

**CHILD CARE AND DEVELOPMENT FUND (CCDF)
REPORT TO CONGRESS FOR FY 2006 AND FY 2007**

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Associate Director's Message

This report provides key data and information about the role of the Child Care and Development Fund (CCDF) in improving the affordability, availability, and quality of child care in the United States. While the majority of the report covers the 2006 and 2007 fiscal years, the paragraphs below provide a brief update on recent developments and future opportunities based on *Pathways and Partnerships for Child Care Excellence*- the strategic work plan for the Department of Health and Human Services' Child Care Bureau. As we approach the twentieth anniversary of the Child Care and Development Block Grant Act, the CCDF remains a vital support for millions of children and families, but reforms are necessary to maximize the program's effectiveness in achieving its dual goals of supporting employment for low-income families, and promoting healthy development and school success for children.

Implementing the Recovery Act. The American Recovery and Reinvestment Act (ARRA) of 2009 included \$2 billion in child care funding to help meet the needs of low-income families during the economic recession, when many families have lost wages or jobs and need assistance in paying for child care services. CCB estimates that up to 220,000 children have been served with CCDF ARRA funds. At a time when States are facing severe budget difficulties, these funds have helped States maintain and expand child care assistance, extend assistance for periods of job search, reduce family co-payments, and raise provider reimbursement rates. States have also used ARRA funds to make critical investments to improve the quality of care, such as implementing Quality Rating and Improvement Systems (QRIS) that provide quality benchmarks for providers and critical information about quality to parents.

Making Critical Investments. The President's FY 2011 budget request builds on the important investment made by the Recovery Act. Prior to enactment of ARRA, the CCDF program had not received a substantial funding increase for eight years, and as a result the average monthly number of children receiving services declined to 1.6 million in FY 2008. To sustain services for children funded by ARRA and to make essential improvements in the quality of child care, the President has proposed an historic \$1.6 billion increase. The President's request also includes CCDF as part of two new High Priority Performance Goals for the Department of Health of Human Services (HHS). The first is focused on promoting access for low-income children to early care and education services, and the second promotes improvements to the quality of care.

Reauthorizing the Program. The President's budget request supports the Administration's intent to work with Congress to reauthorize the child care program. Reauthorization provides the best opportunity for necessary reforms to CCDF that focus on improving the quality of care both for children receiving CCDF subsidies and for all of the nation's 12 million young children in out-of-home care. The Administration is committed to health and safety standards and improved monitoring to ensure that children are in safe environments, establishing high standards of quality across child care settings, and expanding professional development opportunities for the child care workforce. To accomplish these goals, HHS anticipates increases in the quality funding set aside in reauthorization.

Focusing on Quality. Pending reauthorization, the Administration is encouraging States to strategically invest CCDF dollars in systemic investments that promote quality. There is mounting research and momentum in the States to support quality as a priority. For example, a

recent National Institutes of Health study provided even more evidence that quality child care matters, finding that the impact of high quality care extends into adolescence. State efforts include implementing comprehensive Quality Rating and Improvement Systems (QRIS) to provide a framework for system reform and continuous program improvement, and investing in professional development systems to support education, competency-based training, and improved working conditions and compensation to ensure a highly qualified workforce of teachers and providers. In addition, the Child Care Bureau is in the process of reviewing its current policies for CCDF subsidies with a view to building a subsidy system that is child-focused, family-friendly and fair to providers.

Creating Strong Partnerships. The Administration is committed to building partnerships across child care, Head Start, and other early education services in order to promote an integrated mixed delivery system with expanded high quality choices for families. Through an Inter-Departmental Early Learning Initiative and other efforts, the Child Care Bureau is working with other key agencies, including the Office of Head Start and the Department of Education. HHS is also funding implementation of State Early Childhood Advisory Councils that promote coordination across key programs and funding streams.

Strengthening Accountability Measures. Program integrity is an integral part of the CCDF program and a key to maximizing access to child care assistance for eligible children and families. The Child Care Bureau is establishing a comprehensive program integrity framework, along with plans for enhanced technical assistance and resources, to assist States, Territories, and Tribes with preventing waste, fraud, and abuse in the program.

I am confident that these efforts will translate into serving more low-income children in higher quality settings—resulting in improved outcomes for children and families across the country. We look forward to working in partnership to achieve these goals.

Shannon L. Rudisill
Child Care Bureau

INTRODUCTION

This Report to Congress is required by Section 658L of the Child Care and Development Block Grant Act (CCDBG) as amended by the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 (P.L. 104–193) and the Balanced Budget Act of 1997 (P.L. 105–33). The report describes and analyzes information about the Child Care and Development Fund (CCDF) from a variety of sources, including State Plans, expenditure reports, administrative data reports, and research findings. The report also includes information about training and technical assistance that is provided to States, Territories, and Tribes.

CCDF is a significant source of Federal support to improve the affordability, availability, and quality of child care in the United States. CCDF assists low-income families, including families receiving or transitioning from temporary public assistance, to obtain child care so they can work, or at State option, participate in training or education.

For both Fiscal Years (FY) 2006 and 2007, approximately \$5 billion in Federal CCDF funding was available through grants to all 50 States, the District of Columbia, 5 Territories, and 259 Tribal grantees in FY 2006 and 260 Tribal grantees in FY 2007 (representing over 500 Indian Tribes).¹

Child Care and Development Fund Grantees

- 50 States
- District of Columbia
- Five Territories (American Samoa, Guam, Northern Mariana Islands, Puerto Rico, Virgin Islands)
- Tribal grantees providing services to about 500 Indian Tribes, many through consortia arrangements (259 grantees in FY 2006 and 260 grantees in FY 2007).

CCDF is administered at the Federal level by the Child Care Bureau (CCB), Office of Family Assistance in the Administration for Children and Families (ACF). States, Territories, and Tribes are responsible for ensuring that their CCDF grants are administered in compliance with Federal statutory and regulatory requirements. As a block grant, States have significant discretion in implementing the program and in determining how funds are used to achieve the overall goals of CCDF.

CCDF funds are used primarily to provide subsidized child care services through vouchers or certificates to low-income working families with children under age 13. Parents may select any legally operating child care provider, including child care centers, family child care homes, relatives, neighbors, after-school programs, and faith-based programs.

Providers serving children funded by CCDF must meet basic health and safety requirements set by States, Territories, and Tribes. Within general Federal rules, States decide how their subsidy

¹ Estimates of available funding for child care do not match actual State expenditures reported in Part III of this report. States have more than one year to liquidate their CCDF funds, and thus can spend dollars from both current and prior fiscal year appropriations.

system will be administered and determine payment rates for providers, copayment amounts that parents are required to pay, specific eligibility requirements that a family must meet to receive a subsidy, and how CCDF services will be prioritized.

CCDF Lead Agencies must use a minimum of four percent of CCDF funds to improve the quality of child care. CCDF also includes targeted funds for specific purposes: quality enhancement, improving the quality of care for infants and toddlers, improving school-age care, and child care resource and referral services. Quality activities include provider staff training, grants and loans to providers, health and safety improvements, monitoring of licensing requirements, and other initiatives.

What Data Sources Are Used in This Report?

This report is largely based on information and data reported by States to CCB, including:

- Biennial State Plans effective for the period October 1, 2005, through September 30, 2007 (FY 2006 and FY 2007);
- State CCDF expenditure reports for FY 2006 and FY 2007; and
- Administrative data about the families and children receiving CCDF services in FY 2006 and FY 2007

The report also includes information from research and technical assistance efforts in FY 2006 and FY 2007.

OVERVIEW OF THE REPORT

This report consists of eight parts:

- Part I provides background on the CCDF program including funding, eligibility requirements, a description of how funds may be used, information about program administration, and key child care and CCDF terms.
- Part II provides information from aggregate and case-level data reported by States for FY 2006 and FY 2007, including information about children receiving subsidized care and the providers who cared for them.
- Part III summarizes expenditure data obtained from State quarterly financial reports on expenditures in FY 2006 and FY 2007.
- Part IV summarizes information reported by States in their CCDF plans for FY 2006 and FY 2007. States are required to submit plans every two years that describe how they will implement CCDF policies and services.
- Part V describes child care services provided by Indian Tribes that receive CCDF funding.

- Part VI describes ongoing research efforts, highlighting projects funded by the U.S. Department of Health and Human Services (HHS), and summarizing some of the latest research findings about child care.
- Part VII describes training and technical assistance provided by CCB to assist States, Territories, and Tribes in administering CCDF.
- Part VIII, the Appendix, provides reporting overviews for States, Territories, and Tribes, information about CCB-funded research grantees, and administrative data on the children and families served through CCDF from State aggregate and case-level reports covering FY 2006 and 2007.

Key Highlights in FY 2006 and FY 2007

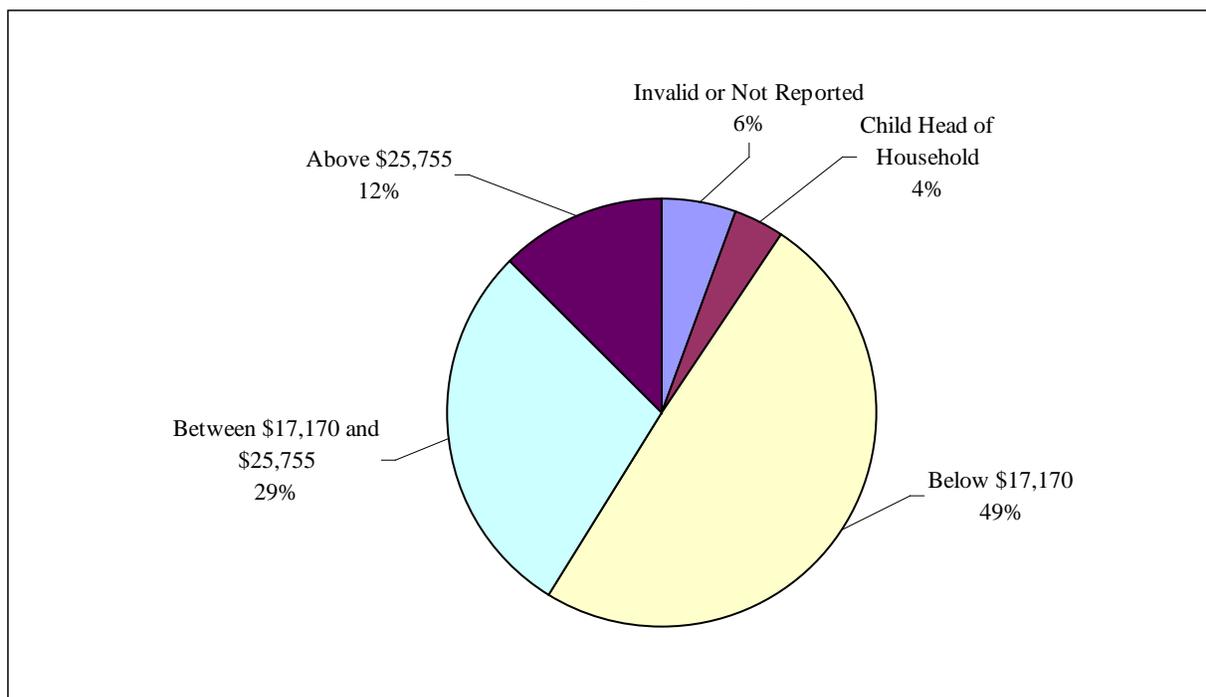
- Approximately 1.77 million children and 1 million families per month received child care assistance through CCDF in FY 2006. Approximately 1.71 million children and 991,500 families per month received child care assistance in FY 2007.
- State spending on improving child care quality totaled \$945 million or ten percent of total spending in 2006 and \$935 million or nine percent of total spending in 2007.
- In FY 2006-2007, Lead Agencies reported on their strategies to prevent, measure, identify, reduce and/or collect improper payments. The majority of States and Territories reported such strategies as the use of automated data systems to share data with other government programs and flag possible errors.
- The Final Rule to revise the Child Care and Development Fund regulations to provide for the reporting of error rates in the use of CCDF grant funds was published in the Federal Register on September 5, 2007 with an effective date of October 1, 2007.
- CCB broadened efforts to work with CCDF grantees to improve child care emergency preparedness and response planning as part of a sustained long-term technical assistance effort.
- As of November 2007, 15 States implemented a Quality Rating and Improvement System (QRIS) for child care services while more than 25 other States were in the process of exploring or designing a statewide QRIS. Thirty States pay higher child care subsidy reimbursement rates to child care programs that meet quality standards above minimum licensing requirement.

REPORT HIGHLIGHTS

In 2007, CCDF served on average 1.71 million children per month. In an average month in FY 2006, 1.77 million children (1 million families) received child care services through Federal CCDF funds, State Matching and MOE funds, and TANF transfers to CCDF. In FY 2007, approximately 1.71 million children (991,500 families) were served. The number of children served is determined by available funding, as well as the flexibility given to States in setting child care policies, including income eligibility requirements and parent copayments.

CCDF largely serves families with incomes at or below the poverty level. Median monthly income for families served in FY 2006 was \$1,325, or \$15,900 when annualized. In FY 2006, the Federal Poverty Level was \$16,600 for a family of three. Of those families with valid reported income in FY 2006, about 50 percent had incomes below the poverty level. In FY 2007, median monthly income increased slightly to \$1,390, or \$16,680. In FY 2007, the federal poverty level was \$17,170 for a family of three. Of those families with valid reported income in FY 2007, about 49 percent had incomes below poverty. TANF was reported as a source of income for 18 percent of families receiving services through CCDF in FY 2006 and 16 percent in FY 2007.² Figure 1.1 shows the distribution of income for CCDF recipients in FY 2007.

Figure 1.1
FY 2007 CCDF Recipients by Income



*Income categories based on 2007 Federal Poverty Level guidelines for a family size of three.

² The FY 2006 and FY 2007 administrative data presented in this report are based on reported family size.

For context, the table below displays Federal poverty guidelines in FY 2007. These guidelines provide a consistent standard across States and take into account family size. They do not, however, take into account variations in the cost of living among States (except Alaska and Hawaii) or the benefits low-income families may receive such as Food Stamps, medical assistance, housing allowances, child care assistance, or the Earned Income Tax Credit.

Size of Family Unit	2007 HHS Poverty Guidelines (Annual Income)		
	48 Contiguous States and DC	Alaska	Hawaii
1	\$10,210	\$12,770	\$11,750
2	\$13,690	\$17,120	\$15,750
3	\$17,170	\$21,470	\$19,750
4	\$20,650	\$25,820	\$23,750
5	\$24,130	\$30,170	\$27,750

Source: Federal Register, Vol. 72, No. 15, January 24, 2007, PP. 3147–3148

State policy decisions result in a wide variety of State subsidy systems and coverage patterns. States have a great deal of flexibility under CCDF to develop child care programs and policies to suit the needs of individual children and parents they serve. States have flexibility in at least four key areas: income eligibility, target population, parent copayments, and provider reimbursement rates.

- **Income Eligibility:** States have authority to set income eligibility up to 85 percent of the State median income. Most States set program eligibility below 85 percent of the Federal maximum.
- **Priorities and Target Population:** States decide whether to target certain populations. For example, States decide whether to focus on families transitioning off TANF or to treat all families the same, regardless of TANF status or history. Some States serve all eligible families who apply, while others have waiting lists of eligible families. States must give priority to children with special needs and children from very low-income families but have the flexibility to define “special needs” and “very low-income” in their biennial State Plans.
- **Parent Copayments:** Of those families with reported income, approximately 72 percent paid a copayment in FY 2006 compared to 74 percent in FY 2007. Of the families with copayments, child care payments represented on average, five percent of family income in FY 2006 and FY 2007.
- **Provider Reimbursement:** In setting reimbursement rates, States must ensure that eligible children have equal access to child care services comparable to those available to children whose parents are not eligible to receive CCDF assistance. Nine States and two Territories reported capping rates at the 75th percentile or higher in their FY 2006–FY 2007 State plans. An additional 14 States have at least some of their rate ceilings at or above the 75th percentile.³ When rates are set at the 75th percentile, families should have access to at least

³ In most States, the Market Rate Survey (MRS) is conducted every two years as required by regulation, but some States report reimbursement rates based on a prior year MRS due to a lag between the date of the survey and implementation of the revised rate ceiling.

75 percent of the care in the local market. A growing number of States create incentives for quality improvements and increased supply by paying higher provider rates for meeting quality benchmarks (such as accreditation) or serving children with special needs or during non-traditional hours.

States use CCDF dollars to fund a variety of innovative efforts to improve the quality of care. In FY 2006, States spent \$945 million in CCDF funds including targeted funds to improve the quality of child care services – accounting for 10 percent of combined Federal and State expenditures. In FY 2007, quality expenditures were \$935 million or 9 percent of total spending. By statute, a minimum of 4 percent of CCDF funds must be used to improve the quality of child care and offer additional services to parents, such as resource and referral counseling regarding the selection of appropriate child care providers to meet their child's needs. Targeted funds are additional portions of the discretionary funds appropriated for specific purposes such as: school-age child care activities, quality expansion, including improvement in the quality of infant and toddler care and child care research, demonstration, and evaluation activities. These figures do not reflect State investments and choices made through the child care subsidy system that impact the quality of care, such as decisions related to provider payment rates and family copayment levels. A large number of States, for example, encourage improved caregiver training and program quality through tiered reimbursement; that is, payment systems that pay more for higher quality care.

States are implementing quality rating and improvement systems. Research confirms that higher quality in child care leads to greater cognitive, language and social skills, which are key measures of children's school readiness. Based on these findings, CCB supported States and communities nationwide in their efforts to improve child care quality and outcomes through Quality Ratings Systems (QRIS). Similar to rating systems for restaurants and hotels, QRIS award quality ratings to early care and education programs based on the program's performance. Generally, QRIS consider the following areas in determining program quality:

- **Program Standards:** This element of QRIS is based on State licensing regulations and includes two or more levels beyond licensing, with incremental progression to the highest QRIS level defined by the State.
- **Accountability Measures:** These measures are used to determine how well programs meet QRIS standards, to assign quality ratings, and to verify ongoing compliance with established quality standards.
- **Training and Technical Assistance:** To promote participation and help programs meet higher standards, QRIS include program and practitioner outreach and support, such as training, mentoring and technical assistance.
- **Financial Incentives:** Some QRIS include financial incentives such as tiered subsidy reimbursement, which are linked to program compliance with quality standards. Tiered subsidy reimbursement pays higher rates to child care providers who meet standards beyond minimum licensing requirement.
- **Parent Education:** This component of QRIS helps parents understand overall quality as well as QRIS program ratings so that they can make more informed child care decisions.

By November 2006, 14 States had developed QRIS while nine other States piloted QRIS either statewide or in one or more communities. The number of States that implemented QRIS increased to 15 in 2007, while an additional 25 States were in the process of exploring or designing a statewide QRIS. Thirty States pay higher child care subsidy reimbursement rates to child care programs that meet quality standards above minimum licensing requirements. Most give higher payments to nationally accredited programs.

States and the CCB are taking steps to control improper payments in CCDF programs.

A final rule to revise the CCDF regulations to provide for the reporting of error rates in the use of CCDF grant funds was published in the *Federal Register* on September 5, 2007 with an effective date of October 1, 2007. On September 10, 2007 a notice of approval of the data collection forms and instructions used to implement the final rule on CCDF error rate reporting was published in the *Federal Register*.

This rule and the associated forms and instructions implement provisions of the Improper Payments Information Act of 2002. It requires the States, District of Columbia and Puerto Rico to conduct reviews of samples of cases and subsequently report information on administrative errors and improper authorizations for payment associated with eligibility determinations. This methodology was piloted in a number of States prior to implementation. The State reporting process allows CCB to estimate the level of CCDF improper payments in the HHS Agency Financial Report (AFR).

For the first time in FY 2006-2007, Lead Agencies in their State Plans, reported on their strategies to prevent, measure, identify, reduce and/or collect improper payments. The majority of States and Territories reported strategies to prevent improper payments as the use of automated data systems to share data with other government programs and flag possible errors; and to conduct training on program requirements for providers, parents, and agency staff. Forty-two States and Territories monitor client caseloads to identify and measure improper payments. Twenty-six States and Territories monitored and/or audited provider attendance sheets and billing records. Strategies for collecting improper payments include establishing and coordinating with a designated fraud or quality assurance unit, using repayment plans, reducing future payments and establishing client and provider sanctions.

In FY 2006, HHS Child Care Bureau (CCB) also developed a voluntary survey to obtain information from States about the design and scope of their CCDF systems for managing improper payments. A repository of this information is posted on the CCB website and is available for review by all States. As an additional effort towards reducing improper payments, the CCB adapted the Government Accountability Office's Internal Control Management and Evaluation tool for use with the CCDF program and piloted the tool. This assessment tool provided: 1) a systematic way to assess the adequacies of internal controls; and 2) a basis to establish corrective actions to address issues that may, or actually have already, contributed to improper payments. The CCB also funded a contract to provide technical assistance and support to States implementing the new improper payment reporting requirements.

CCB strengthened and expanded emergency preparedness and response efforts, which initially began in the aftermath of Hurricanes Katrina and Rita. The destruction caused by the Gulf Coast hurricanes highlighted many areas in which the Federal and State governments could improve in order to better respond to the needs of children and families, especially in the area of child care. In response, CCB broadened efforts to work with CCDF grantees to improve child care emergency preparedness and response planning as part of a sustained long-term technical assistance effort.

A primary goal of the CCDF program is to help ensure early childhood programs support children's healthy growth and development; this goal becomes especially important in the event of a major disaster or emergency, as children are among our most vulnerable populations. Disasters not only create a greater need for child care financial assistance among families struggling to rebuild their lives, but also can substantially affect the child care provider community, causing damage and destruction of child care homes and facilities. These are significant challenges for States and localities struggling to provide services to families and rebuild critical infrastructure in their communities. CCB has become more involved with State, Tribal, and Territorial grantees in providing resources that can help meet these challenges and support the continuity of early care and education services. A summary of key activities that were undertaken by CCB in FY 2006 and FY 2007 in response to child care emergency preparedness and response issues is provided in Part VII of this report.

CCB provides training and technical assistance related to child care services and administration of the CCDF program. Through its network of technical assistance projects and services, along with Federal leadership, CCB provides training and technical assistance to States, Tribes, and local communities. This network assesses States' needs, identifies innovations in child care administration, and promotes the dissemination and replication of solutions to the challenges faced by State and local child care programs. CCB technical assistance helps CCDF grantees build integrated child care systems that enable parents to work and promote the health and well-being of children. The network also supports public outreach and information dissemination.

ACF research initiatives provided States with the data and evidence needed to improve child care services and systems. In addition, the research agenda for FY 2006 and FY 2007 initiated new research to inform future policy decision-making and implementation of the CCDF program at the State and local levels. Congress authorized ACF to spend \$10 million annually in CCDF funds for research, demonstration, and evaluation. As a result of this funding, ACF has made substantial investments in child care research to increase understanding about State child care policy decisions, the implications of these decisions for the availability and quality of child care, the choices families make, and the outcomes for children and families. Research priorities in FY 2006 and FY 2007 were identified after a careful review of the current status of knowledge and evidence in the child care field.

Increasingly, ACF research involves using rigorous methodologies (including experimental designs) to provide a sound basis for evidence-based practices and policies. This research also involves a growing number of collaborative relationships within HHS, ACF, and other Federal agencies and national organizations that promote coordinated and comprehensive efforts. ACF's

research priorities for FY 2006 and FY 2007 were designed to address the questions that are most relevant to Federal, State, and community policy makers. These questions include:

- What are the effects of alternative child care subsidy policies and practices on children and families served?
- What is the relationship between receipt of child care subsidies and parents' employment outcomes, including stability of employment and of child care for their children?
- Which child care policies are linked to access to child care that meets the needs and preferences of parents? What factors influence choice of care among low-income working families?
- What are the child care needs and utilization patterns of low-income working families?
- How do public and private child care and early education sectors interact to affect the supply and quality of care available to low-income families?
- What is the impact of CCDF on improving the quality of care available and utilized by low-income working parents and at-risk families to support parental outcomes and child well-being?
- What constitutes cost-effective investment in child care quality and improvement?

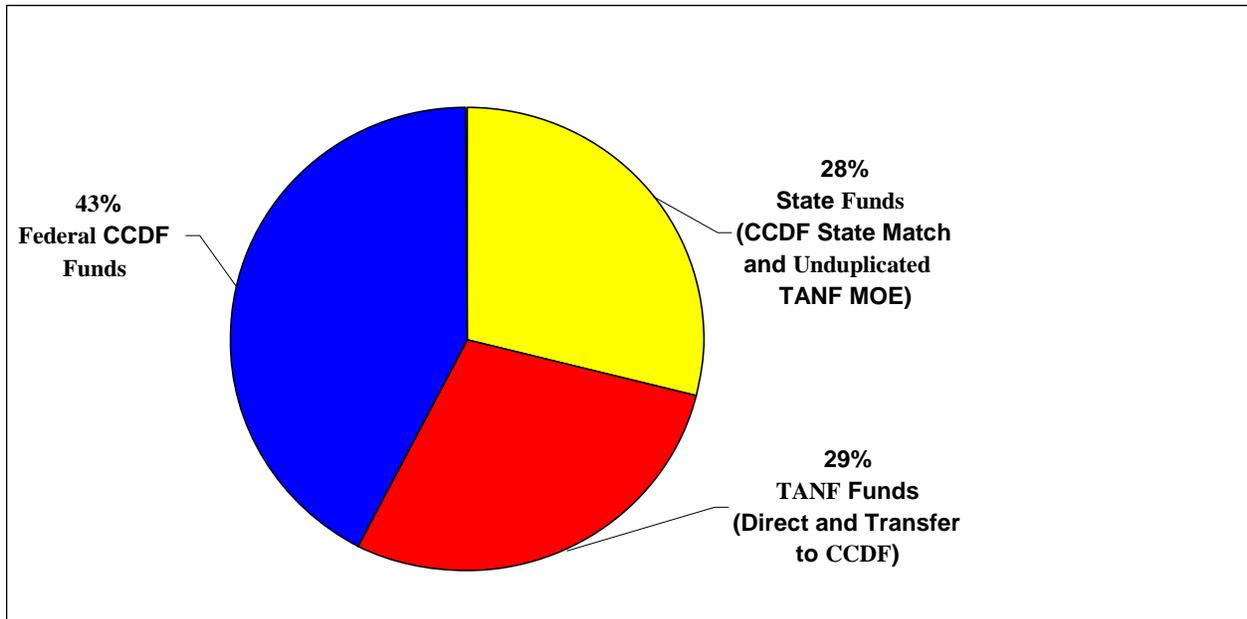
States used a range of Federal and State funding sources for child care. The following sources provided funding for child care subsidies, quality improvements, and related activities in FY 2006 and FY 2007.

- **Child Care and Development Fund (CCDF):** Mandatory and discretionary funding for CCDF was \$5 billion for FY 2006 and 2007 each.
- **Temporary Assistance for Needy Families (TANF):** States can transfer up to 30 percent of their Federal TANF dollars to CCDF and spend TANF funds directly for child care (see more detailed discussion of TANF funding below).
- **State Spending Associated with CCDF and TANF:** State spending accounts for nearly a third of total State and Federal child care expenditures under CCDF and TANF. There were \$9.32 billion in total CCDF spending in FY 2006. Of this amount, \$6.84 billion were Federal CCDF funds (including amounts transferred from TANF) while \$2.48 billion were State funds (including Matching and Maintenance of Effort (MOE) funds). Of the \$10.2 billion in total CCDF spending in FY 2007, \$7 billion were Federal CCDF funds while \$3.2 billion were State funds. The reports indicate that States exceeded the aggregate amounts required to access the maximum amount of available Federal funds. As discussed below, States also include additional child care expenditures in reports of State MOE funds for the TANF program.
- **Social Services Block Grant (SSBG or Title XX):** The Social Services Block Grant funds a broad range of social services, including child care. In FY 2006, States reported spending \$220 million of SSBG funds for child care. In 2007, SSBG expenditures for child care services increased to \$389 million.
- **State Pre-Kindergarten Programs:** According to a report published by the National Institute for Early Education Research, 38 States spent \$3.7 billion for pre-kindergarten

during the 2006–2007 school year. According to the report, ten States accounted for over 80 percent of this amount. A portion of these funds is reported as State spending under CCDF to meet State Match and MOE requirements.

- **Other Federal Sources:** Head Start, a \$6.8 billion program in FY 2006 and \$6.9 billion in FY 2007, works directly and through referrals to other programs to provide comprehensive developmental services for low-income preschool children and social services for their families. Additionally, the U.S. Department of Education provided nearly \$1 billion for after-school programs through its 21st Century Community Learning Centers in both FY 2006 and FY 2007.

Figure 1.2
FY 2007 CCDF and TANF Funding for Child Care



States are using Temporary Assistance for Needy Families (TANF) funds for child care. Through transfers to CCDF and direct spending, many States rely on TANF as a major funding source for child care. In FY 2006, 37 States transferred \$1.9 billion in TANF funds to CCDF and spent approximately \$1.2 billion in TANF funds directly on child care. In FY 2007, 37 States transferred \$2 billion in TANF funds to CCDF and spent roughly \$1.2 billion directly on child care services. In total, States invested nearly \$3.1 billion in TANF (transfers and direct spending) in FY 2006 and \$3.2 billion in FY 2007 – representing almost a third of all Federal and State child care funding available through CCDF and TANF in each of these 2 years. (See Figure 1.2)

States have Maintenance of Effort (MOE) requirements for both the CCDF and TANF programs.⁴ State spending on child care can dually qualify toward both the CCDF and TANF MOE requirements. ACF considers State spending on child care reported in their TANF MOE reports to be additional State spending on child care only to the extent that it exceeds the CCDF MOE requirement for the State. ACF estimates that in FY 2006, States spent approximately \$1.4 billion on child care services that met TANF State spending requirements but also exceeded the required CCDF State spending. This is a conservative estimate because it assumes that, of the TANF MOE funds spent on child care, 100 percent also are reported as CCDF MOE.

CCDF funds child care programs for over 500 federally recognized Indian Tribes. In both FY 2006 and FY 2007, approximately \$99 million in CCDF funds was awarded to Indian Tribes, representing two percent of total funding. With few exceptions, Tribal CCDF grantees are located in rural, economically challenged areas. In these communities, the CCDF program plays a crucial role in offering child care options to parents as they move toward economic self-sufficiency. There is often a strong emphasis on traditional culture and language in Tribal child care settings and curricula. Unlike States, Tribes can apply to use a portion of their CCDF allocations for construction or renovation of child care facilities, as long as the level of direct services is not reduced. Between FY 1997 and FY 2007, ACF approved over \$63 million in CCDF funds to construct or renovate 126 Tribal child care facilities.

⁴ For the CCDF MOE requirement, in order to be eligible for its share of the Federal Matching Funds, a State must demonstrate that it has continued to spend at least the same amount on child care services that it expended on the repealed Title IV-A child care programs in FY 1994 or FY 1995, whichever was greater.

PART I: THE CHILD CARE AND DEVELOPMENT FUND (CCDF)

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) created three major streams of funding within CCDF. These components include Discretionary Funds under the Child Care and Development Block Grant (CCDBG) Act as well as Mandatory and Matching Funds under Section 418 of the Social Security Act. To access the Matching Funds, States must provide a share of the Matching Funds and spend their required Maintenance of Effort (MOE) level. As of October 1, 1996, PRWORA repealed the old welfare-related child care programs provided under the Social Security Act (AFDC/JOBS Child Care, Transitional Child Care (TCC), and At-Risk Child Care).

CCDF consists of three Federal funding streams: Discretionary, Mandatory and Matching.

FUNDING, OBLIGATIONS, AND EXPENDITURES

Each of the component funds of CCDF has its own rules regarding funding and periods of obligation and expenditure. The variations are summarized in the chart below and described in more detail in the pages that follow.

If Source of Funds is FY 2006:	Obligation Must Be Made by End of:	And Liquidated by the End of:
Discretionary	FY 2007 (i.e., by 9/30/07)	FY 2008 (i.e., by 9/30/08)
Mandatory	FY 2006 (i.e., by 9/30/06; but ONLY if Matching Funds are used)	No requirement to liquidate by a specific date
Matching	FY 2006 (i.e., by 9/30/06)	FY 2007 (i.e., by 9/30/07)
MOE	FY 2006 (i.e., by 9/30/06)	FY 2006 (i.e., by 9/30/06)

Discretionary Funds

The CCDBG Act authorized Discretionary Funds, which are subject to annual appropriation. The amount an individual State receives in a fiscal year is determined according to a formula that consists of three factors –

- **Young child factor:** The ratio of the number of children under age five in the State to the number of children under age five in the country;
- **School lunch factor:** The ratio of the number of children in the State who receive free or reduced-price school lunches under the National School Lunch Act to the number of such children in the country; and
- **Allotment proportion factor:** A weighting factor determined by dividing the three-year average national per capita income by the three-year average per capita State income (as calculated every two years).

The Discretionary Funds are 100 percent Federal funds. No State match is required. States have two years to obligate their Discretionary Funds and an additional year to liquidate those obligations.

Consistent with prior year appropriations, in FY 2006 and FY 2007, Congress targeted specific amounts of the Discretionary Funds for:

- Child care quality improvement activities (\$169 million);
- Infant and toddler quality improvement (\$99 million);
- Child care resource and referral and school-age child care activities (\$19 million, of which almost \$1 million was for the Child Care toll-free hotline); and
- Child care research, demonstration, and evaluation activities (almost \$10 million).

Mandatory Funds

In 1996, PRWORA originally appropriated Mandatory Funds at Section 418 of the Social Security Act. The Deficit Reduction Act (DRA) of 2005 appropriated Mandatory Funds through FY 2010. A State's allocation of the Mandatory Funds is the greater of the:

- Federal share of expenditures in the State Title IV-A child care programs (AFDC, JOBS, Transitional, and At-Risk Child Care) in 1994 or 1995 (whichever is greater), or
- Average Federal share of expenditures in the State Title IV-A child care programs (AFDC, JOBS, TCC, At-Risk) for 1992 through 1994.

The Mandatory Funds are 100 percent Federal funds. No State match is required. Mandatory Funds are available until expended unless the State chooses to expend its Matching Funds. To qualify for its share of the Matching Funds, a State must obligate its Mandatory Funds by the end of the Federal fiscal year (September 30) in which they are granted.

Matching Funds

The Matching Funds are the remaining amount appropriated under Section 418(a)(3) of the Social Security Act after the Mandatory Funds are allotted. A State's allocation of the Matching Funds is based on the number of children under age 13 in the State compared with the national total of children under age 13. The Matching Funds must be matched by a State at its applicable Federal Medical Assistance Percentage (FMAP) rate. Matching Funds are available to a State if:

To access the Matching portion, States must provide a share of the Matching Funds and spend their required Maintenance of Effort (MOE) level.

- Its Mandatory Funds are obligated by the end of the Federal fiscal year in which they are awarded;
- Within the same fiscal year, the State expends State funds equal to its State MOE level; and
- Its Federal and State shares of the Matching Funds are obligated by the end of the fiscal year in which they are awarded.

Matching Funds must be fully expended within two years of award.

Maintenance of Effort (MOE)

To be eligible for its share of the Matching Funds, a State must continue to spend at least the same amount on child care services that it spent on the repealed Title IV-A child care programs in FY 1994 or FY 1995, whichever was greater.

Example

At the beginning of FY 2006, a State was awarded \$90 million in Mandatory Funds. The State was also awarded Federal Matching Funds of \$7 million. To receive the Federal Matching Funds, the State must match the Federal funds with State funds at the State's FMAP rate of 70 percent. Therefore, to receive its \$7 million share of Matching Funds, the State had to provide \$3 million in State funds.

Before the end of FY 2006, the State was required to obligate its \$90 million in Mandatory Funds; obligate its \$10 million in Matching Funds (both the \$7 million of Federal funds and the \$3 million of State Matching Funds); and obligate and expend its required MOE level of \$15 million in State funds.

Before the end of the following year, FY 2007, the State was required to expend all its Matching Funds of \$10 million (both the \$7 million of Federal funds and the \$3 million of State match). There is no time limit for expending the Mandatory Funds.

ELIGIBLE FAMILIES AND CHILDREN

By statute, States may serve families when parents are working, in education or training, or when children are receiving protective services. The income level of such families may not exceed the eligibility levels set by the State and the Federal maximum of 85 percent of the State Median Income

States may serve families when parents are working, in education or training, or when children are receiving protective services.

(SMI) for a family of the same size. CCDF services may be provided up to age 13, or age 19 for children who are under court supervision or are mentally or physically incapable of self-care. States must give priority to children with special needs and to children from very low-income families and are required to define "special needs" and "very low-income" in their State Plans. States also can give priority to other categories of children.

HOW FAMILIES RECEIVE SUBSIDIES

Parents may choose any legally operating child care provider.

Parental Choice. The statute provides for parental choice of child care provider. Parents may choose any legally operating child care provider. The regulations define child care provider as one who provides child care in a center, a group home, a family home, or in the child's own home. States may limit the use of in-home care. Care by a faith-based provider, a relative provider, and any other type of legally provided child care are allowable choices.

Certificates

Families receiving a CCDF subsidy must be given the choice to receive a certificate for child care services. A certificate is defined in the statute as a check or other disbursement that is issued by a State or local government directly to a parent who may use the certificate only as payment for child care services. Certificates must be flexible enough to allow funds to follow the child to any participating child care provider the parent selects.

Access

By statute, a State's CCDF Plan must certify that payment rates for the provision of CCDF child care services facilitate access for eligible children. Services must be comparable to those provided to children whose parents are not eligible to receive assistance. In their CCDF Plans, States must describe:

- How a choice of the full range of providers is made available;
- How payment rates are adequate, based on a local market rate survey conducted within the previous two years; and
- The affordability of family copayments.

Copayments:

Families must contribute to the cost of care on a sliding fee basis. The CCDF Plan must include the scale or scales used to determine the family's contribution, which must be based on family size and income. The State may add other factors; for example, the number of children in care and rules for counting income. States may exempt families below the Federal Poverty Level from paying a copayment.

Families must contribute to the cost of care on a sliding fee basis.

HEALTH, SAFETY, AND QUALITY OF CARE

States must have health and safety requirements that apply to CCDF providers.

A State must certify that it has licensing requirements in effect, and its CCDF Plan must detail the requirements and how they are enforced. However, States may exempt certain types of providers from meeting these licensing requirements. For example, many States do exempt certain center-based providers (such as school-based, faith-based) and home-based providers that serve a relatively small number of children. States also must certify that they have health and safety requirements in place that apply to those providing child care to CCDF children. The requirements must include measures to prevent and control infectious diseases (including immunization), ensure building and physical premises safety, and provide minimum health and safety training appropriate to the provider setting. States may choose to exempt certain categories of relatives from health and safety requirements.

CCDF Lead Agencies must use a minimum of 4 percent of CCDF funds to improve the quality of child care. CCDF also includes targeted funds for specific purposes: quality enhancement, improving the quality of care for infants and toddlers, and improving school-age care and child care resource and referral services. Quality activities include provider staff training, grants and loans to providers, health and safety improvements, monitoring of licensing requirements, and other initiatives.

EXAMPLES OF QUALITY ACTIVITIES

Quality Improvement for Infants and Toddlers

States use CCDF funds to support a variety of initiatives to improve the quality of care for infants and toddlers, including: practitioner training and technical assistance; specialists who work with programs on unique health, safety, and developmental needs of infants and toddlers; and enhancement grants to allow programs to purchase needed equipment, make minor renovations, develop new curricula, or pursue accreditation.

