

## Attachment 3.2.3 – Summary of Results

### **2009 Child Care Market Price Study Summary of Rates**

#### **Introduction**

In December 2008, EEC contracted with Mills Consulting Group and Goodman Research Group to conduct a study of the current market prices being charged by licensed child care providers across the Commonwealth. The market price study completed data collection in April 2009, and the final results were reported to EEC in June 2009.

This summary presents the findings from the study in each of six local market areas in the state by type of care and age group. EEC defines daily published rates as the rates for private paying parents or parents who pay for child care without any state subsidies. The six local market areas are the six EEC Administrative Regions in the state:

1. Western;
2. Central;
3. Northeast;
4. Greater Boston;
5. Southeast; and
6. Boston.

The three major types of care and their age/time of year subsets include:

1. Family child care (from 1 month through 12 years of age, and up to 16 if the child has special needs):
  - a. Children under the age of 15 months
  - b. Children between 15 months and 24 months
  - c. Children over the age of two years
2. Center-based care:
  - a. Infants (0-15 months)
  - b. Toddlers (16 months to 33 months)
  - c. Preschooler children (34 months to the age the child is eligible to enter first grade)
3. School age care (a child who is either enrolled in kindergarten or is eligible to enroll in the first grade the next school year, through the age of 12, or under the age of 16 if the child has special needs):
  - a. Before school
  - b. After school
  - c. Vacation/holiday care
  - d. Summer care

## **Sample**

The universe for the study included all active licensed providers that were providing full time child care for a minimum of 4 days per week. This included the following numbers by type of care:

- \_\_\_ Family providers;
- \_\_\_ Group providers; and
- \_\_\_ School age providers.

## **Data Collection and Response Rate**

Data were collected through telephone interviews and an online questionnaire with the providers. The research team used three interview protocols – one each for family child care providers, group child care providers, and school-aged child care providers.

Interviews were conducted by the Massachusetts CCR&R Network between January and late March 2009 using both a web-based survey form and direct telephone interviews. Efforts to achieve an acceptable response rate included an advance letter and worksheet from the EEC Commissioner to alert providers to the specific information requested in the interviews, at least three calls to each provider, and the flexibility to conduct interviews in the evening. In creating the survey, EEC solicited input from the market rate advisory group, and their feedback assisted in the development of questions and strategies to increase provider response.

## **General Findings**

- Prices for center-based care are highest for infants, then toddlers, then preschoolers.
- Prices for family child care do not vary markedly with the age of the child in care although they decrease slightly as the child grows older.
- Prices for center-based care are higher than prices for family child care.
- Prices for center-based and family child care are generally highest in the suburbs of Boston (Region 2) and lowest in the Western Massachusetts (Region 1).
- Prices for after-school care are highest in Northeastern Massachusetts (Region 3) and Boston (Region 6) and lowest in Western Massachusetts (Region 1).
- All data was collected at the zip code level which will allow EEC to analyze the existing rate reimbursement regions.

Attachment 3.2.3 – Market Rate Study Survey Instruments

**EEC Market Rate Survey  
Child Care Centers**

Center Name: \_\_\_\_\_

Your Name: \_\_\_\_\_

City & Zip Code: \_\_\_\_\_

**1. In the last 3 months have you enrolled any full fee paying families at your center? (These are families who are not using voucher/subsidy rates, sliding scale rates, employee discounts, sibling discounts or any other discounted rates)**

\_\_\_\_ Yes \_\_\_\_ No

*If you answered NO, you are done with the survey. Please return in the envelope provided. Thank you very much. If your answer is YES, please continue with the survey.*

**2. What is the earliest time children can arrive at your program each day? You can use the Daily option if your opening times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**3. What is the latest time children can leave your program each day? You can use the Daily option if your closing times are the same each day.**

If your program has an evening shift, please give us the latest "day shift" pick-up time.

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**4. Please check the days of the week you are open for full day care.**

Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**5. What is the maximum amount your center charges for full-time care for each age group; ignore voucher/subsidy rates, sliding scale rates, employee discounts or any other discounted rates.**

Please fill in the rate as you would typically charge/quote a parent.

