

**Virginia's Local Social Service Agencies:
Child Care Quality, Improvement, Subsidy Data,
and What Would be Most Useful in an Early Childhood Data System**

Isabel S. Bradburn, Nancy J. White, Aaron D. Schroeder, and Caitlin Faas

The Child Care Development Fund (CCDF) is a federal work support program to help low-income families pay for child care while parents are at work. Administered as a block grant to states, the program is designed to enable parents to choose the child care arrangements that best suit their work schedules as well as family needs. As long-term benefits of high quality early care and education for economically disadvantaged children are increasingly documented, however, a focus on the type and quality of subsidy care has emerged. Four percent of each block grant award is designated to be applied to efforts to improve the quality of child care or to increase access to high quality care. As part of the quality improvement plan in Virginia, CCDF Quality Improvement (QI) monies are distributed to localities by the Virginia Department of Social Services through the Division of Child Care + Early Childhood Development. Child Care Consultants located in each of the five Regional Offices review local agency Quality Initiative (QI) plans, and approve the local departments of social services (LDSS) budgets for QI activities.

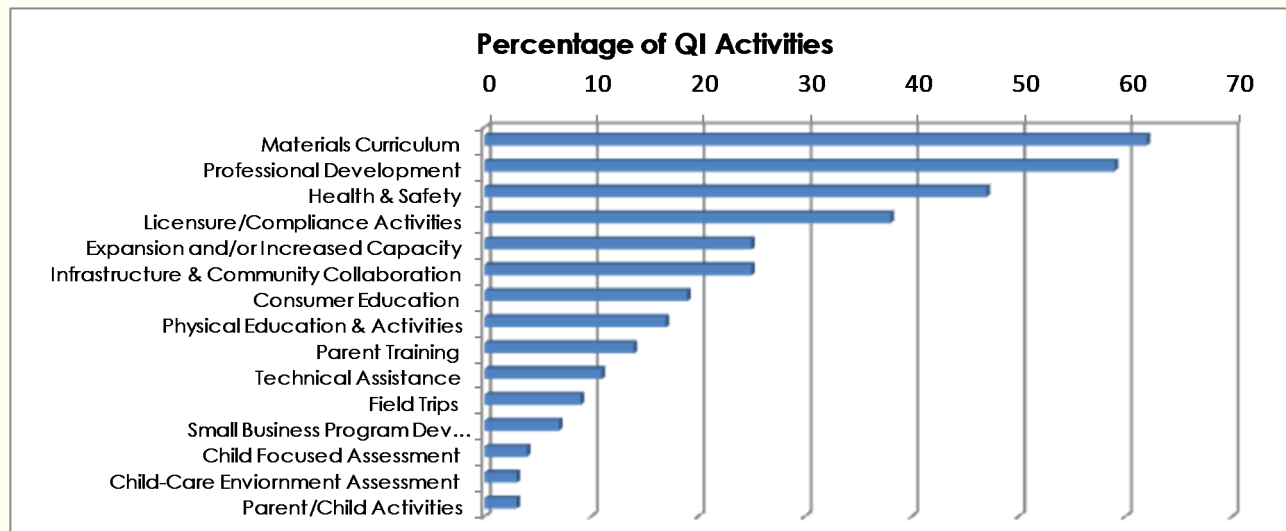
This report specifically examines

- How LDSS across the Commonwealth reported allocating their QI funds in 2009.
- What types of data localities routinely collect on child care quality in their areas.
- What types of information they would like from an early childhood data system.

Method

- This brief Research Report is one of a series of fact sheets produced as a result of a state-wide data inventory during 2009.
- As part of the first phase of Project Child HANDS, all local social service agencies and school divisions were surveyed regarding what kinds of early childhood data they collected related to the child care subsidy program, preschool and childcare, childcare quality, and learning outcomes. They also reported how the data were stored.
- Activities were reported by LDSS subsidy program personnel to their regional director.
- Reports from 2009 were classified into different categories of activities, with information from 118 (98% of 120) local agencies. Classification was aimed at minimizing overlap between categories.
- For details on the category scheme, see Technical Paper_QI_2009 at www.childhands.org.
- Other research reports are also available at www.childhands.org.