Grants and Loans to Providers

A number of States offer support to child care programs by making start-up grants and loans available to providers including school districts and community-based organizations. In some cases, grants are targeted to programs that need funds to maintain compliance with health and safety standards. In others, funds are targeted to quality improvement such as the purchase of equipment.

Monitoring Compliance with Regulatory Requirements

CCDF funds support States in monitoring compliance with child care licensing and regulatory requirements. These Federal funds help States to lower caseloads for licensing staff and to expand training opportunities for these staff and create cross-system regulatory and technical assistance teams.

Training and Technical Assistance

Every State is involved in training and technical assistance. Increasingly, States view these services as part of a broader career development approach and link them to training strategies in other systems (such as Head Start, pre-kindergarten, and early intervention). States also are working with statewide systems like the child care resource and referral agencies and institutions of higher education to administer/coordinate training and technical assistance.

Child Care Resource and Referral Services

Local CCR&R agencies help families find child care and financial assistance and provide consumer education to inform parents of choices. Many CCR&Rs also play other roles, such as helping to train child care providers, document the supply of care, and administer the child care subsidy program.

Compensation of Child Care Providers

Several States provide additional compensation for child care providers such as grant programs specifically aimed at improving wages for child care providers. Over half the States have implemented some form of tiered reimbursement to pay higher rates for child care centers and family child care providers that achieve one or more levels of quality beyond the basic licensing requirements.

KEY TERMS

Legislation and Initiatives

Child Care and Development Fund (CCDF): Integrated entitlement and discretionary child care funding program created in 1996 as a result of PRWORA.

Child Care and Development Block Grant (CCDBG) Act: The primary law governing CCDF; created by the Omnibus Budget and Reconciliation Act of 1990 and amended by PRWORA.

Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA or P.L. 104–193): The welfare reform legislation of 1996 that created TANF and unified several Federal child care programs to form CCDF.

Temporary Assistance for Needy Families (TANF): A comprehensive welfare reform program with time-limited assistance that focuses on moving recipients into work and supporting family formation. TANF replaced the former Federal welfare program, Aid to Families with Dependent Children (AFDC).

Categories of Care

Center-based child care provider: A provider who is licensed or otherwise authorized to provide child care services in a nonresidential setting.

Family child care (FCC) provider: An individual who provides child care services as the sole caregiver in a private residence other than the child's home.

Group home child care provider: Two or more individuals who provide child care services in a private residence other than the child's home.

In-home child care provider: An individual who provides child care services in the child's own home.

Legally operating without regulation: A caregiver providing services under CCDF who would not be subject to State or local child care regulations if she or he were not participating in the CCDF program; a number of States, for example, exempt from regulation family child care homes that care for a small number of children.

Licensed/Regulated: A provider subject to regulation under the laws of a State or local jurisdiction.

KEY TERMS

Subsidies and Services

Accessibility and Affordability: In their Biennial State Plans, States must demonstrate that families eligible for services through CCDF can choose from among the same types of care as privately paying families. Affordable family copayments and adequate reimbursement rates are central to access. (The CCDF final rule encourages States to set their maximum rates no lower than the 75th percentile, based on their most recent market rate survey; this is intended to provide families with access to 75 percent of the child care slots in their communities.)

Annual Aggregate Report: The annual report required of the States and Territories (45 CFR 98.70 (b)) that provides aggregate or summary data on children and families served, providers receiving CCDF funds, and public education efforts. Tribes receiving CCDF grant funds are required to provide a similar annual report.

Biennial State Plan: A two-year plan required of each State and Territory to receive its CCDF grant funding. The plan must include information on how the CCDF program will be administered in the State in compliance with CCDF statute, regulations, and policy.

CCDF Lead Agency: The State, Territorial, or Tribal entity designated to receive and administer the CCDF program, either directly or indirectly through another entity.

Case-Level Report: Provided monthly or quarterly, a report required of the States and Territories (45 CFR 98.70 (a)) that provides monthly family case-level data, including demographics of families and children served, sources of income for families served, types of child care used, and reasons for receiving care.

Certificate: A certificate, check, voucher, or other disbursement issued by a State Lead Agency to a parent to facilitate payment for child care services.

Contract: An agreement between a State Lead Agency and a provider to provide funding in exchange for direct child care services and/or reserved “slots” in child care facilities for specific populations. These services may include Head Start “wraparound” initiatives, school-age child care, and programs that target specialized populations or services, such as child care for migrant or teen parent populations or child care during nontraditional hours.

Copayment: The financial contribution a family receiving CCDF funding must make toward the cost of child care. The CCDBG Act requires that copayments be determined based on a sliding fee scale that takes family size and income into account. By Federal regulation, States may consider other factors in determining copayments, such as the number of children in child care, and may exempt families below the poverty level from making a payment. States may waive the copayment for families at or below the Federal poverty level.

PART II: CCDF ADMINISTRATIVE DATA

CCB collects administrative data on the number of children and families served through the CCDF program, as well as other caseload characteristics. Aggregate and case-level child care program information for the CCDF is required by Section 658K of the CCDBG Act as amended.

MAJOR FINDINGS

Children Served: Approximately 1.77 million children and 1 million families per month received child care assistance in FY 2006. Approximately 1.71 million children and 991,500 families per month received child care assistance in FY 2007. These figures reflect children that are funded by CCDF (including TANF transfer) but do not include other funding sources such as TANF direct spending.

Family Income: Median monthly income for families served in FY 2006 was \$1,325; about 17 percent of families had income that exceeded \$2,000 per month. In FY 2007, median monthly income increased to \$1,390, and nearly 19 percent of families had income that exceeded \$2,000. TANF was reported as a source of income for 18 percent of families receiving services through CCDF in FY 2006 and 16 percent in FY 2007.

Family Copayments: Of those families with reported income in FY 2006, approximately 72 percent paid a copayment compared to 74 percent in FY 2007. Of those families with copayments, child care copayments represented on average six percent of family income in FY 2006 and FY 2007. A majority of States and Territories (34 in FY 2006 and 31 in FY 2007) served families where the assessed family copayment was on average, five percent or less of family income.

Type of Care: In FY 2006, approximately 57 percent of the children served were in centers compared to 59 percent in FY 2007; in both FY 2006 and FY 2007, 29 percent of the children were served in family child care homes; in FY 2006 seven percent of the children were served in the child's own home compared to six percent in FY 2007; and in both FY 2006 and FY 2007, five percent of children were served in group homes. Care types for the remaining one to two percent were reported as invalid / not reported.

Regulatory Status of Providers: In both FY 2006 and FY 2007, approximately three-fourths of children served were in regulated settings. Of the remaining quarter in unregulated settings, nearly 58 percent were in relative care compared to 42 percent in nonrelative care in FY 2006; 61 percent were in relative care compared to 39 percent in nonrelative care in FY 2007.

Reasons for Care: Eligibility for CCDF requires parents to be working or participating in education or training activities. A State may also serve children in need of protective services as defined by the State. In both FY 2006 and FY 2007, over 90 percent of families cited either employment or education and training as the reason for needing child care. The remaining families cited protective services as reasons for care.

SERVICE PATTERNS

The following patterns of services, including the scope, type, and methods of child care delivery, as well as the cost and level of child care services, are derived from the FY 2006 and FY 2007 aggregate and case-level data. Differences are noted where data varied in interesting or substantial ways. In some instances, similarities across years are noted as well.

Given the flexibility States have in the implementation of CCDF (as well as variations in demographics, employment, economic circumstances, and population density that influence the availability of child care and the choices that parents make within the local context), national statistics about CCDF mask significant variation among States. For this reason, the narrative below notes variations among States.

Average Monthly Number of Children and Families Served

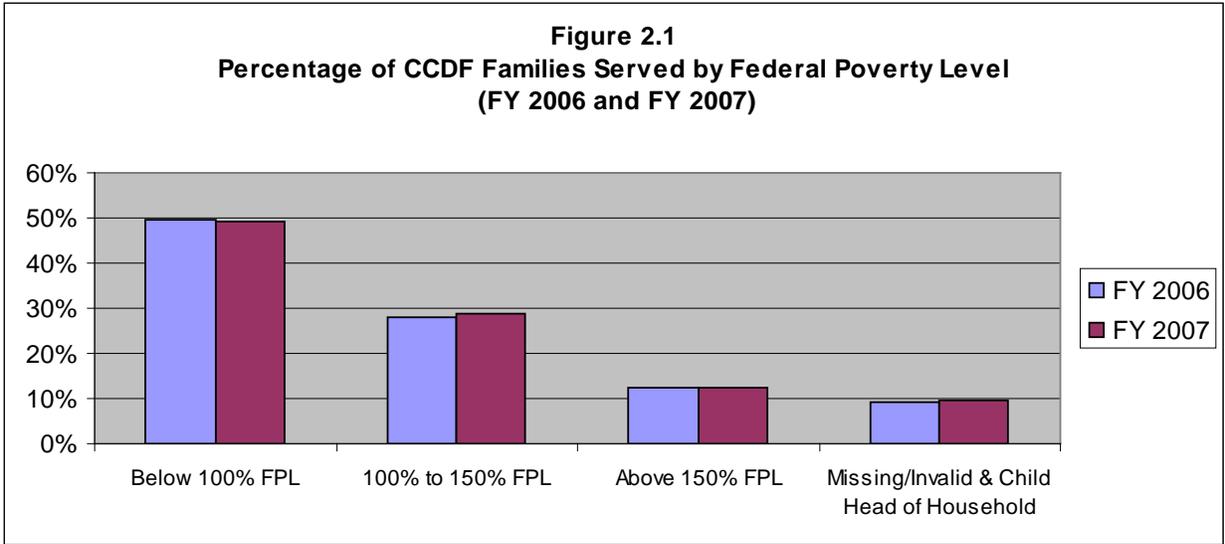
In an average month in FY 2006, 1.77 million children (1 million families) received child care services with CCDF funds, including TANF transfers and State Matching and MOE Funds. In FY 2007, 1.71 million children (991,500 families) were served in an average month. (Refer to Tables 1a and 1b in the appendices). HHS estimates that an additional 748,000 children were served in FY 2006 and 803,000 in FY 2007 through SSBG, direct TANF, and excess TANF MOE funds. Hence, approximately 2.5 million children per month were served in both FY 2006 and FY 2007 after accounting for all Federal and related State funding sources. The number of children served reflects the flexibility given to States in setting child care policies, including income eligibility requirements and parent copayments.

Family Income

States have the flexibility to serve families with income up to 85 percent of the State Median Income. However, States generally target eligibility to families most in need. In FY 2006, the median monthly income was \$1,325, or \$15,900 when annualized. In FY 2007, the median monthly income was \$1,390, or \$16,680 when annualized.

Of the families served in FY 2006, 50 percent were below 100 percent of the Federal Poverty Level (FPL), which was \$16,600 for a family of three. In FY 2007, 49 percent were below the FPL, which was \$17,170 for a family of three. In FY 2006, 28 percent had incomes between 100 percent and 150 percent of the FPL compared to 29 percent in FY 2007. In both FY 2006 and FY 2007, 13 percent had incomes above 150 percent of FPL. The remaining families had invalid or unreported data or a child as head of household. (Refer to Figure 2.1)

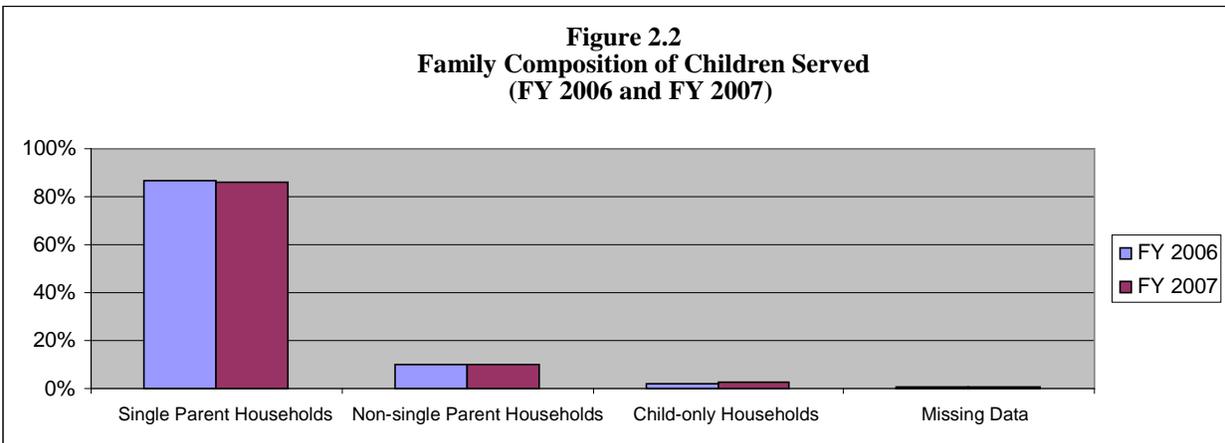
Nationally, TANF was reported as a source of income for approximately 18 percent of families receiving services through CCDF in FY 2006 as compared to 16 percent in FY 2007. However, at the State and Territory level there was considerable variation. Twenty States had fewer than 10 percent of their families reporting TANF as a source of income in FY 2006 compared to 23 States in FY 2007. Twelve States reported that TANF was a source of income for 25 percent or more families in FY 2006 compared to 10 States in FY 2007. (Refer to Tables 14a and 14b in the appendices).



Family Composition

The CCDF statute requires States and Territories to report whether or not families served are headed by a single parent. Non-single parent households include two or more parents or adults living with a child who are legally or financially responsible for the child in that eligible family unit. In FY 2006, approximately 87 percent of families receiving services through CCDF were single-parent households. This figure was 86 percent in FY 2007. (Refer to Figure 2.2)

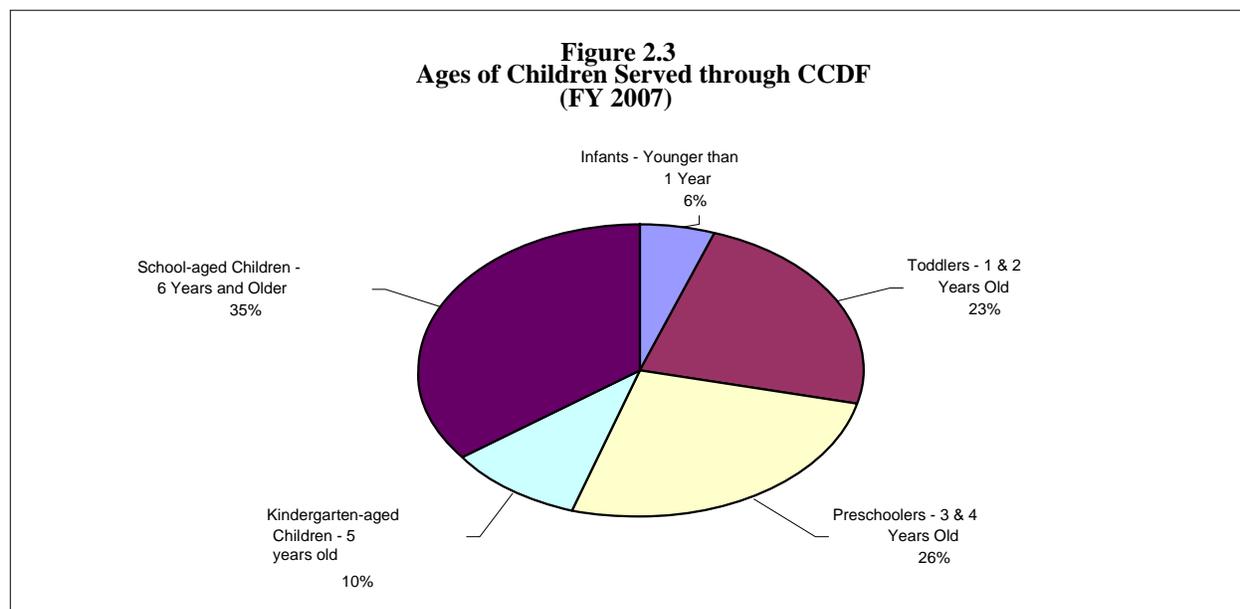
In FY 2006, assuming a family size of three, approximately 84 percent of single-parent families had incomes under 150 percent of the Federal Poverty Level. This figure was 86 percent in FY 2007. In both FY 2006 and FY 2007, approximately 59 percent of non-single families had incomes under 150 percent of the Federal Poverty Level. The remaining families had invalid or unreported data or a child as head of household.



Ages of Children

Of children served through CCDF in FY 2006 and FY 2007, school-aged children (six years and older) made up slightly more than a third of the caseload (between 35 and 36 percent), children from birth to under three years of age were slightly less than a third of the case load (between 28

and 29 percent), followed by preschoolers ages three and four (26 percent). Kindergarten-aged children (aged five years) were 10 percent of those served. Less than one percent of children were aged 13–18. (Refer to Figure 2.3)



During FY 2006 in six States and Territories, 40 percent or more of the children served were six years and older. Those States included Illinois, Michigan, New York, Pennsylvania, Puerto Rico, and Rhode Island. This was also true for six States and Territories in FY 2007: Illinois, Michigan, New York, North Carolina, Northern Mariana Islands, and Rhode Island. In both FY 2006 and FY 2007, children under the age of six made up over half of those served in every State. (Refer to Tables 2a and 2b, columns 8 and 9 in the appendices).

Race and Ethnicity

In collecting and reporting race and ethnicity for purposes of CCDF, ACF uses “Standards for the Classification of Federal Data and Ethnicity” as prescribed by the Office of Management and Budget (OMB). Of the children served in FY 2006 and FY 2007, 44 percent were African American and 44 percent White. Native American/Alaskan Native, Asian, and Native Hawaiian/Pacific Islander represented one percent each of children served. And multi-racial represented two percent of children served. For the balance, race was not reported by States and Territories. (Refer to Tables 3a and 3b in the appendices).

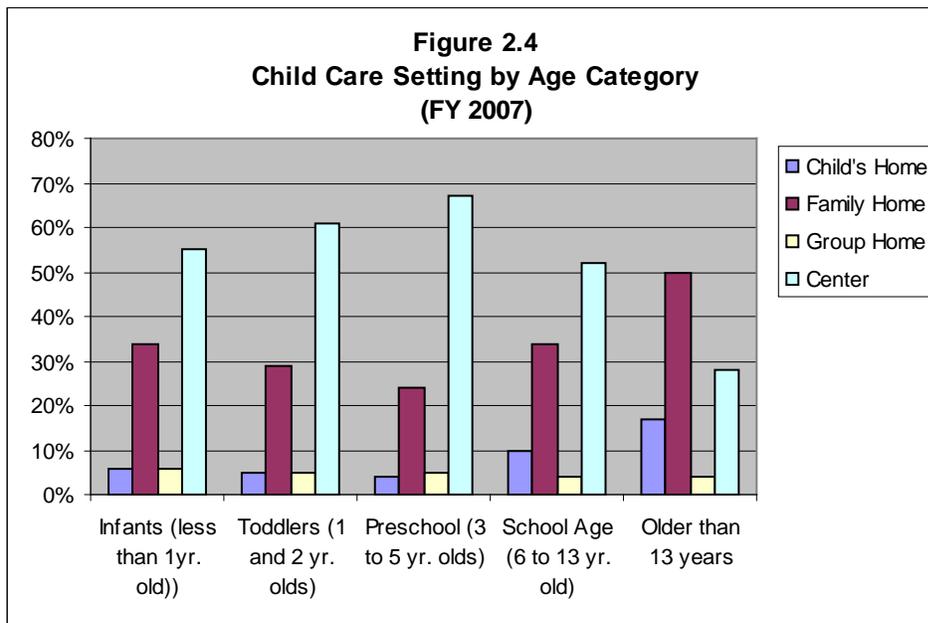
In FY 2006 and FY 2007, 19 percent of families reported Latino ethnicity. Following Puerto Rico, the States with the highest concentrations of Latino children were Arizona, California, New Mexico, and Texas. (Refer to Tables 4a and 4b in the appendices).

Children Served by Type of Care

In FY 2006 and FY 2007, center care was the most prevalent type of care used by CCDF-subsidized families although there were significant variations among States. In FY 2006,

approximately 57 percent of children were in center care compared to 59 percent in FY 2007.⁵ In FY 2006, 7 percent were in the child’s own home compared to 6 percent in FY 2007. In both years, 29 percent were in family child care homes and five percent were in group homes. Between one and two percent had invalid / not reported data. In over half of the States and Territories, 50 percent or more of the children received center-based care. Also, in FY 2006, seven States had 33 percent or fewer of the children in center care compared to six States in FY 2007. (Refer to Tables 10a and 10b, columns 5 and 12 in the appendices).

In FY 2006 and FY 2007, preschoolers and kindergarten-aged children (children between the ages of three and five) were more likely to be served in child care centers than children who were younger or older. (Refer to Figure 2.4 and Tables 5a and 5b).



Average Monthly Provider Payment

In FY 2006, the average monthly provider payment (which includes the family copayment) was highest for group homes (\$429) and center-based care (\$386), followed by family child care homes (\$330) and care provided in the child’s home (\$275). In FY 2007, the average monthly provider payment (which includes the family copayment) was highest for group homes (\$461) and center-based care (\$401), followed by family child care homes (\$339) and care provided in the child’s home (\$272). In general, provider payments are higher for younger children than for school-age children because younger children tend to be in child care for longer periods. (Refer to Tables 7a & 7b in the appendices).

Family Copayment Amounts

Of those families with reported income in FY 2006 and FY 2007, 72 to 73 percent paid a copayment. The table below shows mean family copayments according to poverty level.

⁵ Center care includes licensed or regulated centers and centers legally operating without regulation (columns 5 and 12 of tables 10a and 10b of in the appendices).

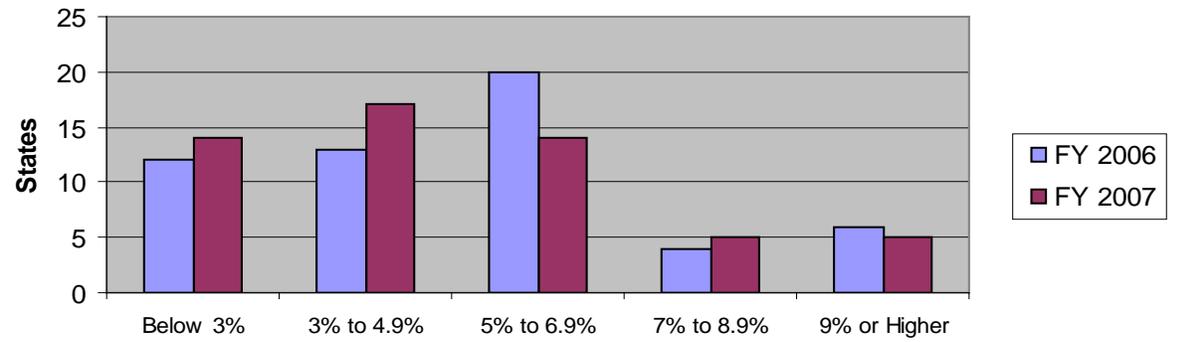
Mean Family Copayments by Federal Poverty Level (FPL)

	Families Below 100% of FPL	Families Between 100% and 150% of FPL	Families Above 150% FPL
FY 2006	\$31.04/mth	\$88.99/mth	\$152.06/mth
FY 2007	\$33.94/mth	\$95.25/mth	\$157.84/mth

Source: ACF-801 Administrative Data (Based on Family Size of 3)

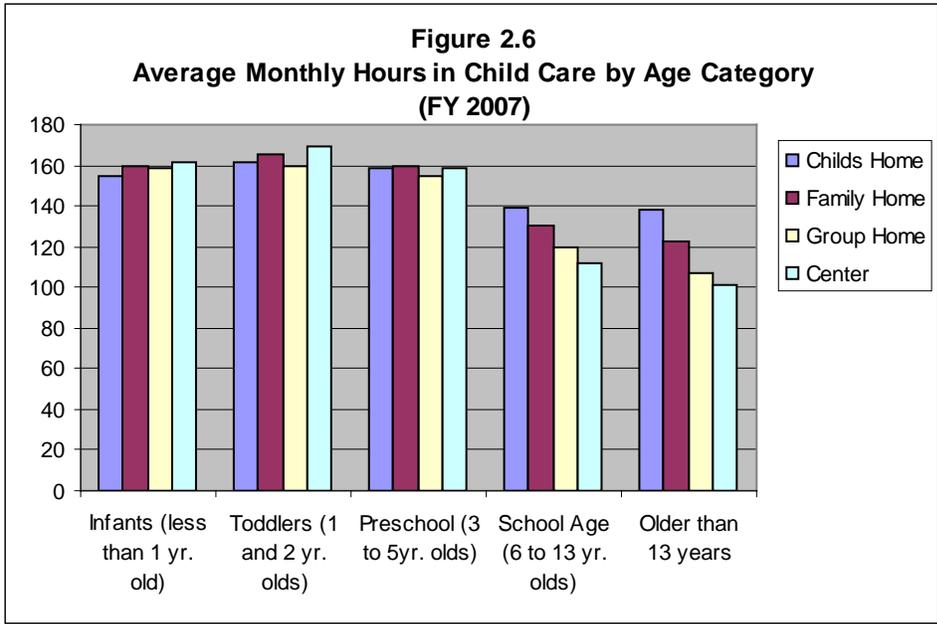
Of those families with copayments, child care copayments represented on average 6 percent of family income in FY 2006 and FY 2007. Including families who did not have a copayment, families paid on average 5 percent of family income toward child care. Including those families with \$0 copayments, majority of States and Territories (45 in both FY 2006 and FY 2007) served families where the assessed family copayment was less than 7 percent of family income (Refer to Figure 2.5 and Tables 15a & 15b). In FY 2006 and FY 2007, in 12 States families paid less than 3 percent of their income for child care copayments compared to 14 States in FY 2007.

Figure 2.5
State Distribution of the Percentage of Family Income Spent on Child Care (FY 2006 and FY 2007)



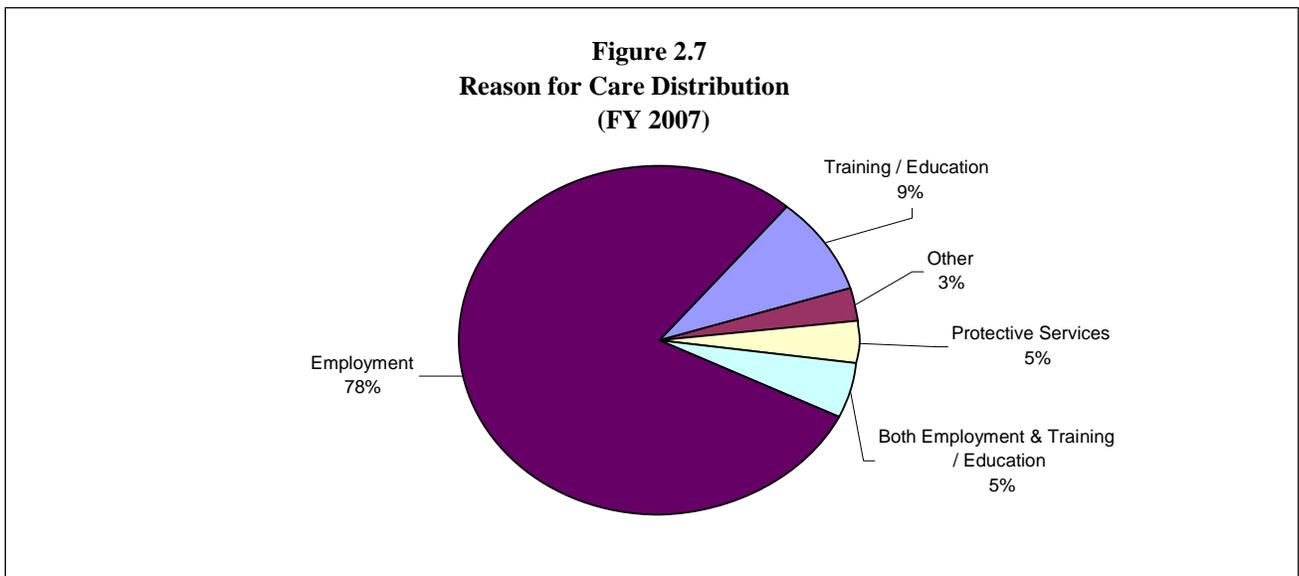
Average Monthly Hours of Child Care by Child’s Age and Type of Care

In both FY 2006 and FY 2007, children were in care on average 148 hours per month. Average hours of care by setting type did not vary significantly. However, hours in care by age did vary. Children under age five averaged significantly more hours in child care than children aged five and older. For instance, toddlers (between ages 1 and 2) averaged 167 hours of care per month, compared to 122 hours of care per month (in FY 2006) and 121 hours of care (in FY 2007) for children between the ages of six and 13. This reflects the fact that older children attend school part of the day during the school year. (Refer to Figure 2.6 and Tables 6a and 6b in the appendices).



Reasons for Care

Eligibility for CCDF requires parents to be working or participating in education or training activities. States may also serve children in protective services through CCDF. In FY 2007, over 90 percent of families reported either employment or education and training as the reason for needing child care. Specifically, 78 percent of families reported employment. Another 9 percent reported training and education. An additional 5 percent cited both employment and training and education. The remaining families reported protective services as reasons for care. FY 2006 data were comparable. (See Figure 2.7 and Tables 8a and 8b in the appendices).



Numbers and Types of Child Care Providers

Of those providers receiving CCDF funds in FY 2006 and FY 2007, between 61 and 62 percent were family child care homes. Between 21 and 22 percent served children in their own home, and 13 percent were child care centers. The remaining providers were group homes. (Refer to Tables 9a and 9b in the appendices).

Providers Serving CCDF Children		
	FY 2006	FY 2007
Family Child Care	427,915	414,865
Child's Own Home	157,697	136,784
Child Care Center	88,297	87,891
Group Home	26,689	25,989

Regulated Vs. Unregulated Settings

In FY 2006 and FY 2007, nearly three-fourths of the children were served in regulated child care settings; the remaining children were served in settings legally operating without regulation. Nearly all children served in child care centers and group homes were in regulated settings. Nearly all of the children served in the child's home were in settings legally operating without regulation. Of the children served in family child care homes, approximately half were in regulated family child care homes. In FY 2006, four States and one Territory had more than 50 percent of children served by providers legally operating without regulation – Hawaii, Illinois, Michigan, Oregon, and Puerto Rico. In FY 2007, four States had more than 50 percent of children served by providers legally operating without regulation – Hawaii, Michigan, Missouri, and Oregon. (Refer to Tables 10a and 10b in the appendices).

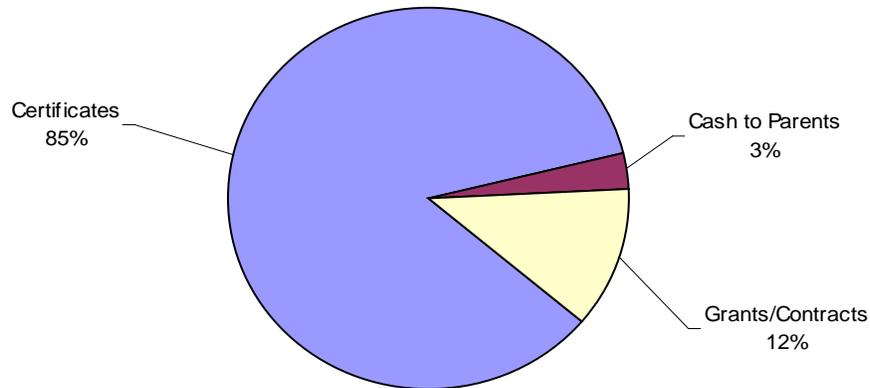
Relative vs. Non-Relative Care

In FY 2006 and FY 2007, children served in legally operating settings without regulation (child's own home or family child care) were more likely to be served by a relative than a non-relative. (Refer to Tables 11a and 11b in the appendices).

Children Served by Payment Method

Certificates were the most frequently used method of payment in both FY 2006 and FY 2007 (85 percent). Eleven percent of families were served through grants or contracts in FY 2006 compared to 12 percent in FY 2007. The others were served through cash payments to parents. In FY 2006, Florida, Northern Mariana Islands, Puerto Rico, Utah, and Virginia used certificates less than half of the time. In FY 2007, Florida, Hawaii, Northern Mariana Islands, Puerto Rico, and Utah, used certificates less than half of the time. (Refer to Figure 2.8 and Tables 12a and 12b in the appendices).

Figure 2.8
Percentage of Children Served by Payment Method
(FY 2007)



State and Territorial Methods of Consumer Education

In FY 2006 and FY 2007, resource and referral counseling, as well as, brochures, booklets, or written materials about types of care and quality of care were used by every State and Territory (for which data was available). With the exception of information to subsidized families concerning the choice of a certificate or grant/contract, the remaining methods of consumer education, i.e., legally operating provider lists, health and safety checklists, regulatory information, complaint policy, and mass media, were used by nearly all States and Territories. (Refer to Tables 13a and 13b in the appendices.)

About the Administrative Data

Required Reports

The statute governing CCDF requires that States, Territories, and Tribes provide aggregate and case-level information about the families and children receiving direct services through CCDF. This information is collected from States and Territories through OMB-approved instruments, the Child Care Annual Aggregate Report (ACF-800), and the Child Care Quarterly Case-Level Report (ACF-801). Tribal information is collected using the Child Care Annual Aggregate Report (ACF-700). The appendices provide a summary of the reports grantees are required to submit.

Since funds transferred from TANF to CCDF are subject to the rules governing the Discretionary Fund, State reports include children who were served through TANF transfers as well as State Matching and MOE Funds. Although States are encouraged to provide case-level information about services provided directly with TANF dollars, the statute does not require States to provide specific information about child care funded with TANF. Consequently, detailed data about these services are not available. (States do report expenditure data on TANF services, and these data were used to estimate aggregate children served under TANF).

Annual Aggregate Report and Pooling (ACF-800)

The annual aggregate report provides unduplicated annual counts of children and families served through the CCDF, payment methods, the number of child care providers receiving CCDF funding by type of care, consumer education methods, and information about pooling of funding sources. In support of integrated approaches to the administration of child care subsidies, States are allowed to provide data on the families and children receiving child care services through all funding sources (e.g., SSBG, TANF, State dollars). If States choose to report pooled information, they must indicate the percentage of CCDF funds included in the pooled funds. This allows ACF to provide information about the numbers of families and children whose child care services are provided specifically through CCDF.

Quarterly Case-Level Report (ACF-801)

The quarterly report provides case-level data on the children and families served during the month of service, including demographics, family income and copayments, and types of settings including licensure status. States have the option of submitting data on a sample basis, or for all cases on a monthly or quarterly basis.

Some States and Territories have experienced difficulty in providing case-level data about families and children served through CCDF. These difficulties are related to problems with technology, rapid program growth, workload issues, multiple subsidy programs (as opposed to integrated approaches), and devolution of child care administration to local entities. FY 2006 and FY 2007 statistical tables based on annual aggregate and case-level reports may be found in the appendices, along with the methodology employed to derive national estimates. Limitations of the aggregate and case-level data are described as well.

PART III: CCDF EXPENDITURE DATA

Information about FY 2006 and FY 2007 CCDF expenditures was obtained from ACF-696 Financial Reports which are submitted quarterly by States and Territories. The ACF-696 report details expenditures from each of the CCDF funding streams and by major spending categories. States have more than one year to liquidate their CCDF funds, therefore total expenditures reflect spending from both current and prior fiscal year grant awards. These tables are referred to as “Spending from All Appropriation Years” on the CCB website. CCDF FY 2006 and FY 2007 Expenditure tables can be found at: <http://www.acf.hhs.gov/programs/ccb/data/index.htm>

TOTAL FY 2006 AND FY 2007 SPENDING ON CHILD CARE

In FY 2006, reported Federal and State CCDF expenditures were \$9.3 billion, including TANF funds transferred to CCDF.⁶ Of the \$9.3 billion in total CCDF spending in FY 2006, \$6.8 billion were Federal CCDF funds (including amounts transferred from TANF), and \$2.5 billion were State spending (Matching and MOE).

Table 3.1 - Expenditures in FY 2006 by Appropriation Year				
	FY 2004	FY 2005	FY 2006	Total by Fund
Mandatory	\$1,735,181	\$109,425,827	\$1,062,263,137	\$1,173,424,145
Matching Federal	\$139,958	\$239,957,940	\$1,481,553,088	\$1,721,650,986
Discretionary	\$161,271,449	\$1,035,274,512	\$2,752,247,887	\$3,948,793,848
<i>Subtotal Federal</i>	<i>\$163,146,588</i>	<i>\$1,384,658,279</i>	<i>\$5,296,064,112</i>	<i>\$6,843,868,979</i>
Matching State	\$541,316	\$73,896,479	\$1,438,736,574	\$1,513,174,369
CCDF MOE	(\$2,186,548)	(\$2,111,275)	\$971,581,220	\$967,283,397
<i>Subtotal State</i>	<i>(\$1,645,232)</i>	<i>\$71,785,204</i>	<i>\$2,410,317,794</i>	<i>\$2,480,457,766</i>
Total	\$161,501,356	\$1,456,443,483	\$7,706,381,906	\$9,324,326,745

In FY 2007, reported Federal and State CCDF expenditures were \$10.2 billion, including TANF funds transferred to CCDF. Of the \$10.2 billion in total CCDF spending in FY 2007, \$7.0 billion were Federal CCDF funds (including amounts transferred from TANF), and \$3.2 billion were State spending (Matching and MOE).

Table 3.2 - Expenditures in FY 2007 by Appropriation Year				
	FY 2005	FY 2006	FY 2007	Total by Fund
Mandatory	\$2,745,121	\$109,827,020	\$1,136,394,143	\$1,248,966,284
Matching Federal	(\$3,049)	\$192,018,666	\$1,506,855,012	\$1,698,870,629
Discretionary	\$87,707,364	\$1,068,705,012	\$2,856,342,492	\$4,012,754,868
<i>Subtotal Federal</i>	<i>\$90,449,436</i>	<i>\$1,370,550,698</i>	<i>\$5,499,591,647</i>	<i>\$6,960,591,781</i>
Matching State	(\$5,081,615)	\$274,566,290	\$1,940,335,748	\$2,209,820,423
CCDF MOE	(\$4,453)	(\$3,363,654)	\$992,600,043	\$989,231,936
<i>Subtotal State</i>	<i>(\$5,086,068)</i>	<i>\$271,202,636</i>	<i>\$2,932,935,791</i>	<i>\$3,199,052,359</i>
Total	\$85,363,368	\$1,641,753,334	\$8,432,527,438	\$10,159,644,140

⁶ Funds transferred from the TANF block grant are considered CCDF Discretionary funds.

Some States report excess State expenditures above the amounts needed to draw down the full allotment of Federal CCDF funds. These excess expenditures are State-only expenditures on child care.

In FY 2006, four States reported excess State Match expenditures totaling approximately \$454 million, and nine States reported excess State MOE expenditures totaling approximately \$86 million. Therefore, in FY 2006 the \$2.5 billion in State spending included approximately \$540 million in excess State-only expenditures on child care. After adjusting for this additional State money, total CCDF-only expenditures in FY 2006 are decreased from \$9.3 billion to \$8.8 billion.

