310 Fox Hollow Road
Eugene, OR 97405
Phone: 503/345-1216

Valid Until: 8/31/00
EMU Child Care & Development Centers
1511 Moss Street
University of Oregon
Eugene, OR 97403
Phone: 503/346-4384
Valid Until: 7/31/00
Fruit And Flower Child Care Center
2378 N.W. Irving
Portland, OR 97210
Phone: 503/228-8349

Valid Until: 9/30/00
Growing Oaks Child Care Center
3731 SouthWest Jefferson Way
Corvallis, OR 97333
Phone: 503/754-4368

Valid Until: 7/31/00
Joyful Noise Child Care Centers, Inc.
333 S.W. 1st, Suite A
Portland, OR 97204
Phone: 503/326-6827

Valid Until: 1/31/00
Joyful Noise, Metro Kids
600 N.E. Grand Avenue
Portland, OR 97232
Phone: 503/797-1702

Valid Until: 6/30/99
Kindercare-Oakmont
2506 Oakmont Way
Susan Southerton
Eugene, OR 97401
Phone: 503/687-2484

Valid Until: 3/31/99
Kindercare-Oregon State University
11th & Adams
Nancy De Rhonde eller
Corvallis, OR 97331-1950
Phone: 541/737-4640

Valid Until: 4/30/98
Linfield College Pre-k Laboratory School
900 S. Baker, Unit V
Linfield College
Mcminnville, OR 97128-6894
Phone: 503/434-2268

Valid Until: 7/31/99
Linn-benton Comm. College
Family Resource Center
6500 SW Pacific Blvd.
Liz Pearce-smith
Albany, OR 97321
Phone: 503/917-4898

Valid Until: 5/31/00
Maryhurst Early Childhood Center
817 12th Street
Oregon City, OR 97045
Phone: 503/650-0978

Valid Until: 7/31/99
Mentor Graphics Child Development Center
8005 SW Boeckman Rd.
Wilsonville, OR 97219
Phone: 503/685-4865

Valid Until: 6/30/98
Mt. Hood Community College
Child Development Center
26000 S.E. Stark Street
Gresham, OR 97030-3300
Phone: 503/667-7169

Valid Until: 6/30/98
Mt. Hood Community College Head Start
26000 S.E. Stark
Gresham, OR 97030
Phone: 503/492-6060

Valid Until: 6/30/99
Multnomah Cooperative Playschool
2201 SW Vermont
Marilyn Piluso
Portland, OR 97219
Phone: 503/244-9141

Valid Until: 6/30/00
Neveh Shalom Foundation School
2900 S.W. Peaceful Lane
Portland, OR 97201
Phone: 503/246-8831

Valid Until: 6/30/00
Oak Street Child Development Center
540 Oak Street
Eugene, OR 97401
Phone: 503/344-0241

Valid Until: 3/31/01
Pearl Buck Center, Inc.
Families with Special Needs
5100 West Amazon
Eugene, OR 97405
Phone: 541/345-8506
Valid Until: 12/31/99  
**Portland Community College**  
Child Development Center  
12000 S.W. 49th Avenue  
Portland, OR 97219  
Phone: 503/977-4424

Valid Until: 4/30/98  
**Sequent Learning Center**  
15150 South West Koll Parkway  
Beaverton, OR 97006-6063  
Phone: 503/578-3020

Valid Until: 6/30/99  
**Southern Oregon University Schneider Children Center**  
Southern Oregon College  
1361 Quincy Street  
Ashland, OR 97520  
Phone: 503/482-0366

Valid Until: 6/30/99  
**St. Mark Child Development Center**  
790 Marion Street, Ne  
Maureen Keough Summers  
Salem, OR 97301  
Phone: 503/588-0141

Valid Until: 6/29/00  
**Teaching Research Child Development Center**  
345 N. Monmouth Avenue  
Monmouth, OR 97361  
Phone: 503/838-8769

Valid Until: 7/31/98  
**The Mt. Hood Council Of Camp Fire Child Care Center**  
19600 South Molalla Avenue  
Oregon City, OR 97045  
Phone: 503/659-6683

Valid Until: 6/30/00  
**Title One Preschool McMinnville School District**  
1600 South West Fellows Street  
McMinnville, OR 97128  
Phone: 503-472-5313

Valid Until: 2/28/01  
**Touchstone School**  
2 S.W. Touchstone  
Lake Oswego, OR 97035  
Phone: 503/635-4486
Oregon Vision
for
School Age Care, Enrichment & Recreation

Statement of Vision
Professionals working with school age children and youth in Oregon support a vision of safe and healthy communities that value their young people by providing a variety of quality programs which:

- foster positive youth development;
- provide a safe and welcoming environment;
- meet the diverse needs of all children, youth and families;
- are accessible and affordable to everyone;
- are staffed by caring, well-trained, appropriately compensated professionals;
- are well-supported by a broad base of resources.