Quality improvement activities



- Results indicate that more than 60% of localities devoted some portion of their funds toward purchasing classroom or program-related materials and curricula, followed by efforts to improve provider or teacher knowledge and skills.
- Just under 50% directed funds toward improving health practices or safety training; most often, this was reported as staff training in CPR and First Aid (annual certification is required for licensure).
- 38% of local agencies allocated resources toward helping programs retain licensure (for example, by helping pay for new staff criminal background checks) or, more commonly, for unregulated providers to become licensed.
- Approximately 25% focused some or all of their QI reserves toward building child care community infrastructure and capacity, often focused around infant/toddler care or outdoor programming, such as helping to build a park or starting a summer daycamp. Infrastructure projects usually involved collaboration with multiple community partners or neighboring social service boards.
- Fewer than 20% of local agencies reported supporting the remaining nine activities with QI funding.

Across the five regions – Northern, Eastern, Central, Piedmont and Western

- Although Professional Development was supported in every region, the percentage of local offices focusing efforts on it ranged from 68% in the Central region, to 27% in the Western region.
- The Piedmont region was particularly strong on Materials and Curriculum, with 83% of those local agencies highlighting that area of quality improvement.
- Fifty-nine percent of the Eastern region's agencies spent funds on Health and Safety, considerably higher than the others, especially the Western region (23 percent).
- While field trips were not listed as QI activities for most localities lists, 20% of the Central region's offices did so.
- These differences may reflect perceived area needs or initiatives from the child care community as a whole.

Summing up: The great majority of 2009 QI funds at the local level appeared to be dedicated to purchasing materials, curricula, and professional development activities, rather than to assessment, family-oriented activities, or business practices. Future research might explicate what kinds of professional development and curricula localities are engaging in.

What do we currently know about child subsidy care quality in Virginia?

Required reporting to the Virginia Department of Social Services mandates only that local offices report the type of care a child receives. Despite this, fifteen percent of Virginia localities reported via survey that they collect additional quality-related information related to subsidy care.

The survey response rate was high (100 agencies from all regions and agency size responded, or 83%), so results can be considered representative.

Most of the additional data are in the areas of:

- Education/training of child care provider staff beyond minimum requirements set by Virginia's licensing policy;
- Local child care ordinances that maintain additional standards above state licensing;
- Parent satisfaction data was collected in a few cases;
- Child care environment, assessed by local raters through the Virginia Star Quality Initiative.

As anticipated, most localities do not routinely collect data on subsidy provider quality.

What would local service agencies like to know?

Agency personnel had many ideas about what they would use in a cross-division, cross-agency data system. The most heavily subscribed are listed below.

Q: What would be most helpful to you from an early childhood interactive data system?

Ranking	Type of Data	Selection by Percentage
1	Tracking 5-year cap for child care assistance	67
2	Parent employment as related to child care use	63
3	Child care quality by type of provider	62
4	Child care stability	56
5	Child care funding across years or by provider type	49
6	Subsidy use by demographic breakdown	44
7	Linking child care assistance to receipt of Medicaid	26
8	Other	13

The following areas of interest were described for "Other":

- **Management Tools** - # of applications processed, timeliness of processing, # of contacts, recipients' time on waiting list, and link child care data system to ADAPT/SPIDER systems.
- **Families/Child Specific Information** - reasons for families returning to the child care system, identify changes in providers by family in order to track stability (family & provider), track funding by child not provider type, track market rates as related to parent choice of provider, and parent employment/education as related to child care.
- **Provider Information** - track provider type by locality, ability to sort provider type by zip code in order to match family needs to availability to include provider age range for children served, hours of operation, localities served, and quality of care; GPS for provider locations, ability to track how providers are affected by child care rate changes.
- **Funding/Budget line items** - track children between funding streams, relate quality by funding streams.