In FY 2007, five States reported excess State Match expenditures totaling approximately \$720 million, and seven States reported excess State MOE expenditures totaling approximately \$105 million. Therefore, in FY 2007 the \$3.2 billion in State spending included approximately \$825 million in excess State-only expenditures on child care. After adjusting for this additional State money, total CCDF-only expenditures in FY 2007 are decreased from \$10.2 billion to \$9.4 billion.

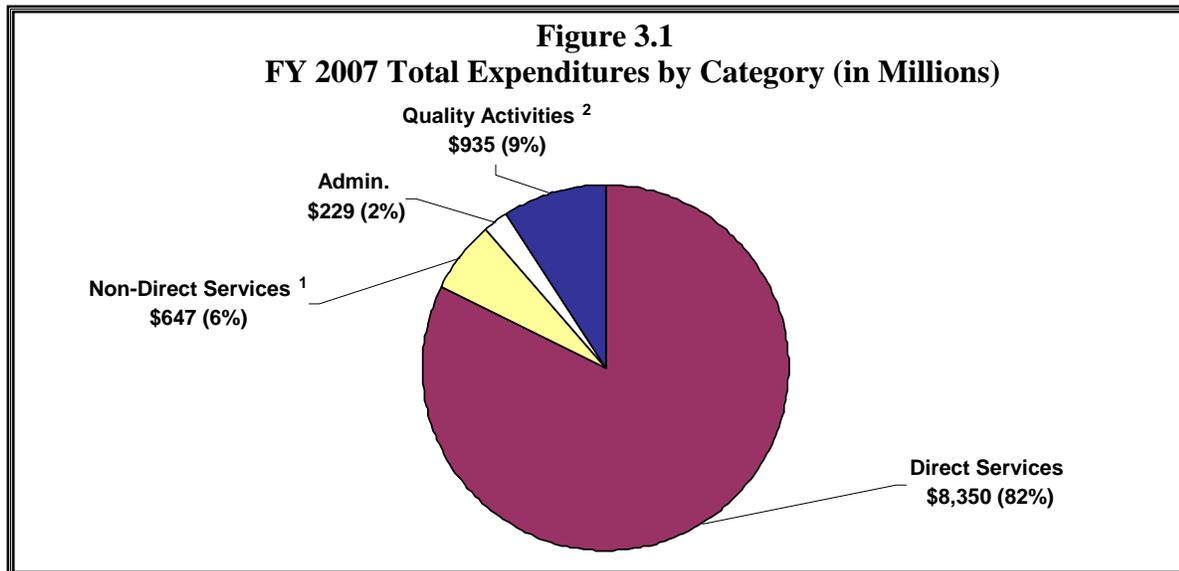
Another way to look at expenditures is how States spend their appropriations for a particular grant award year. For example, this would include what States spend from only the FY 2006 CCDF grant award during FY 2006, and what States spend from the FY 2007 CCDF grant award in FY 2007. Since States have more than one year to liquidate their grant award funds, ACF updates spending by grant award year expenditure tables for two out years following the end of the grant award year. In FY 2006, States spent a total \$7.7 billion of FY 2006 Federal and State funds, which includes both CCDF and TANF transfers into CCDF as of September 30, 2006. This amount is broken down to \$5.3 billion in Federal funds and \$2.4 billion in State funds. In FY 2007, States spent a total \$8.4 billion of FY 2007 Federal and State funds, including CCDF and TANF transfers into CCDF as of September 30, 2007. Expenditures of Federal CCDF funds were \$5.5 billion, and State Matching and MOE Funds were \$2.9 billion. Again, the State share of expenditures reported here includes any excess State amounts reported on the ACF-696. These are more explicitly footnoted in individual CCDF expenditure tables posted on the CCB website.

TANF BLOCK GRANT FUNDS FOR CHILD CARE

Title IV-A of the Social Security Act allows States to transfer up to 30 percent of their TANF grant to CCDF. According to TANF Final Regulations, States may transfer current year TANF funds only. States also may spend a portion of their TANF block grant directly on child care services. States use this flexibility under TANF to support child care services. In FY 2006, 37 States transferred \$1.9 billion in TANF funds to CCDF and spent approximately \$1.2 billion in TANF funds directly on child care. In FY 2007, 37 States transferred \$2.0 billion in TANF funds to CCDF and spent roughly \$1.2 billion directly on child care services. Between TANF transfers and direct spending, States invested a total of \$3.1 billion in TANF funds for child care in FY 2006 and \$3.2 billion in FY 2007.

CCDF SPENDING BY CATEGORY

This summary provides information about categorical expenditures of CCDF funds by States. These include: direct services, quality improvement activities, non-direct services and administration. TANF spending on child care directly (as opposed to TANF transferred to CCDF) is not categorized, and therefore is not included in Figure 3.1.



1/ Non-Direct Services include expenditures related to the operation of voucher programs, eligibility determination and re-determination, and developing and maintaining computer systems

2/ Quality Activities include quality expenditures as well as expenditures of targeted funds for quality activities.

Direct Services

States spend the majority of their funds on direct services to provide child care assistance to low-income families, primarily through the use of vouchers and contracts. In FY 2006, States spent \$7.4 billion, or 80 percent, on direct services. In FY 2007, States spent \$8.4 billion, or 82 percent, on direct services.

Quality Improvement Activities

Quality improvement activities include targeted funds for child care resource and referral and school-aged activities, improving the quality of infant and toddler child care, and quality expansion activities established above the 4 percent minimum quality spending requirement. In FY 2006, quality expenditures were \$945 million or 10 percent of total spending. In FY 2007, quality expenditures were \$935 million or 9 percent of total spending.⁷

⁷ Total quality spending includes discretionary targeted funds for specific quality improvement activities

Non-Direct Services

Non-direct spending on items such as information technology, resource and referral services, and eligibility determination was \$672 million or 7 percent of total State and Federal expenditures in FY 2006. In FY 2007, non-direct spending was \$647 million or 6 percent of total expenditures.

Administrative Expenses

In FY 2006, administrative expenses made up 3 percent of total expenditures at \$262 million. In FY 2007, administrative expenses made up 2 percent of total expenditures at \$229 million. By law, no more than 5 percent of the aggregate amount of CCDF funds expended by the Lead Agency from each fiscal year's allotment may be used for administrative activities.

SPENDING OF CCDF FOR PUBLIC PRE-KINDERGARTEN

According to Federal regulation, States may count expenditures on public pre-kindergarten for up to 20 percent of State funds serving as MOE. In FY 2006 and FY 2007, 12 States used public pre-kindergarten expenditures to meet their MOE requirement, a total of \$42 million, accounting for about 4 percent of total MOE expenditures.

In addition, States may count other public pre-kindergarten expenditures for up to 30 percent of the States' Matching Fund requirement. In FY 2006, 13 States reported a total of \$57 million in spending on pre-kindergarten toward their Match requirement. In FY 2007, 11 States reported a total of \$57 million in spending on pre-kindergarten toward their Match requirement. In FY 2006, these public pre-kindergarten expenditures made up about 4 percent of the State Match expenditures. In FY 2007, public pre-kindergarten expenditures made up about 3 percent of the State Match expenditures.

PART IV: CCDF PLANS

States, Territories, and Tribes submit plans that describe how they intend to implement CCDF in the subsequent two-year period. These plans provide information about the Lead Agency, CCDF administration, the process for developing the plan, service coordination and priorities, consumer education processes, and activities that will be funded with the quality set-aside and targeted funds for quality improvement activities.

The CCDF Plan, which the Lead Agency must submit biennially to HHS for funding, provides assurances that the Lead Agency will comply with all requirements of the Act and regulations and identifies the:

- Lead Agency (designated by the State or Territory chief executive, or by appropriate Tribal leader or applicant);
- Policies and procedures used by the Lead Agency in administering and implementing CCDF services, including eligibility criteria, payment rates and family contributions (copayments);
- Purposes for which CCDF funds will be expended; and
- Other information specified by HHS

In developing its CCDF Plan, the Lead Agency must:

- Consult with appropriate representatives of local governments;
- Coordinate the provision of services with other Federal, State, and local child care and early childhood development programs, including such programs for the benefit of Indian children; and
- Hold at least one public hearing.

CCB reviews CCDF Plans to ensure compliance with the CCDF statute and regulations. The following summarizes the information States and Territories provided in their plans for FYs 2006 and 2007 (October 1, 2005, through September 30, 2007).

ADMINISTRATION

States and Territories indicated that CCDF Lead Agencies are working in partnership with multiple Federal, State, Tribal, and local entities to administer CCDF funds. Many Lead Agencies directly administered funds for child care services through child care certificates, vouchers, or contracting with child care programs to serve families that are eligible for child care assistance. However, all of the Lead Agencies contracted with at least one other entity to assist them in administering funds to improve the quality and availability of child care.

In many cases, States and Territories devolved substantial administrative responsibility for CCDF to local jurisdictions, such as counties or nongovernmental entities created by statute. Only four States and three Territories reported that the Lead Agency directly administers and

implements all services, programs, and activities funded by CCDF. Lead Agencies were more likely to determine eligibility for families receiving TANF than for non-TANF families.

CERTIFICATES, GRANTS, AND CONTRACTS

Although most States administered the bulk of their CCDF funds as certificates or vouchers, 23 States and three Territories reported they also have grants or contracts for child care slots. In most cases, these grants and contracts were limited to specific populations or certain areas of the State. States also used contracts to support Head Start “wraparound” initiatives, school-age child care, or programs that target specialized populations such as teen parents or children with special needs.

Limitations on the Use of In-Home Care

While Lead Agencies must allow families to choose from the full range of providers, (center-based, family child care, group home family child care, and in-home), States and Territories may set limits on the use of in-home child care. Thirty-four States and two Territories did impose limits in some way. Eleven States required parents using in-home care to meet State minimum wage laws and/or the Fair Labor Standards Act requirements. For example, Idaho, Indiana, Iowa, Nebraska, South Carolina and Wisconsin limited in-home care to families in which three or more children require child care while Delaware set the minimum number at four children and Nevada set the minimum number at two children.

Improper Payments

For the first time in FYs 2006 and 2007, Lead Agencies reported on their strategies to prevent, measure, identify, reduce and/or collect improper payments. The majority of States and Territories reported strategies such as the use of automated data systems to share data with other government programs and to flag possible errors. Many States conducted training on program requirements for providers, parents, agency staff, and contractors, and also developed policy manuals, procedural guides, and other resource materials to help child care staff reduce improper payments. Forty-two States and Territories monitored client caseloads to identify and measure improper payments. Twenty-six States and Territories monitored and/or audited provider attendance sheets and billing records. Many States conducted onsite monitoring, established requirements, and developed tools to promote oversight of contractors and grantees. Strategies for collecting improper payments included establishing and coordinating with a designated fraud or quality assurance unit, using repayment plans, reducing future payments and establishing client and provider sanctions.

SERVICE COORDINATION

Lead Agencies consulted with many Federal, State, local, Tribal entities, and private early care agencies in developing their CCDF Plans, as required by statute. Many States established local coordinating councils or advisory boards that meet regularly to provide input and direction on CCDF-funded programs. Lead Agencies also consulted with advocacy organizations, business

and employment entities, child care providers, parents, school districts, faith-based programs, and charitable and community organizations.

CCDF Lead Agencies typically collaborate and coordinate services with:

- *Federal partners, including Head Start*
- *Education programs, including programs dedicated to children with special needs*
- *Public health programs*
- *TANF programs*
- *Juvenile justice agencies*
- *Private entities*

Lead Agencies reported diverse and innovative approaches in the coordination of services with other Federal, State, and local child care and early childhood development programs, including such programs for the benefit of Indian children. Kansas coordinated with TANF through a combined application for TANF cash, medical, child care and food assistance benefits. Through the Strengthening Families Initiative, Missouri linked early childhood and child welfare practices to reduce child abuse and

neglect incidents in the State. Montana addressed early childhood coordination through an annual meeting of its Early Childhood Advisory Council which brings Tribal CCDF Administrators and other Tribal representatives together to discuss such issues as licensing and registration agreements, Tribal child care service areas, and training and integration agreements between Tribal colleges and the State university system.

All States and Territories were involved in public-private partnerships. Those partnerships supported a wide range of activities, including professional development, early childhood system building efforts, development of quality rating and improvement systems, school readiness and literacy, facility start-up and enhancement, public awareness, and addressing availability and accessibility. Partners included child care resource and referral agencies, businesses, charitable organizations, and community organizations.

PROGRAM FLEXIBILITY

States and Territories have significant flexibility in administering and funding child care assistance programs under CCDF. Lead Agencies determine service areas, program eligibility criteria (e.g., definitions of income and work requirements), program priorities, family contributions to the cost of care based on a sliding fee scale, and reimbursement rates.

Eligibility

In the FYs 2006 and 2007 CCDF Plans, maximum family income eligibility levels across States and Territories ranged from 34 to 85 percent of the State Median Income (SMI). Forty-four States set income eligibility limits for CCDF assistance below the Federal maximum of 85 percent of SMI. Twenty-nine States and four Territories established additional eligibility conditions or priority rules in their 2006-2007 Plans. Twelve States used a two-tiered eligibility threshold to allow families to retain subsidies even when family income increased. For instance, in Florida, a family must have an income at or below 150 percent of the Federal Poverty Level (FPL) in order to access the subsidized child care system. However, once that family has a subsidy, they remain eligible until their income reaches 200 percent of FPL. On average, States reported an income eligibility level equivalent to 61 percent of SMI. Income eligibility

thresholds for a family of three are reported in Appendix 16a: Child Care and Development Fund Child Care Assistance Income Eligibility Thresholds, Family of Three.

Most States and Territories used pretax gross income, usually expressed in monthly terms, to determine if a family is eligible to receive child care assistance. However, some excluded or exempted certain income, or allowed deductions to income for certain expenses. Most commonly, States and Territories excluded or exempted income received from certain public assistance programs such as TANF, Supplemental Security Income, food stamps, energy assistance, and housing allotments.

States and Territories determine the initial authorized eligibility period for families and how often eligibility is reviewed. Twenty-nine States and three Territories authorized payments for six months, and another nineteen States and one Territory authorized initial eligibility for 12 months. The overall range was from monthly authorization (Hawaii and North Dakota) up to two years in Puerto Rico. Seven States and three Territories allowed child care programs that collaborate with Head Start to extend the eligibility period for families beyond the typical three to six month eligibility period.

Priorities

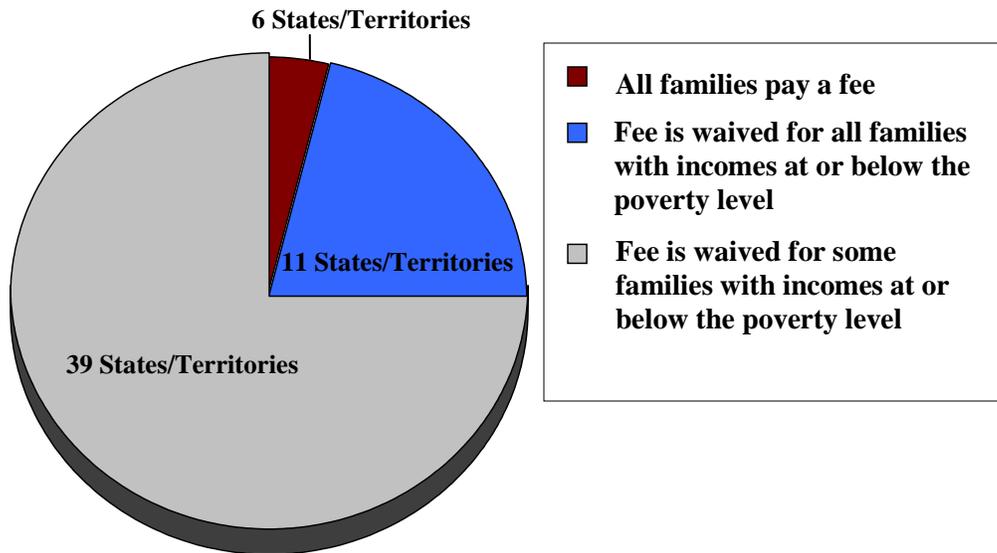
In addition to the requirement to give priority to families with very low incomes and families of children with special needs, States and Territories included additional service priorities for certain populations. As an example, Kentucky prioritized children with special needs, children receiving protective services, children of teen parents, and TANF participants.

<p>To meet the child care needs of TANF families, States and Territories:</p> <ul style="list-style-type: none">• <i>Establish priority rules for TANF families and those at risk of becoming dependent on TANF</i>• <i>Coordinate services across programs</i>• <i>Waive fees for some or all families with open TANF cases</i>

Family Contributions to the Cost of Care

States and Territories were required to establish a sliding fee scale, based on income and family size, which identifies each family's contribution to the cost of care through CCDF (i.e., copayment). Some States and Territories used additional factors such as the number of children in care, and/or whether the care is full- or part-time, to determine the family contribution. In the FY 2006 – 2007 CCDF Plans, eight States indicated that copayments were based on a percentage of family income, ranging from 0 to 17 percent of income. Another ten States and two Territories reported that copayments were based on a percentage of the cost of care. Copayment policies for a family of three are reported in Part II of this report and in Appendix 16b: Child Care and Development Fund: Child Care Assistance Family Copayment Policies, Family of Three. States and Territories may choose to waive copayments for families with income below the Federal Poverty Level (FPL). As shown in Figure 4.1, four States and two Territories required all families to pay a fee. Nine States and two Territories waived fees for all families with income at or below FPL. Thirty-eight States and one Territory waived fees for some families with incomes at or below FPL.

Figure 4.1
Policies on Waiving Family Contributions to the Cost of Care*



*Includes the District of Columbia and 5 Territories (American Samoa, Commonwealth of the Northern Marianas Islands, Guam, Puerto Rico, and the Virgin Islands).

In addition to assessed family copayments, many States allowed providers to charge families the difference between their standard rates for all families and what the State reimburses. Fifteen States and one Territory prohibited providers from charging fees in addition to the copayments established by the State. For example, Arkansas providers signed an agreement indicating they may not charge parents the difference between the reimbursement rate and the private pay rate. Thirty-six States and four Territories did not prohibit providers from charging parents this differential.

Payment Rates

States and Territories must conduct market rate surveys every two years and must use the results to ensure that families receiving CCDF assistance have equal access to comparable care purchased by private paying families. Payment rates vary by type of care, age of children, full- and part-time care and geographic setting. Nine States and two Territories set reimbursement rate ceilings equal to or higher than the 75th percentile of the local market rate based on its most recent survey. (This means that the rate ceiling is equal to or more than the price charged by three out of every four slots or facilities in the market). Another 14 States had at least some of their rate ceilings at or above the 75th percentile. In West Virginia, base rates varied from the 35th percentile to the 75th percentile, depending on region, type of care, and age of child. Rates for center-based providers in the largest urban area of the State/Territory are provided in Appendix 17: Child Care and Development Fund Center-Based Reimbursement Rate Ceilings, Largest Urban Area.

Thirty States and one Territory implemented a tiered reimbursement system whereby providers are paid more if they can demonstrate that they offer higher quality care or as an incentive for

serving for children from priority categories. Twenty-four States and two Territories paid higher rates to providers caring for special needs children, ten States had a higher rate for care provided during non-traditional evening and weekend hours, and eight States paid a higher rate for care provided to infants and toddlers.

Consumer Education

States and Territories used innovative strategies to promote awareness of the CCDF program. States and Territories used their web sites to provide information about child care options, services and assistance. Thirteen States made their applications available online, with four of those permitting families to complete their applications via e-mail or the Web. Four States had online tools to help families estimate whether they are eligible for assistance.

States and Territories are required to establish procedures for maintaining records of substantiated parental complaints. In most States, records of substantiated complaints were maintained by the State's licensing agency and were available to the public upon request at a designated place. Fourteen States and one Territory established a toll-free telephone number that parents may call to request substantiated complaint information and nine States allowed parents to request or receive complaint information via the Internet. Nine States reported using an automated system to track complaint information. Forty-one States and four Territories informed parents of their rights to unlimited access to their children while in child care through their subsidy application and/or through their fiscal agreements with providers.

IMPROVING THE QUALITY OF EARLY CHILDHOOD SERVICES

States and Territories are required to spend at least four percent of their CCDF allocation on quality activities. In addition, CCDF provides targeted funds for improving the child care quality of specific populations, such as infant and toddler and school-age, and for particular activities, such as child care resource and referral. States and Territories may meet their CCDF quality set-aside and requirements for targeting funds by using CCDF funds for a variety of quality initiatives, including those that target:

- Infants and toddlers;
- Child care resource and referral services;
- School-age child care;
- Comprehensive consumer education;
- Grants or loans to providers to assist in meeting State and local standards;
- Monitoring compliance with licensing and regulatory requirements;
- Training and technical assistance;
- Compensation of child care providers;
- Activities that increase parental choice and improve the quality and availability of child care;
- Voluntary guidelines for early learning;

- Plans for comprehensive professional development; and
- Plans for program coordination.

Improving Child Care Quality for Infants and Toddlers

States and Territories used targeted CCDF funds to improve the quality of care provided to infants and toddlers, and they were doing so in ways that promote systemic change. Over 90 percent of States reported using infant and toddler set-aside funds for specialized training. More than half of the States and Territories offered some form of technical assistance or consultation to infant and toddler programs and practitioners. Some States used CCDF quality funds to expand the supply of child care programs that serve infants and toddlers. Other activities addressing the quality of infant and toddler care included raising the reimbursement rate ceiling for programs serving infants and toddlers, supporting environmental assessments of infant and toddler care, and integrating all infant and toddler initiatives into a single system.

As an example, the Texas Department of Family and Protective Services collaborated with Local Workforce Development Boards to provide required training on preventing Shaken Baby Syndrome, preventing Sudden Infant Death Syndrome and understanding early childhood brain development. Some Boards offered the Program for Infant and Toddler Caregivers training, Ages and Stages Questionnaires training, Center for Improving the Readiness of Children for Learning and Education language and literacy training or training on the High Scope Infant and Toddler Approach. Further, some Boards coordinated resources in the community to offer scholarships to child care providers seeking training on infant and toddler care.

Resource and Referral

All States reported that they use their targeted CCDF funds to contract with public or private entities to provide child care resource and referral services, which included consumer information and referrals to families seeking child care, development of new family child care homes and centers, training and/or technical assistance to child care providers, and other quality enhancement initiatives. In the Territories, the Lead Agency provided child care resource and referral activities directly. Several States used their targeted funds to establish or upgrade the automation and data collection systems used by resource and referral agencies. They also reported using resource and referral agencies as coordinating bodies to support a range of services for parents and providers, including infant and toddler training programs.

In Pennsylvania, child care resource and referral staff from child care information service agencies created a statewide provider database to offer parents information about any regulated provider in the State, including days and hours of operation, education level of caregivers, location of facility, special services and accommodations, language capability, school districts served and availability of transportation of children, including public transportation. Information was also provided on the Keystone STARS (Standards, Training, Assistance, Resources, and Support) Quality Initiative.

School-Age Child Care Quality

States and Territories also use targeted CCDF funds to support quality initiatives for school-age child care programs and services. Most States and Territories used set-aside funds for school-age child care provider training, technical assistance activities, and grants for school-age child care programs. Some States and Territories used CCDF quality and targeted funds to aid in start-up and operating assistance for school-age child care programs. Other States supported rate increases for school-age child care programs.

For example, Oregon's School Age Care Enrichment and Recreation Program at Portland State University received CCDF funds targeted for school-age child care programs. The project supported community programs through training and technical assistance and improves coordination among local programs that provide before- and after-school activities.

Consumer Education

Nearly all States and Territories reported that they undertook comprehensive consumer education activities to improve the availability and quality of child care. A growing number of States used Quality Rating and Improvement Systems and web sites to educate consumers about the quality and supply of early childhood programs.

Grants and Loans to Child Care Providers

Twenty-seven States and one Territory reported establishing child care quality improvement grant programs. For example, Louisiana offered repair and improvement grants to licensed or registered providers or those who have applied to become licensed or registered, assisting them in meeting State or local licensing and safety standards or helping them improve the quality of child care services. These grants were limited to providers who care for children receiving child care assistance.

Monitoring Compliance with Regulatory Requirements

CCDF funds supported States in monitoring compliance with State child care licensing and regulatory requirements. Forty-one States and four Territories reported using CCDF to support licensing staff. For example, Maryland funded positions in the Office of Licensing to perform mandated licensing and regulatory functions in a timely and thorough manner. Additional staff members may be added to improve the licensing staff /facility ratio and meet demands generated by new initiatives as funds are available.

Training and Technical Assistance

Forty-one States used CCDF funds to support or build an early care and education career development system. Twenty-nine States reported working with child care resource and referral agencies to implement and/or coordinate training. Other States reported other training and technical assistance activities, such as participation in the Teacher Education and Compensation

Helps (T.E.A.C.H.) program, development of distance learning techniques, and establishment of mentoring programs.

Compensation of Child Care Providers

States continued to use CCDF funds to plan or implement strategies to address provider compensation. States described strategies such as wage supplements, one-time bonuses or quality awards and child care staff benefit initiatives. Seventeen States reported that they are involved in some type of child care practitioner wage initiative. For example, in Pennsylvania, Keystone STARS Child Care Quality Improvement Initiative included several program operating grants, including merit awards and education and retention funds. Linking staff retention grants to Keystone STARS was designed to reduce staff turnover, which will help sites meet higher performance standards and achieve higher STAR levels.

Voluntary Guidelines for Early Learning

All States and Territories were engaged at some level in developing or implementing voluntary early learning guidelines. Two Territories were planning for the development of early learning guidelines. Ten States were in the process of developing early learning guidelines, the last of which was scheduled to be completed by December 2006. Four States had approved early learning guidelines, but had not yet developed or initiated an implementation plan. Thirty-three States and three Territories had embarked on implementation efforts, which may include dissemination, training or embedding guidelines in the professional development system. Four States previously had developed early learning guidelines and now are revising them.

Plans for Comprehensive Professional Development

All States and Territories were engaged in efforts to support and increase the skills and knowledge of adults who work with young children. Eleven States and one Territory were in the planning stages. Five States and one Territory were developing their professional development plan. Eighteen States reported that their plan is in the implementation phase. Fourteen States were revising previously developed plans or do not have a discrete professional development plan encompassing their professional development efforts. In all instances, the Lead Agency played a key role in supporting State or Territory early childhood professional development.

Plans for Program Coordination

Thirteen States indicated that planning was underway to develop a plan for early childhood program coordination. Seven States and one Territory were developing an early childhood program coordination plan. One State had developed an early childhood program coordination plan. Fourteen States and two Territories were implementing an early childhood program coordination plan. Sixteen States were involved in multi-agency collaborative initiatives.

Other Quality Activities

States and Territories reported a variety of other initiatives aimed at improving the quality of child care, including:

- Activities in support of early language, literacy, pre-reading and early math development (forty-two States and four Territories);
- Healthy Child Care America and other health activities, including those designed to promote the social and emotional development of children (twenty-eight States and one Territory); and
- Establishment of a quality rating or tiered reimbursement system as strategies to increase parental choice and improve child care quality (fourteen States).

HEALTH AND SAFETY REQUIREMENTS

Providers caring for children receiving CCDF assistance are not required to be licensed by the State or Territory, but Lead Agencies must ensure that all providers caring for children receiving CCDF assistance meet health and safety requirements related to prevention and control of infectious disease (including immunizations), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. To enforce these requirements, States used unannounced visits, background checks, monitoring site visits, complaint investigations, inspections, and reports of serious injuries.

States and Territories have the option of exempting relative caregivers from these requirements. Thirty-two States and five Territories did not exempt relative caregivers from these requirements. Five States exempted all relative providers from all health and safety requirements.

THE TERRITORIES

Five Territories receive Child Care and Development Fund (CCDF) Discretionary Funding:

- American Samoa
- Guam
- The Commonwealth of Northern Mariana Islands (CNMI)
- Virgin Islands
- Puerto Rico

Discretionary Funds include targeted funds for:

- Child care quality improvement activities
- Infant and toddler quality improvement
- Child care resource and referral and school-age care activities

The Territories do not receive CCDF Mandatory or Matching Funds, which means they are not required to meet the Maintenance of Effort (MOE) or Matching Fund requirements for CCDF (which are tied to accessing the Matching Funds). However, they are required to meet the same CCDF Plan submission and reporting requirements as States.

	CCDF Discretionary Fund Allocations	
	FY 2006	FY 2007
American Samoa	\$ 2,680,745	\$ 2,606,042
Commonwealth of Northern Mariana Islands (CNMI)	\$ 1,700,190	\$ 1,799,139
Guam	\$ 4,063,930	\$ 4,047,582
Puerto Rico	\$ 38,244,447	\$ 34,859,806
Virgin Islands	\$ 1,865,540	\$ 1,857,642

PART V: TRIBAL CHILD CARE

Background

In FY 2006, 13,594 families and 24,248 children were served with CCDF funds (76 percent of grantees reporting) and in FY 2007, 16,488 families and 30,147 children were served (94 percent of grantees reporting). Over the past several years, the number of tribal grantees submitting data has increased significantly. While data quality also is improving, some tribal grantees continue to have difficulty providing accurate, complete data due to a number of factors, including staff turnover and a lack of technology resources and infrastructure. To address these issues with data quality, CCB provides ongoing technical assistance, training, and a variety of tools including specialized software (Child Care-Data Tracker) to help Tribes with data reporting.

Over 500 federally recognized Indian Tribes, Alaska Native Villages, and a Native Hawaiian organization received CCDF funds directly or through consortium arrangements. With some exceptions, Tribal CCDF grantees are located in rural, economically challenged areas. There is a strong emphasis on traditional culture and language in Tribal child care settings, which is usually reflected in a Tribe's CCDF program activities. For example, in many Tribal communities, parents place their children with Tribal child care providers or relative providers, where the child's heritage, culture, and native language will be supported through activities such as storytelling and drumming.

Eligibility

An Indian Tribe is eligible to receive CCDF monies if the Tribe is federally recognized and the Tribal population includes at least 50 children under age 13. A Federally recognized Tribe, including a Tribe with fewer than 50 children, may join a consortium of Tribes to receive funding. Grant awards are calculated based on the number of children under age 13 reported by each Tribe. As part of the annual CCDF funds application process, a Tribe must submit a signed declaration that certifies the number of Indian children under age 13 who reside on or live near the reservation or Tribal service area.

Funding:

The CCDF is comprised of two funding sources for Tribes:

Discretionary Funds – funding that is provided under the Child Care and Development Block Grant Act, as amended. Grants include a base amount of \$20,000 plus a per child amount for each Tribe or tribal consortium with a minimum of 50 children. A small amount of funds is also available for school-age care and resource and referral activities. The amount of targeted funds for resource and referral activities and school age care is based on a \$500 amount per Tribe plus a per child amount.

Tribal Mandatory Funds – funding that is provided to eligible Tribes and tribal organizations under Section 418 of the Social Security Act. Grants are calculated solely on a per child basis and do not include a base amount.

Tribal CCDF grant award amounts ranged from \$22,837 to \$9,813,443 in FY 2006 and \$22,694 to \$9,943,723 in FY 2007.

REGULATORY FLEXIBILITY

The CCDF regulations provide significant flexibility for Tribes to design and administer their programs in accordance with the unique needs and challenges in their communities.

Recognizing that many smaller Tribes do not have the infrastructure to support certain CCDF requirements, CCB exempts these Tribal grantees from two key provisions. First, unlike the States and large Tribes, exempt Tribes are not required to spend at least four percent of their CCDF funds on activities to promote child care quality. Second, exempt Tribes are not required to operate a certificate (voucher) program. The 1998 CCDF regulations (45 CFR Parts 98 and 99) set the exempt/nonexempt threshold at \$500,000. Therefore, a Tribe with an annual CCDF allocation of \$500,000 or greater is considered nonexempt and must operate a certificate program and meet the four percent quality requirement.

In addition, the CCDF 5 percent cap on administrative costs does not apply to Tribes. Instead, Tribes have a 15 percent cap that does not include the Discretionary Funds base amount.

Tribal Program Flexibility: Public Law 102–477 Option

Through the Indian Employment, Training, and Related Services Demonstration Act of 1992 (P.L. 102–477), Tribes have the option to consolidate their CCDF funds with other employment and training funds, which allows them to submit abbreviated CCDF applications, plans, and program reports. Tribes may also request waivers for certain CCDF statutory provisions, regulations, policies, or procedures, given that the waiver is consistent with P.L. 102–477 and the Child Care and Development Block Grant Act of 1990. This option gives Tribes increased flexibility in developing comprehensive service delivery models and program outcomes that support the policy of Tribal self-determination and meet the unique needs of Tribal families.

In FY 2007, 34 Tribes consolidated their CCDF plans into P.L. 102–477 plans. These 34 Tribes received nearly a quarter of the FY 2007 CCDF funds. As the statutorily designated Lead Agency of the 102–477 option, the Department of the Interior conducts onsite reviews for all 102–477 grantees during their approved two or three-year grant periods. Tribes receive copies of review findings and are provided with corrective actions, if necessary.

Tribes may use their CCDF funds to construct or renovate child care facilities, subject to ACF approval of an application for construction and major renovation. Between FY 1997 and FY 2007, ACF approved over \$62 million in CCDF funds to construct or renovate 126 child care facilities, which is increasing parental choice in the child care settings available in tribal communities.

Because Tribes have the authority to construct child care facilities, many Tribes now offer child care services through tribally operated child care centers. The operation of centers brings new administrative challenges related to staffing; building maintenance; and budgeting. CCB continues to provide technical assistance and training to help Tribes with their specialized child care facility issues.

Child Care Bureau Initiatives

CCB targets a significant portion of technical assistance efforts to Tribes to help them maximize resources and take full advantage of the significant flexibility provided by Federal rules that govern child care funding. The majority of the tribal technical assistance activities focus on training related to staff turnover (and lack of succession planning) and capacity building issues. In addition to technical assistance tools such as the *Tribal Data Tracker* that assists Tribal Lead Agencies with case management functions and federal data reporting on the ACF-700 report form, other initiatives are underway to help Tribal Lead Agencies with the effective administration of the CCDF program. A more detailed description of tribal technical assistance activities is provided under Chapter VII (T&TA).

Tribal Data Collection and Submission

Tribes are required to provide aggregate child care data on the ACF-700 report, including annual counts of Tribal children and families served through CCDF, average hours of service per child by type of care, average monthly payment and copayments per child, and the number of children served by income. The Tribes are required to submit the ACF-700 report for each Federal fiscal year. Tribes may submit their reports up to three months after the end of the reporting period. Data fluctuations or trends in the ACF-700 reports help the Child Care Bureau determine how best to provide technical assistance to meet certain identified needs, such as an increase in the use of child care centers over other care settings.

Tribal Market Rate Survey Study

CCB sponsored a Child Care Policy Research Brief “*Tribal Child Care and Development Fund Grantees: Market Rate Surveys and Other Child Care Practices and Policies.*” The Oregon State University Family Policy Program, Oregon Child Care Research Partnership, published the result of the study in August 2007. This Research Brief describes basic child care practices of all tribal CCDF grantees and survey practices and policies of the 38 Tribes that used the findings of their own market rate surveys, in lieu of a State’s survey. This document provides a general discussion and findings of tribal market rate survey practices. It also contains practical considerations for Tribes that are weighing the feasibility of conducting their own market rate survey of child care provider payment rates on their reservation/service area.

Grantee Activities to Promote Child Care Quality

While exempt, larger Tribal CCDF programs (those with annual grant awards over \$500,000) are required to spend no less than 4 percent of their funds on quality activities, the majority of Tribes are investing some CCDF funds in activities to promote the quality of child care, such as activities to provide professional development opportunities for caregivers, to assist providers in meeting health and safety standards, and to support native culture and language acquisition within the child care setting.

Beginning in FY 2006, emergency preparedness planning efforts were established or enhanced in many tribal child care programs. At the 2007 National American Indian/Alaska Native Child Care Conference, the Chitimacha Indian Tribe of Charenton, Louisiana discussed how they helped staff and child care providers develop crisis prevention activities and action steps for responding to emergencies.

Although CCB offers several tribal trainings each year, many Tribes take the initiative to host their own child care workshops, training and conferences. In 2006, the Association of Village Council Presidents (AVCP) in Bethel, Alaska held its first Child Care Providers Conference. Child care providers from many of AVCP's 56 federally recognized Tribes located in the Yukon-Kuskokwim Delta, along the South Western region of Alaska participated in skill-building workshops on topics including: infant toddler programming; storytelling and literature; and nutrition and hygiene.

Some Tribes host annual child care conferences, such as the White Earth Reservation in White Earth, Minnesota that held its 7th annual Brain Development Conference in 2007. The Conference brings in national speakers and local experts to share strategies and high quality training on brain development issues to approximately 1,000 early childhood professionals, child care providers, teachers, social workers, therapists, policy makers, and parents from a tri-State area. The White Earth Child Care Program attributes the conference's success to the many tribal, county and statewide partnerships that contribute to this annual event.

In 2006 the Hopi Tribe's Child Care Program in Kykotsmovi, Arizona was one of seven Tribes recognized with an Honors Award by the *Honoring Contributions in the Governance of American Indian Nations* (Honoring Nations) national awards program. The program is administered by the Harvard Project on American Indian Economic Development at Harvard's Kennedy School of Government. This awards program identifies, celebrates, and shares outstanding examples of tribal governance. The Hopi Tribe's Child Care Program was lauded for facilitating parents' access to high quality child care when demands of work or educational pursuits require them to be away from home. Among the contributing factors to the program's success is a strong commitment to parental involvement in their child care services.

COORDINATION ACTIVITIES

The CCDF statute and regulations require CCDF Lead Agencies to:

- Consult with appropriate representatives of local government;
- Coordinate services with other Federal, State, and local child care and early childhood development programs, including those serving Indian children; and
- Coordinate with other State and Tribal agencies responsible for public health, employment, education, and TANF.

Tribes employ a number of creative strategies to leverage their child care resources and coordinate with other early childhood programs, such as Head Start and Early Head Start programs and the U.S. Department of Education's 21st Century Community Learning Centers (for school-age children) and Boys and Girls Clubs. Tribes have a long and successful history of coordinating across program boundaries and leveraging resources in order to meet the needs of their children and families. The CCDF program is a major part of this effort.

State-Tribal Collaborations

Through a "dual eligibility" provision in the CCDF's authorizing legislation, eligible Indian families may elect to apply for CCDF services from either their Tribe's CCDF program or the State CCDF program. States and Tribes have both found that it is in their best interests to work out a system that supports families to make their own decisions as to whether to access Tribal or State programs. States and Tribes recognize that by working together they can avoid duplication, and maximize limited resources. They also share and learn about each other's best practices in such areas as policy development, training, licensing, and developing culturally sensitive and relevant services.

In their FY 2006-2007 CCDF plans, States and Tribes described a number of ways they are coordinating services. Approved CCDF plans address tribal priorities and resources and demonstrate partnerships across early care and education systems, such as partnerships with State CCDF programs around the development and implementation of Early Learning Guidelines. Several tribal child care administrators served on State early childhood advisory councils or state early learning boards during FY 2006-2007.

Building on this momentum, in summer 2006 CCB combined its State Child Administrators Meeting and its American Indian and Alaska Native Child Care Conference for the first time in over 10 years. The conference "*Diverse Perspectives – Common Goals*," promoted and facilitated collaboration between Tribes, Territories and States, provided training to all child care grantees on common issues and encouraged the sharing of expertise between all CCDF grantees.

One of the primary reasons for the joint conference in Washington, D.C. was to encourage a dialogue about the ways Tribal and State CCDF programs could become true partners in providing child care services for CCDF-eligible families. Through facilitated meetings, States and Tribes met together to begin or continue this collaborative process at the conference,

focusing on issues including State Early Learning Guidelines and professional development strategies.