Guiding Principles

1. Children, youth and families have a significant voice in the planning and delivery of school age care, enrichment and recreation services in their communities.

2. Children, youth and families have the opportunity to choose among various program and activity options promoting positive use of out-of-school time.

3. All program and activity options are of high quality. Quality means:
   - having carefully screened, well-trained administrators, staff and volunteers;
   - having enough staff to be sensitive, responsive, and supportive to each child and family;
   - providing a safe, healthy and challenging environment;
   - ensuring continuity of relationships;
   - empowering children and youth to play a significant role in program design and implementation;
   - promoting children's appreciation of human differences;
   - involving children and youth in their communities; and
   - incorporating input from families into program design and operation.

4. Programs for children and youth contribute to their ability to function successfully in a global community.
5. Program and activity options are available to all children and youth. Opportunities for participation are equitable regardless of socioeconomic status and geographic location.

6. The leadership, staffing, program design and delivery of services for children and youth reflect and respond to the diversity of their families, their communities and the global community.

7. Quality services depend upon a skilled and committed work force that is respected, valued and fairly compensated regardless of total number of hours worked. A respected, valued and fairly compensated work force:
   • receives salaries which recognize and reward training and education;
   • receives competitive benefits;
   • is encouraged to develop and demonstrate leadership; and
   • has access to a system of career development opportunities that results in professional and economic advancement.

8. Professional development is a critical element of quality programs for children and youth. Training:
   • is specialized to reflect the ages, developmental stages, and needs of the children and youth served in a variety of settings;
   • includes appropriate preservice opportunities;
   • is on-going for all levels of personnel; and
   • demonstrates respect for different learning styles and cultural backgrounds.

9. Opportunities for community members to volunteer in programs and activities for children and youth are promoted. Access to appropriate training opportunities is provided to volunteers.

10. Quality services for children and youth require a stable and equitable resource base that bridges the gap between what families can afford and the actual cost of quality services. Stability and equity are achieved through the development of private and public partnerships at both the state and local level.

The Oregon vision work group gratefully acknowledges the work of the April 19th group, upon which the above principles are based. Their year long effort to establish guiding principles for a comprehensive system of early education and child care provided an excellent model for expanding into the field of school age care, enrichment and recreation. It is our sincere belief that children, from infancy until they reach adulthood, deserve a clear, consistent approach to services that assist their families in providing care, education, enrichment and recreation.

Adopted by the Child Care Division, Oregon Employment Department, and the Oregon Commission for Children & Families, 1995.
What Are the Issues in School Age Care?

Issues for communities to consider regarding school age care can be identified in a community assessment process using the Oregon Vision for School Age Care, Enrichment & Recreation as a road map. Communities can ask: Where are we in achieving this vision? What pieces are already in place? What needs to be done? In what priority?

Recurring “hot topic” issues in school age care are as follows:

1. **Choice is key, voice is fundamental.**
   No one program is going to meet the needs of the children, youth and families in a community. Choice is essential -- choice in provider, program location, type of program, supervision, and activities. And there is no real choice unless the people affected have had something to say about designing the choices before they are asked to choose. Children, youth and families must have a significant voice in the planning process.

2. **Location, location, location.**
   Working parents cannot transport their children to and from school and school age programs. This means programs need to be within walking distance, provide transportation, or be located at the children’s school. School-based programs are the simplest solution to transportation issues -- no buses or vans to miss, no getting lost along the way. School-based programs are not the answer for every child, however, which is why a variety of option is important. School-based programs also do not mean the programs are school-operated. School-run programs in Oregon are in the minority. Most school-based programs are run through a partnership between the school/district and an outside provider -- a child care center, a youth service organization, a park & recreation district, etc. Having to pay commercial rates to use a public school building is not an affordable option for most programs, however. Please see the discussion under item 3.