**Infants (6 weeks to 15 months)**

Hourly \_\_\_\_\_  
Full day \_\_\_\_\_  
Weekly \_\_\_\_\_  
Monthly \_\_\_\_\_

**Toddlers (16 months to 33 months)**

Hourly \_\_\_\_\_  
Full day \_\_\_\_\_  
Weekly \_\_\_\_\_  
Monthly \_\_\_\_\_

**Preschoolers (34 months to 5 years)**

Hourly \_\_\_\_\_  
Full day \_\_\_\_\_  
Weekly \_\_\_\_\_  
Monthly \_\_\_\_\_

**6. Please share with us your desired full time capacity for each age group.**

**Note: Desired capacity cannot exceed licensed capacity.**

\_\_\_\_\_ Infants

\_\_\_\_\_ Toddlers

\_\_\_\_\_ Preschoolers

**You are finished with the survey. Please return in the envelope provided.  
Thank you very much for your time.**

Attachment 3.2.3 – Market Rate Study Survey Instruments (continued)

**EEC Market Rate Survey  
Family Child Care Programs**

Your Name: \_\_\_\_\_

City & Zip Code: \_\_\_\_\_

**1. In the last 3 months have you enrolled any “full fee” paying children in your family child care home?** *(These are children who are not using voucher/subsidy rates, sliding scale rates, employee discounts, sibling discounts or any other discounted rates)*

\_\_\_\_ Yes \_\_\_\_ No

*If you answered NO, you are done with the survey. Please return in the envelope provided. Thank you very much. If your answer is YES, please continue with the survey.*

**2. What is the earliest time children can arrive at your program each day? You can use the Daily option if your opening times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**3. What is the latest time children can leave your program each day? You can use the Daily option if your closing times are the same each day.**

*If your program has an evening shift, please give us the latest “day shift” pick-up time.*

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**4. Please check the days of the week you are open for full day care.**

Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**5. What is the maximum amount you charge for full-time care for each age group; ignore voucher/subsidy rates, sliding scale rates, employee discounts or any other discounted rates.**

Please fill in the rate as you would typically charge/quote a parent.

**Infants**

Hourly \_\_\_\_\_  
Full day \_\_\_\_\_  
Weekly \_\_\_\_\_  
Monthly \_\_\_\_\_

**Toddlers**

Hourly \_\_\_\_\_  
Full day \_\_\_\_\_  
Weekly \_\_\_\_\_  
Monthly \_\_\_\_\_

**Preschoolers**

Hourly \_\_\_\_\_  
Full day \_\_\_\_\_  
Weekly \_\_\_\_\_  
Monthly \_\_\_\_\_

**6. Please share your desired full time capacity for each age group.  
Note: Desired capacity cannot exceed licensed capacity.**

\_\_\_\_\_ Infants

\_\_\_\_\_ Toddlers

\_\_\_\_\_ Preschoolers (ages 2+)

**You are finished with the survey. Please return in the envelope provided.  
Thank you very much for your time.**

**Attachment 3.2.3 – Market Rate Study Survey Instruments (continued)**

**EEC Market Rate Survey  
School-Age Programs**

**Program Name:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_

**City & Zip Code:** \_\_\_\_\_

**1. In the last 3 months have you enrolled any full fee paying families in your program?** *(These are families who are not using voucher/subsidy rates, sliding scale rates, employee discounts, sibling discounts or any other discounted rates)*

\_\_\_\_\_ Yes \_\_\_\_\_ No

*If you answered NO, you are done with the survey. Please return the survey in the envelope provided. Thank you very much. If your answer is YES, please continue with the survey.*

**2. Do you charge one rate for after school sessions, another rate for before school sessions and another rate for full day sessions?**

\_\_\_\_\_ Yes \_\_\_\_\_ No

*If the answer is YES, go to Question #3. If the answer is NO please go to Question #2a.*

**2a. Do you use a blended rate?**

\_\_\_\_\_ Yes \_\_\_\_\_ No

*If the answer is YES, skip to Question #11.*

**3. First, we want to ask about rates you charge for the school-age care only. Please do not include additional services, such as transportation.**

**Does your program offer an after-school session?**

\_\_\_\_\_ Yes \_\_\_\_\_ No

*If the answer is YES, go to Question #4. If the answer is NO please go to Question #5.*

**4. What is the maximum amount you charge full fee paying families for the “after school session” during the school year? Please give us the rate that is based on how you actually charge/quote parents. (Only need to fill in those rates that apply).**

Hourly \_\_\_\_\_

Daily \_\_\_\_\_

Weekly \_\_\_\_\_

Monthly \_\_\_\_\_

**4a. What is the earliest time children can arrive at your after-school program each day? Do not include the time children arrive for a Kindergarten wrap-around program if applicable. You can use the Daily option if your opening times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**4b. What is the latest time children can leave your after-school program each day? You can use the Daily option if your closing times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**4c. Please share with us your desired after-school capacity (should not exceed licensed capacity).** \_\_\_\_\_