Other examples of State and Tribal coordination include:

- The Oklahoma Tribal State Child Care Network, which is comprised of the 37 tribal CCDF grantees and Oklahoma Department of Human Services (OKDHS) officials, meets regularly to share information on licensing, quality initiatives and subsidy reimbursement issues. The OKDHS also has cooperative licensing agreements with four Tribes (Cherokee Nation, Chickasaw Nation, Choctaw Nation and Muscogee Creek Nation).
- Through a Memorandum of Understanding (MOU) with the State Resource and Referral Agency, the Blackfeet Tribal CCDF Program in Browning, Montana is able to serve more children and families on their reservation in rural Montana. The MOU states that all Blackfeet Tribal TANF clients that are working will seek child care assistance through the State, while the Blackfeet Tribal CCDF Program will serve all other eligible tribal families.
- In 2007, senior managers from Washington State's Division of Child Care and Early Learning held a summit with tribal leaders to discuss early childhood collaboration issues. To support these efforts, the State hired a senior policy advisor to lead the partnership with tribal nations across the State.

Tribal College Partnerships

In many Tribal communities, Tribal Colleges and Universities (TCU) are a valuable resource for professional development opportunities. The Child Care Bureau encourages Tribal Lead Agencies to consult with Tribal Colleges and Universities, and other local higher education institutions, as appropriate, as they design their CCDF program activities including early childhood trainings and degree programs.

For those Tribes that are not located near an existing TCU, distance learning technology is emerging as a vital resource for providing culturally relevant training to students in remote areas. Through an arrangement with the Northwest Indian College in Bellingham, Washington, the Nez Perce Tribe has two distance learning centers on its reservation in Lapwai and Kamiah, Idaho that provide tribal members access to early childhood classes or Child Development Associate (CDA) certificate programs.

CCB arranged with United Tribes Technical College (UTTC) in Bismarck, North Dakota to offer Continuing Education Units (CEUs) to participants at the 2006 CCB National Conference “*Diverse Perspectives – Common Goals.*” UTTC is the only Tribal College that offers an on-line early childhood Associates of Arts (A.A.) degree in Early Childhood Education, which affords tribal child care professionals nationwide the opportunity to pursue a culturally relevant early childhood degree in a virtual classroom setting.

Part VI: FY 2006 AND FY 2007 RESEARCH ACTIVITIES

Beginning in FY 2000, Congress authorized the Administration for Children and Families (ACF) to spend \$10 million annually in CCDF funds for research, demonstration, and evaluation. Research priorities in FY 2006 and FY 2007 were identified after a careful review of the current status of knowledge and evidence in the child care field. The research agenda responds to the needs of States for research-based evidence that will inform policy decision-making and implementation of the CCDF program at the State and local levels.

ACF's Research Priorities

ACF seeks to address the questions that are most relevant to Federal, State, and local community policymakers. These questions include:

- What are the effects of alternative child care subsidy policies and practices on children and families served?
- What is the relationship between receipt of child care subsidies and parents' employment outcomes, including stability of employment and of child care for their children?
- Which child care policies are linked to access to child care that meets the needs and preferences of parents? What factors influence choice of care among low-income working families?
- What are the child care needs and utilization patterns of low-income working families?
- How do public and private child care and early education sectors interact to affect the supply and quality of care available to low-income families?
- What is the impact of CCDF on improving the quality of care available and utilized by low-income working parents and at-risk families to support parental outcomes and child well-being?
- What are cost-effective investments in child care quality?

ACF's research projects involve sophisticated research methodologies, including quasi-experimental and experimental designs. Several national evaluations have been launched to examine variations in state child care policies and explore promising approaches to child care provider training. In addition, ACF is investing in efforts to increase state capacity for research and data analysis, support doctoral students working in child care research, and improve research quality and usefulness through the Child Care Policy Research Consortium and Child Care and Early Education Research Connections. Collaborative relationships with other Federal agencies and national organizations are being strengthened, and many studies now involve partnerships that bring together diverse constituencies and research interests. The following provides an overview of ACF's research initiatives in FY 2006 and FY 2007. For updates regarding these initiatives, see the HHS Administration for Children and Families' website at <http://www.acf.hhs.gov/programs/opre/project/childCareProjects.jsp>.

Child Care Policy Research Consortium

During FY 2006 and FY 2007, ACF continued to expand its national Child Care Policy Research Consortium of grantees and contractors. The purpose of this consortium is to help ACF increase national capacity for sound child care research, identify and respond to critical issues, and link child care research with policy, practice, and consumer demand. ACF sponsored annual meetings of the Consortium in FY2006 and FY2007 to foster child care research and dissemination of research findings. Members of the consortium participated in panel discussions, workshops, and poster sessions to explore current issues facing researchers and policymakers.

As a result of the Consortium's activities, child care researchers across the country are working in collaboration with policymakers and practitioners on studies that are timely and interdisciplinary. Members work to develop improved consensus about child care data definitions, measures, and methods. They also are creating longitudinal datasets from child care subsidy systems, regulatory information systems, resource and referral systems, and other key sources. Finally, members are producing new studies that examine interrelationships among programs and their effects on families and children, as well as some that replicate existing studies in different States and communities.

Child Care and Early Education Research Connections (www.childcareresearch.org)

Research Connections is a Web-based, interactive database of research documents and public use data sets for conducting secondary analyses on topics related to early care and education. The project is a cooperative agreement between ACF, the National Center for Children in Poverty (NCCP) at Columbia University, and the Inter-University Consortium for Political and Social Research (ICPSR) at the University of Michigan. In FY 2006 and FY 2007, the project continued to populate the site with thousands of child care and early education research materials and datasets for secondary analyses; provided data workshops on the use of archived datasets containing important variables on child care and early education, subsidy usage, child development, and parent employment; and produced research summaries and briefs on topics relevant for policy decision-making.

Child Care Policy Research Grants

ACF has funded 42 Child Care Policy Research Grants to study a broad range of issues highlighted by policymakers and investigators in the field. In FY 2007, ACF funded eight new child care policy research grants addressing a variety of child care policy topics, including:

- The child care needs and utilization patterns of low-income working families.
- The factors that influence choice of care among low-income working families.
- The impact of state and local efforts to provide universal preschool on the quality and availability of care needed and utilized by low-income working families.

(See appendices for descriptions of new child care policy research grants awarded in FY 2007.)

State Child Care Data and Research Capacity Projects

The State Child Care Data and Research Capacity Projects assist CCDF lead agencies in developing greater capacity for policy-relevant research and analysis. In partnership with research organizations, the grantees design more effective child care policies and programs with identifiable outcomes for children, families, and communities. The primary goal of the projects is to create a statewide research infrastructure to better understand child care needs, services, and outcomes for families in the context of social, economic, and cultural change. One State was awarded a 3-year grant in FY 2007. (See appendices for a description of this new grant.)

Child Care Research Scholars

Since FY 2000, ACF has funded doctoral candidates to conduct dissertation research on child care issues. In FY 2006, three new scholars were awarded grants. Four scholars were awarded grants in FY 2007, bringing the total number of funded scholars to 36. New scholars examined several questions, including:

1. What is the impact of State- and local-level subsidy policies and practices as implemented through vouchers on access to subsidies, child care affordability, and parental employment?
2. What factors play a role in parents' decisions about work, child care and subsidy access?
3. What are cost-effective strategies to improve child care quality in all settings, and what features of quality are most critical to support children's development and family well-being?

(See appendices for descriptions of new child care research scholar grants awarded in FY 2006 and FY 2007.)

Nearly all scholars from the first six waves have completed their dissertations, and several have been published in peer-reviewed journals.

Design Phase for National Study of Child Care Supply and Demand

In FY 2007, ACF contracted with the National Opinion Research Center (NORC) and its partners, the Chapin Hall Center at the University of Chicago and Child Trends, to undertake the design phase of the National Study of Child Care Supply and Demand. The project is developing sampling and methodology options for the study, with special focus on low-income households with children ages birth through age 12 years whose parents are working and receiving cash assistance, are transitioning off cash assistance, or are at risk of needing cash assistance, and on child care and early education programs and providers serving these focal families. Other products of the project include survey instruments that address questions of interest from both the demand and supply sides, address the limitations of other data collection efforts in this area of inquiry and fill a gap in our knowledge; a feasibility test of the proposed design and the survey instruments with the populations of interest; and a resource analysis.

Supporting Quality in Home-Based Care

In FY 2007, ACF contracted with Mathematica Policy Research to identify strategies with potential effectiveness for improving the quality of care provided by home-based child care providers serving low-income children and families, and to develop or refine one or more interventions that will be suitable for implementing in family child care and family, friend, and neighbor care. Other products of the project include a review of the research literature in the area of quality in home-based care, an analytic paper on current state initiatives in support of quality in home-based care settings, and a study design that could be used to evaluate promising interventions.

Interagency Workgroup on Early Childhood

During FY 2006 and FY 2007, ACF actively supported interagency research initiatives with the U.S. Department of Education. In collaboration with the U.S. Department of Education, ACF funded observations of child care quality in a sub-sample of care settings used by the children in the Early Childhood Longitudinal Study-Birth Cohort (ECLS-B). The observations of quality were conducted when the children were 24 months and 48 months of age. In addition, ACF Offices (Child Care Bureau; Office of Planning, Research and Evaluation; Office of Head Start) partnered with other HHS Offices (ASPE and National Institute of Child Health and Human Development) and the U.S. Department of Education (Office of Elementary and Secondary Education; Office of Special Education Programs; Institute for Education Sciences) to coordinate research priorities and activities.

Research Roundtable Meetings

ACF hosted two research roundtable meetings in FY 2006 and FY 2007.

A September 2006 meeting, titled “Developing Measures of Child Care as a Support to Employment and Self-Sufficiency,” explored development of long-term performance measures for the CCDF to be used to assess the impact of child care assistance on low-income families, particularly on their employment. The roundtable brought together child care administrators, researchers, and representatives of Federal agencies that gather administrative and survey data potentially useful for eventual measures.

A December 2006 meeting, titled “Measuring Quality in Early Childhood and School-Age Settings: At the Junction of Research, Policy, and Practice,” explored current quality measures used for identifying characteristics of child care that contribute to children's development and the increasing use of these measures for making policy and practice decisions. The roundtable brought together child care administrators, researchers, and representatives of federal agencies to address questions of quality including: what does the research say about the strength of our existing measures of quality; are there further measures of quality needed; and do States agree on what measures of quality should be included in State quality rating and improvement systems.

EMERGING FINDINGS FROM ACF AND OTHER FUNDED RESEARCH

Reports from previously funded grants, cooperative agreements, and contracts are posted on the Research Connections website (www.childcareresearch.org). Below is a brief synthesis of findings from ACF and other funded research released in FYs 2006 and 2007.

Parent Choice and Patterns of Child Care Use

Shortly after welfare reform legislation (The Personal Responsibility and Work Opportunity Reconciliation Act or PRWORA) was enacted in 1996, ACF contracted with Abt Associates and the National Center for Children in Poverty at Columbia University to conduct a study that would provide information regarding the effects of Federal, State, and local policies and programs on child care at the community level and on the employment and child care decisions of low-income families (<200% Federal Poverty Income Guidelines). In the National Study of Child Care for Low-Income Families, researchers collected information from administrative records, policy manuals, and key informant interviews in 25 communities within 17 States. In the first of three sub-studies, researchers explored the implementation of state child care and welfare policies at the local level, the effects of these policies on the supply and demand of child care, and their effects on the types of child care arrangements used by low-income parents. In the second sub-study, researchers explored the factors that influence choice of care and the role of subsidies in these decisions. The third sub-study was an in-depth examination of family child care, from the perspective of families who use this type of care and the providers who offer it. Selected findings from this study are highlighted below, as are findings from other research.

Child Care Use and Types of Care Used

Analyses of data from the 2005 National Household Education Survey: Early Childhood Program Participation (2005 NHES:ECPP) show that, in 2005, nearly 12.5 million children ages birth through age 6 (not yet in kindergarten) were in some form of regular non-parental care arrangement. Within this age group, close to 51 percent of children birth through age 2 and 74 percent of children 3 to 6 years of age participated in some form of non-parental care arrangement. Analyses of the 2005 NHES: After School survey (2005 NHES:AS) show another 14,124,400 children ages 5 through 13 years (K through 8th grade) in at least one non-parental care arrangement after school. Adding both age groups, approximately 26 million children 13 years and younger participated in some form of non-parental care arrangement in 2005.

In terms of types of care used by families, analyses of the 2005 NHES: ECPP revealed that 39 percent of children younger than 6 years with employed mothers or mothers looking for work were in center-based care for their primary non-parental care arrangement; 38 percent were in some form of in-home care (22 percent were cared for by a relative, whereas 16 percent were cared for by a non-relative). Twenty-three percent of these children used more than one non-parental care arrangement. Patterns of non-parental care use differed by the age of the children. Children ages 3 to 5 years of age were more likely to use center-based care (55 percent) as their sole care arrangement whereas infants (less than 1 year of age) were more likely to use home-based care by a relative (36 percent) or non-relative (27 percent). Children ages 1 to 2 years also used home-based care (46 percent used relative and non-relative care) but not as much as the infants.

In the same year, 40 percent of children attending kindergarten through 8th grade (children 13 years and younger) participated in at least one weekly after-school non-parental care arrangement; close to 56 percent of children 6 to 10 years and 67 percent of children 10 to 13 participated. Across all age groups, the most common type of care used by school-age children was center-based care, not counting self-care. Children in households where the mother was employed full time used after-school non-parental care more frequently (57 percent) than those whose mothers were working part-time or were looking for work (32 percent in both cases).

There is little up-to-date information regarding the child care use of low-income families or the types of care used specifically by low-income families. Data for the National Study of Child Care for Low-Income Families: State and Community Substudy (Layzer & Burstein, 2007) were collected in 2000. Analyses of these data revealed that, at that time, 44 percent of low-income children under age 13 experienced some form of non-parental child care (in addition to school) while their mothers were working or in school. Work hours and schedules are important factors that may impact child care options for low-income families. Of the low-income mothers in the study who were employed outside the home, only 27 percent worked regular hours and schedules; the remainder worked irregular schedules or during non-standard hours.

In terms of the types of care used by low-income families, care by a relative was the most common non-parental care arrangement used by families participating in the National Study of Child Care for Low-Income Families in 2000. Most children (88 percent) were in a single non-parental care arrangement. More than half of children under age 5 were in care for more than 30 hours a week (Layzer & Burstein, 2007).

Updated and detailed information regarding child care use and the types of care used by families will be collected for the National Study of Child Care Supply and Demand, the design phase of which was funded in FY 2007. The sample for this study will be nationally representative and will consist of families from all income levels, but there will be a focus on low-income families with children under the age of 13.

Choosing Child Care

Parents participating in the National Study of Child Care for Low-Income Families reported, in 2000, that the most important considerations in choosing a care arrangement were the safety of the child, the convenience of the arrangement, and the family's relationship with the provider. Families rarely turned to a formal referral source for help in finding care (Layzer & Burstein, 2007).

Paying for Child Care

Of the families participating in the National Study of Child Care for Low-Income Families in 2000, some paid nothing for their child care. Forty-three percent paid nothing for their primary care arrangement, whereas thirty-five percent paid nothing for all arrangements. However, families that paid for child care spent an average of 17 percent of their monthly income on child care, with families living at or below the Federal Poverty Income Guidelines (FPIG) spending 22 percent of their income on child care and families with incomes close to or at 200 percent of FPIG spending 10 percent of their income on child care. Sixteen percent of families using non-parental care received a child care subsidy (Layzer & Burstein, 2007).

Use of License-Exempt and Home-Based Care

Recent research provides needed insight into license-exempt and home-based care. One project is an observational study of child care provided by family, friends, and neighbors (FFN) in Minnesota, and another is an in-depth substudy of the National Study of Child Care for Low-Income Families of family child care (defined in this study as care by an adult, related to the child or unrelated, in that adult's own home and outside the child's own home). Results of these studies have revealed both strengths and areas of concern in these care settings. In both studies, the participating caregivers were attentive and affectionate toward the children in their care, maintained a safe environment and provided developmentally appropriate materials (Layzer & Goodson, 2007; Tout & Zaslow, 2006). In the sites selected for the national study, space in the homes was adequate for play and learning activities and offered a safe and unrestricted environment for children (Layzer & Goodson, 2007). However, in both studies, there was room for improvement. Caregivers did not always take advantage of opportunities to teach children about such things as identifying their emotions, cooperative play, and expanding their vocabulary by extending conversations (Tout & Zaslow, 2006). Learning activities were infrequent in family child care homes. Likewise, too few developmentally appropriate materials were available in many settings. In the majority of settings, children were exposed to appropriate, although frequent, television programming. In the national study, televisions were rarely or never turned off during the day in more than 40 percent of homes. Although a number of safety and positive routines were observed, additional steps could be taken in ensuring the health and safety of the children.

The National Study of Child Care for Low-Income Families also provides information regarding the children and families using family child care, although there is no way of knowing how representative the sample is of all low-income families using family child care. Based on interviews with families, it appears that family child care met the needs of working parents. A majority of the families were headed by a single female parent. Mothers who were working full time had employment that was unstable and, for the most part, did not conform to standard hours. More than one third of the participating children were related to the adult who provided child care for them. Minority families and families in which the participating child was school-aged were more likely to use care by a relative. Parents seemed to be aware of other child care options, however. Parents and providers generally had positive attitudes toward each other, although there were some areas of stress. Many participating children, especially those cared for by relatives, experienced stable child care arrangements in family child care.

Child Care Use Among Children With Special Needs

Numerous studies indicate that families that include a child with special needs experience heightened challenges in finding and maintaining child care. Researchers at the University of Southern Maine (Ward et al., 2006) found that this is especially true for those children whose disability includes behavioral challenges. Caregivers often feel that they do not have adequate training and/or resources to properly care for children with special needs. Parents are further hindered by employers who are unable or unwilling to accommodate the multiple absences that often arise due to issues related to inadequate care.

Child Care Subsidies

State Spending

Results of the National Study of Child Care for Low-Income Families revealed that State spending on child care subsidies grew dramatically in every State included in the study between Federal Fiscal Years (FFY) 1997 and 2001. The increase in spending was most dramatic between FFY 1997 and 1999. In addition to the funding provided through CCDF, States also made use of their own funds and funds from other Federal sources, primarily the Temporary Assistance for Needy Families (TANF) Block Grant, to fund child care. During the same years, States also devoted funds, in most cases far more than the required 4 percent of CCDF funds, to quality improvement efforts, including training and education for child care providers, salary enhancements for providers, consumer education for parents, and child care resource and referral systems for parents, providers, and communities (Collins, Layzer, & Kreader, 2007).

Proportion of Families and Children Served

From FFY 1997 to 2002, the number of children served by child care subsidies nearly doubled in the average study State. Parallel with the spending findings, most of the growth occurred between FFY 1997 and 1999, shortly after PRWORA was enacted. The average percentage of low-income families served increased from 15 percent in April 1997 to 24 percent in April 2002. However, there was wide variation in the proportion of families and children served across study States, ranging from 12 percent to 37 percent in April 2002 (Collins et al., 2007).

Patterns of Care Used by Subsidized Families

In the majority of States participating in the National Study of Child Care for Low-Income Families, more than half of all the subsidized arrangements were in child care centers. A much smaller proportion of subsidies were used to support care by relatives, either in the relative's home or the child's own home. However, there was wide variation among States (Collins et al., 2007).

Subsidy Policies and Practices

States are allowed maximum flexibility in developing their subsidy policies and are amending them as needed to account for changes within the State over time. For example, in 2003, the income eligibility ceiling for child care subsidies for non-TANF families ranged from 37 percent of State Median Income (SMI) to 77 percent of SMI. In some States, income eligibility ceilings remained unchanged since 1999; in other States, the ceilings went up as a percentage of SMI, and in still others they went down between 1999 and 2003. Copayment rules, provider reimbursement rates, and regulatory requirements imposed on providers varied greatly across States and over time (Collins et al., 2007).

There is variation across localities, as well as across States. Researchers at the Urban Institute have conducted several studies exploring the intersection of the child care subsidy system and the TANF system, the policies and practices that are implemented in administering these programs, and their effects on parents (Holcomb et al., 2006). Discussions with administrators, staff, and parents at 11 sites revealed that the child care subsidy system and the TANF system are

closely interconnected, and sites varied in their approaches to simplifying and streamlining processes for staff and parents.

In a study of child care subsidy use in Oregon, researchers explored the reasons why many parents leave the subsidy system after only a few months. Results of their study suggest that parents perceive the cost in time and effort of maintaining a subsidy to be greater than the benefit of the subsidy (Grobe, Weber, & Davis, 2006). This study also considered alternative explanations, including instability in the lives of subsidy recipients and increases in income that cause recipients to become ineligible for subsidy, but these factors did not explain why some parents leave the subsidy system after only a few months.

Child Care Supply

Results of the National Study of Child Care for Low-Income Families revealed that, just as there is variation in policies and practices across States and communities, there is variation in the local supply of child care. For example, the number of regulated child care slots available for children under the age of 13 from families at all income levels varied widely across the study communities, with seven out of 25 of the communities reporting 300 or more regulated slots per thousand children under age 13 (approximately one slot for every three children) and five out of the 25 communities reporting 100 or fewer regulated slots per thousand children (approximately one slot for every 10 children). In about two-thirds of the communities, for both centers and homes, payment rates for subsidies appeared adequate to purchase 75 percent of the regulated child care slots from infant, preschool, and school-age child care providers, assuming providers accepted subsidy payments. In a minority of the study communities, subsidy rates were relatively low, and were only adequate enough to purchase fewer than half of the regulated child care slots. In some communities, particularly large rural areas where there were limited numbers of centers, and large urban counties with substantial numbers of income-eligible children, child care subsidies helped pay for a substantial proportion of child care in centers, facilities and regulated family child care homes (Collins et al., 2007).

Child Care Providers

Understanding the supply of child care, particularly the early care and education workforce, is critical to the development of policies that respond to the training, compensation, and other needs of providers. In turn, policies that result in improved caregiver skills and retention can positively affect families and children.

Reasons for Providing Care

In the National Study of Child Care for Low-Income Families in-depth substudy on family child care, providers who cared for children who were unrelated to them cited the ability to work at home while raising their own children, whereas providers who cared for relatives' children did so to help out one or more family members (Layzer & Goodson, 2007). Caring for other people's children in their home resulted in stress for many providers (Layzer & Goodson, 2007).

Provider Turnover

Child care quality and positive outcomes for children are associated with caregivers who are engaged and responsive to the needs of the children in their care; have established trusting

relationships; and are better educated, trained, and paid. Indications are, however, that turnover continues to be a barrier to continuity and the development of responsive relationships critical to child care quality. Most States are spending some of their CCDF quality funds to address workforce issues including initiatives that link training and compensation.

Recently, researchers in Missouri evaluated a workforce incentive initiative called the “Workforce INcentive Project (WIN),” which provided biannual cash payments to licensed child care providers according to their education level. The primary goal of the program was to reduce child care staff turnover, especially among educated and experienced staff. Overall, participants in the WIN program had lower turnover rates over 20 months than a comparison group of non-participants (Gable, Rothrauff, Thornburg, & Mauzy, 2007).

Workforce Factors Affecting Quality

A number of studies have examined the relationship between quality and licensing, accreditation, and professional memberships, as well as characteristics of the child care and early education workforce that are linked to children’s successful transitions to elementary school, including professional development, education and training. A review of the research on the relationship between early childhood teacher education and training and the quality of child care and early education environments (Tout, Zaslow, and Berry, 2005) showed that there were few consistent or conclusive findings, although the limited evidence available may lean toward an impact of education. Recently, the Midwest Research Consortium examined a sample of center-based providers of early care and education and found that the Child Development Associate (CDA) credential was associated with better quality care for preschoolers, although not for infants and toddlers (Torquati, Raikes, & Huddleston-Casas, 2007). For a recently funded project, Supporting Quality in Home-Based Care, researchers will identify potentially effective strategies for improving the quality of care provided to low-income children in home-based settings.

Child Care Quality and Outcomes for Children

It is difficult to draw causal conclusions regarding the effect of child care quality on child outcomes because families with particular characteristics select care for specific children from the options available to them. Further, both quality and child outcomes are complex, multi-dimensional, and hard to measure. Over the years, however, researchers have consistently found associations between child care quality and children’s developmental outcomes. For example, in the National Institute of Child Health and Human Development NICHD Study of Early Child Care (SECC), higher quality care has been linked with better cognitive, language, and school-readiness outcomes, as well as some socioemotional and peer outcomes (NICHD Early Child Care Research Network, 2006). Such positive outcomes, particularly in vocabulary, persist into the early elementary school years (Belsky et al., 2007).

In recent research funded by ACF, Tran and Weinraub (2006) examined data from the NICHD SECC to explore the effects of quality, stability, and multiple child care arrangements during infancy. Their analyses revealed that multiple care arrangements involving family members were associated with better language outcomes, whereas multiple care arrangements involving non-family members were associated with worse language outcomes. Yet, infants who were in multiple arrangements *and* who received low- to moderate-quality care in the primary care arrangement had lower language abilities at 15 months of age, whereas infants who were in

multiple arrangements and received *high*-quality care had higher language scores. In terms of language development, a high-quality primary arrangement may buffer the effect of multiple care arrangements.

CHILD CARE RESEARCH GRANTS (FY 2006)

In FY 2006, ACF awarded \$74,948 for three new Child Care Research Scholars Grants. These three projects are summarized below. In addition to these new projects, ACF continued funding for grant projects begun in prior years. These included seven Policy Research Grants, five Child Care Research Scholar Grants, and three Cooperative Agreements.

Child Care Research Scholars Grants

- **Northwestern University, “Child Care during the First Year of School: How Extent, Type, and Quality Relate to Child Well-Being” (\$27,506).** A systematic examination of the links between extent, type and quality of child care and children's social-emotional and cognitive well-being using the Early Childhood Longitudinal Study - kindergarten cohort (ECLS-K). The sample for this study includes approximately 14,000 kindergarteners in the ECLS-K. The research explores the full range of child care options (formal and informal), focusing on sub-groups of children including low-income and subsidy-eligible. This project was completed in 2007.
- **Cornell University, “Patchworks and Developmental Sequences: Impacts of Multiple Child Care Arrangements on Child Development” (\$23,433).** A study of the impacts on child development of multiple child care arrangements, including parental care, formal child care, and informal arrangements with relatives, neighbors, and babysitters, how these influences may change with a child's age, and how policy factors influence the number and sequence of child care types. The project uses the NICHD Study of Early Child Care to examine the number and type of child care arrangements children experience, both at one point in time and over their first five years, on child social-emotional and behavioral outcomes. This dataset allows for examination of how subsidy requirements and child care regulations affect the use and impacts of child care combinations. This project will be completed in 2009.
- **University of Maryland, “Maintaining Employment: The Impact of Child Care Subsidies” (\$24,009).** An examination of the relationship between child care subsidies and child care-related work disruptions that affect mothers' ability to maintain steady employment and work productively, including considerations of whether this relationship is mediated by variables that affect the type of care chosen, and whether subsidies impact the desire to change child care arrangements. The study examined two samples: (1) a sample, collected in 2005-2006, of 40 low-income employed mothers who were interviewed twice--once while on the wait list for child care subsidies, and again eight months later, when the majority had subsequently received a subsidy--allowing for a quasi-experimental research design; and (2) a sample of predominately unmarried mothers with children aged 1-3 years from the Fragile Families and Child Well-Being study. This project was completed in 2007.

CHILD CARE RESEARCH GRANTS (FY 2007)

In FY 2007, ACF awarded \$119,074 for four new Child Care Research Scholars Grants, \$2,197,737 for eight new Child Care Policy Research Grants, and \$187,205 for one new State Child Care Data and Research Capacity Cooperative Agreement. These 13 projects are summarized below. In addition to these new projects, CCB continued funding for grant projects begun in prior years. These included one Child Care Research Scholar Grant and one Cooperative Agreement.

Child Care Research Scholars Grants

- **University of Denver, “Goodness of Fit in Child Care: Examining the Contributions of Child and Caregiver Characteristics to Stress Reactivity” (\$30,000).** Previous work has shown that full-day child care is associated with increased physiological stress for many young children. Efforts to understand this phenomenon have demonstrated that quality of caregiving is important for predicting the proportion of children who exhibit a rising pattern of the stress-sensitive hormone cortisol across the day at child care. Understanding which children find child care particularly stressful and what caregiving behaviors are most important for buffering them from stress is needed. The present study examines whether: (1) child temperament and attachment to parents predict cortisol reactivity across the day at child care; (2) whether secure attachment to child care providers buffers children against the stress reactivity; and (3) whether child care providers are able to buffer stress reactivity in a structured one-on-one interaction. This project will be completed in 2009.
- **Harvard University, “Examining the Effects of Subsidy Eligibility on Parent Employment, Child Care Arrangements and Children’s Development” (\$30,000).** Federal law limits eligibility of child care subsidy receipt to a maximum of 85 percent of a State’s median income, but States may choose to set thresholds below this level. As a result, there is a substantial amount of variation in the thresholds States set and variation within States, over time. This variation in eligibility is used in the present study to predict changes in parent employment, child care arrangements and child outcomes. Specifically, this project examines the impact of eligibility for child care subsidies, as determined by state income eligibility thresholds, on parents’ labor force participation and child care choices. In addition, the study investigates whether the change in child care and parent employment experiences by eligible families has subsequent effects on child behavior and school readiness. This project will be completed in 2009.
- **University of Chicago, “Child Care Subsidies and the Work Effort of Single Mothers” (\$30,000).** Post-welfare reform has introduced a new set of policy questions around child care subsidy receipt. The present study addresses policy relevant questions that seek to better articulate the relationships between single-mothers’ decisions about work, child care and subsidy access. In addition, the study explores the relative importance of process and structural measures of child care quality in supporting children’s development. This project will be completed in 2009.

- **University of Wisconsin-Madison, “The Role of Child Care Subsidies in the Economic Well-Being of Low-Income Families” (\$29,074).** This project explores the dynamics of child care subsidy use among low-income families as well as examines the factors associated with stable (long-term) subsidy use and positive economic outcomes at the exit of subsidy receipt. In addition, this research provides estimates in the extent to which child care subsidy receipt is associated with changes in mothers' earnings and how these relationships differ (or not) across racial/ethnic subgroups. The results will provide needed information regarding long-term patterns of child care subsidy receipt in Wisconsin and the extent to which subsidies contribute to self-sufficiency for low-income working families. This project was completed in 2008.

Child Care Policy Research Grants

- **Columbia University, Teachers College, “Subsidy Policies, Preferences and Perceptions of Quality, Child Care Outcomes: A Study of Families in NYC” (\$300,000).** The goal of this project is to examine the relations among subsidy policies, parental preferences and perceptions of child care quality, and three child care outcomes: duration of subsidy use, continuity of care, and the type of care selected. There is a particular focus on low-income working parents in New York City. The following research questions are addressed: (1) What are the dynamics and duration of subsidy use? Are there variations across sub-populations by age of child, TANF status, race-ethnicity, immigration status and child disability status?; (2) What are parents’ preferences for child-care arrangements? Do the child-care choices parents make reflect their preferences? How do parents’ experiences with the subsidy administration program affect utilization of formal and informal care? How are parents’ perceptions of quality and their work hours associated with subsidy receipt and selection of formal or informal care?; and (3) How does subsidized child-care affect duration of subsidy use and promote continuity of care in formal and informal settings? This project will be completed in 2010, and reports will be posted to the Research Connections website.
- **University of Southern Maine, “New Americans: The Child Care Choices of Parents of English Language Learners (ELL)” (\$228,918).** The goal of this study is to examine the individual, organizational and systemic factors that influence the child care choices of low income immigrant and refugee families of ELL children. This study examines efforts made and challenges at the provider, community and state level to address the needs of this population. The researchers collect data across two U.S. cities which include large populations of Mexican immigrants (Denver, CO) and Somalian, Sudanese and Cambodian immigrants (Portland, ME). Specifically, the researchers conduct focus groups of parents and interviews with the community organizations, community leaders and service providers who interact with them; they conduct surveys of child care providers and kindergarten teachers in counties with high concentrations of the study populations; and they review relevant federal, state and local laws and policies. This project will be completed in 2010, and reports will be posted to the Research Connections website.
- **Wellesley College, “The Massachusetts Child Care Study: Child Care Subsidies, Child Care needs and Utilization, and Choice of Care Among Low-Income Working Families” (\$238,046).** This study examines the role that child care resource and referral

agencies and community agencies play in the parental access and choice of child care. Specifically, the researchers examine the extent to which different types of child care assistance support families' abilities to obtain and maintain employment and self-sufficiency, and the extent to which child care subsidy policies and practices affect family choice and access to quality child care that meets their needs. The multi-method study includes the use of Massachusetts administrative data, a review of lead agency plans for the CCDF program, key informant interviews with CCDF administrators and subsidy administration agencies, and original data collection. The original data collection consists of surveys of licensed care providers, low-income families using these providers, and families using kith and kin care, with a focus on the communities of Boston and Somerville, MA. This project also identifies models used in other States to support choice of care for low-income families. This project will be completed in 2010, and reports will be posted to the Research Connections website.

- **Child Trends, “The Effects of Quality Information and Financial Assistance on Child Care Choices and Employment Outcomes of Low-Income Families in Minnesota” (\$300,000).** The study builds on an existing evaluation documenting the effectiveness of a pilot quality rating and improvement system (QRIS) in improving outcomes for children, families, and programs across Minnesota’s early care and education system by examining how low-income families make child care decisions. The project tracks QRIS and non-QRIS communities for two years to gather data for descriptive analyses and the testing of econometric models. The following research questions are addressed: (1) What factors affect awareness of the QRIS data and the family’s ability to access the data? What are the characteristics of families using the QRIS? (2) How does the QRIS affect choice of child care? Does the QRIS affect the use of subsidies? (3) What influences the use of subsidies? (4) How do subsidies affect choice of child care? Do subsidies change the type or quality of child care chosen? Is the use of subsidies associated with more stable child care arrangements over time?; (5) What family, community, and child care characteristics affect child care stability and reliability, and employment outcomes? How do parental perceptions of the quality and reliability of care influence the relationship between family/community/child care characteristics and child care-related work disruptions? Do child care-related work disruptions significantly predict job tenure, job advancement, and wage increases? This project will be completed in 2010, and reports will be posted to the Research Connections website.
- **Urban Institute, “Child Care Choices of Low-Income Families with Vulnerabilities” (\$299,886).** This project explores the ways in which low-income, vulnerable families choose child care. The goal is to identify the family characteristics and contextual factors that expand or limit child care choices. The three-year project takes place in several low-income, urban communities. The focus is on vulnerable families, including families who have children with special needs, parents who are English language learners or immigrants, parents receiving TANF, and children at risk of maltreatment. The research includes a family study, in which parents are interviewed regarding their decision-making processes related to child care, and a community study, in which key community members are interviewed regarding the community and policy contexts that affect child care choices. The following research questions are addressed: (1) What factors influence choice of care among low-income working families in a diverse set of urban neighborhoods? How do different

families with particular vulnerabilities make child care choices?; (2) How do child care choice processes of parents overall, and particularly families who have special vulnerabilities, interact with several key contextual factors?; and (3) What family characteristics or contextual factors seem to particularly expand or constrain the child care choices of low-income families overall, and the lives of vulnerable families in particular? Which of these seem amenable to policy strategies to support choices for low-income working families, and what should these strategies be? This project will be completed in 2010, and reports will be posted to the Research Connections website.

- **University of North Carolina Chapel Hill, “Choice of Care Among Low-Income Working Families: A Study of Latino Families in the New South” (\$300,000).** This study examines the relationship between the childcare utilization patterns of low-income Latino families and family characteristics, childcare program characteristics and the extent to which type and quality of care meet the needs of low-income Latino families. Data are collected from interviews with 450 families in North Carolina who vary in the kind of child care they use (i.e., center based, family home and parent/relative care). In addition, the researchers examine 120 center-based or family child care home programs where the children attend as well as conduct 45 in depth ethnographic parent interviews. Findings from this study contributes to increased understanding of Latino families’ child care needs, preferences for types of care and barriers to child care access, utilization patterns and provides information about what constitutes high quality, culturally responsive child care for this fast growing segment of the country’s population. This project will be completed in 2010, and reports will be posted to the Research Connections website.
- **Education Development Center, “Impact of Pre-K Expansion on Child Care for Low-Income Families” (\$249,999).** The goal of this project is to examine the impact of prekindergarten expansion on child care quality and supply for low-income working families. The project consists of two components. The first is a three-year longitudinal investigation to identify changes in child care availability and quality of care for low-income working families across types of providers and for different ages of children. This component takes place in counties in New York and Ohio that have contrasting policies regarding prekindergarten expansion. The following research questions are addressed: (1) How do expanded prekindergarten programs affect change over time in the overall supply of child care and in the supply of child care for the children of low-income working families?; (2) How does the configuration of the child care market change over time as prekindergarten programs expand?; (3) How does the expansion of prekindergarten programs affect child care subsidy utilization for low-income working families?; (4) How is expansion of prekindergarten programs related to the quality of child care, particularly for low-income families?; and (5) Does the expansion of prekindergarten programs contribute to a higher turnover rate of early care and education teachers? The second component of the project utilizes a national survey to address the following research questions: (1) To what extent do state prekindergarten policies address the needs of low-income working families? and (2) How are funds and resources that support low-income parents’ workforce participation being used by States to support prekindergarten efforts? This project will be completed in 2010, and reports will be posted to the Research Connections website.

- **Children’s Institute, “The Impact of Childhood Behavior Problems on Child Care and Employment Decision-Making: A Nationally Representative Panel Study” (\$280,888).** The goal of this study is to examine associations between childhood behavior problems and the stability of child care and employment among working families. Particular attention is paid to childhood behavior problems that may go undiagnosed and autism. The study follows a nationally representative sample of 1,500 parents and children ages 0-13 selected from Gallup panel data which includes an oversample of low-income respondents, and a comparison group of parents of children with autism, also selected from Gallup panel data. Both descriptive and multivariate analyses are conducted, and an instrumental variable approach is applied to address possible endogeneity. The expected benefits of this project are to document the influence of behavior problems on child care and employment at the national level, to inform CCDF eligibility criteria for children ages 0-13 with undiagnosed developmental and/or behavior problems, and to build research capacity by linking child care research to autism research and develop two nationally representative longitudinal public domain datasets. This project will be completed in 2010, and reports will be posted to the Research Connections website.

State Child Care Data and Research Capacity Cooperative Agreements

- **South Carolina. Department of Social Services, “South Carolina Child Care State Research Capacity Building Project” (\$187,205).** A research project with the goal of leveraging the state of South Carolina’s current data system and building its research capacity to better track South Carolina’s children and their families. Specifically, the project aims to: (1) create a child-based database for the Child Care Licensing Operating System to house data on children in child care; (2) develop a system of linked data sets from multiple service providers to capture key data about families and children under the age of 6; and (3) investigate the impact of the Child Care and Development Fund (CCDF) on improving the quality of child care available to, and utilized by, low-income working parents and at-risk families.