3. **Subsidies for lower income families.**
   Even middle income families are being stretched by costs for child care. Accessibility is critical to provide equal access to opportunities for children and youth. School districts are beginning to charge fees for use of buildings that formerly were available at little or no charge. Programs have no recourse except to pass the increased costs onto parents, thus making programs even more inaccessible for lower income working families.

4. **Integration of kids with special needs into after school programs.**
   On the whole, Oregon has not done a good job in providing inclusive programs serving children with special needs -- children who require a level of care over and above the norm for their age due to a physical, developmental, behavioral, mental or medical disability. This issue is being addressed in child care as a whole by several state groups. New training and initiatives may become available in the near future. Providers of after school programs for elementary and middle school children need to be connected with resource and support organizations within their communities.
5. **Lack of appropriate programs for older kids (4th grade through middle school).**
   
   Training and resources need to be targeted specifically for this age group. Looking at this age group does mean breaking out of the “child care box,” however. Discussion should include planning committees working on Lighted Schools initiatives or 21st Century Community Learning Center initiatives. Prevention, law enforcement and juvenile justice people are also concerned with these kids.

6. **General program quality.**
   
   It does no good to fund or otherwise support programs that are not of the highest quality. Every county commission should have at least one copy of *The NSACA Standards for Quality School-Age Care* available for commission staff, commissioners and local programs to reference. At least one county has found it very useful for school age programs seeking funding to use Thelma Harms’ *School Age Care Environment Rating Scale* as both a self assessment and with an outside observer to determine areas where improvement needs to occur and write that into the program’s grant proposal. Program quality is often linked to staff issues.

7. **High staff turnover.**
   
   School age care programs experience remarkably high staff turnover rates, adversely affecting program consistency for children. School age care programs generally are part time, low pay, entry level positions with few benefits. People who are truly attracted to school age as a profession often have trouble staying in the field. Creative solutions to these staffing issues would go a long way to stabilizing quality programs.

8. **Professional development for administrators and staff.**
   
   The need for appropriate, school age care specific professional development opportunities for entry level staff, experienced staff, and supervisors and administrators is critical to quality improvement. Training and education directly in school age care is limited at both the for credit and not-for-credit arena. The Oregon School Age Coalition (OSAC), the professional organization for people working in the field of school age care, enrichment and recreation, provides an annual state conference in the fall and does another administrative level conference in the summer. OSAC is working to establish regional chapters that could provide professional support to staff and administrators, as well as sponsor local training opportunities. There is no community college or four year institution degree specifically related to school age care in the state of Oregon. Concordia University in St. Paul, Minnesota, now offers distance learning (via the Internet) certificate, Bachelors and Masters programs. Some professionals in Oregon have enrolled in these programs; but the cost has made it prohibitive for many. Incentives to offer training and education coursework, as well as scholarships for professionals are two worthy investments to improve quality.
Who Are the Resource People and Organizations Related to School Age Care that Are Available to Communities?

The state School Age Care, Enrichment and Recreation Project has been in existence since January 1987, providing technical assistance and support to communities, organizations and individuals wanting to start programs or to improve the quality of out-of-school time programming for elementary and middle school children. Project staff can provide assistance, or can connect you with consultants and/or trainers (see below) to meet your specific needs. The SACER Project is funded with federal dollars from the Child Care & Development Fund. Contact the Project at: SACER Project, Portland State University, PO Box 751-occd, Portland OR 97207-0751; 503-725-8528; email: dyrudc@pdx.edu.

The Oregon School Age Training Specialists (OSATS) is a team of trainers with backgrounds in school age care and adult education. They are able to provide training on a fee-negotiated basis in areas related to school age core knowledge, including child development, curriculum development, guidance and discipline and program administration. For more information, contact the Project at the address/phone above.

The Oregon School Age Coalition (OSAC) is an affiliate of the National School Age Care Alliance. It is a professional membership organization with a mission to support, promote and enhance quality school age programs. Membership benefits include newsletters and discounts to conferences and workshops. OSAC sponsors an annual School Age Conference each fall at Linn-Benton Community College in Albany, which is geared primarily to program staff. It also sponsors a summer Building Blocks of School Age Care workshop for supervisors and administrators. Additionally, OSAC is encouraging the development of regional chapters to provide more localized support and training opportunities. OSAC has copies of the NSACA Standards booklet for sale. The Oregon School Age Coalition can be reached at PO Box 1524, Portland OR 97207.