**5. Does your program offer a before-school session?**

\_\_\_\_\_ Yes \_\_\_\_\_ No

*If the answer is YES, go to Question #6. If the answer is NO please go to Question #7.*

**6. What is the maximum amount you charge families for the “before school session” during the school year? Please give us the rate that is based on how you actually charge/quote parents. (Only need to fill in those rates that apply).**

Hourly \_\_\_\_\_  
Daily \_\_\_\_\_  
Weekly \_\_\_\_\_  
Monthly \_\_\_\_\_

**6a. What is the earliest time children can arrive at your before-school program each day? You can use the Daily option if your opening times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**6b. What is the latest time children can leave your before-school program each day?  
You can use the Daily option if your closing times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**6c. Please share with us your desired before school capacity (should not exceed licensed capacity).** \_\_\_\_\_

**7. Does your program offer full day care during holidays and/or school vacations (excluding summer)?**

\_\_\_\_\_ Yes \_\_\_\_\_ No

*If the answer is YES, go to Question #8. If the answer is NO please go to Question #9.*

**8. If you offer full day care during holidays and/or school vacations (excluding summer), what is the maximum amount you charge based on a FULL day? Please tell us the rate based on how you actually charge/quote parents. (Only need to fill in those rates that apply)**

Hourly \_\_\_\_\_  
Daily \_\_\_\_\_  
Weekly \_\_\_\_\_

**8a. What is the earliest time children can arrive at your full day program each day?  
You can use the Daily option if your opening times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**8b. What is the latest time children can leave your full day program each day?  
You can use the Daily option if your closing times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**8c. Please share with us your desired full-day capacity (should not exceed licensed capacity).**

\_\_\_\_\_

**9. Do you offer a summer vacation program that is licensed by EEC?**

\_\_\_\_\_ Yes \_\_\_\_\_ No

*If you answered YES, please continue with the survey, if you answered NO, you are finished with the survey. Please return the survey in the envelope provided. Thank you very much for your time.*

**10. What is the maximum amount you charge for your Summer program? Please tell us the rate based on how you actually charge/quote parents. (Only need to fill in those rates that apply)**

Hourly \_\_\_\_\_

Daily \_\_\_\_\_

Weekly \_\_\_\_\_

Monthly \_\_\_\_\_

**10a. What is the earliest time children can arrive at your Summer program each day? You can use the Daily option if your opening times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**10b. What is the latest time children can leave your Summer program each day? You can use the Daily option if your closing times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**10c. Please share with us your desired Summer program capacity (should not exceed licensed capacity).** \_\_\_\_\_

**11. First, we want to ask about rates you charge for the school-age care only. Please do not include additional services, such as transportation.**

**If you charge a blended rate (the same rate each week whether children attend before school, full day or just after school) what is the maximum amount you charge for full fee**

**paying families per child?** (Remember to ignore children using voucher/subsidy rates, sliding scale rates, employee discounts, sibling discounts or any other discounted rates).

Full Year \_\_\_\_\_  
Hourly \_\_\_\_\_  
Daily \_\_\_\_\_  
Weekly \_\_\_\_\_  
Monthly \_\_\_\_\_

**11a. What is the earliest time children can arrive at your after-school program each day? Do not include the time children arrive for a Kindergarten wrap-around program if applicable. You can use the Daily option if your opening times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**11b. What is the latest time children can leave your after-school program each day? You can use the Daily option if your closing times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_

**11c. Please share with us your desired after-school capacity (should not exceed licensed capacity).** \_\_\_\_\_

**12. Does your program offer a before-school session?**  
\_\_\_\_\_ Yes \_\_\_\_\_ No

*If the answer is YES, go to Question #12a. If the answer is NO please go to Question #13a.*

**12a. What is the earliest time children can arrive at your before-school program each day?  
You can use the Daily option if your opening times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**12b. What is the latest time children can leave your before-school program each day?  
You can use the Daily option if your closing times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**12c. Please share with us your desired before-school capacity (should not exceed licensed capacity).** \_\_\_\_\_

**13a. What is the earliest time children can arrive at your full day program each day?  
You can use the Daily option if your opening times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**13b. What is the latest time children can leave your full day program each day?  
You can use the Daily option if your closing times are the same each day.**

Daily \_\_\_\_\_  
Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

**13c. Please share with us your desired full-day capacity (should not exceed licensed capacity).** \_\_\_\_\_

**You are finished with the survey. Please return in the envelope provided.  
Thank you very much for your time.**