PART VII: TRAINING AND TECHNICAL ASSISTANCE

Federal regulations [45 CFR Section 98.60(b)(1)] set aside a quarter of 1 percent (0.25 percent) of the Federal Child Care and Development Fund (CCDF) for the purpose of providing technical assistance (TA) to CCDF grantees. In each of FY 2006 and FY 2007, over \$12 million was allocated to meet the TA needs of State, Territorial, and Tribal CCDF grantees. The Child Care Bureau (CCB) provides a variety of TA and professional development services targeted to support CCDF grantees and their staff in identifying and implementing effective policies and practices that build integrated child care systems to help parents work and to promote the healthy development of children in child care.

In partnership with a network of contracted TA providers and Administration for Children and Families (ACF) Regional Offices, the Bureau identifies exemplary research and promising practices and brings CCDF grantees together to learn from one another. CCB delivers evidence-based TA through links with the ACF Office of Planning, Research, and Evaluation (OPRE) team and its partners. The Bureau's expert TA providers, many of whom have worked as State child care administrators, provide direct consultation to CCDF administrators and child care stakeholders in States and communities. In addition, the TA partners provide information and outreach to parents, child care providers, institutions of higher education, and other Federal agencies and national organizations.

EMERGENCY PREPAREDNESS AND RESPONSE (EPR) TECHNICAL ASSISTANCE

The Child Care Bureau (CCB) strengthened and expanded emergency preparedness and response efforts which initially began in the aftermath of Hurricanes Katrina and Rita.

The destruction caused by the Gulf Coast hurricanes highlighted many areas in which the Federal and State governments could improve upon in order to better respond to the needs of children and families, especially in the area of child care. In response, CCB has broadened efforts to work with CCDF grantees to improve child care emergency preparedness and response planning as part of a sustained long-term technical assistance effort.

A primary goal of the CCDF program is to help ensure early childhood programs support children's healthy growth and development; this goal becomes especially important in the event of a major disaster or emergency, as children are among our most vulnerable populations. Disasters not only create a greater need for child care financial assistance among families struggling to rebuild their lives, but also can substantially affect the child care provider community causing damage and destruction of child care homes and facilities. These are significant challenges for States and localities struggling to provide services to families and rebuild critical infrastructure in their communities. CCB has become more involved with our State, Tribal, and Territorial grantees to provide resources that can help meet these challenges and support the continuity of early care and education services. The following paragraphs summarize key activities undertaken by CCB and in FY 2006 and FY 2007 in response to child care emergency preparedness and response issues:

Response to Child Care Emergency Preparedness Issues

- CCB completed a Program Instruction (ACYF-PI-CC-06-01) to provide instructions on how to apply for waivers included in P.L. 109-148, which provided the HHS Secretary with temporary authority to waive certain provisions of the Child Care and Development Block Grant (CCDBG) Act of 1990 for States affected by the Gulf hurricane disasters and those States serving significant numbers of individuals affected by the Gulf hurricane disasters. Under this waiver authority, HHS approved child care waivers to Louisiana, Mississippi, and Texas to access \$60 million in funds for child care services in support of recovery efforts. The waivers lifted Federal requirements for State matching funds in order for States to draw down their full allotment of CCDF funding.
- CCB completed an Information Memorandum (ACYF-IM-CC-05-03) to provide guidance to grantees on the use of CCDF funds in responding to Federal or State declared emergency situations. Since funds are awarded to States on a formula basis, there are no additional CCDF funds available for distribution in the event of a Federal or State declared emergency. However, the Federal CCDF statute and rules provide States affected by such emergency situations with some flexibility to continue providing child care services despite disruptions to families and providers. This IM describes some of the options available to States and actions required to be taken.
- In December 2006, the Administration for Children and Families (ACF) created the Office of Human Services Emergency Preparedness and Response (OHSEPR). This new office is tasked with implementation and coordination of ACF program and human services emergency planning, preparedness, and response during nationally declared emergencies. CCB has worked closely with OHSEPR to raise awareness among Federal agencies and national emergency management organizations about issues specifically related to the provision of child care services. In conjunction with OHSEPR, CCB has initiated a workgroup to develop an emergency preparedness and response plan specific to the CCDF program.
- CCB added a question to the FY2008-2009 CCDF State Plan Pre-Print requiring grantees to indicate whether they consulted and/or coordinated with their State agency responsible for emergency preparedness and planning in development of the State Plan for operation of the child care program. States also were asked to submit emergency preparedness plans they developed for administering child care and early development services. CCB will use this information to facilitate development of best practices and information sharing among States.
- CCB developed the Child Care Resources for Disasters and Emergencies Web site. The site is available at <http://nccic.acf.hhs.gov/emergency>. The site includes a wide range of information and resources about emergency preparedness, disaster and emergency response efforts, recovery resources, and lessons learned.

THE CHILD CARE TECHNICAL ASSISTANCE NETWORK (CCTAN)

CCB's technical assistance services are provided through the coordinated efforts of a network of individual contractors that comprise the Child Care Technical Assistance Network (CCTAN). The CCTAN partners provide information, training and technical assistance to help States, policymakers and their partners administer CCDF funds and programs. During FY 2006 and FY 2007, CCTAN assessed the needs of CCDF grantees, provided strategic direction, and shared

resources between projects, collaborated and coordinated efforts to improve services. Projects in the CCTAN vary in scope and provide technical assistance across full age spectrum and care settings.

Afterschool Investments Project (AIP)

Afterschool Investments Project (AIP) provides TA to CCDF grantees and other State and local leaders supporting out-of-school time efforts. CCDF is one of the largest public funding sources for out-of-school time programs; over a third (36 percent) of CCDF children are aged six through 12. Many States devote a significant portion of CCDF quality dollars to enhance and expand school-age programs. The project provides practical tools and/or resources that help CCDF grantees make strategic decisions about afterschool programming. It also identifies other major programs and sectors that are potential partners for CCDF grantees in supporting out-of-school time programs and provides models, strategies, resources, and tools for coordination with other programs and sectors.

FY 2006–FY 2007 Accomplishments

CCB developed tools and materials to guide CCDF grantees and others in their efforts to expand and strengthen afterschool policy, programs and related activities. In 2007 alone, staff disseminated 6,650 hard copies of these reports and reached a still wider audience through targeted email dissemination and a project website. The eight resources developed in FY 2006 and 2007 addressed, for example, promoting quality through State Child Care Regulations, promoting nutrition and fitness in afterschool, and building professional development systems for afterschool programs.

- Delivered targeted technical assistance to State child care administrators and other state leaders around building partnerships and developing state policies that promote investments in high-quality afterschool programs; through eight site visits; 17 consultations by phone or in writing; and 27 presentations at national or regional conferences.
- Launched a re-designed Afterschool.gov, an online portal for all federal resources on afterschool programs. Staff coordinated on behalf of the Child Care Bureau the Federal Interagency Oversight Committee, which serves as a forum for information sharing about federal investments in afterschool.
- Updated State profiles allowing policymakers, state child care administrators, providers and other afterschool stakeholders to quickly assess the demographic, administrative, fiscal and program landscape for afterschool initiatives in each state, including an online tool for state comparisons and a national overview.

Center for the Social and Emotional Foundations of Early Learning (CSEFEL)

The Center on the Social and Emotional Foundations of Early Learning (CSEFEL) promotes the social and emotional development of children as a means of preventing challenging behaviors in early childhood programs. Jointly funded by the Child Care Bureau and the Office of Head Start, this collaborative project initially began in FY 2001. Vanderbilt University serves as the grantee for the project. Vanderbilt University works with other nationally recognized researchers and trainers from a variety of other universities and early childhood organizations,

including the University of Illinois at Urbana-Champaign, the University of Colorado at Denver, the University of South Florida, Georgetown University, and ZERO TO THREE (National Infant & Toddler Initiative).

FY 2006–FY 2007 Accomplishments

CSEFEL has identified and is working with collaborative networks in eight States (Colorado, Iowa, Maryland, Nebraska, North Carolina, Vermont, Tennessee and Hawaii). The overall goal of the state work is to foster professional development that will sustain the use of effective practices at the local level. Specifically, CSEFEL is supporting statewide planning teams to (1) develop a cadre of trainers and coaches, (2) create demonstration programs that can show what evidence based practices look like on a daily basis, (3) improve child social skills and school readiness, and (4) develop state infrastructure to sustain the effort and outcomes.

- CSEFEL facilitated strategic planning and professional development with teams of early care and education workforce in an additional 16 States and US territories to improve children’s social and emotional development through better classroom practices in child care and Head Start.
- Work was completed on three *Training Modules* focused on the birth-three age range. These new modules provide the materials needed for training early childhood practitioners including PowerPoint presentations, speaker notes, handouts, participant activities, video clips, and case studies. Presently, these modules function as companion modules to the CSEFEL training materials that focused on practices related to working with children 2 – 5 years.
- CSEFEL collaborated with several high profile professional early childhood organizations, including the National Association for the Education of Young Children (NAEYC,) National Head Start Association (NHSA), National Association of Child Care Resource and Referrals Agencies (NACCRRA), National Association for Bilingual Education (NABE), National Association for State Mental Health Program Directors (NASMHPD) and the Office of Special Education Programs (OSEP’s) Technical Assistance Center on Social Emotional Intervention for Young Children (TACSEI). In 2006, CEEFEL in partnership with the above organizations completed the fifth annual National Training Institute on Effective Practices for Supporting Young Children’s Social Emotional Development. The Institute provided intensive training for child care providers and teachers, early intervention specialists, and other early childhood professionals.
- Worked with over 50 local demonstration sites to implement evidence-based practices in early childhood settings; activities included training for early care providers, developing cohorts of local trainers, creating demonstration classrooms, measuring child outcomes and developing materials to support families.

Child Care Aware (CCA)

Child Care Aware (CCA) connects families to local child care experts who help them understand what to look for in a child care setting and how to locate child care and other parenting

resources. The CCA Web site and toll-free hotline provide easy access to approximately 800 local child care resource and referral agencies (CCR&R) as well as consumer education materials for parents.

FY 2006–FY 2007 Accomplishments

- *The Child Care Aware National Toll Free Hotline:* In FY 2006, CCA served 17,000 English-speaking and Spanish-speaking families by providing consumer education information and referrals to their local Child Care Resource & Referral (CCR&R) agencies. This is a 26 percent increase as compared to FY 2005.
- CCA distributed nearly 350,000 publications in FY 2006 to families through exhibits, hotline calls, and ChildCareAware.org. A new publication in 2006 included: *How to Find High-Quality Child Care in your Community: a pocket size guide to finding and choosing high-quality child care and child care resources.*
- Child Care Aware launched a web-based “Decision Making Tool” in English and Spanish. *A Child Care Budgeting Calculator* that allows parents to understand how their child care choices will affect their family budgets. Since the launch, there have been nearly 7,000 web hits.
- The Child Care Aware Quality Assurance Program delivered a national, voluntary accreditation system for community CCR&Rs agencies designed to ensure that the child care consumer information and referrals they offer to parents is consistent and meets stringent quality standards. FY2006 highlights include:
 1. A total of 116 agencies received Quality Assurance certification
 2. 83 agencies were actively engaged in the certification process
 3. 1,000 Consumer Education Specialists from the 83 agencies participated in 75 web-based training sessions that were offered on 11 subjects.

Child Care Information Systems Technical Assistance Project (CCISTAP)

The Child Care Information Systems Technical Assistance Project helps States, Territories, and Tribes collect and submit accurate and timely data about services provided under CCDF. Grantees face many challenges in data collection, management, and reporting, including outdated systems, the use of multiple systems across jurisdictions, and limited communication between information system staff and child care program staff. The project offers a wide range of support including free software, computer-based training, a toll-free hot line, data review and analysis, and onsite visits to help resolve complex data collection and system problems. In addition, the project analyzes data to paint a picture of child care services, including the number of families served and the characteristics of families and providers participating in CCDF.

FY 2006–FY 2007 Accomplishments

- Provided extensive customized technical assistance (TA) to Alabama, Eastern Band of Cherokee, Florida, Kansas, Maine, Mississippi, North Carolina, Oklahoma, Oregon, and Pennsylvania.

- Deployed enhancements to the Child Care Bureau Information System (CCBIS), including the development of new standard reports, new data quality reports, additional data extraction capabilities, improved data processing time, and increased statistical accuracy.
- Developed and prepared child care data for web publication and performed numerous data analyses.
- Developed public use samples of administrative case level data for the child care research community.
- Deployed a revised Child Care Data Tracker to assist Tribes and Territories manage their administrative data and fulfill their reporting requirements. This software has had an important multiplier effect; it is being used in several States to enhance their reporting capabilities.

Healthy Child Care America (HCCA)

Healthy Child Care America (HCCA) is a collaboration of health professionals, child care providers, and families that collaborates to maximize the well-being and school readiness of children in early education and child care programs. CCB sponsors TA for Healthy Child Care America, in partnership with the Maternal and Child Health Bureau (MCHB). MCHB provided grants to States and Territories to coordinate statewide early childhood comprehensive systems (including child care health and safety efforts). Healthy Child Care America, a cooperative agreement among MCHB, CCB, and the American Academy of Pediatrics (AAP), increased child care provider and health professional partnerships in all States, Territories, and Tribes. These partnerships and program resources help ensure that children in child care have access to safe physical environments and quality medical, dental, and preventive health services, including immunization screening.

FY 2006–FY 2007 Accomplishments

- Implemented the “Reducing the Risk of Sudden Infant Death Syndrome (SIDS) in Child Care Evaluation Project” in California, Louisiana, Montana, and Pennsylvania, resulting in the identification of baseline measures to support additional SIDS reduction activities.
- Mobilized a network of pediatrician child care experts across all 50 States that provide consultation to child care providers in order to improve the health and safety of children in child care and engage parents in discussions about quality care and their child care options.
- Provided resource materials and presented Health and Safety Educational Sessions to over 150 Child Care Professionals, resulting in a request to provide follow up technical assistance activities.
- Developed and distributed a Health and Safety E-Newsletter for Caregivers and Teachers. This quarterly newsletter includes practical steps that caregivers and teachers can take to promote the health and development of children in child care. Each newsletter is brief, and focuses on one health and/or safety topic.

- Revised the AAP brochures, A Parent’s Guide to Safe Sleep Practices, A Child Care Provider’s Guide to Safe Sleep Practices, and Tummy Time to reflect the revised AAP policy on SIDS and infant sleep positioning released in October 2005. Copies of these brochures were mailed to more than 1,200 health care and child care professionals. The brochures are also posted online where they can be downloaded and printed free of charge.

National Child Care Information Center (NCCIC)

NCCIC is a clearinghouse that provides the latest information and technical assistance (TA) services to the early and school-age child care communities in the country. NCCIC regularly provides CCDF Administrators with information and TA via its Web site, telephone consultation, summaries of innovative practices, audio conferences, Webinars, and customized and onsite consultation. In addition, NCCIC continually provides stakeholders with resources regarding pertinent child care issues, such as CCDF subsidy administration, licensing regulations, quality rating and improvement systems, professional development, accountability, and strategies for collaborating with State early childhood programs.

FY 2006–FY 2007 Accomplishments

- Responded to more than 630 TA requests and nearly 900 information requests from State, Tribal, and Territorial grantees; other State and Federal agencies; and national organizations.
- Provided information services, including services in Spanish, to parents, providers, students, and the general public in response to nearly 3,000 telephones, written, and electronic requests.
- Attended, facilitated, presented, and/or exhibited at more than 18 conferences, including the Child Welfare League Annual Conference, Birth to Three Conference, National Head Start Hispanic Institute, and the first annual Early Childhood Partners Meeting.
- Developed a workplan to help States establish partnerships, alliances, and coordination strategies with Federal, State, local, Tribal, and private agencies. This plan is called the Partnerships, Alliances, and Coordination Techniques (PACT) initiative. NCCIC is currently designing and developing eight PACT training modules.
- Researched and developed 98 information products in response to requests from Federal and State decision makers on key topics, including subsidy administration, quality rating and improvement systems, funding, professional development of early childhood educators, regulations/standards, literacy, program assessment and evaluation, and partnerships.
- Helped States plan improvements in their early care and education systems and supported them in developing or furthering their work on professional development and accountability systems linked to Early Learning Guidelines (ELG).

National Infant & Toddler Child Care Initiative (NITCCI)

The National Infant & Toddler Child Care Initiative (NITCCI) works collaboratively with CCDF administrators and other partners to improve the quality and supply of infant and toddler child care, using learning communities and other TA approaches to develop a deeper knowledge about specific elements of the early care and education system that support quality for infant and toddler child care. The project developed a unique strategic planning process for States and Territories to map current efforts, prioritize areas of need, and create an action plan.

FY 2006–FY 2007 Accomplishments

- Conducted four different national audio conferences for State and Territory child care administrators on: Infant/Toddler Specialist Consultation, Developing and Implementing an Infant/Toddler Credential, Quality Rating and Improvement Systems that Meet the Needs of Infants and Toddlers, and Effective Supports for Informal Caregivers.
- Convened a national institute that focused on Infant/Toddler Specialist Networks, where 120 participants took part. A CD of resources was developed as a resource for the day.
- Developed various materials including technical assistance paper, CDs and planning guides for use by State and Territories.
- Conducted three Learning Communities in the areas of Infant/Toddler Specialist Networks, Infant/Toddler Credentials, and Quality Rating and Improvement Systems that include infant and toddlers.
 1. Twenty-eight teams from States and Territories (a total of 193 individual members) took part in the Learning Communities.
 2. Each Learning Community team developed a mission, goals and objectives. Three publications resulted from each Learning Community: *Infant/Toddler Early Learning Guidelines*, *Infant/Toddler Child Care Credentials*, and *Quality Ratings Systems Design Elements for Infants and Toddlers*.

Tribal Child Care Technical Assistance Center (TriTAC)

The Tribal Child Care Technical Assistance Center (TriTAC) provides targeted TA to Tribal grantees that encompass approximately 500 Indian Tribes. TriTAC builds capacity in Tribal child care programs by linking Tribes to share information and innovations. The project facilitates peer-to-peer learning and provides specialized training in program administration and quality improvement in Tribal programs. It operates a toll-free information and referral line to respond to grantees' TA inquiries and also maintains TA resources on the project's Web site.

FY 2006–FY 2007 Accomplishments

- Tribal technical assistance (TA) was expanded to provide more targeted assistance on-site at tribal CCDF programs, which has enhanced program activities - - particularly those related to school readiness, and improved subsidy administration functions, including data collection, succession planning and program accountability.

- TriTAC provided cluster trainings for tribal child care administrators on critical topics that were identified by tribal grantees and Child Care Bureau staff. For example, in 2006 tribal cluster training on “Construction and Renovation of Child Care Facilities” focused on the real world challenges of constructing and renovating early childhood and school-age care facilities in tribal communities. Another training “Improved Management, Improved Outcomes” was jointly sponsored by the Child Care Bureau, which administers the CCDF, and the TANF Bureau, which administers the Tribal Temporary Assistance for Needy Families (TANF) program. This training assisted Tribal TANF and CCDF program managers in developing management techniques and partnering strategies to help them successfully administer their programs.

- In FY 2007, 16 Tribes benefited from on-site TA activities conducted by CCB TA contractors, and 10 State/Regional TA events were also held that included Tribes. Technical assistance activities have helped to improve tribal plan submissions and also have assisted Tribes with CCDF plan implementation issues, including: the development and enhancement of CCDF policies and procedures; data collection and submission; and early care and education activities.

- A booklet “Tribal Child Care and Development Fund Guide for New Administrators” was developed in conjunction with the Tribal New Administrators Training in December 2006. This resource guide provided in-depth information on the fundamentals of CCDF program administration, including regulatory and statutory requirements. Program implementation issues, including family and provider eligibility, health and safety standards and financial management/budgets were also addressed. Examples of successful collaborations and partnerships were highlighted as a way to feature effective strategies that could be adapted by other tribal CCDF programs.

FY 2006 CCDF Data from Aggregate and Case-Level Reports

The following notes are applicable to all FY 2006 tables derived from ACF-801 data (which include Tables 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 10a, 11a, 14a, and 15a). Notes specific to FY 2006 tables derived from ACF-800 data follow each table (which include Tables 9a, 12a, and 13a).

1. The source for this table is ACF-801 data for FFY 2006.
2. All counts are adjusted numbers of families and children unless otherwise indicated. These adjusted numbers represent the number funded through CCDF only. The adjusted number is the raw or unadjusted number reported by the State multiplied by the pooling factor as reported on the ACF-800. DC has indicated that the pooling factor reported on the ACF-800 is not applicable to the ACF-801. This report takes this factor into consideration in calculating the adjusted numbers or percentages.
3. All percentages are based on adjusted numbers of families and children unless otherwise indicated. These adjusted numbers represent the number funded through CCDF only. The adjusted number is the raw or unadjusted number reported by the State multiplied by the pooling factor as reported on the ACF-800. DC has indicated that the pooling factor reported on the ACF-800 is not applicable to the ACF-801. This report takes this factor into consideration in calculating the adjusted numbers or percentages.
4. A 0% indication often means the value is less than 0.5% rather than actually zero. In a few instances, the sum of the categories may not appear to add up to exactly 100% because of rounding.
5. All States provide an actual unadjusted count of families served each month. For States reporting full population data, the number of child records reported each month were directly counted. However, for States that only submit samples, the ratio of children-to-families was determined each month from the samples and then multiplied by the reported number of families to obtain an estimate of the unadjusted number of children served each month. The unadjusted average number of families and children were obtained from the monthly numbers in the Federal Fiscal Year (FFY) as reported on the ACF-801 summary (header) record.
6. At the time of publication, American Samoa had not reported any ACF-801 data for FFY 2006 and Guam had only submitted ten (10) months of data.
7. Alaska's reported population does not accurately reflect the population served from October 2005 through January 2006 by CCDF due to sampling difficulties. However, Alaska began reporting full population data in February 2006. Alaska does not report any children in foster care or families headed by a child. Connecticut does not report ACF-801 data on all or nearly all children served by contracted centers.

Table 1a - Child Care and Development Fund
Average Monthly Adjusted Numbers of Families and Children Served (FY 2006)

States/Territories	Average Number of Families	Average Number of Children
Alabama	14,700	28,000
Alaska	2,900	4,900
American Samoa	-	-
Arizona	18,100	30,200
Arkansas	3,900	5,600
California	111,500	175,500
Colorado	8,900	16,300
Connecticut	6,300	10,100
Delaware	4,600	7,500
District of Columbia	2,600	3,700
Florida	67,900	108,600
Georgia	35,600	64,600
Guam	300	600
Hawaii	5,600	8,600
Idaho	5,400	9,900
Illinois	44,500	82,200
Indiana	17,300	32,800
Iowa	11,100	19,400
Kansas	12,000	22,400
Kentucky	16,200	28,900
Louisiana	23,200	39,100
Maine	3,700	5,400
Maryland	13,500	22,900
Massachusetts	23,900	32,100
Michigan	45,000	87,800
Minnesota	15,100	27,300
Mississippi	19,500	39,100
Missouri	19,200	33,600
Montana	2,900	4,800
Nebraska	7,400	13,100
Nevada	3,600	6,000
New Hampshire	5,100	7,500
New Jersey	26,000	37,900
New Mexico	12,700	21,600
New York	73,200	123,700
North Carolina	39,300	79,900
North Dakota	2,500	4,000
Northern Mariana Islands	200	400
Ohio	28,800	39,900
Oklahoma	14,600	25,000
Oregon	11,000	20,200
Pennsylvania	47,300	82,800
Puerto Rico	7,800	10,700
Rhode Island	4,400	7,100
South Carolina	11,300	19,700
South Dakota	3,100	4,900
Tennessee	22,200	42,500
Texas	68,200	126,200
Utah	7,000	13,000
Vermont	4,700	6,800
Virgin Islands	400	700
Virginia	17,200	27,900
Washington	32,700	53,200
West Virginia	5,600	9,300
Wisconsin	16,800	29,500
Wyoming	2,900	4,700
National Total	1,025,400	1,770,100

Notes applicable to this table:

1. The reported results shown above have been rounded to the nearest 100. The national numbers are simply the sum of the State and Territory numbers.

Table 2a - Child Care and Development Fund
Average Monthly Percentages of Children by Age Group (FY 2006)

States/ Territories	0 to < 1 yr	1 yr to < 2 yrs	2 yrs to < 3 yrs	3 yrs to < 4 yrs	4 yrs to < 5 yrs	5 yrs to < 6 yrs	6 yrs to < 13 yrs	13+ yrs	Invalid/ Not Reported	Total
Alabama	7%	11%	12%	12%	12%	11%	35%	0%	0%	100%
Alaska	7%	11%	13%	13%	13%	11%	33%	0%	0%	100%
American Samoa	-	-	-	-	-	-	-	-	-	-
Arizona	6%	11%	12%	13%	13%	11%	34%	0%	0%	100%
Arkansas	12%	20%	22%	20%	17%	8%	0%	0%	0%	100%
California	3%	6%	10%	14%	16%	12%	39%	0%	0%	100%
Colorado	7%	12%	13%	13%	12%	11%	32%	0%	0%	100%
Connecticut	6%	10%	12%	13%	13%	10%	36%	0%	0%	100%
Delaware	8%	12%	13%	12%	12%	10%	33%	0%	0%	100%
District of Columbia	6%	14%	19%	19%	13%	7%	22%	0%	0%	100%
Florida	5%	11%	14%	14%	14%	11%	30%	0%	0%	100%
Georgia	8%	13%	14%	13%	12%	9%	30%	0%	0%	100%
Guam	10%	14%	16%	15%	15%	8%	20%	2%	0%	100%
Hawaii	5%	11%	13%	16%	20%	8%	26%	0%	0%	100%
Idaho	7%	12%	12%	13%	13%	11%	32%	0%	0%	100%
Illinois	6%	9%	11%	11%	11%	10%	42%	1%	0%	100%
Indiana	5%	10%	13%	13%	13%	12%	34%	0%	0%	100%
Iowa	9%	12%	13%	12%	11%	10%	33%	0%	0%	100%
Kansas	7%	11%	13%	13%	13%	11%	33%	0%	0%	100%
Kentucky	7%	12%	13%	13%	12%	10%	33%	0%	0%	100%
Louisiana	8%	14%	16%	14%	11%	8%	29%	0%	0%	100%
Maine	4%	8%	12%	15%	16%	12%	34%	1%	0%	100%
Maryland	5%	10%	12%	12%	12%	10%	38%	0%	0%	100%
Massachusetts	5%	9%	13%	14%	15%	11%	33%	0%	0%	100%
Michigan	6%	9%	10%	10%	10%	9%	45%	1%	0%	100%
Minnesota	7%	11%	13%	12%	13%	11%	32%	0%	0%	100%
Mississippi	5%	11%	13%	13%	12%	10%	35%	1%	0%	100%
Missouri	6%	11%	13%	13%	12%	10%	28%	0%	6%	100%
Montana	8%	12%	14%	14%	13%	12%	28%	0%	0%	100%
Nebraska	9%	13%	13%	13%	12%	10%	30%	1%	0%	100%
Nevada	6%	10%	12%	13%	13%	11%	34%	0%	0%	100%
New Hampshire	5%	10%	12%	14%	14%	12%	33%	0%	0%	100%
New Jersey	4%	10%	13%	13%	11%	9%	38%	2%	0%	100%
New Mexico	7%	11%	13%	13%	13%	10%	33%	0%	0%	100%
New York	4%	9%	11%	12%	13%	10%	40%	1%	0%	100%
North Carolina	5%	9%	11%	12%	12%	11%	39%	0%	0%	100%
North Dakota	10%	14%	15%	13%	11%	10%	27%	1%	0%	100%
Northern Mariana Islands	6%	9%	11%	12%	12%	14%	35%	0%	0%	100%
Ohio	7%	12%	13%	12%	11%	10%	35%	0%	0%	100%
Oklahoma	8%	13%	14%	14%	12%	10%	29%	0%	0%	100%
Oregon	7%	11%	11%	11%	11%	10%	37%	0%	0%	100%
Pennsylvania	5%	10%	11%	12%	12%	10%	40%	1%	0%	100%
Puerto Rico	4%	6%	7%	14%	14%	11%	41%	2%	0%	100%
Rhode Island	5%	9%	11%	12%	12%	11%	40%	0%	0%	100%
South Carolina	4%	8%	11%	13%	13%	11%	39%	0%	0%	100%

South Dakota	9%	13%	14%	14%	13%	11%	26%	0%	0%	100%
Tennessee	6%	12%	13%	13%	12%	10%	33%	0%	0%	100%
Texas	7%	12%	14%	13%	11%	10%	33%	0%	0%	100%
Utah	7%	11%	12%	12%	12%	12%	34%	0%	0%	100%
Vermont	5%	10%	12%	14%	14%	11%	33%	1%	0%	100%
Virgin Islands	4%	10%	12%	17%	17%	9%	30%	1%	0%	100%
Virginia	5%	12%	14%	15%	12%	10%	32%	0%	0%	100%
Washington	6%	11%	13%	12%	13%	11%	34%	0%	0%	100%
West Virginia	6%	11%	13%	13%	12%	10%	35%	0%	0%	100%
Wisconsin	7%	11%	12%	12%	12%	10%	35%	0%	0%	100%
Wyoming	7%	12%	15%	14%	14%	11%	27%	0%	0%	100%
National	6%	10%	12%	13%	13%	10%	36%	0%	0%	100%

Notes applicable to this report:

1. The Invalid/Not Reported category only includes children with an invalid year/month of birth or report date.

Table 3a - Child Care and Development Fund
Average Monthly Percentages of Children by Racial Group (FY 2006)

States/Territories	Native American or Alaskan Native	Asian	Black or African American	Native Hawaiian or Pacific Islander	White	Multi-Racial	Invalid/Race not Reported	Total
Alabama	0%	0%	76%	0%	23%	0%	0%	100%
Alaska	10%	5%	10%	6%	47%	14%	8%	100%
American Samoa	-	-	-	-	-	-	-	-
Arizona	5%	0%	14%	1%	77%	3%	0%	100%
Arkansas	0%	0%	61%	0%	38%	0%	0%	100%
California	2%	6%	23%	2%	65%	2%	0%	100%
Colorado	1%	0%	13%	0%	34%	2%	48%	100%
Connecticut	1%	0%	35%	0%	26%	6%	32%	100%
Delaware	0%	0%	66%	0%	33%	0%	0%	100%
District of Columbia	1%	0%	90%	0%	7%	0%	2%	100%
Florida	0%	0%	50%	0%	47%	2%	0%	100%
Georgia	0%	0%	78%	0%	19%	2%	1%	100%
Guam	0%	7%	0%	84%	1%	9%	0%	100%
Hawaii	0%	34%	1%	35%	12%	18%	0%	100%
Idaho	1%	0%	1%	0%	96%	1%	0%	100%
Illinois	0%	1%	64%	1%	18%	2%	15%	100%
Indiana	1%	0%	53%	0%	39%	7%	0%	100%
Iowa	0%	0%	20%	0%	80%	0%	0%	100%
Kansas	2%	0%	27%	0%	64%	2%	5%	100%
Kentucky	0%	0%	31%	0%	60%	0%	8%	100%
Louisiana	0%	0%	77%	0%	22%	1%	0%	100%
Maine	1%	1%	3%	0%	81%	5%	9%	100%
Maryland	0%	0%	80%	0%	16%	2%	2%	100%
Massachusetts	0%	2%	20%	0%	25%	1%	53%	100%
Michigan	0%	0%	58%	0%	40%	2%	0%	100%
Minnesota	3%	6%	34%	0%	55%	2%	0%	100%
Mississippi	0%	0%	87%	0%	11%	2%	0%	100%
Missouri	0%	0%	57%	0%	40%	1%	2%	100%
Montana	12%	0%	2%	0%	82%	4%	0%	100%
Nebraska	3%	0%	25%	0%	70%	1%	0%	100%
Nevada	3%	1%	31%	1%	56%	8%	0%	100%
New Hampshire	0%	0%	2%	0%	22%	1%	75%	100%
New Jersey	0%	1%	56%	13%	22%	1%	5%	100%
New Mexico	6%	0%	4%	0%	85%	3%	0%	100%
New York	1%	2%	54%	1%	39%	3%	0%	100%
North Carolina	2%	0%	61%	0%	36%	0%	0%	100%
North Dakota	24%	0%	3%	0%	69%	3%	0%	100%
Northern Mariana Islands	0%	0%	0%	99%	0%	1%	0%	100%
Ohio	0%	0%	54%	0%	43%	1%	0%	100%
Oklahoma	8%	1%	34%	0%	57%	0%	0%	100%
Oregon	2%	2%	10%	0%	85%	1%	0%	100%
Pennsylvania	0%	1%	40%	0%	56%	2%	1%	100%
Puerto Rico	0%	0%	0%	0%	41%	0%	59%	100%
Rhode Island	0%	0%	8%	0%	19%	0%	72%	100%
South Carolina	0%	0%	75%	0%	24%	0%	0%	100%
South Dakota	19%	0%	4%	0%	71%	5%	0%	100%
Tennessee	0%	0%	72%	0%	27%	0%	0%	100%
Texas	0%	0%	36%	0%	43%	1%	20%	100%
Utah	3%	2%	5%	0%	90%	0%	0%	100%
Vermont	0%	1%	2%	0%	94%	2%	0%	100%
Virgin Islands	7%	0%	93%	0%	0%	0%	0%	100%
Virginia	6%	1%	65%	0%	26%	1%	0%	100%
Washington	2%	2%	9%	0%	42%	0%	45%	100%
West Virginia	0%	0%	12%	0%	76%	10%	2%	100%
Wisconsin	2%	2%	41%	0%	43%	3%	9%	100%
Wyoming	3%	0%	4%	0%	81%	0%	12%	100%
National	1%	1%	44%	1%	44%	2%	7%	100%

Notes applicable to this report:

1. The multi-racial category includes any child where more than one race was answered Yes (1). Several States do not capture and report more than one race per child and thus do not provide multi-racial data.
2. The Invalid/Not Reported category includes children where one or more race fields had anything other than a No (0) or Yes (1), blank, null, or space.
3. Washington is still reporting ethnicity (Latino/Hispanic) as a race rather than as an ethnicity in accordance with the Pre-FY 2000 Technical Bulletin 3 standard. In many of these instances if a child is

designated as Latino, no race is designated.

Table 4a - Child Care and Development Fund
Average Monthly Percentages of Children by Latino Ethnicity (FY 2006)

States/Territories	Latino	Not Latino	Invalid/ Not Reported	Ethnicity Total
Alabama	1%	99%	0%	100%
Alaska	9%	91%	0%	100%
American Samoa	-	-	-	-
Arizona	47%	53%	0%	100%
Arkansas	0%	100%	0%	100%
California	50%	50%	0%	100%
Colorado	32%	68%	0%	100%
Connecticut	36%	64%	0%	100%
Delaware	9%	91%	0%	100%
District of Columbia	9%	91%	0%	100%
Florida	23%	77%	0%	100%
Georgia	2%	98%	0%	100%
Guam	0%	100%	0%	100%
Hawaii	5%	95%	0%	100%
Idaho	15%	85%	0%	100%
Illinois	14%	84%	3%	100%
Indiana	6%	94%	0%	100%
Iowa	6%	94%	0%	100%
Kansas	11%	89%	0%	100%
Kentucky	3%	92%	5%	100%
Louisiana	1%	98%	0%	100%
Maine	3%	97%	0%	100%
Maryland	3%	97%	0%	100%
Massachusetts	31%	69%	0%	100%
Michigan	4%	96%	0%	100%
Minnesota	3%	97%	0%	100%
Mississippi	1%	99%	0%	100%
Missouri	3%	97%	0%	100%
Montana	7%	93%	0%	100%
Nebraska	10%	90%	0%	100%
Nevada	29%	71%	0%	100%
New Hampshire	2%	0%	98%	100%
New Jersey	28%	72%	0%	100%
New Mexico	74%	26%	0%	100%
New York	26%	74%	0%	100%
North Carolina	5%	95%	0%	100%
North Dakota	3%	97%	0%	100%
Northern Mariana Islands	0%	100%	0%	100%
Ohio	4%	96%	0%	100%
Oklahoma	8%	92%	0%	100%
Oregon	20%	80%	0%	100%
Pennsylvania	10%	90%	0%	100%
Puerto Rico	100%	0%	0%	100%
Rhode Island	22%	78%	0%	100%
South Carolina	-	-	-	-
South Dakota	3%	97%	0%	100%
Tennessee	1%	99%	0%	100%
Texas	44%	56%	0%	100%
Utah	15%	85%	0%	100%
Vermont	2%	98%	0%	100%
Virgin Islands	9%	91%	0%	100%
Virginia	9%	91%	0%	100%
Washington	14%	86%	0%	100%
West Virginia	2%	98%	0%	100%
Wisconsin	8%	92%	0%	100%
Wyoming	12%	88%	0%	100%
National	19%	80%	1%	100%

Notes applicable to this report:

1. South Carolina did not collect Ethnicity data in FFY 2006.

2. The Invalid/Not Reported category includes children where anything other than a No (0) or Yes (1) was in the Ethnicity field.

Table 5a - Child Care and Development Fund
Average Monthly Percentages of Children in Child Care by Age Category and Type of Care (FY 2006)

Age Group	Child's Home	Family Home	Group Home	Center	Total
Infants (0 to <1 yr)	7%	35%	5%	53%	100%
Toddlers (1 yr to <3 yrs)	6%	29%	6%	60%	100%
Preschool (3 yrs to <6 yrs)	5%	24%	4%	66%	100%
School Age (6 yrs to <13 yrs)	11%	34%	4%	50%	100%
13 years and older	21%	48%	3%	28%	100%
All Ages	7%	30%	5%	58%	100%

Notes applicable to this table:

1. Nationally 2.1% of the children served with CCDF funds were excluded from the above table because either their age was invalid/not reported or one or more setting elements of the child's setting record(s) were invalid or not reported.

2. The National values were determined by multiplying each State's percentage by the adjusted number of children served for each State, summing across the States and then dividing by the adjusted number of children served for the Nation. Adjusted means adjusted to represent CCDF funding only.

3. Some children are reported to have multiple settings for the same month. If a child was in more than one of the above setting categories within the same month, the child was counted in each setting in proportion to the number of hours of service received in each setting. For example if the child spent 70-hours in a setting and 30-hours in a child's home, the child would be scored as 0.7 count in Center and 0.3 count in Child's Home (proportional counting).

Table 6a - Child Care and Development Fund
Average Monthly Hours of Child Care by Age Group and Type of Care (FY 2006)

Age Group	Child's Home	Family Home	Group Home	Center	Average
0 to < 1 yr	159	160	156	162	161
1 to < 2 yrs	160	165	162	170	167
2 to < 3 yrs	167	168	161	171	169
3 to < 4 yrs	167	166	166	169	168
4 to < 5 yrs	165	162	160	166	164
5 to < 6 yrs	156	145	141	143	144
6 to < 13 yrs	141	130	117	112	122
13+ yrs	133	121	128	104	119
National	151	148	145	148	148

Notes applicable to this report:

1. Nationally 2.1% of the children served with CCDF funds were excluded from the above table because either their age was invalid/not reported or one or more setting elements of a child's setting record was invalid or not reported.
2. Average hours per month were based on sums of hours per month in categories divided by counts of children in categories as further defined below.
3. For children served by multiple providers, the child's count is proportioned based on the ratio of the monthly hours with each provider divided by the monthly total hours of service. The average hours and payments for each State-month combination are based on the sum of hours in each category divided by the sum of proportional counts in each category. The State's annual results are determined by calculating a weighted average of the monthly results where the weight was the adjusted number of children served in each month. The national results shown above represent a weighted average of the State's fiscal annual results where the weight for each State is the average monthly adjusted number of children served in each State for the fiscal year.
4. Some States have been reporting the maximum number of hours authorized rather than the actual number of service hours provided.