The National School Age Care Alliance (NSACA) is the national professional organization for the field. NSACA is in the process of putting a national program accreditation system in place, scheduled to begin in the fall of 1998. There are also discussions being held about a national staff credentialing system. For information on the Standards, program accreditation, or other issues, contact NSACA at 1137 Washington St, Boston MA 02124; 617-298-5012; staff@nsaca.org; www.nsaca.org.

The National Institute on Out-of-School Time (formerly the School-Age Child Care Project) is the national leader in research and training in the field. For information on their resources, contact them at Center for Research on Women, Wellesley College, 106 Central St, Wellesley MA 02181; 781-283-2547; www.wellesley.edu/WCW/CRW/SAC.

School-Age NOTES is the primary publisher and book distributor in the field. Catalogs and newsletters are available from them at PO Box 40205, Nashville TN 37204; 1-800-410-8780 (9-4 p.m. CST).
What School Age Care Resource Materials Are Recommended?

*Oregon Vision for School Age Care, Enrichment & Recreation* (available in this appendix).

*The NSACA Standards for Quality School-Age Care* (1998), edited by Janette Roman (available from the Oregon School Age Coalition or the National School Age Care Alliance).

*Quality School-Age Care: A Public Investment that Pays Triple Dividends*, 1998 NSACA Public Policy Position Paper (available in this appendix).

*School Age Care Environment Rating Scale* (1996), Thelma Harms, Ellen Jacobs and Donna White.

*By Design: A New Approach to Programs for 10-15 Year-Olds* (1998), Work Family Directions. A kit which is also applicable to working with younger schoolagers as well. The kit includes two books:

- *Building by Design: Creating Democratic Communities in Programs for 10-15 Year-Olds* -- theories and approaches to programming.
- *Caring by Design: Establishing Care Structures in Programs for 10-15 Year-Olds* -- needs assessments and budgeting to staffing and environment.

and a video:

*Leading by Design* -- show high quality programs in action, as well as insights from leading researchers and practitioners.

The kit available from School-Age NOTES.
Cost and Contact information for Professionalization, Training and Workforce Development Resources

The Professional Development Registry

What does it cost? It costs $7.50 to order an application for the Professional Development Registry. To submit a Professional Portfolio, applicants must submit a Portfolio fee. This fee varies according to the level to which one is applying.

<table>
<thead>
<tr>
<th>Level</th>
<th>Portfolio Fee</th>
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<tbody>
<tr>
<td>I</td>
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<td>II</td>
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<td>V</td>
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<tr>
<td>VI</td>
<td>$70.00</td>
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</tbody>
</table>

According to a recent cost survey, practitioners spend approximately $44 applying to the Registry, including the costs of time, training, copying, and relevant fees.

Whom should we contact? To request more information on the Professional Development Registry, call the Oregon Center for Career Development in Childhood Care and Education, 503-724-8535. Christyn Dundorf, Registry Coordinator, oversees the Professional Development Registry.

Formal Educational Programs

Child Development Associate (CDA) Credential

What does it cost? It costs $17.75 to order an application package. The final assessment costs $325. There may be additional costs for training and advising. Currently, the Oregon Child Development Fund offers scholarships to family childcare providers and group home staff to cover the cost of the assessment. Funding is still needed to cover the costs of advising and training.

Whom should we contact? For more general information on the CDA, contact:

- Council for Early Childhood Professional Recognition
  2460 16th Street, NW
  Washington, DC 20009-3575
  800-424-4310

For information on how obtain a CDA scholarship application contact either your local Child Care Resource and Referral Agency, or

- Roberta Wood
  Oregon Child Development Fund
  American Bank Building, Ste. 725
  621 Morrison
  Portland, OR 97205
  (503) 227-4288
Higher Education: Community Colleges, Colleges, and Universities

**What does it cost?** Costs vary at each institution.

**Whom should we contact?** The Following Community Colleges, Colleges and Universities have programs in early childhood education.

