KEY FINDINGS FROM THE EVALUATION OF LANE COUNTY’S CHILD CARE ENHANCEMENT PROJECT (CCEP)

What Is the Child Care Enhancement Project (CCEP)?

In 2003, the Oregon Legislature enacted the Oregon Child Care Contribution Tax Credit, the proceeds of which have been used to fund the Lane County Child Care Enhancement Project (CCEP), administered by Family Connections at Lane Community College. The purpose of CCEP is to increase affordable, high quality, and stable child care for low-income families. 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 qualifying child care providers with wage enhancements, scholarships, and facility improvement grants designed as incentives for engaging in training and making quality improvements; 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.

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 child care 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.

NPC Research, a research firm contracted to conduct an evaluation of CCEP, collected independent observations of child care facilities, and surveys of parents and child care providers over three years. Providers who applied for the project were randomly assigned to either CCEP or a control group. Both center-based child care facilities and family child care facilities participated in the program.

Key Findings

**CCEP Improved Child Care Quality for Family-Based Child Care.** Compared to family-based providers not receiving CCEP, CCEP family providers offered higher quality child care environments to children in all of the following domains:

- Quality and amount of equipment available for children;
- Safety of furnishings and materials;
- Quantity and quality of materials to support language and literacy;
- Providers’ ability to support children’s social emotional development;
- Providers’ ability to support children’s cognitive development; and
- Providers’ ability to support children’s language development and early literacy.
To access the full report and executive summary, see www.npcresearch.com/projects_0041.php

CCEP Family Providers Offered Significantly Higher Quality Child Care Environments at Follow-up

CCEP Increased Training and Professional Development. CCEP providers, compared to control providers:

- Were more likely to have enrolled and advanced in the Oregon Registry (OR)

CCEP Increased Family Provider Stability. CCEP family providers, compared to control family providers:

- Reported less likely to report income instability.
- Were less likely to close (1 CCEP facility closure vs. 6 control facility closures during the study period).

CCEP Increased Parent Satisfaction and Child Placement Stability. Parents of children enrolled in CCEP facilities, compared to parents of children at non-CCEP facilities, reported:

- Fewer changes in child care placements for their children;
- Reported using more hours of high-quality child care;
- Higher satisfaction with the quality of child care being provided.

Conclusions

Overall, the evaluation of CCEP finds good evidence 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 also was 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 impact, although qualitative responses suggest that CCEP did help both families and providers to accomplish important financial goals that otherwise would not have been met. 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. Staff turnover was higher in center-based facilities than in family child care facilities, resulting in less exposure to CCEP programming for center-based providers. In addition, it may be that family providers are more open to the kind of individualized technical assistance that was provided by CCEP, or that family providers have more autonomy to implement changes. Future program and evaluation work is needed to determine whether additional strategies, supports, or interventions can enhance effectiveness for center-based providers.