Table 7a - Child Care and Development Fund
 Average Monthly Payment to Provider (Including Family CoPay) by Age Group and Care Type (FY 2006)

Age Group	Child's Home	Family Home	Group Home	Center	Average
0 to < 1 yr	\$298	\$369	\$464	\$454	\$413
1 to < 2 yrs	\$303	\$380	\$491	\$457	\$425
2 to < 3 yrs	\$300	\$376	\$474	\$445	\$420
3 to < 4 yrs	\$295	\$358	\$464	\$428	\$407
4 to < 5 yrs	\$283	\$345	\$450	\$428	\$403
5 to < 6 yrs	\$282	\$321	\$396	\$377	\$357
6 to < 13 yrs	\$259	\$291	\$365	\$291	\$290
13+ yrs	\$273	\$287	\$323	\$286	\$285
National	\$275	\$330	\$429	\$386	\$363

Notes applicable to this report:

- Nationally 2.1% of the children served with CCDF funds were excluded from the above table because either their age was invalid/not reported or one or more setting elements of a child's setting record was invalid or not reported.
- Payment is defined as the total amount received by the provider. It is the sum of the State subsidy and the family copay.
- Average payment per month is based on sums of payments per month in categories divided by counts of children in categories as further defined below.
- For children served by multiple providers, the child's count is proportioned based on the ratio of the monthly hours with each provider divided by the monthly total hours of service. The average hours and payments for each State-month combination are based on the sum of hours in each category divided by the sum of proportional counts in each category. The State's annual results are determined by calculating a weighted average of the monthly results where the weight was the adjusted number of children served in each month. The national results shown above represent a weighted average of the State's fiscal annual results where the weight for each State is the average monthly-adjusted number of children served in each State for the fiscal year.
- The current Technical Bulletin 3 indicates that a payment over \$1,000 per month is considered above the Out of Range Standard and therefore is considered invalid. However, the FFY 2005 market survey data from the highest cost areas of some States shows that the 75-percentile full-time child care market rate cost is above \$1,000 per month. In addition several States have indicated in their ACF-801 notes that they have valid costs over \$1,000. States that have been identified with this issue are: Minnesota, Massachusetts, District of Columbia, Wisconsin, California, Washington, Pennsylvania, North Carolina, New York and Oregon. Nationally approximately 1% of the reported cost data in FFY 2005 exceeded \$1,000 and no State had more than 5% exceeding \$1,000. It is anticipated that the percentage of valid costs that exceed \$1,000 would be slightly higher in FFY 2006 than in FFY 2005. (Note that some of these data percentages with costs over \$1,000 were very large and thus clearly invalid.) The Child Care Bureau has increased this Out of Range Standard to \$2,000 effective October 1, 2006 (FFY 2007), so this should not be an issue in FFY 2007 data.
- Some States have been reporting the maximum number of hours authorized and/or dollars authorized rather than the actual number provided.

Table 8a - Child Care and Development Fund
Reasons for Receiving Care (FY 2006)

States/Territories	Employment	Training/ Education	Both Emp. & Training/ Education	Protective Services	Other	Invalid or not Reported	Total
Alabama	78%	7%	4%	9%	1%	0%	100%
Alaska	85%	4%	8%	0%	3%	0%	100%
American Samoa	-	-	-	-	-	-	-
Arizona	70%	1%	6%	22%	2%	0%	100%
Arkansas	43%	10%	7%	5%	35%	0%	100%
California	85%	6%	5%	1%	2%	0%	100%
Colorado	79%	14%	4%	0%	3%	0%	100%
Connecticut	94%	5%	1%	0%	0%	0%	100%
Delaware	83%	5%	4%	2%	5%	0%	100%
District of Columbia	65%	25%	3%	1%	6%	0%	100%
Florida	73%	5%	4%	18%	1%	0%	100%
Georgia	80%	10%	2%	6%	0%	2%	100%
Guam	76%	15%	9%	0%	0%	0%	100%
Hawaii	82%	3%	10%	0%	4%	0%	100%
Idaho	75%	10%	15%	0%	0%	0%	100%
Illinois	90%	4%	1%	0%	5%	0%	100%
Indiana	68%	9%	8%	0%	15%	0%	100%
Iowa	84%	9%	0%	7%	0%	0%	100%
Kansas	91%	5%	2%	0%	1%	0%	100%
Kentucky	77%	7%	2%	14%	0%	0%	100%
Louisiana	78%	7%	10%	5%	0%	0%	100%
Maine	85%	5%	5%	2%	2%	0%	100%
Maryland	81%	11%	6%	0%	1%	0%	100%
Massachusetts	80%	6%	0%	9%	4%	1%	100%
Michigan	86%	10%	2%	1%	2%	0%	100%
Minnesota	78%	9%	9%	0%	4%	0%	100%
Mississippi	68%	7%	6%	1%	18%	0%	100%
Missouri	57%	18%	8%	7%	0%	9%	100%
Montana	66%	15%	17%	2%	0%	0%	100%
Nebraska	72%	12%	3%	13%	1%	0%	100%
Nevada	90%	6%	2%	0%	2%	0%	100%
New Hampshire	82%	10%	0%	8%	1%	0%	100%
New Jersey	81%	3%	3%	5%	9%	0%	100%
New Mexico	75%	14%	12%	0%	0%	0%	100%
New York	73%	16%	3%	0%	8%	0%	100%
North Carolina	90%	10%	0%	0%	0%	0%	100%
North Dakota	78%	13%	7%	0%	2%	0%	100%
Northern Mariana Islands	71%	24%	6%	0%	0%	0%	100%
Ohio	69%	16%	5%	0%	10%	0%	100%
Oklahoma	78%	18%	3%	0%	0%	0%	100%
Oregon	76%	3%	18%	3%	0%	0%	100%
Pennsylvania	87%	6%	6%	0%	0%	0%	100%
Puerto Rico	65%	26%	7%	1%	2%	0%	100%
Rhode Island	89%	9%	2%	0%	0%	0%	100%
South Carolina	81%	19%	0%	0%	0%	0%	100%
South Dakota	61%	11%	12%	16%	0%	0%	100%
Tennessee	41%	37%	21%	0%	1%	0%	100%
Texas	75%	18%	3%	1%	3%	0%	100%
Utah	80%	4%	3%	0%	13%	0%	100%
Vermont	63%	14%	2%	16%	6%	0%	100%
Virgin Islands	84%	12%	0%	4%	0%	0%	100%
Virginia	87%	5%	5%	1%	2%	0%	100%
Washington	83%	7%	1%	9%	1%	0%	100%
West Virginia	78%	13%	9%	1%	0%	0%	100%
Wisconsin	93%	1%	5%	0%	2%	0%	100%
Wyoming	91%	9%	0%	0%	0%	0%	100%
National	79%	10%	4%	4%	3%	0%	100%

Notes applicable to this report:

1. The Invalid/Not Reported only includes family records with an invalid or missing number for ACF-801

element 6, Reason for Receiving Subsidized Child Care.

2. Several States only capture the primary reason for receiving services and therefore do not report any families in Both Employment and Training/Education categories. States reporting no families in this combination category of Both Employment and Training/Education are Massachusetts, New Hampshire, North Carolina, South Carolina, and Wyoming.

3. CCB has observed some issues with income reporting across most States to varying degrees. CCB is working with States to address and resolve internal inconsistencies between ACF-801 element 6 (reason for receiving a subsidy), element 9 (total income for determining eligibility), and elements 10 through 15 (sources of income).

Table 9a - Child Care and Development Fund
Number of Child Care Providers Receiving CCDF Funds (FY 2006)

States/Territories	Child's Home	FCC Home	Group Home	Center	Total
Alabama	13	1,273	263	1,645	3,194
Alaska	809	1,254	153	284	2,500
American Samoa	-	-	-	-	-
Arizona	834	3,885	345	1,296	6,360
Arkansas	0	619	0	957	1,576
California	12,463	59,037	6,471	5,499	83,470
Colorado	1,172	4,318	0	1,398	6,888
Connecticut	5,209	4,105	22	1,607	10,943
Delaware	653	1,412	50	403	2,518
District of Columbia	2	223	0	185	410
Florida	72	6,104	0	7,703	13,879
Georgia	1,295	3,922	249	3,738	9,204
Guam	177	14	3	51	245
Hawaii	1,188	4,909	4	245	6,346
Idaho	135	2,235	400	533	3,303
Illinois	33,044	50,505	299	3,579	87,427
Indiana	69	3,592	0	1,233	4,894
Iowa	213	7,559	366	726	8,864
Kansas	712	2,546	2,386	694	6,338
Kentucky	344	3,661	131	1,772	5,908
Louisiana	4,083	1,918	0	2,035	8,036
Maine	145	1,850	0	485	2,480
Maryland	2,932	5,920	0	1,572	10,424
Massachusetts	2,064	2,382	2,916	2,248	9,610
Michigan	28,787	39,706	2,810	2,476	73,779
Minnesota	3,390	14,267	0	2,179	19,836
Mississippi	680	5,355	33	1,362	7,430
Missouri	614	7,964	184	2,022	10,784
Montana	226	1,364	459	253	2,302
Nebraska	336	4,051	306	614	5,307
Nevada	82	619	11	614	1,326
New Hampshire	487	2,077	0	681	3,245
New Jersey	830	5,601	0	2,546	8,977
New Mexico	11	6,244	162	489	6,906
New York	21,503	48,435	4,074	4,309	77,871
North Carolina	101	4,165	0	4,592	8,858
North Dakota	1	1,788	671	140	2,600
Northern Mariana Islands	0	175	0	20	195
Ohio	14	10,955	210	3,747	14,926
Oklahoma	20	2,671	0	1,351	4,042
Oregon	3,642	11,859	185	786	16,472
Pennsylvania	5,068	36,412	701	3,612	45,793
Puerto Rico	24	2,116	0	712	2,852
Rhode Island	124	1,130	6	352	1,612
South Carolina	798	2,293	179	1,163	4,433
South Dakota	72	1,368	82	246	1,768
Tennessee	112	1,958	387	1,631	4,088
Texas	10,101	13,999	935	6,434	31,469
Utah	2,792	6,968	382	570	10,712
Vermont	375	1,989	0	505	2,869
Virgin Islands	0	25	34	86	145
Virginia	-	-	-	-	-
Washington	10,043	9,426	0	2,029	21,498
West Virginia	12	2,573	92	427	3,104
Wisconsin	116	6,311	0	2,304	8,731
Wyoming	158	808	728	157	1,851
National Total	157,697	427,915	26,689	88,297	700,598

Notes applicable to this table:

1. The source for this table is ACF-800 data for FFY 2006, an unduplicated annual count.

2. This data has not been adjusted by the pooling factor (unadjusted data) because ACF-800 Data Element 6a is reported as a count of providers receiving CCDF funding.
3. Note that this table reports the number of providers (not the number of children). A provider that serves one child is counted the same as a provider serving 200 children per day.
4. At the time of publication, American Samoa had not yet reported ACF-800 data for FFY 2006.
5. Virginia is not able to report the number of providers because payments are made locally and information on providers is kept at the local level. They are working towards an automated system in order to report the number of providers.

Table 10a - Child Care and Development Fund
Average Monthly Percentages of Children Served in All Types of Care (FY 2006)

States/Territories	%Licensed or Regulated Providers				Providers Legally Operating without Regulation								Invalid/ Not Reported
	Child's Home	Family Home	Group Home	Center	Child's Home		Family Home		Group Home Non- Relative	Center			
					Relative	Non- Relative	Relative	Non- Relative					
Alabama	0%	4%	4%	71%	0%	0%	3%	0%	0%	0%	0%	17%	1%
Alaska	0%	19%	6%	46%	14%	1%	8%	5%	0%	0%	0%	0%	0%
American Samoa	-	-	-	-	-	-	-	-	-	-	-	-	-
Arizona	0%	8%	7%	74%	2%	0%	8%	0%	0%	0%	0%	0%	0%
Arkansas	0%	18%	0%	82%	0%	0%	0%	1%	0%	0%	0%	0%	0%
California	0%	15%	10%	43%	5%	2%	16%	6%	0%	0%	0%	3%	1%
Colorado	0%	18%	0%	62%	5%	1%	9%	4%	0%	0%	0%	0%	1%
Connecticut	0%	12%	0%	37%	18%	7%	16%	2%	0%	0%	0%	4%	4%
Delaware	0%	30%	3%	56%	3%	0%	5%	0%	0%	0%	0%	2%	0%
District of Columbia	0%	4%	0%	81%	0%	0%	1%	0%	0%	0%	0%	0%	14%
Florida	0%	11%	0%	80%	0%	1%	0%	0%	0%	0%	0%	8%	0%
Georgia	0%	9%	2%	85%	1%	0%	3%	1%	0%	0%	0%	0%	0%
Guam	1%	1%	1%	82%	3%	3%	3%	3%	0%	0%	0%	4%	0%
Hawaii	0%	7%	0%	30%	12%	2%	40%	6%	0%	0%	0%	2%	1%
Idaho	0%	0%	14%	49%	0%	1%	12%	24%	0%	0%	0%	0%	0%
Illinois	0%	19%	1%	30%	10%	12%	7%	18%	0%	0%	0%	4%	0%
Indiana	0%	36%	0%	30%	0%	0%	2%	6%	0%	0%	0%	25%	0%
Iowa	0%	37%	6%	37%	0%	0%	3%	16%	0%	0%	0%	0%	1%
Kansas	0%	9%	40%	35%	3%	3%	11%	0%	0%	0%	0%	0%	0%
Kentucky	0%	7%	2%	79%	0%	0%	7%	5%	0%	0%	0%	0%	0%
Louisiana	0%	0%	0%	73%	10%	4%	4%	7%	0%	0%	0%	1%	0%
Maine	0%	33%	0%	52%	1%	1%	6%	5%	0%	0%	0%	0%	1%
Maryland	0%	37%	0%	40%	10%	3%	9%	0%	0%	0%	0%	0%	1%
Massachusetts	0%	2%	21%	67%	1%	1%	2%	0%	0%	0%	0%	0%	5%
Michigan	0%	7%	10%	15%	29%	0%	38%	0%	0%	0%	0%	0%	1%
Minnesota	0%	34%	0%	35%	8%	6%	4%	9%	0%	0%	0%	2%	3%
Mississippi	0%	0%	1%	73%	2%	1%	12%	11%	0%	0%	0%	0%	1%
Missouri	0%	12%	2%	47%	1%	1%	11%	17%	0%	0%	0%	7%	2%
Montana	0%	12%	37%	38%	2%	1%	5%	5%	0%	0%	0%	0%	0%
Nebraska	0%	20%	8%	53%	0%	0%	1%	17%	0%	0%	0%	0%	1%
Nevada	0%	4%	1%	69%	2%	6%	0%	1%	0%	0%	0%	18%	0%
New Hampshire	0%	8%	0%	61%	3%	3%	5%	19%	0%	0%	0%	0%	1%
New Jersey	0%	11%	0%	76%	1%	1%	3%	5%	0%	0%	0%	0%	4%
New Mexico	0%	2%	6%	53%	1%	1%	27%	10%	0%	0%	0%	0%	1%
New York	0%	10%	9%	27%	10%	8%	11%	18%	0%	0%	0%	1%	6%
North Carolina	0%	17%	0%	81%	0%	0%	1%	0%	0%	0%	0%	0%	0%
North Dakota	0%	8%	31%	26%	0%	0%	13%	22%	0%	0%	0%	0%	0%
Northern Mariana Islands	7%	45%	6%	41%	0%	0%	1%	0%	0%	0%	0%	0%	0%
Ohio	0%	32%	2%	59%	0%	0%	0%	0%	0%	0%	0%	0%	7%
Oklahoma	0%	28%	0%	72%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Oregon	0%	22%	2%	18%	5%	7%	11%	32%	0%	1%	1%	1%	0%
Pennsylvania	0%	8%	4%	48%	4%	2%	16%	16%	0%	0%	0%	0%	3%
Puerto Rico	2%	1%	1%	44%	1%	0%	42%	6%	0%	0%	0%	3%	1%
Rhode Island	0%	30%	0%	67%	0%	1%	1%	1%	0%	0%	0%	0%	0%
South Carolina	0%	2%	3%	78%	0%	6%	0%	11%	0%	0%	0%	0%	0%
South Dakota	0%	36%	0%	51%	0%	1%	7%	5%	0%	0%	0%	0%	0%
Tennessee	0%	6%	5%	79%	1%	0%	3%	6%	0%	0%	0%	0%	0%
Texas	0%	3%	2%	79%	7%	0%	9%	0%	0%	0%	0%	0%	0%
Utah	0%	12%	7%	37%	10%	1%	30%	1%	0%	0%	1%	1%	2%

Vermont	0%	51%	0%	46%	0%	0%	0%	0%	0%	0%	0%	0%	3%
Virgin Islands	8%	0%	3%	85%	2%	1%	0%	0%	0%	0%	0%	0%	0%
Virginia	1%	21%	0%	59%	1%	1%	8%	6%	0%	0%	2%	0%	0%
Washington	0%	27%	0%	43%	11%	0%	5%	0%	0%	0%	0%	0%	14%
West Virginia	0%	35%	4%	57%	0%	0%	1%	0%	0%	0%	0%	1%	0%
Wisconsin	0%	33%	0%	60%	0%	0%	0%	0%	0%	0%	0%	0%	6%
Wyoming	0%	8%	6%	15%	4%	2%	11%	9%	0%	0%	0%	0%	45%
National Percentage	0%	14%	5%	55%	5%	2%	9%	6%	0%	0%	0%	2%	2%

Notes applicable to this table:

1. Some children are reported to have multiple settings for the same month. If a child was in more than one setting category within the same month, the child was counted in each setting in proportion to the number of hours of service received in each setting. For example if the child spent 70-hours in a center and 30-hours in a child's home, the child would be scored as 0.7 count in Center and 0.3 count in Child's Home (proportional counting).

2. For consistency with related reports involving setting data, the Invalid/Not Reported category includes children with any element of any setting identified as invalid or not reported including zero hours served, zero cost, or no setting records.

Table 11a - Child Care and Development Fund
 Of Children in Settings Legally Operating Without Regulation,
 Percent Served by Relatives vs. Non-Relatives (FY 2006)

States/Territories	Relative	Non-Relative
Alabama	14%	86%
Alaska	78%	22%
American Samoa	-	-
Arizona	100%	0%
Arkansas	10%	90%
California	65%	35%
Colorado	71%	29%
Connecticut	73%	27%
Delaware	79%	21%
District of Columbia	93%	7%
Florida	3%	97%
Georgia	80%	20%
Guam	35%	65%
Hawaii	84%	16%
Idaho	34%	66%
Illinois	34%	66%
Indiana	7%	93%
Iowa	16%	84%
Kansas	84%	16%
Kentucky	57%	43%
Louisiana	51%	49%
Maine	49%	51%
Maryland	86%	14%
Massachusetts	68%	32%
Michigan	100%	0%
Minnesota	42%	58%
Mississippi	53%	47%
Missouri	32%	68%
Montana	55%	45%
Nebraska	3%	97%
Nevada	7%	93%
New Hampshire	28%	72%
New Jersey	35%	65%
New Mexico	73%	27%
New York	43%	57%
North Carolina	75%	25%
North Dakota	38%	62%
Northern Mariana Islands	100%	0%
Ohio	NA	NA
Oklahoma	NA	NA
Oregon	29%	70%
Pennsylvania	51%	49%
Puerto Rico	83%	17%
Rhode Island	46%	55%
South Carolina	0%	100%
South Dakota	57%	43%
Tennessee	40%	60%
Texas	100%	0%
Utah	95%	5%
Vermont	NA	NA
Virgin Islands	52%	48%
Virginia	49%	50%
Washington	97%	3%
West Virginia	30%	70%
Wisconsin	0%	100%
Wyoming	60%	40%
National	58%	42%

Notes applicable to this table:

1. In some States there were no children served in unregulated settings and thus the percent is NA since division by zero is undefined. Ohio, Oklahoma, and Vermont have no Providers Legally Operating Without Regulation.

2. Some children are reported to have multiple settings for the same month. If a child was in more than one setting category within the same month, the child was counted in each setting in proportion to the number of hours of service received in each setting. For example if the child spent 70-hours in a center and 30-hours in a child's home, the child would be scored as 0.7 count in Center and 0.3 count in Child's Home (proportional counting).

Table 12a - Child Care and Development Fund
Average Monthly Percentages of Children Served by Payment Method (FY 2006)

States/Territories	Grants / Contracts %	Certificates %	Cash %
Alabama	0%	100%	0%
Alaska	0%	85%	15%
American Samoa	-	-	-
Arizona	0%	100%	0%
Arkansas	41%	59%	0%
California	37%	63%	0%
Colorado	1%	96%	3%
Connecticut	40%	60%	0%
Delaware	0%	100%	0%
District of Columbia	0%	100%	0%
Florida	51%	49%	0%
Georgia	0%	100%	0%
Guam	38%	62%	0%
Hawaii	46%	0%	54%
Idaho	0%	100%	0%
Illinois	7%	93%	0%
Indiana	3%	97%	0%
Iowa	0%	100%	0%
Kansas	0%	100%	0%
Kentucky	0%	100%	0%
Louisiana	0%	100%	0%
Maine	29%	69%	2%
Maryland	0%	100%	0%
Massachusetts	44%	56%	0%
Michigan	0%	71%	29%
Minnesota	0%	100%	0%
Mississippi	3%	97%	0%
Missouri	0%	100%	0%
Montana	0%	100%	0%
Nebraska	0%	100%	0%
Nevada	20%	80%	0%
New Hampshire	0%	100%	0%
New Jersey	19%	81%	0%
New Mexico	0%	100%	0%
New York	19%	81%	0%
North Carolina	0%	100%	0%
North Dakota	0%	100%	0%
Northern Mariana Islands	0%	0%	100%
Ohio	0%	100%	0%
Oklahoma	0%	100%	0%
Oregon	3%	97%	0%
Pennsylvania	0%	78%	22%
Puerto Rico	71%	29%	0%
Rhode Island	0%	100%	0%
South Carolina	0%	100%	0%
South Dakota	1%	99%	0%
Tennessee	0%	100%	0%
Texas	0%	100%	0%
Utah	0%	0%	100%
Vermont	3%	97%	0%
Virgin Islands	0%	100%	0%
Virginia	0%	0%	100%
Washington	0%	81%	19%
West Virginia	0%	100%	0%
Wisconsin	0%	100%	0%
Wyoming	0%	100%	0%
National Total	11%	85%	4%

Notes applicable to this table:

1. The source for this table is ACF-800 data for FFY 2006. The ACF-800 is based on an annual unduplicated count of families and children; i.e. a family or child that receives one hour of service on one day is counted the same as a family or child that receives full-time care throughout the fiscal year.

2. All counts are adjusted numbers of families and children unless otherwise indicated. These adjusted numbers represent the number funded through CCDF only. The adjusted number is the raw or unadjusted number reported by the State multiplied by the pooling factor as reported on the ACF-800. DC has indicated that the pooling factor reported on the ACF-800 is not applicable to the ACF-801. This report takes this factor into consideration in calculating the adjusted numbers or percentages.

3. A 0% indication often means the value is less than 0.5% rather than actually zero. In a few instances, the sum of the categories may not appear to add up to exactly 100% because of rounding.

4. At the time of publication American Samoa had not submitted any ACF-800 data for FFY 2006.

Virginia	Y	Y	Y	Y	Y	Y	Y	Y		39,993
Washington	NA	Y	Y	Y	Y	Y	Y	Y		24,839
West Virginia	NA	Y	Y	Y	Y	Y	Y	Y	Y	8,587
Wisconsin	Y	Y	N	Y	Y	Y	Y	Y	N	51,947
Wyoming	NA	Y	Y	Y	Y	Y	Y	Y	N	11,907
Total Yes	33	55	52	55	52	52	52	50	9	12,372,570

Notes applicable to this table:

1. The source for this table is ACF-800 data for FFY 2006, an unduplicated annual count.
2. This data has not been adjusted by the pooling factor (unadjusted data) because it is impossible to tell which families receiving consumer information also received CCDF funding.
3. NA=Not applicable, does not offer grants or contracts for subsidized child care slots.
4. A blank cell indicates that the State did not provide a response.
5. At the time of publication, American Samoa had not yet reported FFY 2006 ACF-800 data.
6. TN reported a percentage of families served receiving consumer education rather than an estimated count.

Table 14a -Child Care Development Fund
Average Monthly Percentages of Families with TANF as one of their Sources of Income (FY 2006)

States/Territories	Yes	No	Invalid/ Not Reported	Total
Alabama	13%	87%	0%	100%
Alaska	15%	85%	0%	100%
American Samoa	-	-	-	-
Arizona	21%	79%	0%	100%
Arkansas	4%	96%	0%	100%
California	12%	87%	0%	100%
Colorado	12%	88%	0%	100%
Connecticut	43%	57%	0%	100%
Delaware	12%	88%	0%	100%
District of Columbia	14%	86%	0%	100%
Florida	7%	91%	2%	100%
Georgia	8%	92%	0%	100%
Guam	0%	100%	0%	100%
Hawaii	15%	85%	0%	100%
Idaho	2%	98%	0%	100%
Illinois	6%	94%	0%	100%
Indiana	27%	73%	0%	100%
Iowa	32%	68%	0%	100%
Kansas	8%	91%	0%	100%
Kentucky	1%	99%	0%	100%
Louisiana	10%	85%	5%	100%
Maine	4%	96%	0%	100%
Maryland	15%	85%	0%	100%
Massachusetts	18%	82%	0%	100%
Michigan	51%	49%	0%	100%
Minnesota	41%	59%	0%	100%
Mississippi	15%	85%	0%	100%
Missouri	19%	81%	0%	100%
Montana	15%	85%	0%	100%
Nebraska	28%	72%	0%	100%
Nevada	18%	82%	0%	100%
New Hampshire	28%	65%	8%	100%
New Jersey	13%	87%	0%	100%
New Mexico	17%	83%	0%	100%
New York	47%	53%	0%	100%
North Carolina	6%	94%	0%	100%
North Dakota	21%	79%	0%	100%
Northern Mariana Islands	0%	100%	0%	100%
Ohio	16%	84%	0%	100%
Oklahoma	11%	89%	0%	100%
Oregon	30%	70%	0%	100%
Pennsylvania	9%	91%	0%	100%
Puerto Rico	0%	100%	0%	100%
Rhode Island	9%	91%	0%	100%
South Carolina	29%	71%	0%	100%
South Dakota	7%	93%	0%	100%
Tennessee	63%	37%	0%	100%
Texas	1%	99%	0%	100%
Utah	16%	84%	0%	100%
Vermont	17%	83%	0%	100%
Virgin Islands	2%	98%	0%	100%
Virginia	29%	71%	0%	100%
Washington	19%	81%	0%	100%
West Virginia	7%	93%	0%	100%
Wisconsin	5%	95%	0%	100%
Wyoming	0%	100%	0%	100%
National	18%	82%	0%	100%

Notes applicable to this report:

1. The percentage shown as Yes is the number reported as Yes divided by the families that answered Yes or No excluding families that were in protective services. The Invalid/Not Reported column includes families that did not indicate whether TANF was a source of income and the family was reported as being in protective services.

Table 15a - Child Care and Development Fund
Mean Family Co-payment as a Percentage of Family Income (FY 2006)

States/Territories	Families			All Families	Mean Copay/Income	
	with Income=\$0; Protective Services; Invalid Data (Column 1)	Families with Copay=\$0; Income>\$0; (NOT in Column 1)	Families with Copay>\$0; Income>\$0; (NOT in Column 1)		Including Families with Copay=\$0	Excluding Families with Copay=\$0
Alabama	2,485	1,238	10,964	14,688	5%	5%
Alaska	287	269	2,322	2,878	4%	4%
American Samoa	-	-	-	-	-	-
Arizona	4,550	1,613	11,889	18,053	4%	5%
Arkansas	550	2,546	767	3,863	2%	8%
California	5,287	74,588	31,643	111,518	1%	3%
Colorado	2,428	696	5,736	8,860	9%	10%
Connecticut	590	261	5,487	6,337	5%	5%
Delaware	391	2,536	1,672	4,598	4%	10%
District of Columbia	1,155	453	969	2,576	3%	4%
Florida	14,370	312	53,206	67,888	6%	6%
Georgia	5,555	4,044	26,032	35,632	6%	7%
Guam	26	13	307	346	6%	7%
Hawaii	207	2,530	2,879	5,615	2%	3%
Idaho	622	0	4,818	5,440	10%	10%
Illinois	1,471	619	42,412	44,503	6%	6%
Indiana	323	13,572	3,443	17,339	1%	7%
Iowa	1,187	6,152	3,720	11,059	2%	5%
Kansas	2,296	2,049	7,669	12,014	5%	6%
Kentucky	2,409	3,573	10,240	16,222	6%	8%
Louisiana	1,500	1,431	20,268	23,199	12%	13%
Maine	235	102	3,331	3,667	7%	8%
Maryland	515	2,770	10,167	13,452	6%	8%
Massachusetts	4,638	5,733	13,500	23,870	6%	9%
Michigan	1,604	10,687	32,676	44,966	2%	3%
Minnesota	935	4,005	10,129	15,069	3%	5%
Mississippi	5,343	619	13,513	19,476	4%	5%
Missouri	5,901	4,467	8,861	19,228	5%	7%
Montana	157	0	2,706	2,863	4%	4%
Nebraska	2,945	3,346	1,140	7,431	2%	9%
Nevada	75	542	3,008	3,625	6%	7%
New Hampshire	514	1,992	2,625	5,131	0%	0%
New Jersey	2,946	3,685	19,340	25,970	6%	7%
New Mexico	832	2,302	9,570	12,704	4%	5%
New York	7,001	26,054	40,100	73,155	3%	5%
North Carolina	6,446	1,696	31,119	39,262	8%	8%
North Dakota	740	1	1,726	2,467	17%	17%
Northern Mariana Islands	34	9	131	174	12%	13%
Ohio	1,698	863	20,229	22,791	6%	6%
Oklahoma	4,381	3,419	6,835	14,634	5%	7%
Oregon	2,701	710	7,564	10,975	8%	9%
Pennsylvania	3,636	3,467	40,191	47,294	5%	6%
Puerto Rico	1,663	2,627	3,557	7,848	2%	4%
Rhode Island	228	1,193	3,024	4,445	4%	5%
South Carolina	761	1	10,544	11,306	4%	4%
South Dakota	697	1,404	985	3,086	5%	11%
Tennessee	132	19,064	3,010	22,207	0%	1%
Texas	16,761	3,845	47,615	68,220	9%	10%
Utah	213	1,286	5,534	7,034	3%	4%
Vermont	1,422	253	3,000	4,676	5%	5%
Virgin Islands	27	264	114	406	0%	0%
Virginia	1,050	5,029	11,138	17,217	7%	10%
Washington	7,577	18,725	6,378	32,681	2%	7%
West Virginia	368	784	4,434	5,585	4%	4%
Wisconsin	2,536	499	13,726	16,761	6%	6%
Wyoming	425	51	2,415	2,892	5%	5%
National	134,828	249,988	640,381	1,025,197	5%	6%

Notes applicable to this report:

1. The Mean Copay/Income columns exclude families with zero income because dividing by zero is undefined.

2. The Column labeled as Category A includes: families with zero income; families in protective services or families headed by a child; families with invalid income or copay.

3 The Families with \$0 Copay category is the percentage of families that had a \$0 co-payment and were not in Category A, divided by the count of all families. The sum of these three categories is 100%.

4. The results shown under Mean Copay/Income feature two different statistics, Including and Excluding \$0 copay. The data analyzed for the Including Families with \$0 Copay category includes all families except those families in the Category A data i.e., the total minus the Category A data. The data analyzed for Excluding Families with \$0 Copay includes only those families in the category Families with Copay >\$0 (and not in Category A). Alternatively, the data used for Excluding Families with \$0 Copay is all the family data minus those families in Category A and minus those families with \$0 Copay.

5. The National weighted values were determined by multiplying each State's average co-payment/income percentage by the adjusted number of children in each State, summing across the States and then dividing by the adjusted number of children served for the Nation.

FY 2007 CCDF Data from Aggregate and Case-Level Reports

The following notes are applicable to all FY 2007 tables derived from ACF-801 data (which include Tables 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 10b, 11b, 14b, and 15b). Notes specific to FY 2007 tables derived from ACF-800 data follow each table (which include Tables 9b, 12b, and 13b).

1. The source for this table is ACF-801 data for FFY 2007.
2. All counts are adjusted numbers of families and children unless otherwise indicated. These adjusted numbers represent the number funded through CCDF only. The adjusted number is the raw or unadjusted number reported by the State multiplied by its pooling factor as reported on the ACF-800. DC has indicated that the pooling factor reported on the ACF-800 is not applicable to the ACF-801. This report takes this factor into consideration in calculating the adjusted numbers or percentages.
3. All percentages are based on adjusted numbers of families and children unless otherwise indicated. These adjusted numbers represent the number funded through CCDF only. The adjusted number is the raw or unadjusted number reported by the State multiplied by its pooling factor as reported on the ACF-800. DC has indicated that the pooling factor reported on the ACF-800 is not applicable to the ACF-801. This report takes this factor into consideration in calculating the adjusted numbers or percentages.
4. A 0% indication often means the value is less than 0.5% rather than actually zero. In a few instances, the sum of the categories may not appear to add up to exactly 100% because of rounding.
5. All States provide an actual unadjusted count of families served each month. For States reporting full population data, the number of child records reported each month were directly counted. However, for States that only submit samples, the ratio of children-to-families was determined each month from the samples and then multiplied by the reported number of families to obtain an estimate of the unadjusted number of children served each month. The unadjusted average number of families and children were obtained from the monthly numbers in the Federal Fiscal Year (FFY) as reported on the ACF-801 summary (header) record.
6. At the time of publication American Samoa had not yet reported any ACF-801 data for FFY 2007.
7. Alaska began reporting full population data in February 2006; however, they are still resolving the difficulty of capturing information on children in Protective Services and Foster Care. Connecticut does not report ACF-801 data on all or nearly all children served by contracted centers. The current Wyoming processing system is unable to extract a number of hours for full- and part-day authorizations resulting in a high percentage of invalid setting records. Wyoming is developing a completely new processing system that will correct this problem in the future.

Table 1b - Child Care and Development Fund
Average Monthly Adjusted Numbers of Families and Children Served (FY 2007)

States/Territories	Average Number of Families	Average Number of Children
Alabama	16,800	31,700
Alaska	2,300	3,800
American Samoa	-	-
Arizona	18,000	29,900
Arkansas	3,200	4,700
California	91,800	144,500
Colorado	9,200	16,500
Connecticut	6,200	9,700
Delaware	4,200	7,000
District of Columbia	2,700	3,900
Florida	71,800	108,900
Georgia	28,300	53,600
Guam	400	700
Hawaii	6,400	10,000
Idaho	4,600	8,700
Illinois	41,300	76,200
Indiana	18,400	35,200
Iowa	10,200	17,900
Kansas	12,000	22,500
Kentucky	16,400	29,400
Louisiana	27,300	44,800
Maine	3,800	5,600
Maryland	13,900	23,900
Massachusetts	20,700	28,600
Michigan	38,700	75,500
Minnesota	14,000	25,600
Mississippi	16,600	30,600
Missouri	22,100	38,100
Montana	2,700	4,500
Nebraska	8,400	14,900
Nevada	3,600	6,100
New Hampshire	5,200	7,600
New Jersey	24,300	35,100
New Mexico	12,600	21,300
New York	69,400	115,500
North Carolina	30,700	64,200
North Dakota	2,300	3,800
Northern Mariana Islands	200	500
Ohio	31,000	54,300
Oklahoma	14,000	24,100
Oregon	10,500	19,600
Pennsylvania	53,900	95,700
Puerto Rico	7,400	9,100
Rhode Island	4,700	7,700
South Carolina	11,700	20,500
South Dakota	3,200	5,100
Tennessee	21,100	40,400
Texas	71,300	132,000
Utah	6,700	12,600
Vermont	4,200	6,100
Virgin Islands	300	500
Virginia	15,000	24,400
Washington	33,100	54,100
West Virginia	5,500	9,300
Wisconsin	14,500	25,700
Wyoming	2,700	4,400
National Total	991,500	1,706,600

Notes applicable to this table:

1. The reported results shown above have been rounded to the nearest 100. The national numbers are simply the sum of the State and Territory numbers.