**Community Colleges**

- Blue Mountain Community College  
  P. O. Box 100  
  Pendleton, OR 97801-1000  
  (541) 276-1260

- Central Oregon Community College  
  2600 NW College Way  
  Bend, OR 97701-5998  
  (541) 383-7700

- Chemeketa Community College  
  P. O. Box 14007  
  Salem, OR 97309-7070  
  (503) 399-5000

- Clackamas Community College  
  19600 S. Molalla Ave.  
  Oregon City, OR 97045-9049  
  (503) 657-6958

- Clatsop Community College  
  1653 Jerome Ave.  
  Astoria, OR 97103-3698  
  (503) 325-0910

- Columbia Gorge Community College  
  400 E. Scenic Drive  
  The Dalles, OR 97058  
  (541) 296-6182

- Klamath Community College  
  241 Williams Ave.  
  Klamath Falls, OR 97601  
  (541) 882-3521

- Lane Community College  
  4000 E. 30th Ave.  
  Eugene, OR 97405-0640  
  (541) 747-4501

- Linn-Benton Community College  
  6500 SW Pacific Blvd.  
  Albany, OR 97321-3779  
  (541) 917-4999

- Mt. Hood Community College  
  26000 SE Stark St.  
  Gresham, OR 97030-3300  
  (503) 667-6422

- Oregon Coast Community College  
  332 SW Coast Hwy  
  Newport, OR 97365-4928  
  (541) 265-2283

- Portland Community College  
  P. O. Box 19000  
  Portland, OR 97280-0990  
  (503) 244-6111

- Rogue Community College  
  3345 Redwood Hwy  
  Grants Pass, OR 97527-9298  
  (541) 471-3500

- Southwestern Oregon Community College  
  1988 Newmark  
  Coos Bay, OR 97420-2971  
  (541) 888-2525

- Tillamook Bay Community College  
  6385 Tillamook Ave.  
  Bay City, OR 97107-9641  
  (503) 377-2765

- Treasure Valley Community College  
  650 College Blvd.  
  Ontario, OR 97914-3498  
  (541) 889-6493

- Umpqua Community College  
  P. O. Box 967  
  Roseburg, OR 97470-0226  
  (541) 440-4600
The Review and Approval System for Informal Training

Oregon Childhood Care and Education Trainer (O.C.C.E.T.)

What does it cost?

There is no application costs associated with becoming an O.C.C.E.T. trainer. Once the application is approved there is a $20 cost to attend a required orientation.

There is a cost for requesting review and approval of individual training sessions by O.C.C.E.T. The costs are: $5.00 for a workshop; $7.50 for a seminar; and $10.00 for a class.

The cost for practitioners to attend O.C.C.E.T. training sessions (provided by O.C.C.E.T. trainers) may vary widely and depends upon the individual trainer as well as the venue through which the training is being offered.

Whom should we contact?

The Oregon Center for Career Development in Childhood Care and Education can provide information on trainers in various geographic regions, their core knowledge categories, their level of training provided as well as the level and core knowledge categories of the training sessions they provide.

Contact: Joann Contini, Training Coordinator, Oregon Center for Career Development in Childhood Care and Education, phone (503) 725-8527.
PROFESSIONALIZATION RESOURCES

Information Dissemination Systems

Oregon Child Care Resource and Referral Network

What does it cost? There are nominal fees for some resources available from the Network. Some local child care resource and referral agencies request a fee or donation for their services.

Whom should we contact? Oregon Child Care Resource and Referral Network
1823 23rd. Street, SE
Salem, OR  97302
1-800-342-6712

Oregon Childhood Care and Education Clearinghouse

What does it cost? Since the Clearinghouse is still in the planning stages and it is not known if there will be user fees or costs for access.

Whom should we contact? The Clearinghouse is a program within the Oregon Center for Career Development in Childhood Care and Education. The Center can provide information on the development of this emerging system.

Contact: Joann Contini, Training Coordinator, Oregon Center for Career Development in Childhood Care and Education, phone (503) 725-8527.

The Consultant Database

What does it cost? Consultant Database can be purchased from the Oregon Center for Career Development in Childhood Care and Education for $10.

Whom should we contact? Contact: Joann Contini, Training Coordinator, Oregon Center for Career Development in Childhood Care and Education, phone (503) 725-8527.

Statewide Training Initiatives

Oregon Child Care Basics  (O.C.C.B.)

What does it cost? There is a $5.00 class fee for the participant. Participants receive an Oregon Child Care Basics manual as well as an OCCET certificate documenting the core knowledge covered by the class. O.C.C.B. classes meet the requirements for a Professional Development Level I and II.

Whom should we contact? The Oregon Child Care Basics initiative is an existing program within the Oregon Center for Career Development in Childhood Care and Education. The Center contracts with 17 statewide agencies who then deliver O.C.C.B. classes within their geographic regions. The Center can provide information on the local contractors, trained instructors and the availability of courses.

