Lane County Child Care Enhancement Project: Final Evaluation Report

EXECUTIVE SUMMARY



Submitted to:

Oregon Employment Department – Child Care Division

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Informing policy, improving programs

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CCEP Overview

In 2003, the Oregon Legislature enacted the Oregon Child Care Contribution Tax Credit, the proceeds of which were used to fund two child care enhancement pilot projects administered by the Oregon Employment Department's Child Care Division. The first project, the Lane County Child Care Enhancement Project (CCEP) was awarded to Lane Community College in 2005. This report summarizes the final results from a 3-year process and outcome study of the CCEP.

The CCEP is guided by three goals:

- To decrease the cost of child care to 10% of gross family income;
- To increase and stabilize child care provider wages; and
- To increase child care quality through provider access to professional development and other enhancements.

The CCEP consists of three program components:

- 1. Parent subsidies: The program provides income-eligible parents with child care subsidies to limit the percentage of family income spent on child care to 10%;
- 2. Wage enhancements & financial supports: The program provides child care providers with wage enhancements, scholarships, and facility improvement grants designed as incentives for quality improvements and to support provider retention and program quality; and
- 3. *Mentoring, networking, and technical support*: The program provides individualized technical assistance, facilitates networking among providers, and mentors providers to enhance child care quality.



These three components are designed to jointly influence the three project goals, and represent a multi-pronged approach to determining the kinds of investments that are needed to create high-quality, affordable child care.

CCEP Evaluation Overview

A 3-year contract to conduct process and outcome evaluation of the CCEP was awarded to NPC in 2005. The process study was designed to monitor program implementation, document barriers and successes in engaging child care providers and parents, and provide ongoing feedback to the project about implementation. The outcome study was designed to address eight key outcome questions, linked to the study goals:

Family outcomes:

- 1. Are CCEP parents spending less than 10% of their household income on child care?
- 2. Are CCEP parents more satisfied with their child care arrangements?

Provider professional development and retention outcomes:

3. Do CCEP providers show more evidence of engagement in professional development activities?



- 4. Are CCEP providers compensated at a rate commensurate with their level of training and education?
- 5. Are CCEP facilities more likely to have stable revenue and less likely to have problems with issues of parent non-payment?
- 6. Are CCEP providers more likely to stay in the field longer?

Child care quality outcomes:

- 7. Are CCEP providers more likely to make facility improvements?
- 8. Are CCEP children experiencing higher quality child care?

Methodology

STUDY SAMPLE

The evaluation employed a randomized design, with providers assigned to either the CCEP intervention or to a control group. The CCEP group consisted of a total of 13 facilities, representing 11 family child care facilities and 2 child care centers. The control group consisted of 15 facilities representing 12 family child care facilities and 3 centers. An additional comparison group was added to the study after it became apparent that a number of the original control group were participating in CARES, a program providing wage enhancements and training to child care providers. Sixteen non-CARES facilities (13 family child care facilities and 3 centers) were added to the control group.

DATA COLLECTION

Data were collected in a variety of ways to answer the key study questions. Process study data were collected through quarterly reports submitted by the Program Director, as well as through regular program updates via email, telephone, and project meetings. Outcome data were collected using the following instruments, collected at baseline and annually thereafter:

- Provider surveys;
- Observations of child care settings using the Quality of Early Childhood Care Settings (QUEST) Inventory collected annually by NPC Research staff;
- Facility director surveys; and
- Parent surveys and interviews.

Key Findings

Over the course of the 3-year pilot, the program provided services to a total of 13 facilities (11 family child care facilities and 2 centers) and 34 providers (14 family providers and 20 center providers). During Year 1, CCEP facilities served 218 families including 269 children; during Year 2, CCEP facilities served 230 families including 297 children, and during Year 3, CCEP facilities served 222 families including 307 children.

Results of this evaluation show that the Lane County Child Care Enhancement Project (CCEP) had a number of positive effects for child care providers, families, and children. First, observational data collected by objective outside data collectors found significant improvements in child care quality for CCEP family-based providers. Compared to providers not receiving the program, CCEP family providers provided:

- Higher quality (and more available) developmentally appropriate equipment for children;
- Safer furnishings and materials;
- Higher quality (and more available) materials to support language and literacy;
- Higher quality support for children's social emotional development;
- Higher quality support for children's cognitive development; and
- Higher quality support for children's language development and early literacy.

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Further, CCEP parents showed:

- Fewer changes in child care placements for their children; and
- Higher satisfaction with the quality of child care being provided.

The program also increased support and training among CCEP providers, who, compared to control providers:

- Were more likely to be enrolled in the Oregon Registry (OR);
- Were more likely to have advanced their level of qualifications on the OR;
- Were somewhat less likely to report income instability (family providers only); and
- Were less likely to report stress about working with children with challenging behaviors (family providers only).

Finally, the program influenced provider stability: CCEP family child care facilities were

less likely to close (one closure during the study period) than were control family child care facilities (six closures during the study period).

Overall, the evaluation of CCEP finds good evi-

dence for the efficacy of the program, especially for family child care providers. Results were strongest and most consistent in terms of supporting improvements in child care quality, with significant and meaningful improvements seen in a variety of domains. The program was also clearly successful in engaging providers in professional development activities, and in supporting them to increase their qualifications sufficiently to enable them to move up on the Oregon Registry.

Financial outcomes for both providers and parents proved more difficult to influence, although qualitative responses, and some

quantitative data, suggest that CCEP did help both families and providers to accomplish important financial goals that otherwise would not have been met. One of the most important findings related to the financial impact of CCEP was the increased ability of CCEP parents to keep their children in these high-quality child care settings for more hours than would have otherwise been possible. An important question for future study is whether the level of parent subsidy support could be decreased, while continuing to support child care stability for low-income families.

Despite redoubled efforts in the final project year, this evaluation found few significant improvements in quality, work-related stress, or retention for center-based child care providers. It may be that family providers are more open to the kind of individualized technical assistance that were provided by CCEP, or that family providers have more autonomy to implement changes suggested by the

project. It is also important to note that early evaluation reports found that family providers were more involved in professional development activities than were centerbased providers. While this difference was elimi-

"CCEP provided the training and support to become the child care professional I've always wanted to be." - CCEP Child Care Provider nated in Year 3 as the program increased its

level of effort in working with center providers, there may not have been sufficient time for center providers to implement quality changes based on their increased knowledge.

Sustainability and Future **Directions**

While the research clearly supports implementation of CCEP-like interventions for family providers, such support is not evident for center providers. Future program and evaluation work is needed to determine whether additional strategies, supports, or



interventions can enhance effectiveness for this group of providers.

Further, how much intervention (both in terms of duration and intensity) is needed after the initial 3 years in order to maintain these improvements remains an important, but unanswered question. Qualitative interviews with providers suggest that reductions in the level of technical assistance, networking support, and financial support may be possible without an associated drop in program quality. Family and center providers

differed in their perceptions of which program components were most crucial for success, with family providers emphasizing the mentoring and networking components, and center providers emphasizing the wage enhancements and scholarships. These differences in opinion between family and center providers support the idea that the most successful interventions may need to be tailored specifically for center or for family based providers.

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