Table 2b - Child Care and Development Fund
Average Monthly Percentages of Children by Age Group (FY 2007)

States/ Territories	0 to < 1 yr	1 yr to < 2 yrs	2 yrs to < 3 yrs	3 yrs to < 4 yrs	4 yrs to < 5 yrs	5 yrs to < 6 yrs	6 yrs to < 13 yrs	13+ yrs	Invalid/Not Reported	Total
Alabama	7%	12%	13%	13%	11%	10%	34%	0%	0%	100%
Alaska	7%	12%	13%	13%	13%	11%	32%	0%	0%	100%
American Samoa	--	--	--	--	--	--	--	--	--	--
Arizona	6%	11%	13%	13%	13%	10%	33%	0%	0%	100%
Arkansas	13%	20%	22%	20%	16%	8%	0%	0%	0%	100%
California	3%	7%	10%	14%	18%	11%	38%	0%	0%	100%
Colorado	7%	12%	13%	14%	13%	10%	31%	0%	0%	100%
Connecticut	6%	11%	13%	14%	13%	10%	33%	0%	0%	100%
Delaware	7%	12%	13%	13%	12%	10%	34%	0%	0%	100%
District of Columbia	6%	15%	20%	19%	12%	7%	21%	0%	0%	100%
Florida	6%	12%	14%	15%	14%	11%	29%	0%	0%	100%
Georgia	7%	12%	14%	13%	11%	9%	32%	0%	0%	100%
Guam	10%	15%	17%	15%	14%	9%	18%	0%	0%	100%
Hawaii	6%	11%	13%	17%	19%	8%	26%	0%	0%	100%
Idaho	7%	11%	13%	13%	12%	11%	32%	0%	0%	100%
Illinois	6%	10%	11%	11%	11%	9%	42%	1%	0%	100%
Indiana	6%	11%	12%	13%	13%	12%	32%	0%	0%	100%
Iowa	8%	12%	13%	13%	11%	9%	34%	0%	0%	100%
Kansas	7%	11%	13%	13%	12%	11%	33%	0%	0%	100%
Kentucky	8%	12%	13%	13%	12%	10%	33%	0%	0%	100%
Louisiana	9%	15%	17%	15%	11%	7%	26%	0%	0%	100%
Maine	4%	9%	12%	14%	15%	11%	35%	1%	0%	100%
Maryland	6%	11%	13%	13%	12%	9%	36%	0%	0%	100%
Massachusetts	7%	10%	14%	13%	15%	8%	33%	0%	0%	100%
Michigan	6%	9%	10%	10%	10%	9%	45%	1%	0%	100%
Minnesota	9%	11%	12%	12%	13%	10%	33%	0%	0%	100%
Mississippi	6%	11%	13%	13%	11%	9%	36%	0%	0%	100%
Missouri	9%	13%	14%	14%	13%	10%	28%	0%	0%	100%
Montana	8%	12%	14%	14%	13%	11%	28%	0%	0%	100%
Nebraska	9%	13%	13%	13%	12%	9%	30%	1%	0%	100%
Nevada	6%	11%	12%	13%	13%	10%	35%	0%	0%	100%
New Hampshire	5%	10%	12%	13%	13%	11%	33%	0%	0%	100%
New Jersey	4%	11%	14%	14%	10%	9%	36%	1%	0%	100%
New Mexico	7%	12%	13%	14%	13%	10%	32%	0%	0%	100%
New York	5%	9%	11%	13%	13%	9%	41%	0%	0%	100%
North Carolina	6%	9%	11%	12%	12%	10%	40%	0%	0%	100%
North Dakota	11%	14%	14%	14%	11%	9%	27%	0%	0%	100%
Northern Mariana Islands	8%	9%	9%	10%	11%	11%	41%	0%	0%	100%
Ohio	7%	12%	14%	12%	11%	10%	35%	0%	0%	100%
Oklahoma	8%	13%	14%	14%	12%	10%	29%	0%	0%	100%
Oregon	8%	11%	11%	12%	11%	10%	37%	0%	0%	100%
Pennsylvania	5%	10%	11%	12%	12%	10%	39%	1%	0%	100%
Puerto Rico	3%	8%	12%	16%	19%	12%	29%	2%	0%	100%
Rhode Island	5%	9%	11%	12%	12%	10%	42%	0%	0%	100%
South Carolina	8%	13%	14%	14%	12%	9%	30%	0%	0%	100%
South Dakota	9%	12%	14%	15%	13%	11%	26%	0%	0%	100%
Tennessee	7%	12%	13%	13%	12%	9%	33%	0%	0%	100%
Texas	7%	12%	14%	13%	12%	9%	33%	0%	0%	100%
Utah	7%	10%	12%	12%	12%	11%	35%	0%	0%	100%
Vermont	5%	10%	13%	13%	14%	11%	33%	1%	0%	100%
Virgin Islands	3%	11%	14%	17%	18%	8%	28%	0%	0%	100%
Virginia	6%	11%	15%	15%	13%	10%	30%	0%	0%	100%
Washington	7%	11%	12%	12%	12%	10%	35%	0%	0%	100%

West Virginia	6%	11%	13%	13%	12%	10%	35%	0%	0%	100%
Wisconsin	8%	11%	12%	12%	12%	10%	35%	0%	0%	100%
Wyoming	7%	12%	14%	16%	14%	10%	27%	0%	0%	100%
National	6%	11%	12%	13%	13%	10%	35%	0%	0%	100%

Notes applicable to this report:

1. The Invalid/Not Reported category only includes children with an invalid year/month of birth or report date.

Table 3b - Child Care and Development Fund
Average Monthly Percentages of Children by Racial Group (FY 2007)

States/Territories	Native American or Alaskan Native	Asian	Black or African American	Native Hawaiian or Pacific Islander	White	Multi-Racial	Invalid/Race not Reported	Total
Alabama	0%	0%	76%	0%	23%	1%	0%	100%
Alaska	10%	5%	10%	6%	47%	16%	6%	100%
American Samoa	--	--	--	--	--	--	--	--
Arizona	5%	1%	14%	1%	77%	3%	0%	100%
Arkansas	0%	0%	59%	0%	40%	0%	0%	100%
California	2%	5%	24%	1%	66%	2%	0%	100%
Colorado	1%	0%	15%	0%	34%	3%	46%	100%
Connecticut	1%	0%	34%	0%	27%	6%	31%	100%
Delaware	0%	0%	65%	0%	34%	1%	0%	100%
District of Columbia	1%	0%	88%	0%	9%	0%	2%	100%
Florida	0%	0%	50%	0%	47%	3%	0%	100%
Georgia	0%	0%	80%	0%	17%	1%	2%	100%
Guam	0%	10%	0%	76%	1%	13%	0%	100%
Hawaii	0%	31%	1%	35%	11%	21%	0%	100%
Idaho	1%	0%	1%	0%	96%	1%	0%	100%
Illinois	0%	0%	62%	1%	19%	2%	16%	100%
Indiana	0%	0%	48%	0%	42%	9%	0%	100%
Iowa	0%	1%	20%	0%	79%	0%	0%	100%
Kansas	1%	1%	28%	0%	63%	2%	5%	100%
Kentucky	0%	0%	31%	0%	60%	0%	9%	100%
Louisiana	0%	0%	77%	0%	22%	1%	0%	100%
Maine	1%	1%	4%	0%	86%	5%	2%	100%
Maryland	0%	0%	78%	0%	18%	2%	1%	100%
Massachusetts	0%	2%	17%	0%	25%	1%	54%	100%
Michigan	0%	0%	57%	0%	41%	2%	0%	100%
Minnesota	3%	8%	33%	0%	54%	2%	0%	100%
Mississippi	0%	0%	88%	0%	10%	2%	0%	100%
Missouri	0%	0%	57%	0%	35%	1%	6%	100%
Montana	13%	0%	2%	0%	80%	4%	1%	100%
Nebraska	3%	0%	27%	0%	68%	1%	0%	100%
Nevada	2%	1%	29%	1%	57%	9%	0%	100%
New Hampshire	0%	0%	3%	0%	75%	0%	21%	100%
New Jersey	0%	1%	56%	12%	25%	1%	5%	100%
New Mexico	6%	0%	4%	0%	85%	3%	0%	100%
New York	1%	1%	53%	2%	40%	3%	0%	100%
North Carolina	2%	0%	62%	0%	35%	0%	0%	100%
North Dakota	24%	0%	4%	0%	69%	4%	0%	100%
Northern Mariana Islands	0%	0%	0%	99%	0%	1%	0%	100%
Ohio	0%	0%	53%	0%	44%	2%	0%	100%
Oklahoma	8%	0%	33%	0%	57%	1%	0%	100%
Oregon	2%	2%	10%	0%	85%	1%	0%	100%
Pennsylvania	0%	1%	44%	0%	53%	2%	0%	100%
Puerto Rico	0%	0%	0%	0%	67%	0%	33%	100%
Rhode Island	0%	0%	7%	0%	17%	0%	75%	100%
South Carolina	0%	0%	75%	0%	25%	0%	0%	100%
South Dakota	20%	0%	4%	0%	69%	6%	0%	100%
Tennessee	0%	0%	73%	0%	26%	0%	0%	100%
Texas	0%	0%	35%	0%	46%	1%	18%	100%
Utah	3%	2%	5%	1%	89%	0%	0%	100%
Vermont	0%	1%	3%	0%	93%	3%	0%	100%

Virgin Islands	5%	0%	94%	0%	0%	0%	0%	100%
Virginia	3%	1%	67%	0%	27%	1%	0%	100%
Washington	3%	2%	10%	0%	41%	0%	44%	100%
West Virginia	0%	0%	11%	0%	76%	11%	2%	100%
Wisconsin	2%	1%	40%	0%	40%	3%	13%	100%
Wyoming	3%	0%	4%	0%	80%	0%	13%	100%
National	1%	1%	44%	1%	44%	2%	6%	100%

Notes applicable to this report:

1. The multi-racial category includes any child where more than one race was answered Yes (1). Several States do not capture and report more than one race per child and thus do not provide multi-racial data.

2. The Invalid/Not Reported category includes children where one or more race fields had anything other than a No (0) or Yes (1), blank, null, or space.

3. It appears that several States and Territories are still reporting ethnicity (Latino/Hispanic) as a race rather than as an ethnicity in accordance with the Pre-FFY 2000 Technical Bulletin 3 standard. In many of these instances if a child is designated as Latino, no race is designated.

Table 4b - Child Care and Development Fund
Average Monthly Percentages of Children by Latino Ethnicity (FY 2007)

States/Territories	Latino	Not Latino	Invalid/ Not Reported	Ethnicity Total
Alabama	1%	99%	0%	100%
Alaska	10%	88%	2%	100%
American Samoa	--	--	--	--
Arizona	48%	52%	0%	100%
Arkansas	0%	100%	0%	100%
California	52%	48%	0%	100%
Colorado	33%	67%	0%	100%
Connecticut	37%	63%	0%	100%
Delaware	10%	90%	0%	100%
District of Columbia	11%	89%	0%	100%
Florida	24%	76%	0%	100%
Georgia	2%	98%	0%	100%
Guam	1%	99%	0%	100%
Hawaii	6%	94%	0%	100%
Idaho	16%	84%	0%	100%
Illinois	15%	83%	3%	100%
Indiana	7%	93%	0%	100%
Iowa	6%	94%	0%	100%
Kansas	12%	88%	0%	100%
Kentucky	4%	91%	5%	100%
Louisiana	2%	98%	0%	100%
Maine	3%	97%	0%	100%
Maryland	3%	97%	0%	100%
Massachusetts	33%	67%	0%	100%
Michigan	4%	96%	0%	100%
Minnesota	3%	97%	0%	100%
Mississippi	1%	99%	0%	100%
Missouri	3%	91%	6%	100%
Montana	7%	93%	0%	100%
Nebraska	10%	90%	0%	100%
Nevada	31%	69%	0%	100%
New Hampshire	5%	71%	24%	100%
New Jersey	29%	71%	0%	100%
New Mexico	75%	25%	0%	100%
New York	24%	76%	0%	100%
North Carolina	5%	95%	0%	100%
North Dakota	3%	97%	0%	100%
Northern Mariana Islands	0%	100%	0%	100%
Ohio	4%	96%	0%	100%
Oklahoma	9%	91%	0%	100%
Oregon	14%	86%	0%	100%
Pennsylvania	11%	83%	5%	100%
Puerto Rico	99%	1%	0%	100%
Rhode Island	21%	79%	0%	100%
South Carolina	0%	100%	0%	100%
South Dakota	3%	97%	0%	100%
Tennessee	1%	99%	0%	100%
Texas	44%	56%	0%	100%
Utah	16%	84%	0%	100%
Vermont	2%	98%	0%	100%
Virgin Islands	9%	91%	0%	100%
Virginia	6%	94%	0%	100%
Washington	13%	87%	0%	100%

West Virginia	2%	98%	0%	100%
Wisconsin	8%	92%	0%	100%
Wyoming	12%	88%	0%	100%
National	19%	80%	1%	100%

Notes applicable to this report:

1. The Invalid/Not Reported category includes children where anything other than a No (0) or Yes (1) was in the Ethnicity field.

Table 5b - Child Care and Development Fund
 Average Monthly Percentages of Children in Child Care by Age Category and Type of Care (FY 2007)

Age Group	Child's Home	Family Home	Group Home	Center	Total
Infants (0 to <1 yr)	6%	34%	6%	55%	100%
Toddlers (1 yr to <3 yrs)	5%	29%	5%	61%	100%
Preschool (3 yrs to <6 yrs)	4%	24%	5%	67%	100%
School Age (6 yrs to <13 yrs)	10%	34%	4%	52%	100%
13 years and older	17%	50%	4%	28%	100%
All Ages	6%	29%	5%	60%	100%

Notes applicable to this report:

1. Nationally 1.4% of the children served with CCDF funds were excluded from the above table because either their age was invalid/not reported or one or more setting elements of the child's setting record(s) were invalid or not reported.
2. The National values were determined by multiplying each State's percentage by the adjusted number of children served for each State, summing across the States and then dividing by the adjusted number of children served for the Nation. Adjusted means adjusted to represent CCDF funding only.
3. Some children are reported to have multiple settings for the same month. If a child was in more than one of the above setting categories within the same month, the child was counted in each setting in proportion to the number of hours of service received in each setting. For example if the child spent 70-hours in a center and 30-hours in a child's home, the child would be scored as 0.7 count in Center and 0.3 count in Child's Home (proportional counting).

Table 6b - Child Care and Development Fund
Average Monthly Hours of Child Care by Age Group and Type of Care (FY 2007)

Age Group	Child's Home	Family Home	Group Home	Center	Average
0 to < 1 yr	155	160	159	162	161
1 to < 2 yrs	161	165	158	169	167
2 to < 3 yrs	162	166	162	170	168
3 to < 4 yrs	167	167	163	169	168
4 to < 5 yrs	161	164	159	164	164
5 to < 6 yrs	148	148	141	142	144
6 to < 13 yrs	139	130	120	112	121
13+ yrs	138	123	107	101	119
National	148	149	146	148	148

Notes applicable to this report:

1. Nationally 1.4% of the children served with CCDF funds were excluded from the above table because either their age was invalid/not reported or one or more setting elements of a child's setting record was invalid or not reported.
2. Average hours per month were based on sums of hours per month in categories divided by counts of children in categories as further defined below.
3. For children served by multiple providers, the child's count is proportioned based on the ratio of the monthly hours with each provider divided by the monthly total hours of service. The average hours and payments for each State-month combination are based on the sum of hours in each category divided by the sum of proportional counts in each category. The State's annual results are determined by calculating a weighted average of the monthly results where the weight was the adjusted number of children served in each month. The national results shown above represent a weighted average of the State's fiscal annual results where the weight for each State is the average monthly adjusted number of children served in each State for the fiscal year.
4. Some States have been reporting the maximum number of hours authorized rather than the actual number of service hours provided.

Table 7b - Child Care and Development Fund
Average Monthly Payment to Provider (Including Family CoPay) by Age Group and Care Type (FY 2007)

Age Group	Child's Home	Family Home	Group Home	Center	Average
0 to < 1 yr	\$299	\$382	\$518	\$481	\$439
1 to < 2 yrs	\$315	\$395	\$501	\$483	\$448
2 to < 3 yrs	\$291	\$383	\$516	\$464	\$437
3 to < 4 yrs	\$296	\$366	\$486	\$442	\$420
4 to < 5 yrs	\$286	\$361	\$470	\$441	\$418
5 to < 6 yrs	\$263	\$331	\$436	\$382	\$365
6 to < 13 yrs	\$255	\$294	\$400	\$299	\$297
13+ yrs	\$250	\$277	\$326	\$310	\$283
National	\$272	\$339	\$461	\$401	\$377

Notes applicable to this report:

1. Nationally 1.4% of the children served with CCDF funds were excluded from the above table because either their age was invalid/not reported or one or more setting elements of a child's setting record was invalid or not reported.
2. Payment is defined as the total amount received by the provider. It is the sum of the State subsidy and the family copay.
3. Average payment per month is based on sums of payments per month in categories divided by counts of children in categories as further defined below.
4. For children served by multiple providers, the child's count is proportioned based on the ratio of the monthly hours with each provider divided by the monthly total hours of service. The average hours and payments for each State-month combination are based on the sum of hours in each category divided by the sum of proportional counts in each category. The State's annual results are determined by calculating a weighted average of the monthly results where the weight was the adjusted number of children served in each month. The national results shown above represent a weighted average of the State's fiscal annual results where the weight for each State is the average monthly adjusted number of children served in each State for the fiscal year.
5. Some States have been reporting the maximum number of hours authorized and/or dollars authorized rather than the actual number provided.

Table 8b - Child Care and Development Fund
Reasons for Receiving Care (FY 2007)

States/Territories	Employment	Training/ Education	Both Emp. & Training/ Education	Protective Services	Other	Invalid or not Reported	Total
Alabama	79%	7%	4%	9%	1%	0%	100%
Alaska	86%	3%	8%	0%	2%	0%	100%
American Samoa	--	--	--	--	--	--	--
Arizona	70%	1%	5%	23%	2%	0%	100%
Arkansas	46%	9%	8%	5%	32%	0%	100%
California	86%	6%	5%	1%	3%	0%	100%
Colorado	81%	11%	5%	0%	2%	2%	100%
Connecticut	95%	4%	1%	0%	0%	0%	100%
Delaware	82%	6%	4%	2%	5%	0%	100%
District of Columbia	63%	26%	3%	1%	6%	0%	100%
Florida	67%	4%	3%	25%	1%	0%	100%
Georgia	81%	7%	2%	8%	0%	1%	100%
Guam	79%	10%	10%	0%	1%	0%	100%
Hawaii	85%	3%	8%	0%	3%	0%	100%
Idaho	77%	9%	14%	0%	0%	0%	100%
Illinois	91%	3%	1%	0%	5%	0%	100%
Indiana	69%	10%	7%	0%	13%	0%	100%
Iowa	88%	6%	0%	6%	0%	0%	100%
Kansas	93%	4%	2%	0%	1%	0%	100%
Kentucky	78%	7%	2%	13%	0%	0%	100%
Louisiana	76%	8%	10%	5%	0%	0%	100%
Maine	86%	4%	6%	2%	2%	0%	100%
Maryland	79%	12%	6%	0%	3%	0%	100%
Massachusetts	72%	10%	0%	15%	3%	0%	100%
Michigan	84%	12%	1%	1%	2%	0%	100%
Minnesota	78%	7%	7%	0%	8%	0%	100%
Mississippi	77%	17%	5%	1%	0%	0%	100%
Missouri	41%	5%	44%	10%	0%	0%	100%
Montana	67%	11%	15%	8%	0%	0%	100%
Nebraska	75%	11%	2%	12%	1%	0%	100%
Nevada	90%	6%	2%	0%	2%	0%	100%
New Hampshire	83%	8%	0%	8%	1%	0%	100%
New Jersey	81%	2%	3%	5%	8%	0%	100%
New Mexico	77%	12%	11%	0%	0%	0%	100%
New York	75%	14%	3%	0%	8%	0%	100%
North Carolina	92%	8%	0%	0%	0%	0%	100%
North Dakota	78%	14%	6%	0%	2%	0%	100%
Northern Mariana Islands	75%	19%	6%	0%	0%	0%	100%
Ohio	70%	15%	5%	0%	11%	0%	100%
Oklahoma	81%	15%	0%	0%	3%	0%	100%
Oregon	75%	4%	20%	1%	0%	0%	100%
Pennsylvania	78%	6%	13%	0%	3%	0%	100%
Puerto Rico	71%	18%	9%	1%	2%	0%	100%
Rhode Island	90%	8%	2%	0%	0%	0%	100%
South Carolina	81%	18%	0%	0%	0%	0%	100%
South Dakota	64%	10%	12%	14%	0%	0%	100%
Tennessee	42%	35%	21%	0%	1%	0%	100%
Texas	79%	16%	3%	1%	2%	0%	100%
Utah	84%	2%	3%	0%	10%	0%	100%
Vermont	63%	14%	2%	15%	6%	0%	100%
Virgin Islands	79%	16%	1%	4%	0%	0%	100%

Virginia	89%	4%	5%	0%	2%	0%	100%
Washington	82%	8%	0%	9%	1%	0%	100%
West Virginia	79%	13%	8%	0%	0%	0%	100%
Wisconsin	93%	1%	5%	0%	2%	0%	100%
Wyoming	92%	7%	0%	0%	0%	0%	100%
National	78%	9%	5%	5%	3%	0%	100%

Notes applicable to this report:

1. The Invalid/Not Reported only includes family records with an invalid or missing number for ACF-801 element 6, Reason for Receiving Subsidized Child Care.

2. Several States only capture the primary reason for receiving services and therefore do not report any families in Both Employment and Training/Education categories. States reporting no families in this combination category of Both Employment and Training/Education are Iowa, Massachusetts, New Hampshire, North Carolina, South Carolina, and Wyoming.

3. CCB has observed some issues with income reporting across most States to varying degrees. CCB is working with States to address and resolve internal inconsistencies between ACF-801 element 6 (reason for receiving a subsidy), element 9 (total income for determining eligibility), and elements 10 through 15 (sources of income).

Table 9b - Child Care and Development Fund
Number of Child Care Providers Receiving CCDF Funds (FY 2007)

States/Territories	Child's Home	FCC Home	Group Home	Center	Total
Alabama	19	1,280	246	1,700	3,245
Alaska	455	813	94	202	1,564
American Samoa	--	--	--	--	--
Arizona	734	3,597	350	1,353	6,034
Arkansas	0	603	0	991	1,594
California	9,825	61,958	6,176	5,369	83,328
Colorado	535	2,569	0	1,406	4,510
Connecticut	4,811	4,033	17	1,586	10,447
Delaware	0	726	43	310	1,079
District of Columbia	105	146	0	214	465
Florida	35	5,464	0	7,444	12,943
Georgia	413	4,177	212	3,583	8,385
Guam	27	1	1	46	75
Hawaii	1,529	5,060	5	212	6,806
Idaho	120	1,732	397	525	2,774
Illinois	28,644	47,553	304	3,496	79,997
Indiana	67	3,495	0	1,199	4,761
Iowa	176	6,814	286	589	7,865
Kansas	688	2,646	2,355	726	6,415
Kentucky	232	2,996	132	1,800	5,160
Louisiana	2,705	2,010	0	2,172	6,887
Maine	215	1,821	0	491	2,527
Maryland	2,375	5,738	0	1,616	9,729
Massachusetts	1,203	1,819	2,956	2,339	8,317
Michigan	26,804	36,159	2,666	2,438	68,067
Minnesota	3,214	13,433	0	1,989	18,636
Mississippi	760	5,699	24	1,404	7,887
Missouri	579	6,565	174	2,061	9,379
Montana	247	1,283	447	237	2,214
Nebraska	309	3,235	284	648	4,476
Nevada	100	659	11	564	1,334
New Hampshire	367	1,540	0	609	2,516
New Jersey	681	4,897	0	2,479	8,057
New Mexico	9	4,268	162	502	4,941
New York	19,276	43,118	4,371	4,490	71,255
North Carolina	95	3,917	0	4,316	8,328
North Dakota	1	1,706	637	140	2,484
Northern Mariana Islands	0	83	0	19	102
Ohio	9	10,373	227	3,846	14,455
Oklahoma	17	2,252	0	1,303	3,572
Oregon	4,250	10,710	240	722	15,922
Pennsylvania	3,710	46,146	734	3,748	54,338
Puerto Rico	61	2,697	0	759	3,517
Rhode Island	36	1,133	6	356	1,531
South Carolina	664	2,511	163	1,199	4,537
South Dakota	57	1,388	84	240	1,769
Tennessee	354	4,325	521	1,898	7,098
Texas	7,412	12,749	897	6,556	27,614
Utah	2,592	6,802	500	511	10,405
Vermont	361	1,990	0	508	2,859
Virgin Islands	0	3	28	71	102
Virginia	0	0	0	0	0
Washington	9,574	8,834	0	1,969	20,377

West Virginia	14	2,239	93	441	2,787
Wisconsin	105	5,993	0	2,340	8,438
Wyoming	213	1,107	146	159	1,625
National Total	136,784	414,865	25,989	87,891	665,529

Notes applicable to this table:

1. The source for this table is ACF-800 data for FFY 2007, an unduplicated annual count.
2. This data has not been adjusted by the pooling factor (unadjusted data) because ACF-800 Data Element 6a is reported as a count of providers receiving CCDF funding.
3. Note that this table reports the number of providers (not the number of children). A provider that serves only one child per day is counted the same as, for example, a provider serving 200 children per day.
4. At the time of publication, American Samoa had not yet reported FFY 2007 ACF-800 data.
5. Virginia is not able to report the number of providers because payments are made locally and information on providers is also kept at the local level. They are working towards an automated system in order to report the number of providers.

Virgin Islands	7%	0%	4%	87%	1%	1%	0%	0%	0%	0%	0%	0%
Virginia	2%	18%	0%	60%	2%	2%	5%	7%	0%	0%	3%	0%
Washington	0%	25%	0%	43%	11%	0%	6%	0%	0%	0%	0%	14%
West Virginia	0%	32%	5%	60%	0%	0%	1%	0%	0%	0%	2%	0%
Wisconsin	0%	32%	0%	64%	0%	0%	0%	0%	0%	0%	0%	4%
Wyoming	0%	8%	5%	14%	4%	2%	10%	7%	0%	0%	0%	50%
National Percentage	0%	13%	5%	56%	4%	2%	9%	7%	0%	0%	3%	1%

Notes applicable to this table:

1. Some children are reported to have multiple settings for the same month. If a child was in more than one setting category within the same month, the child was counted in each setting in proportion to the number of hours of service received in each setting. For example if the child spent 70-hours in a center and 30-hours in a child's home, the child would be scored as 0.7 count in Center and 0.3 count in Child's Home (proportional counting).

2. For consistency with related reports involving setting data, the Invalid/Not Reported category includes children with any element of any setting identified as invalid or not reported including zero hours served, zero cost, or no setting records.

Table 11b - Child Care and Development Fund
 Of Children in Settings Legally Operating Without Regulation,
 Percent Served by Relatives vs. Non-Relatives (FY 2007)

States/Territories	Relative	Non-Relative
Alabama	99%	1%
Alaska	85%	15%
American Samoa	--	--
Arizona	100%	0
Arkansas	3%	97%
California	74%	26%
Colorado	75%	25%
Connecticut	77%	23%
Delaware	99%	1%
District of Columbia	100%	0%
Florida	22%	78%
Georgia	80%	20%
Guam	68%	32%
Hawaii	87%	13%
Idaho	34%	66%
Illinois	36%	64%
Indiana	30%	70%
Iowa	14%	86%
Kansas	84%	16%
Kentucky	51%	49%
Louisiana	51%	49%
Maine	51%	49%
Maryland	47%	53%
Massachusetts	78%	22%
Michigan	100%	0%
Minnesota	49%	51%
Mississippi	54%	46%
Missouri	20%	80%
Montana	58%	42%
Nebraska	3%	97%
Nevada	25%	75%
New Hampshire	29%	71%
New Jersey	37%	63%
New Mexico	72%	28%
New York	45%	55%
North Carolina	73%	27%
North Dakota	36%	64%
Northern Mariana Islands	99%	2%
Ohio	0%	0%
Oklahoma	0%	0%
Oregon	31%	69%
Pennsylvania	55%	45%
Puerto Rico	83%	17%
Rhode Island	65%	35%
South Carolina	0%	100%
South Dakota	61%	39%
Tennessee	39%	61%
Texas	100%	0%
Utah	95%	5%
Vermont	0%	0%
Virgin Islands	50%	50%
Virginia	47%	53%
Washington	99%	1%
West Virginia	64%	36%
Wisconsin	0%	0%
Wyoming	61%	39%
National Total	61%	39%

Notes applicable to this table:

1. In some States there were no children served in unregulated settings and thus the percent is NA since division by zero is undefined. States with no Providers Legally Operating Without Regulation include Ohio, Oklahoma, Vermont and Wisconsin.

2. Some children are reported to have multiple settings for the same month. If a child was in more than one setting category within the same month, the child was counted in each setting in proportion to the number of hours of service received in each setting. For example if the child spent 70-hours in a center and 30-hours in a child's home, the child would be scored as 0.7 count in Center and 0.3 count in Child's Home (proportional counting).

Table 12b - Child Care and Development Fund
Average Monthly Percentages of Children Served by Payment Method (FY 2007)

States/Territories	Grants / Contracts %	Certificates %	Cash %
Alabama	0%	100%	0%
Alaska	0%	84%	16%
American Samoa	--	--	--
Arizona	0%	100%	0%
Arkansas	43%	57%	0%
California	37%	63%	0%
Colorado	1%	98%	1%
Connecticut	31%	69%	0%
Delaware	0%	100%	0%
District of Columbia	0%	100%	0%
Florida	53%	47%	0%
Georgia	0%	100%	0%
Guam	43%	57%	0%
Hawaii	42%	0%	58%
Idaho	0%	100%	0%
Illinois	8%	92%	0%
Indiana	2%	98%	0%
Iowa	0%	100%	0%
Kansas	0%	100%	0%
Kentucky	0%	100%	0%
Louisiana	0%	100%	0%
Maine	29%	70%	1%
Maryland	0%	100%	0%
Massachusetts	44%	56%	0%
Michigan	0%	71%	29%
Minnesota	0%	100%	0%
Mississippi	3%	97%	0%
Missouri	0%	100%	0%
Montana	0%	97%	3%
Nebraska	0%	100%	0%
Nevada	19%	81%	0%
New Hampshire	0%	100%	0%
New Jersey	19%	81%	0%
New Mexico	0%	100%	0%
New York	20%	80%	0%
North Carolina	0%	100%	0%
North Dakota	0%	100%	0%
Northern Mariana Islands	0%	0%	100%
Ohio	0%	100%	0%
Oklahoma	0%	100%	0%
Oregon	3%	97%	0%
Pennsylvania	0%	82%	18%
Puerto Rico	66%	34%	0%
Rhode Island	0%	100%	0%
South Carolina	0%	100%	0%
South Dakota	1%	99%	0%
Tennessee	0%	100%	0%
Texas	0%	100%	0%
Utah	0%	0%	100%
Vermont	1%	99%	0%
Virgin Islands	0%	100%	0%
Virginia	0%	100%	0%
Washington	0%	100%	0%
West Virginia	0%	100%	0%
Wisconsin	0%	100%	0%
Wyoming	0%	100%	0%
National Total	12%	85%	3%

Notes applicable to this table:

1. The source for this table is ACF-800 data for FFY 2007. The ACF-800 is based on an annual unduplicated count of families and children; i.e., a family or child that receives one hour of service on one day is counted the same as a family or child that receives full-time care throughout the fiscal year.

2. All counts are adjusted numbers of families and children unless otherwise indicated. These adjusted numbers represent the number funded through CCDF only. The adjusted number is the raw or unadjusted number reported by the State multiplied by its pooling factor as reported on the ACF-800. DC has indicated that the pooling factor reported on the ACF-800 is not applicable to the ACF-801. This report takes this factor into consideration in calculating the adjusted numbers or percentages.

3. A 0% indication often means the value is less than 0.5% rather than actually zero. In a few instances, the sum of the categories may not appear to add up to exactly 100% because of rounding.

4. At the time of publication, American Samoa had not reported any ACF-800 data for FFY 2007.

Virgin Islands	Y	Y	Y	Y	Y	Y	Y	Y	N	664
Virginia	Y	Y	Y	Y	Y	Y	Y	Y		37,335
Washington	Y	Y	Y	Y	Y	Y	Y	Y	Y	24,988
West Virginia	Y	Y	Y	Y	Y	Y	Y	Y	Y	8,457
Wisconsin	Y	Y	N	Y	Y	Y	Y	Y	N	52,801
Wyoming	NA	Y	Y	Y	Y	Y	Y	Y	N	11,998
Total Yes	35	55	52	55	51	51	52	50	8	12,555,315

Notes applicable to this table:

1. The source for this table is ACF-800 data for FFY 2007, an unduplicated annual count.
2. This data has not been adjusted by the pooling factor (unadjusted data) because it is impossible to tell which families receiving consumer information also received CCDF funding.
3. NA=Not applicable, does not offer grants or contracts for subsidized child care slots.
4. A blank cell indicates that the State did not provide a response.
5. At the time of publication, American Samoa had not yet reported FFY 2007 ACF-800 data.

Table 14b - Child Care and Development Fund
Average Monthly Percentages of Families with TANF as one of their Sources of Income (FY 2007)

States/Territories	Yes	No	Invalid/ Not Reported	Total
Alabama	13%	87%	0%	100%
Alaska	14%	86%	0%	100%
American Samoa	--	--	--	--
Arizona	19%	81%	0%	100%
Arkansas	5%	95%	0%	100%
California	11%	89%	0%	100%
Colorado	7%	93%	0%	100%
Connecticut	13%	87%	0%	100%
Delaware	9%	91%	0%	100%
District of Columbia	9%	91%	0%	100%
Florida	5%	93%	2%	100%
Georgia	6%	94%	0%	100%
Guam	1%	99%	0%	100%
Hawaii	13%	87%	0%	100%
Idaho	1%	99%	0%	100%
Illinois	5%	95%	0%	100%
Indiana	21%	79%	0%	100%
Iowa	27%	73%	0%	100%
Kansas	7%	93%	0%	100%
Kentucky	1%	99%	0%	100%
Louisiana	10%	85%	5%	100%
Maine	3%	97%	0%	100%
Maryland	13%	87%	0%	100%
Massachusetts	22%	78%	0%	100%
Michigan	57%	43%	0%	100%
Minnesota	36%	64%	0%	100%
Mississippi	11%	89%	0%	100%
Missouri	0%	100%	0%	100%
Montana	11%	89%	0%	100%
Nebraska	24%	76%	0%	100%
Nevada	17%	83%	0%	100%
New Hampshire	27%	65%	8%	100%
New Jersey	13%	87%	0%	100%
New Mexico	15%	85%	0%	100%
New York	46%	54%	0%	100%
North Carolina	4%	96%	0%	100%
North Dakota	20%	80%	0%	100%
Northern Mariana Islands	0%	100%	0%	100%
Ohio	15%	85%	0%	100%
Oklahoma	10%	90%	0%	100%
Oregon	32%	68%	0%	100%
Pennsylvania	12%	88%	0%	100%
Puerto Rico	0%	100%	0%	100%
Rhode Island	8%	92%	0%	100%
South Carolina	26%	74%	0%	100%
South Dakota	6%	94%	0%	100%
Tennessee	60%	40%	0%	100%
Texas	1%	99%	0%	100%
Utah	12%	88%	0%	100%
Vermont	19%	81%	0%	100%
Virgin Islands	5%	94%	0%	100%
Virginia	31%	69%	0%	100%
Washington	20%	80%	0%	100%
West Virginia	6%	94%	0%	100%
Wisconsin	4%	96%	0%	100%
Wyoming	0%	100%	0%	100%
National	16%	83%	0%	100%

Notes applicable to this report:

1. The percentage shown as Yes is the number reported as Yes divided by the families that answered Yes or No excluding families that were in protective services. The Invalid/Not Reported column includes families that did not indicate whether TANF was a source of income and the family was reported as being in protective services.

Table 15b - Child Care and Development Fund
Mean Family Co-payment as a Percentage of Family Income (FY 2007)

States/Territories	Families with Income=\$0; Protective Services; Invalid Data (Column 1)	Families with Copay=\$0; Income>\$0; (NOT in Column 1)	Families with Copay>\$0; Income>\$0; (NOT in Column 1)	All Families	Mean Copay/Income	
					Including Families with Copay=\$0	Excluding Families with Copay=\$0
Alabama	2,725	1,240	12,789	16,754	4.9%	5.4%
Alaska	197	172	1,883	2,252	3.7%	4.0%
American Samoa	-	-	-	-	-	-
Arizona	4,908	1,217	11,910	18,035	4.0%	4.4%
Arkansas	396	2,498	325	3,219	0.8%	5.7%
California	2,815	59,651	29,331	91,797	1.1%	3.3%
Colorado	2,155	735	6,283	9,173	9.4%	10.5%
Connecticut	468	297	5,465	6,230	4.5%	4.8%
Delaware	372	1,611	2,248	4,231	5.4%	9.3%
District of Columbia	965	465	1,276	2,706	2.9%	3.9%
Florida	19,858	154	51,741	71,753	6.5%	6.5%
Georgia	4,242	3,522	20,490	28,255	5.6%	6.6%
Guam	14	5	379	398	8.9%	9.0%
Hawaii	215	2,974	3,228	6,417	1.3%	2.4%
Idaho	552	1	4,097	4,649	9.9%	9.9%
Illinois	1,371	589	39,360	41,320	6.2%	6.3%
Indiana	387	13,892	4,135	18,415	1.4%	5.9%
Iowa	960	5,631	3,612	10,203	2.2%	5.5%
Kansas	1,987	2,116	7,922	12,024	4.8%	6.1%
Kentucky	2,243	3,522	10,668	16,433	5.9%	7.8%
Louisiana	2,393	1,419	23,474	27,286	11.5%	12.2%
Maine	204	107	3,446	3,757	7.3%	7.5%
Maryland	724	2,107	11,112	13,944	7.9%	9.3%
Massachusetts	4,229	5,474	10,978	20,681	5.6%	8.4%
Michigan	1,438	10,188	27,030	38,656	2.1%	2.9%
Minnesota	347	3,878	9,745	13,970	3.1%	4.3%
Mississippi	2,635	188	13,762	16,585	3.8%	3.9%
Missouri	6,000	5,172	10,904	22,077	4.4%	6.5%
Montana	252	0	2,424	2,675	3.9%	3.9%
Nebraska	3,184	3,941	1,289	8,415	2.2%	8.7%
Nevada	81	646	2,920	3,647	6.0%	7.4%
New Hampshire	572	1,942	2,701	5,214	0.1%	0.1%
New Jersey	2,792	3,505	17,970	24,267	5.6%	6.7%
New Mexico	894	1,987	9,723	12,603	4.1%	4.9%
New York	1,305	25,356	42,710	69,371	2.9%	4.7%
North Carolina	4,413	1,637	24,687	30,737	7.6%	8.1%
North Dakota	688	1	1,660	2,348	17.4%	17.4%
Northern Mariana Islands	35	0	177	212	4.2%	4.2%
Ohio	2,389	1,189	27,451	31,029	5.8%	6.0%
Oklahoma	3,892	3,188	6,947	14,027	5.1%	7.4%
Oregon	2,723	725	7,056	10,504	8.0%	8.8%
Pennsylvania	6,942	1,379	45,565	53,887	5.2%	5.3%
Puerto Rico	2,053	2,600	2,780	7,433	2.1%	4.0%
Rhode Island	274	1,221	3,254	4,749	3.7%	5.1%
South Carolina	925	2	10,802	11,729	3.3%	3.3%
South Dakota	694	1,409	1,107	3,210	4.9%	11.0%
Tennessee	198	18,648	2,272	21,118	0.1%	1.1%
Texas	15,004	2,834	53,434	71,272	9.2%	9.7%
Utah	176	916	5,601	6,693	3.6%	4.2%
Vermont	1,274	292	2,644	4,210	4.5%	5.0%
Virgin Islands	28	191	101	320	0.0%	0.1%
Virginia	367	4,982	9,624	14,973	6.7%	10.2%
Washington	8,120	19,624	5,356	33,101	1.6%	7.2%
West Virginia	359	736	4,429	5,524	3.4%	4.0%
Wisconsin	1,870	447	12,181	14,498	5.9%	6.2%
Wyoming	395	38	2,296	2,730	5.7%	5.8%
National	126,700	228,263	636,754	991,717	4.8%	6.1%

Notes applicable to this report:

1. The Mean CoPay/Income columns exclude families with zero income because dividing by zero is undefined.
2. The column labeled as Category A includes: families with zero income; families in protective services or families headed by a child; families with invalid income or copay.
3. The Families with \$0 Copay category is the percentage of families that had a \$0 co-payment and were not in Category A, divided by the count of all families. The sum of these three categories is 100%.
4. The results shown under Mean Copay/Income feature two different statistics, Including and Excluding \$0 copay.

The data analyzed for the Including Families with \$0 CoPay category includes all families except those families in the Category A data i.e., the total minus the Category A data. The data analyzed for Excluding Families with \$0 CoPay includes only those families in the category Families with CoPay >\$0 (and not in Category A). Alternatively, the data used for Excluding Families with \$0 CoPay is all the family data minus those families in Category A and minus those families with \$0 CoPay.

5. The National weighted values were determined by multiplying each State's average co-payment/income percentage by the adjusted number of children in each State, summing across the States and then dividing by the adjusted number of children served for the Nation.