Contact: Joann Contini, Training Coordinator, Oregon Center for Career Development in Childhood Care and Education, phone (503) 725-8527.
First by Five Infant/Toddler Training Program

**What does it cost?**
Costs vary depending on the training institution offering the modules.

**Whom should we contact?**
The First by Five training initiative is an existing program within the Oregon Center for Career Development in Childhood Care and Education. The Center works directly with trainers and established training institutions throughout the state to assure delivery of First by Five modules. The Center can provide information on the local training institutions, trained instructors and the availability of courses. The Center can also provide updated information on the availability of scholarships for potential participants.

Contact: Joann Contini, Training Coordinator, Oregon Center for Career Development in Childhood Care and Education, phone (503) 725-8527.

Overview

**What does it cost?**
There is no cost for the Overview class.

**Whom should we contact?**
For more general information contact:

Judy Barker  
Child Care Division  
Employment Department  
875 Union St., NE  
Salem, OR 97311  
(503) 947-1400

Child Abuse and Neglect

**What does it cost?**
This training is free for family child care providers.

**Whom should we contact?**
For more general information contact:

Judy Barker  
Child Care Division  
Employment Department  
875 Union St., NE  
Salem, OR 97311  
(503) 947-1400

Infant/Child First Aid and CPR

**What does it cost?**
The cost varies.

**Whom should we contact?**
Contact your local American Red Cross Agency.
Love and Logic

What does it cost? The cost varies by trainer.

Whom should we contact? For the names of trainers in your area, contact:

Cline/Fay Institute, Inc.
2207 Jackson St.
Golden, CO 80401-2317
(800) 338-4065

Second Helping

What does it cost? Each module costs $50.

Whom should we contact? Joan Lowe
768-3145

OR

Chris Chenoweth
624-8641

Maximizing Oregon’s Brain Power

What does it cost? Training costs are currently under review.

Whom should we contact? The Commission for Children and Families
530 Center St., NE, Suite 300
Salem, OR 97310
(503) 373-1283

The Statewide Mentoring Program

Oregon Childhood Care and Education Mentoring Program

What does it cost? There is no cost to participate in the new statewide mentoring program.

Whom should we contact? The mentoring program is administered by the Oregon Center for Career Development In Childhood Care and Education. Contact Christyn Dundorf, mentoring coordinator, at (503) 725-8536.
### Professional Organizations

<table>
<thead>
<tr>
<th>Organization</th>
<th>What does it cost?</th>
<th>Whom should we contact?</th>
</tr>
</thead>
</table>
| **OAEYC**   | There are various member options for OAEYC. The basic membership costs $35 and includes subscriptions to the nationally published journal, *Young Children*, and to the OAEYC Bulletin, and a discount on entrance fees at OAEYC events. | OAEYC  
P. O. Box 1455  
Tualatin, OR  97062  
(503) 288-3664 OR (800) 452-3610 |
| **OACCD**   | The annual membership costs $50. Membership includes a subscription to the quarterly newsletter, *Managing for Our Children*, reduced admission to OACCD conferences and training, a membership directory and local affiliate membership. | Linda Pompel  
P. O. Box 7032  
Eugene, OR  97401  
(541) 747-4501 |
| **OFCCN**   | There is no cost to participate in the Network. | OFCCN  
P. O. Box 4504  
Salem, OR  97302 |
| **OSAC**    | The individual membership structure is currently being reviewed. Please write for information. OSAC membership includes a subscription to *OSAC News* and conference and workshop discounts. | Oregon School Age Coalition  
P. O. Box 1524  
Portland, OR  97207-1524 |
Family Finances and Child Care Costs

Family Investment in Childhood Care and Education

Oregon families, on average, pay $268 per month for childhood care expenses, up 10% from $242 per month in 1994. Comparably, the average child care cost for U.S. families is $297 a month, or about 7.5 percent of average pretax family income. Although these average costs do not appear outrageously high, for many families the costs of childhood care and education greatly strain their household budgets.

Typically, urban families and families with infants pay the highest child care costs. For example, in 1997, average costs for infant care ranged from $92 a week in rural Oregon to over $112 a week in urban areas (Figure 1). The families’ child care costs also vary by family income levels, as well as by family characteristics.

In Oregon, average monthly child care expenses range from $226 for households making less than $25,000 per year to $316 for households with income of $45,000 per year and over (Figure 2). Although lower income families pay less child care expenditures, child care costs consume a larger share of their budget (Figure 3). Thirty-three percent of Oregon families with children in child care currently spend more than 10% of their income on child care expenses.

Oregon’s low-income families (those who make less than $25,000 per year) spend an average of 37% of household income on child care, compared to around 7% for higher income families.

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An Oregon family with both parents working full-time at minimum wage earns only $23,040. These working families struggle to afford child care.

![Figure 3](image)

**Figure 3**

**Percent of Family Income Spent on Child Care by Families with Preschoolers**

- Less than $14,400: 25%
- $14,400-35,999: 12%
- $36,000-53,999: 8%
- $54,000 or more: 6%


Single parent families and minority families are most likely to pay a large percent of family income for child care costs. About half of African American families with children earn less than $22,000 per year. These statistics are similar for Latino families. Over half (56%) of Latino children with working mothers live in female-headed households or in two-parent households where the mother must work just to provide a family income of $30,000 or less.\

Quality of childhood care is related to costs. Higher quality care costs more than lower quality care. The result is that many families, while paying a high percentage of their income on childhood care, are unable to afford high quality care. The relationship between quality and costs raises a critical question: How much should parents contribute to the cost of childhood care and education?

The Oregon child care affordability benchmark states that families will spend no more than 10% of their income on child care. This standard, however, has been reached by only 41% of Oregon families who earn less than $25,000 per year. Responsibility for adequate financing for child care must be shared by government, business, parents and community organizations.

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6 Ibid.
Who Helps Families Pay for the Cost of Childhood Care?

Government, communities, and some businesses have responded to the problem of ensuring quality and affordability by subsidizing childhood care and education services. This financial support for childhood care and education, however, is provided through a patchwork of programs. Thus, access to quality, affordable child care is not universal for all families.

The Cost of Care

In 1995, the Cost, Quality and Child Outcomes Study Team (CQCO) calculated the full cost of childhood care as $2.83 per child hour. Families paid $2.11 or 74% of the full cost of care (see box). The remaining 26% of the full cost of care is supported by supply subsidies. Supply subsidies reduce the costs incurred by centers and family child care providers. The largest component of supply subsidies are foregone wages, defined as the difference between the wages child care providers are paid and what other workers with similar education and experience are paid. Other examples of supply subsidies are donated goods, volunteer time, and donated occupancy or facilities.

Some families receive direct subsidies to assist them with child care costs. Called "demand subsidies" these subsidies directly reduce parents’ costs by helping with the expenses of childhood care and education. Examples of demand subsidies include tax credits such as the child and dependent care tax credit, working family child care credit, earned income tax credit; and other financial assistance including vouchers and direct payment to providers, eligibility in Head Start programs, and scholarships. In addition, approximately 23,000 Oregon families receive monthly child care subsidies from the state. These families must also pay out of their own pockets a payment or fee referred to as a copayment. For example, an Oregon family of three earning $1,670 a month, who received state child care subsidies, would still be required to pay 22% of their income in copayments.

Eligibility for demand subsidies is most often based on whether or not a family is considered poor by the federal poverty measure. Thus, how poverty is measured is a critical policy issue in childhood care and education.

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8 Data from Adult and Family Services, Department of Human Resources, 1998.
**How is Poverty Defined?**

In the early 1960s Mollie Orshansky developed the official federal poverty measure based on a set of dollar amounts—called lines or thresholds—for different types of families.\(^{10}\) The poverty line or threshold represents an absolute measure of the economic resources necessary to maintain a minimum standard of living in the U.S. Specifically, the poverty line or threshold is based on the cost of a minimally adequate diet, for various family sizes. Called the economy food plan by the U.S. Department of Agriculture, these minimum costs were based on the food-buying patterns of low-income households from the 1955 Household Food Consumption Survey. The cost of the economy food plan was multiplied by three to set the poverty threshold.

Why was three chosen as the multiplier? Because in the 1950s, the typical family spent about one-third of their total budget on food, and it was assumed that the remaining funds would adequately provide for other basic living expenses. This threshold is still in use today and is adjusted annually for inflation using the Consumer Price Index or CPI, a measure that tracks the change in prices for common household goods over time.

A slightly different measure of poverty is called the poverty guidelines. This simplification of the poverty threshold is used to determine eligibility for many federal need-based programs. Examples of these programs include Head Start, Food Stamps, National School Lunch, and Low-Income Home Energy Assistance.

Both poverty thresholds and poverty guidelines are used to indicate whether families are “poor” or “nonpoor”. A family is considered “poor” if their income is below the poverty threshold for that particular family size. Families whose incomes are above the poverty threshold are counted as the “nonpoor” (see box).