Appendix16a. Child Care and Development Fund (CCDF) Child Care Assistance Income Eligibility Thresholds, Family of Three

State/Territory	FY 2006-2007 CCDF Plans			
	85% of Monthly SMI	Monthly Income Eligibility Level Lower Than 85% of SMI <i>if Used to Limit Eligibility</i>	Monthly Income Eligibility Level as a Percentage of SMI	SMI Year
Alabama	\$3,198.00	\$1,743.00	46%	2005
Alaska	\$4,263.00	\$3,853.00	77%	2002
American Samoa	NR	NR	NR	NR
Arizona	\$3,464.00	\$2,213.00	54%	2005
Arkansas	\$2,948.25	\$2,081.17	60%	2005
California	\$3,315.00	\$2,925.00	75%	2000
Colorado	\$4,258.00	\$3,017.00	60%	2006
Commonwealth of the Northern Mariana Islands	NA	\$1,341.00	76%	2005
Connecticut	\$5,117.00	\$3,010.00	50%	2006
Delaware	\$4,134.00	\$2,612.00	54%	2005
District of Columbia	\$3,773.00	\$3,472.00	78%	2003
Florida	\$3,381.00	\$2,682.00	67%	2004
Georgia	\$3,706.00	\$2,035.00	47%	2006
Guam	NA	\$2,011.00	NA	2005
Hawaii	\$3,927.00	NA	85%	2004
Idaho	\$3,230.00	\$1,706.00	45%	2005
Illinois	\$4,306.00	\$2,533.00	50%	2006
Indiana	\$3,750.00	\$1,703.00	39%	2005
Iowa	\$3,828.00	\$1,944.00	43%	2006

State/Territory	FY 2006-2007 CCDF Plans			
	85% of Monthly SMI	Monthly Income Eligibility Level Lower Than 85% of SMI <i>if Used to Limit Eligibility</i>	Monthly Income Eligibility Level as a Percentage of SMI	SMI Year
Kansas	\$3,685.00	\$2,481.00	57%	2005
Kentucky	\$3,165.00	\$2,012.00	54%	2006
Louisiana	\$3,006.00	\$2,653.00	75%	2006
Maine	\$3,545.99	NA	85%	2006
Maryland	\$4,249.00	\$2,499.00	50%	2001
Massachusetts	NR	NR	NR	NR
Michigan	\$4,082.00	\$1,990.00	41%	2006
Minnesota	\$4,566.00	\$2,347.00	44%	2006
Mississippi	\$2,513.00	NA	85%	2004
Missouri	\$3,816.00	\$1,518.00	34%	1990
Montana	\$2,923.00	\$2,011.00	58%	2005
Nebraska	\$3,786.00	\$2,481.00	56%	2006
Nevada	\$3,749.00	\$3,308.00	75%	2006
New Hampshire	\$4,306.00	\$2,482.00	49%	2005
New Jersey	\$5,201.00	\$3,352.00	55%	2005
New Mexico	\$2,945.25	\$2,011.25	58%	2006
New York	\$3,895.00	\$2,682.00	59%	2005
North Carolina	\$3,362.00	\$2,966.00	75%	2004
North Dakota	\$3,397.00	\$2,463.00	62%	2006
Ohio	\$3,931.00	\$2,481.00	54%	2006
Oklahoma	\$3,057.00	\$2,925.00	81%	2005

State/Territory	FY 2006-2007 CCDF Plans			
	85% of Monthly SMI	Monthly Income Eligibility Level Lower Than 85% of SMI if Used to Limit Eligibility	Monthly Income Eligibility Level as a Percentage of SMI	SMI Year
Oregon	\$3,662.00	\$2,011.00	47%	2006
Pennsylvania	\$4,080.39	\$2,681.67	56%	2006
Puerto Rico	\$1,279.00	NA	85%	1994
Rhode Island	\$4,230.00	\$3,016.00	61%	2005
South Carolina	\$3,339.00	\$2,011.00	51%	2005
South Dakota	\$3,527.00	\$2,682.00	65%	2006
Tennessee	\$3,297.00	\$2,327.00	60%	2006
Texas	\$3,246.00	NA	85%	2005
Utah	\$3,691.00	\$2,432.00	56%	2006
Vermont	\$2,664.00	\$2,586.00	83%	1999
Virgin Islands	NR	NR	NR	NR
Virginia	\$4,266.00	\$2,419.00	40%	2006
Washington	\$3,999.00	\$2,682.00	57%	2005
West Virginia	\$2,747.00	\$1,769.00	55%	2006
Wisconsin	\$3,986.00	\$2,481.00	53%	2005
Wyoming	\$3,336.00	\$2,682.00	68%	2006

Source: *Child Care and Development Fund (CCDF) Report of State and Territory Plans, FY 2006-2007 (2007)*, by the Child Care Bureau, Administration for Children and Families.

NR=Not Reported; NA=Not Applicable; NK=Not Known

Note: Fourteen States (AZ, DC, FL, GA, ID, KY, MA, MN, MT, NJ, PA, RI, VA, WI) and two Territories (CNMI, GU) report using Federal Poverty Income Guidelines instead of SMI. PR reports using the Housing and Urban Development Administration median income established for Section 8 applicants. American Samoa and the Virgin Islands use the Territories' median income to determine the income eligibility threshold for child care services. The numbers for the monthly income eligibility level as a percentage of SMI are rounded to the nearest whole number. CCDF Plan data for FY 2006-2007 are not available for AS, MA or VI.

Appendix 16b. Child Care and Development Fund (CCDF) Child Care Assistance Family Co-payment Policies, Family of Three¹

	FY 2006-2007 CCDF Plans					
State/Territory	Monthly Upper Income Level at Which Maximum Fee Is Required ²	Are Families at or Below Poverty Required to Pay a Fee?	Minimum Family Fee (Full-Time Care) ³	Maximum Family Fee (Full-Time Care)	Is the Same Sliding Fee Scale Used in All Parts of the State?	Does the State Prohibit Providers from Charging Families Any Unsubsidized Portion of Providers' Normal Fees?
Alabama	\$2,682.00	some	\$5.00/week 50% of fee for each additional child	\$72.50/week 50% of fee for each additional child	yes	no
Alaska	\$3,854.00	some	\$13.00/month	\$766.00/month	yes	no
American Samoa ⁺	NA	NA	NA	NA	NA	yes
Arizona	\$2,213.00	some	\$1.00/day \$0.50/day 2nd child	\$10.00/day \$5.00/day 2nd child	yes	no
Arkansas	\$2,081.00	none	0% of fee	80% of fee	yes	yes
California	\$2,925.00	none	\$2.00/day	\$10.50/day	yes	no
Colorado	\$3,050.00	some	\$7.00/month	\$427.00/month \$40.00/month 2nd child	yes	yes
Commonwealth of the Northern Mariana Islands	\$2,156.00	all	10% of cost of care	30% of cost of care	yes	no
Connecticut	\$4,515.00	some	2% of income	10% of income	yes	no
Delaware	\$2,612.00	some	1% of cost of care	80% of cost of care	yes	yes
District of Columbia	\$2,892.00	some	\$0.00	\$13.08/day 1st child \$9.81/day 2nd child	yes	yes
Florida	varies by locality	some	\$0.63/day	\$14.00/day	no	no

Georgia	\$2,200.00	some	\$0.00	\$45.00/week	yes	no
Guam	\$2,011.00	some	10% of cost of care	50% of cost of care	yes	no
Hawaii	\$3,678.00	none	0% of reimbursement rate ceiling	20% of reimbursement rate ceiling	yes	no
Idaho	\$1,706.00	some	7% of cost of care	66% of cost of care	yes	no
Illinois	\$2,532.00	all	\$4.33/month, one child	\$186.32/month, one child	yes	yes
			\$8.67/month, two children	\$320.64/month, two children		
Indiana	\$1,703.00	none	\$0.00	9% of income	yes	no
Iowa	\$2,723.00	none	\$0.00	\$14.00/day for full-day	yes	yes
Kansas	\$2,481.00	some	\$0.00	\$243.00/month	yes	no
Kentucky	\$2,099.00	some	\$0.00	\$10.50/day, one child	yes	no
				\$11.50/day, two or more children		
Louisiana	\$2,653.00	some	35% of cost of care	75% of cost of care	yes	no
Maine	\$3,546.00	some	2% of income	10% of income 50% of applicable fee for 2nd child 25% of applicable fee for 3rd child	yes	no
Maryland	\$2,499.00	some	5% of average cost of care	50% of average cost of care	yes	no
			3% of average cost of care for 2nd & 3rd child	40% of average cost of care for 2nd & 3rd child		
Massachusetts*	\$4,104.00	none	\$0.00	\$120.00/week	yes	yes
Michigan	\$1,990.00	some	5% of reimbursement rate ceiling	30% of reimbursement rate ceiling	yes	no

Minnesota	\$3,352.00	some	\$0.00/month	\$737.00/month	yes	no
Mississippi	\$2,917.00	some	\$10.00/month, one child \$20.00/month, two children	\$212.00/month, one child \$222.00/month, two children	yes	no
Missouri	\$1,518.00	some	\$1.00/year	\$5.00/day/child	yes	yes
Montana	\$1,959.00	some	\$10.00/month	14% of income	yes	no
Nebraska	\$2,481.00	none	\$53.00/month, one child \$106.00/month, two children	\$241.00/month, one child \$482.00/month, two children	yes	yes
Nevada	\$3,308.00	some	0% of child care benefit	80% of child care benefit	yes	no
New Hampshire	\$2,548.00	some	\$0.00	\$0.50/week	yes	no
New Jersey	\$3,352.00	some	\$9.10/month, 1st child \$6.80/month, 2nd child	\$294.90/month, 1st child \$221.20/month, 2nd child	yes/no	yes
New Mexico	\$2,700.00	some	\$0.00	\$218.00/month, one child \$327.00/month, 50% of fee for each additional child	yes	yes
New York	varies by locality	some	varies by locality— lowest copay is less than 1% of income	varies by locality— highest copay is 16.2% of income	yes	no
North Carolina	\$2,946.00	some	10% of income	10% of income	yes	no
North Dakota	\$2,463.00	some	20% of reimbursement rate ceiling, up to a maximum of \$42.00/month	80% of reimbursement rate ceiling, up to a maximum of \$365.00/month	yes	no
Ohio	\$3,592.00	some	\$0.00/month	\$314.00/month	yes	yes
Oklahoma	\$2,425.00	some	\$0.00	\$154.00/month for one child \$226.00/month	yes	yes

				for two children		
Oregon	\$2,010.00	some	\$25.00/month	\$454.00/month	yes	no
Pennsylvania	\$3,151.00	some	\$5.00/week	\$70.00/week	yes	no
Puerto Rico	\$1,279.00	all	\$36.00/month	\$48.00/month	yes	no
Rhode Island	\$3,017.00	none	\$0.00	14% of income	yes	yes
South Carolina	\$2,347.00	some	\$4.00/child/week	\$13.00/child/week	yes	no
South Dakota	\$2,682.00	none	\$0.00	15% of family income	yes	no
Tennessee	\$2,336.00	some	\$1.00/week, one child \$2.00/week, two children	\$47.00/week, one child \$82.00/week, two children	yes	no
Texas	varies by locality	some	varies by locality— 7% of income, one child 9% of income, two children	12% of income, one child varies by locality— — 13% of income, two children	no	no
Utah	\$2,432.00	some	\$10.00/month, one child \$15.00/month, two children	\$255.00/month, one child \$281.00/month, two children	yes	no
Vermont	\$2,586.00	all	10% of reimbursement rate ceiling	90% of reimbursement rate ceiling	yes	no
Virginia	\$2,481.00	some	\$25.00/month	10% of income	no	no
Virgin Islands*	\$1,826.00	none	\$0.00	\$10.00/week	yes	no
Washington	\$2,682.00	some	\$15.00/month	\$50.00/month plus 44% of the difference between family income and 137.50% of Federal poverty level (calculated at \$418.72/month at the highest income level)	yes	yes
West Virginia	\$2,181.00	some	\$0.00	\$5.75 per child	yes	yes

Wisconsin	\$2,682.00	some	\$5.00/week, one child licensed care \$2.00/week, one child certified care Higher fee for additional children	\$59.00/week, one child licensed care \$41.00/week, one child certified care Higher fee for additional children	yes	no
Wyoming	\$2,682.00	all	\$0.40/day per child	\$4.00/day per child	yes	no

Source: *Child Care and Development Fund (CCDF) Report of State and Territory Plans, FY 2006-2007* (2007), by the Child Care Bureau, Administration for Children and Families.

NA = Not Applicable

^{*} In AS, all CCDF participants are at or below the Federal Poverty Income Guidelines and the Lead Agency chooses not to apply co-payments to families at or below the Federal Poverty Income Guideline. Data provided for MA and VI are from the FY 2004-2005 CCDF Plans.

¹ Co-payment fees included in this table apply to a family of three, including one or two children in full-time, center-based care who are not infants or children with special needs. Some States and Territories require different fee amounts for families with infants or children with special needs.

²When the Lead Agency provides information on an annual income, income is divided by 12 and reported as "monthly." When the Lead Agency reports information on a weekly income, it is multiplied by 4 and reported as "monthly." All monthly income levels are rounded to the nearest dollar. Typically, this is the maximum income at which families are eligible to receive child care assistance. These monthly income levels at which the maximum fee is capped are drawn from individual State or Territory sliding fee scales and do not necessarily correspond to the monthly income levels used to limit eligibility. (See Table 3.3.1) In some States and Territories, the sliding fee scale is maintained and applied separately from the policies affecting income eligibility thresholds.

³ Minimum co-payment fees are based on sliding fee schedules (as submitted with CCDF Plans) for families paying a sliding fee and do not reflect waivers for specific populations.

Appendix 17. Child Care and Development Fund (CCDF) Center-Based Care Reimbursement Rate Ceilings, Largest Urban Areas

FY 2006-2007 CCDF Plans									
State/ Territory	Infant Age Range	Infant Rate	Toddler Age Range	Toddler Rate	Preschool Age Range	Preschool Rate	School Age Range	School Age Rate	Rate Area
Alabama	infant/ toddler	\$105.00/ week	infant/ toddler	\$105.00/ week	preschool	\$99.00/ week	school	\$83.00/ week	Rates vary by region. Rates for Birmingham given.
Alaska	birth–18 months	\$647.00/ month	19–36 months	\$615.00/ month	37 months–6 years	\$550.00/ month	7–12 years	\$537.00/ month	Rates vary by area. Rates for Anchorage/Mat-Su Metropolitan Area given.
American Samoa	infant	\$180.00/ month	toddler	\$180.00/ month	preschool	\$180.00/ month	school age	\$180.00/ month	Rates are territory-wide.
Arizona	birth < 1 year	\$29.00/ day	1 year < 3 years	\$25.58/ day	3 years < 6 years	\$23.20/ day	6 years < 13 years	\$22.00/ day	Rates vary by district. Rates for District 1, Maricopa County, given.
Arkansas	infant	\$18.00/ day	toddler	\$17.00/ day	day care	\$17.00/ day	school age	\$15.20/ day	Rates vary by county. Rates for Pulaski County given.
California	birth–24 months	\$209.37/ week	2–5 years	\$159.88/ week	2–5 years	\$159.88/ week	school age	\$138.29/ week	Rates vary by groups of zip codes identified as “market areas.” Rates for Market Profile 17 given. Market profiles are based on groups of zip codes with similar socioeconomic characteristics.
Colorado	younger than 2 years	\$30.00/ day	2 years and older	\$24.00/ day	2 years and older	\$24.00/ day	2 years and older	\$24.00/ day	Rates vary by county/groups of counties. Rates for Denver metro counties given.
Commonwealth of the Northern Mariana Islands	birth–2 years	\$300.00/ month	3–4 years	\$300.00/ month	5–6 years	\$250.00/ month	7–13 years	\$250.00/ month	Rates are territory-wide.

	FY 2006-2007 CCDF Plans								
State/ Territory	Infant Age Range	Infant Rate	Toddler Age Range	Toddler Rate	Preschool Age Range	Preschool Rate	School Age Range	School Age Rate	Rate Area
Connecticut	infant/ toddler	\$227.00/ week	infant/ toddler	\$227.00/ week	preschool	\$179.00/ week	school age	\$162.00/ week	Rates vary by region. Rates for Southwest region given.
Delaware	birth–1 year	\$145.00/ week	1–2 years	\$122.00/ week	2–5 years	\$104.60/ week	6 and older	\$104.60/ week	Rates vary by county. Rates for New Castle County given.
District of Columbia	infant	\$31.10/ day	toddler	\$31.10/ day	preschool	\$23.55/ day	school age before and after	\$19.85/ day	Rates are district-wide, but vary by tier level. Rates for Bronze-tiered centers given.
Florida	birth–12 months	\$130.00/ week	13–23 months 24–35 months	\$120.00/ week \$110.00/ week	36–47 months 48–59 months	\$103.00/ week \$100.00/ week	elementary school age (summer/ holiday) FT	\$90.00/ week	Rates vary by early learning coalition area. Rates for early learning coalition of Duval County given.
Georgia	6 weeks– 12 months	\$125.00/ week	13–36 months	\$120.00/ week	3–5 years	\$105.00/ week	before and after school	\$65.00/ week	Rates vary by zone. Rates for Zone 1 (greater metro Atlanta counties) given.
Guam	birth– 1year	\$170.00/ week	2–5 years	\$150.00/ week	2–5 years	\$150.00/ week	6–12 years	\$125.00/ week	Rates are territory-wide.
Hawaii	all ages	\$425.00/ month	all ages	\$425.00/ month	all ages	\$425.00/ month	before school after school	\$60.00/ Month \$80.00/ month	Rates are statewide.
Idaho	birth–12 months	\$594.00/ month	13–30 months	\$539.00/ month	31–60 months	\$492.00/ month	61–72 months 73 months and older	\$440.00/ month \$440.00/ month	Rates vary by region. Rates for Region IV (Ada, Boise, Elmore and Valley counties) given.
Illinois	younger than 2½ years	\$33.77/ day	2½ and older	\$24.34/ day	2½ and older	\$24.34/ day	school age–day	\$12.17/ day	Rates vary by groups of counties. Rates for Group IA (Cook, DuPage, Kane, Kendall,

	FY 2006-2007 CCDF Plans								
State/ Territory	Infant Age Range	Infant Rate	Toddler Age Range	Toddler Rate	Preschool Age Range	Preschool Rate	School Age Range	School Age Rate	Rate Area
									Lake and McHenry counties) given.
Indiana	infant	\$44.00/ day	toddler	\$34.00/ day	3–5 years	\$30.00/ day	before school after school	\$32.00/ month \$29.00/ month	Rates vary by county. Rates for Marion County given.
Iowa	infant/ toddler	\$14.50/ half-day	infant/ toddler	\$14.50/ half-day	preschool	\$12.00/ half-day	school age	\$10.50/ half-day	Rates are statewide.
Kansas	younger than 1 year	\$4.48/ hour	13–30 months	\$3.85/ hour	31 months –5 years	\$3.12/ hour	6 years or older	\$2.98/ hour	Rates vary by urban, near urban and rural groups of counties. Rates for Group 1 (Douglas and Johnson counties) given.
Kentucky	infant/ toddler	\$25.00/ day	infant/ toddler	\$25.00/ day	preschool	\$22.00/ day	school age	\$21.00/ day	Rates vary by region and urban/nonurban area. Urban rates for Central Region given.
Louisiana	all ages	\$16.50/ day	all ages	\$16.50/ day	all ages	\$16.50/ day	all ages	\$16.50/ day	Rates are statewide.
Maine	infant	\$185.00/ week	toddler	\$181.00/ week	preschool	\$162.00/ week	school age– summer school age– before/ after school	\$135.00/ week \$85.00/ week	Rates vary by county. Rates for Cumberland County given.
Maryland	infant	\$771.00/ month	regular	\$433.00/ month	regular	\$433.00/ month	regular	\$433.00/ month	Rates vary by region. Rates for Region BC (Baltimore City) given.
Massachusetts²	infant	\$46.50/ day	toddler	\$41.50/ day	preschool	\$31.50/ day	school age blended	\$18.50/ day	Rates vary by region and tier levels. Rates for Region 4 and 6 (Metro West and

FY 2006-2007 CCDF Plans									
State/ Territory	Infant Age Range	Infant Rate	Toddler Age Range	Toddler Rate	Preschool Age Range	Preschool Rate	School Age Range	School Age Rate	Rate Area
									Metro Boston) Tier 1 given.
Michigan	birth– 2½ years	\$2.85/ hour	2½ years and older	\$2.25/ hour	2½ years and older	\$2.25/ hour	2½ years and older	\$2.25/ hour	Rates vary by shelter areas, which include multiple counties. Rates for Shelter Area IV (20 counties) given.
Minnesota	infant	\$82.00/ day	toddler	\$61.00/ day	preschool	\$55.00/ day	school age	\$52.00/ day	Rates vary by regional groups of counties. Rates for Hennepin County given.
Mississippi	birth–12 months	\$84.00/ week	13–36 months	\$80.00/ week	3–5 years	\$77.00/ week	school age– summer (5–13 years)	\$76.00/ week	Rates are statewide, but vary by tiered quality level. Rates for Tier 1 given.
Missouri	infant	\$25.75/ day	infant	\$25.75/ day	preschool	\$15.30/ day	school age	\$15.00/ day	Rates for infant care vary by metro, sub- metro, and “rest of State;” rates for preschool and school-age vary by groups of counties. Rates given are for Saint Louis County.
Montana	infant	\$25.00/ day	2 years and older	\$20.00/ day	2 years and older	\$20.00/ day	2 years and older	\$20.00/ day	Rates vary by resource and referral district. Rates for Billings District given.
Nebraska	infant	\$32.00/ day	toddler	\$25.00/ day	preschool	\$25.00/ day	school age	\$25.00/ day	Rates vary by groups of counties; for accredited care, rates are statewide. Rates for unaccredited care in Douglas and Sarpy counties given.

	FY 2006-2007 CCDF Plans								
State/ Territory	Infant Age Range	Infant Rate	Toddler Age Range	Toddler Rate	Preschool Age Range	Preschool Rate	School Age Range	School Age Rate	Rate Area
Nevada	birth–1 year	\$31.00/ day	1–3 years	\$28.00/ day	3–6 yrs	\$23.00/ day	6 years and older	\$19.00/ day	Rates vary by counties and a group of rural area counties. Rates for Clark County given.
New Hampshire	younger than 3 years	\$30.35/ day	younger than 3 years	\$30.35/ day	3 years and older	\$25.60/ day	3 years and older	\$25.60/ day	Rates are statewide, but vary by program step level. Rates given for contract/licensed care, for Step 1 Income Limit (Temporary Assistance for Needy Families recipients only).
New Jersey	birth– 2½ years	\$152.20/ week	2–2½ yrs	\$152.20/ week	2½–5 years	\$125.60/ week	5–13 years	\$125.60/ week	Rates are statewide, but may vary by assistance group; rates given for care provided to participants in the Work First New Jersey and transitional child care programs in nonaccredited, licensed centers.
New Mexico	infant	\$467.84/ month	toddler	\$417.19/ month	preschool	\$386.48/ month	school age	\$337.11/ month	Rates vary by metro and rural areas. Metro rates given.
New York	younger than 1½ years	\$67.00/ day	1½–2 years	\$64.00/ day	3–5 years	\$45.00/ day	6–12 years	\$44.00/ day	Rates vary by groups of counties. Rate for Group E counties (Bronx, Kings, New York, Queens and Richmond) given.
North Carolina	infant/ toddler	\$536.00/ month	2 years	\$490.00/ month	3–5 years	\$477.00/ month	school age	\$423.00/ month	Rates vary by county and tiered quality level. Rates for one-star centers in Mecklenburg

	FY 2006-2007 CCDF Plans								
State/ Territory	Infant Age Range	Infant Rate	Toddler Age Range	Toddler Rate	Preschool Age Range	Preschool Rate	School Age Range	School Age Rate	Rate Area
									County given.
North Dakota	birth–2 years	\$115.00/ week	2 years	\$110.00/ week	3–13 years	\$100.00/ week	3–13 years	\$100.00/ week	Rates are statewide.
Ohio	infant	\$166.06/ week	toddler	\$146.07/ week	preschool	\$130.77/ week	school age	\$100.00/ week	Rates vary by groups of counties classified as large and mid- size and rural areas. Rate for large metropolitan areas given.
Oklahoma	birth–1 year	\$15.00/ day	13–24 months	\$15.00/ day	25–72 months	\$13.00/ day	73 months– 13 years	\$11.00/ day	Rates vary by geographic area. Five-day weekly rates paid on a monthly basis for one-star Metro Area (Canadian, Cleveland, Kay, Oklahoma, Tulsa, Wagoner and Washington counties) centers given.
Oregon	birth–1 year	\$525.00/ month	1 year– 30 months	\$509.00/ month	31 months– 5 years	\$372.00/ month	6 years and older	\$372.00/ month	Rates vary by groups of zip codes. Rates for Group Area A (Portland, Eugene, Corvallis, Monmouth and Ashlands areas) given.
Pennsylvania	infant	\$38.32/ day	young toddler old toddler	\$36.40/ day \$34.80/ day	preschool	\$32.44/ day	young school age old school age	\$26.00/ day \$26.00/ day	Rates vary by county. Rates for Bucks County given.
Puerto Rico	infant/ toddler	\$249.00/ month	infant/ toddler	\$249.00/ month	preschool	\$243.00/ month	school age	\$147.00/ month	Rates are commonwealth- wide.
Rhode Island	1 week–3	\$182.00/ week	1 week–3	\$182.00/ week	3 years– 1st grade	\$150.00/ week	1st grade– 13 years	\$135.00/ week	Rates are statewide.

	FY 2006-2007 CCDF Plans								
State/ Territory	Infant Age Range	Infant Rate	Toddler Age Range	Toddler Rate	Preschool Age Range	Preschool Rate	School Age Range	School Age Rate	Rate Area
	years		years						
South Carolina	birth–2 years	\$93.00/ week	birth–2 years	\$93.00/ week	3–5 years	\$83.00/ week	6–12 years	\$78.00/ week	Rates vary by urban and rural areas and whether the center is licensed-only, “enhanced” or accredited. Licensed center rates for urban areas given.
South Dakota	younger than 3 years	\$3.10/ hour	younger than 3 years	\$3.10/ hour	3 years and older	\$2.55/ hour	3 years and older	\$2.55/ hour	Rates vary by county. Rates for Minnehaha County given.
Tennessee	infant	\$110.00/ week	toddler	\$105.00/ week	preschool	\$91.00/ week	school-age in school-age out	\$50.00/ week \$75.00/ week	Rates vary by Top 20 Counties (highest average populations and incomes) and 75 other counties, as well as by tiered quality level. State rate for Top 20 Counties given.
Texas	infant	\$24.00/ day	toddler	\$21.00/ day	preschool	\$19.00/ day	school age	\$18.00/ day	Rates vary by Workforce Development Board. Gulf Coast Board given.
Utah	birth < 24 months	\$533.00/ month	2–3 years	\$441.00/ month	4–5 years	\$412.00/ month	school age in school age out	\$260.00/ month \$372.00/ month	Rates are statewide.
Vermont	younger than 3 years	\$24.00/ day	younger than 3 years	\$23.80/ day	3 years and older	\$21.20/ day	3 years and older	\$21.20/ day	Rates are statewide.
Virgin Islands*	infant	\$255.00/ month	toddler	\$255.00/ month	preschool	\$255.00/ month	before/ after school	\$150.00/ month	Rates are territory-wide.
Virginia	infant	\$63.00/ week	toddler	\$60.00/ week	preschool	\$52.00/ week	school age	\$40.00/ week	Rates vary by regions and also

FY 2006-2007 CCDF Plans									
State/ Territory	Infant Age Range	Infant Rate	Toddler Age Range	Toddler Rate	Preschool Age Range	Preschool Rate	School Age Range	School Age Rate	Rate Area
		day		day		day		day	by county. Rates for Fairfax County/City–Level 2 given.
Washington	birth–11 months	\$37.82/ day	12–29 months	\$31.59/ day	30 months–5 years	\$26.50/ day	5–12 years	\$23.86/ day	Rates vary by region. Rates for Region IV (King County) given.
West Virginia	younger than 2 years	\$24.00/ day	younger than 2 years	\$24.00/ day	2 years and older	\$18.00/ day	2 years and older	\$18.00/ day	Rates are statewide, but vary by tier quality level. Rates for base level given.
Wisconsin	birth–2 years	\$7.83/ hour	2–3 years	\$6.87/ hour	4–5 years	\$5.93/ hour	6 years and older	\$5.70/ hour	Rates vary by county. Rates for Milwaukee County given.
Wyoming	birth–23 months	\$3.00/ hour	2–3 years	\$2.95/ hour	4–5 years	\$2.43/ hour	6–12 years	\$2.35/ hour	Rates are statewide.

Source: *Child Care and Development Fund (CCDF) Report of State Plans, FY 2006-2007* (August 2006), by the Child Care Bureau, Administration for Children and Families.

* Data provided for AS, MA and VI are from the FY 2004-2005 CCDF Plans. Rate and age range information is based on subsidy rate tables included in FY 2006-2007 CCDF Plans. Rates provided are for full-time, standard-hour care in licensed centers. Rates are not necessarily the highest rates paid in the State or Territory, but are the rates prevailing in the largest urban area. For some States and Territories, specific age ranges are not defined in the rate schedule submitted with the CCDF Plan. For those with tiered reimbursement systems, which pay higher rates for higher levels of quality, the base rate for licensed child care centers is given. The actual reimbursement amount is a function not only of the amount of care provided, but also the family's share of fees (i.e., co-payment). Some States and Territories have multiple reimbursement rates for school-age care including before- or after-school, summer, holidays and occasional care. For these States and Territories, the before- and after-school rates are included in this table.

CCDF REPORTING OVERVIEW FOR STATES AND TERRITORIES

	State/Territorial Plan	Financial Report	Aggregate and Case-Level Reports	Error Rate Reports
Form number	ACF-118	ACF-696	ACF-800 & ACF-801	ACF-400, ACF-401 & ACF-402
Purpose	Serves as the agreement between the Lead Agency and the Federal Government as to how CCDF programs will be administered in conformance with legislative requirements, pertinent federal regulations, and other instructions and guidelines issued by ACF.	States are required to use the ACF-696 to report estimates and expenditures for the Mandatory Fund, the Matching Fund, and the Discretionary Fund. Territories are required to use the ACF-696 to report estimates and expenditures for the Discretionary Fund only.	ACF-800 (Aggregate Data Report): Provides unduplicated annual counts of children and families served through the CCDF; and other information. ACF-801(Case-Level Data Report): Provides case-level data on the families and children served during the month of the report, and other demographic information. States may submit a sample or all cases.	States, the District of Columbia and Puerto Rico are required to measure, calculate, and report improper authorizations for payments as well as identify strategies for reducing future improper authorizations for payments. Sampling Decisions/Fieldwork Preparation Plan ACF-400: Record Review Worksheet ACF-401: Data Entry Form ACF-402: State Improper Authorizations for Payment Report
Report frequency	Biennially	Quarterly	ACF-800: Annual ACF-801: Monthly or Quarterly (Grantee's choice)	ACF-400, ACF-401 & ACF-402 are to be completed once every three years for the review process.
Reporting period(s)	Two-year periods starting with an even-numbered fiscal year (e.g. FY2008 – FY2009, or Oct 1, 2007 – Sep 30, 2009)	1. Oct 1 – Dec 31 2. Jan 1 – Mar 31 3. Apr 1 – Jun 30 4. Jul 1 – Sep 30	ACF-800: Federal fiscal year (Oct 1 – Sep 30) ACF-801: Every month or quarter	Year 1 States: 10/01/06 – 09/30/07 Year 2 States: 10/01/07 – 09/30/08 Year 3 States: 10/01/08 – 09/30/09 <i>(Repeat cycle for subsequent years)</i>
Due when	<ul style="list-style-type: none"> The July 1st prior to the reporting period 	<ul style="list-style-type: none"> 30 days after end of quarter 	ACF-800: Dec 31 (three months after end of reporting period) ACF-801: For monthly reporting: 90 days after end of month; For quarterly reporting: 60 days after end of quarter	ACF-400: December 31 st following end of reporting period. ACF-401: March 31 st following end of reporting period. (reviews completed) ACF-402: June 30 th following end of reporting period
Submission method	Hard copy, or Email attachment (to ACF Regional Office, by prior arrangement)	<ul style="list-style-type: none"> Hard copy or On-Line Data Collection (OLDC) System 	ACF-800: submission (at http://www.acf.hhs.gov/cgi-bin/ccis/acf800.cgi) ACF-801: Electronic data files (via secure electronic medium)	<ul style="list-style-type: none"> Hard copy, or Email attachment (to ACF Regional Office, by prior arrangement)
Submit to	<ul style="list-style-type: none"> ACF Regional Office 	<ul style="list-style-type: none"> ACF Regional Office 	ACF-800: Child Care Bureau, Reports Manager (via internet) ACF-801: Department of Health and Human Services (via secure electronic medium)	<ul style="list-style-type: none"> ACF Regional Office
Technical assistance	ACF Regional Office	ACF Regional Office	<ul style="list-style-type: none"> On-line help for ACF-800: /programs/ccb/report/formh 	ACF Regional Office

			<p>elp/acf800/</p> <ul style="list-style-type: none">• On-line help for ACF-801: /programs/ccb/report/formh elp/acf801/• ACF Regional Office• Child Care Automation Resource Center (CCARC)	
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CCDF REPORTING OVERVIEW FOR STATES AND TERRITORIES

	State/Territorial Plan	Financial Report	Aggregate and Case-Level Reports	Error Rate Reports
Form number	ACF-118	ACF-696	ACF-800 & ACF-801	ACF-400, ACF-401 & ACF-402
Purpose	Serves as the agreement between the Lead Agency and the Federal Government as to how CCDF programs will be administered in conformance with legislative requirements, pertinent federal regulations, and other instructions and guidelines issued by ACF.	States are required to use the ACF-696 to report estimates and expenditures for the Mandatory Fund, the Matching Fund, and the Discretionary Fund. Territories are required to use the ACF-696 to report estimates and expenditures for the Discretionary Fund only.	ACF-800 (Aggregate Data Report): Provides unduplicated annual counts of children and families served through the CCDF; and other information. ACF-801(Case-Level Data Report): Provides case-level data on the families and children served during the month of the report, and other demographic information. States may submit a sample or all cases.	States, the District of Columbia and Puerto Rico are required to measure, calculate, and report improper authorizations for payments as well as identify strategies for reducing future improper authorizations for payments. Sampling Decisions/Fieldwork Preparation Plan ACF-400: Record Review Worksheet ACF-401: Data Entry Form ACF-402: State Improper Authorizations for Payment Report
Report frequency	Biennially	Quarterly	ACF-800: Annual ACF-801: Monthly or Quarterly (Grantee's choice)	ACF-400, ACF-401 & ACF-402 are to be completed once every three years for the review process.
Reporting period(s)	Two-year periods starting with an even-numbered fiscal year (e.g. FY2008 – FY2009, or Oct 1, 2007 – Sep 30, 2009)	1. Oct 1 – Dec 31 2. Jan 1 – Mar 31 3. Apr 1 – Jun 30 4. Jul 1 – Sep 30	ACF-800: Federal fiscal year (Oct 1 – Sep 30) ACF-801: Every month or quarter	Year 1 States: 10/01/06 – 09/30/07 Year 2 States: 10/01/07 – 09/30/08 Year 3 States: 10/01/08 – 09/30/09 <i>(Repeat cycle for subsequent years)</i>
Due when	<ul style="list-style-type: none"> The July 1st prior to the reporting period 	<ul style="list-style-type: none"> 30 days after end of quarter 	ACF-800: Dec 31 (three months after end of reporting period) ACF-801: For monthly reporting: 90 days after end of month; For quarterly reporting: 60 days after end of quarter	ACF-400: December 31 st following end of reporting period. ACF-401: March 31 st following end of reporting period. (reviews completed) ACF-402: June 30 th following end of reporting period
Submission method	Hard copy, or Email attachment (to ACF Regional Office, by prior arrangement)	<ul style="list-style-type: none"> Hard copy or On-Line Data Collection (OLDC) System 	ACF-800: submission (at http://www.acf.hhs.gov/cgi-bin/ccis/acf800.cgi) ACF-801: Electronic data files (via secure electronic medium)	<ul style="list-style-type: none"> Hard copy, or Email attachment (to ACF Regional Office, by prior arrangement)
Submit to	<ul style="list-style-type: none"> ACF Regional Office 	<ul style="list-style-type: none"> ACF Regional Office 	ACF-800: Child Care Bureau, Reports Manager (via internet) ACF-801: Department of Health and Human Services (via secure electronic medium)	<ul style="list-style-type: none"> ACF Regional Office
Technical assistance	ACF Regional Office	ACF Regional Office	<ul style="list-style-type: none"> On-line help for ACF-800: /programs/ccb/report/formh 	ACF Regional Office

			<p>elp/acf800/</p> <ul style="list-style-type: none">• On-line help for ACF-801: /programs/ccb/report/formh elp/acf801/• ACF Regional Office• Child Care Automation Resource Center (CCARC)	
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Reporting Overview for Tribes

	Tribal Application	Tribal Plan	Financial Report	Tribal Annual Report
Form number	N/A -- CCB issues annual Program Instruction	ACF-118a	ACF-696T	ACF-700
Purpose	To apply for fiscal year CCDF Tribal Mandatory and Discretionary Funds. NOTE: Tribe must have an approved Plan Preprint.	Serves as the agreement between the Lead Agency and the Federal Government as to how CCDF programs will be administered in conformance with legislative requirements, pertinent federal regulations, and other instructions and guidelines issued by ACF.	Reports expenditures for the Tribal Mandatory, Discretionary and Construction/Renovation funds.	Provides annual counts of children and families served through CCDF; average hours of service per child by type of care; average monthly payment and co-payments per child; number of children served by income; and supplemental narratives.
Frequency	Annual	Biennial (every two years)	Annual	Annual
Timeframe Covered	Federal fiscal year (Oct 1 – Sept 30)	Two-year plan period (e.g. Oct 1, 2006 –Sept 30, 2007)	Federal fiscal year (Oct 1 – Sept 30)	Federal fiscal year (Oct 1 – Sep 30)
Due when	<ul style="list-style-type: none"> ▪ July 1st 	<ul style="list-style-type: none"> • The July 1st prior to the new plan period (due every two years) 	<ul style="list-style-type: none"> • 90 days after end of fiscal year 	<ul style="list-style-type: none"> • Dec 31
Submission method	<ul style="list-style-type: none"> ▪ Hard copy, or ▪ Email attachment (to CCB Regional Office, by prior arrangement) 	<ul style="list-style-type: none"> • Hard copy, or • E-mail attachment (to CCB Regional Office, by prior arrangement) 	<ul style="list-style-type: none"> • Currently: Hard copy In the future: Via new ACF forms database (probably starting sometime in 2003) 	<p><u>ACF-700</u></p> <ul style="list-style-type: none"> • Internet data entry http://www.acf.dhhs.gov/cgi-bin/acf700/acf700.cgi , or • Mail the CCB Regional Office and Child Care Automation Resource Center 2600 Tower Oak Blvd, Suite 600 Rockville, MD 20852 Fax: 301-692-0700 <p><u>Supplemental Narratives</u></p> <ul style="list-style-type: none"> • E-mail attachment in WORD, Word Perfect or text to ccarc@childcaredata.org, or • Mail the CCB Regional Office and Child Care Automation Resource Center 2600 Tower Oak Blvd, Suite 600

				Rockville, MD 20852 Fax: 301-692-0700
Technical assistance	<ul style="list-style-type: none"> ▪ CCB Regional Office 	CCB Regional Office	<ul style="list-style-type: none"> • CCB Regional Office 	<ul style="list-style-type: none"> • On-line help for ACF-700: http://www.acf.dhhs.gov/pr ograms/ccb/report/formhelp /acf700/ • Policy: CCB Regional Office <p>New Passwords: Child Care Automation Resource Center</p> <ul style="list-style-type: none"> • Forgotten Passwords: Child Care Automation Resource Center <p>Electronic submission: Child Care Automation Resource Center</p>