This classification of “poor” versus “nonpoor” greatly oversimplifies the economic situations of many families.\(^{11}\) There are substantial differences in the etiology and effects of poverty for families who have been poor for long periods of time compared to those families who move in and out of poverty over shorter periods. Further, families who live just above the official poverty threshold are not economically secure. This recognition has lead to a category called “near poor” defined as family incomes between 100 percent and 185 percent of the poverty line. Near poor families, although economically vulnerable, are not often eligible for the same assistance as officially poor families.

Altering the way poverty is measured would greatly change the face of who is poor. The next section describes three alternative ways of measuring poverty and the resulting profiles of families who are considered poor.

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\(^{11}\) *One in Four: America's Youngest Poor.* National Center for Children in Poverty: Columbia School of Public Health (1996).
Alternative Ways of Measuring Poverty

Many economists question how accurately the official poverty measure, created over 30 years ago, reflects the economic realities of today’s families. For example, the official poverty measure disregards the changes that have occurred in family spending patterns over the past 30 years. Further, the official measure uses only pre-tax income to assess family resources. Both of these issues, and several others (see box) have lead economists to propose alternative ways of measuring poverty.

New methods of measuring poverty would change the estimated levels of poverty and the profile of who is poor. This is important because family poverty determines eligibility for many government programs.

Two alternatives for measuring poverty are considered here:  

- Alternative 1 calculates income in the same way as the current method, but raises the poverty line to include those families with income below 185% of the current poverty line.
- Alternative 2 uses after-tax income and includes as family resources the value of “near cash” benefits and money received from the Earned Income Tax Credit (EITC).

Both alternative affects the percentage and profile of families classified as below the poverty line (Figure 4). Alternative 1, adopting a poverty measure that includes the “near poor”, would substantially increase the percentage of young families defined as “poor” from the current 23.2% to 43.0%. In contrast, Alternative 2, that include benefits and tax credits as income, diminishes the number of young families in poverty.

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### Criticisms of the Current Official Poverty Measure

**Poverty Threshold Calculation**

- Not updated to reflect the spending patterns of today’s families
- Disregards geographical differences in expenses

**Definition of Family Resources**

- Family resources are defined as pre-tax income
- Excludes in-kind benefits in calculating income (e.g., food stamps, housing assistance)
- Does not permit deductions of work-related expenses (e.g., child care, transportation) in calculating income
- Ignores differences in families’ medical costs

**Source:** "Revising the Poverty Measure". Focus, 19(2) 1998

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12 Other alternatives have been proposed to reflect a change in family income, family structure, and/or the goods and services available for consumption. In addition, a relative economic well-being measure has been proposed where poverty is measured relative to the median family income. For example, the median Oregon family income in 1996 was $38,700, poverty would be measured at $19,350, one-half the median.
Both alternatives not only change the estimated levels of poverty, but also result in a different profile of families considered in poverty. For example, using the current poverty measure, a greater percentage of young children in mother-only families are considered poor compared to two-parent families where the father is employed full-time and the mother does not work (1996 data: 16.8% and 14.2%, respectively). Under Alternative 2 for those same groups the reverse is true. That is 9.3% of mother-only children are poor compared to 11.3% of two-parent for kids with only one employed parent. This reflects the inclusion of the near cash benefits and the EITC as income in the calculation of poverty.

Applied to childhood care, Alternative 1 would almost double the percentage of families eligible for some child care subsidies. In contrast, Alternative 2, which reduces the percentage of families defined as poor, would reduce eligibility for subsidies.

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**Endnotes**


2 Ibid, p. 7

3 Ibid, p. vi.


11 Ibid, p. 12


20 Ibid, p. 11.


22 Ibid, p. 23


24 Ibid, p. ix

25 Ibid, p. ix


33 Ibid, p. 23.


36 Diagram from Douglas County Child Care Resource and Referral.

38 The Leading Edge: NAEYC’s Teleconference/Seminar on Developmentally Appropriate Practice in Early Childhood Programs is available from NAEYC for $200.


41 Video Observation Tapes on the three scales are available @ $65 from Child Development Media, Inc, 5632 Van Nuys Blvd., Suite 286, Van Nuys, CA 91401. Phone: (818) 994-0933.


ENDNOTES


54 Ibid.

55 Ibid.


57 Ibid.


61 See http://www.iamyourchild.org/