Strengthening Achievement under the Child Care and Development Block Grant Act: A State Data Perspective

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Measurements selected by federal entities to gauge the achievements of state child care assistance (CCA) programs funded by the Child Care and Development Block Grant Act (CCDBG) through the Child Care and Development Fund (CCDF) are limited as indicators of policy and program outcomes. This inadequacy decreases opportunities to refine program implementation and achieve maximum impact for participating parents and their children. Leaders lack the ability to answer the extent to which Child Care Assistance programs are meeting the goals of the CCDBG and whether Child Care Assistance programs have demonstrated outcomes associated with these goals.

There is considerable agreement on the importance of the program, while there have been limitations associated with broadly addressing the program’s weaknesses. The selection and standardized application of outcome measures has the potential to provide a milieu in which productive, collaborative, data-driven decision making can occur.

State CCA programs enable the provision of high-quality child care and early learning for children while they support parents to work and continue their education. State administrators have an opportunity to collect and report data that reveals programmatic strengths and challenges. Their position between federal partners and child care providers, a status which enables their role as a conduit for bidirectional communication, has three key strengths. First, the flexibility the CCDBG policy affords states for program implementation enables the selection of indicators revealing innovations needed to mitigate the child care cliff effect and other confounding factors. Second, the context under which states engage with the program provides them with the ability to increase supports for parents working toward financial independence through partnerships; to establish, enforce, and monitor quality standards; and to support the child care industry through promotion of the conditions of employment for the child care workforce. Finally, the relationships state programs have with providers enables the collection and reporting of the meaningful data needed to support recommendations that enhance the policy and the programs.
The Child Care and Development Block Grant (CCDBG) Act was established in 1990 to improve access, affordability, and quality within child care for working families in the United States (Omnibus Budget Reconciliation Act, 1990). This authorizing legislation and associated federal rules effectively set the federal funding and policy direction for child care issues across the country. Implementation of the federal child care program is managed by the Office of Child Care, part of the United States Department of Health and Human Services, through administration of the Child Care Development Fund (CCDF). The CCDF provides block grants to states, territories, and tribal governments to provide financial assistance to eligible low-income working families to assist in paying for child care, and for efforts that improve the quality of child care available for all (Office of Child Care, 2020). The Fund maintains provisions for child care services, quality activities, coordination of resources, state and tribal child care plans, research, and technical assistance; all are administered through state CCA programs.

The CCDBG Act was last reauthorized in 2014. The federal policy goals of the reauthorized act are as follows:

- To allow each state maximum flexibility in developing child care programs and policies that best suit the needs of children and parents within that state.

- To promote parental choice to empower working parents to make their own decisions regarding the child care services that best suit their family’s needs.

- To encourage states to provide consumer education information to help parents make informed choices about child care services and to promote involvement by parents and family members in the development of their children in child care settings.

- To assist states in delivering high-quality, coordinated early childhood care and education services to maximize parents’ options and support parents trying to achieve independence from public assistance.
To assist states in improving the overall quality of child care services and programs by implementing the health, safety, licensing, training, and oversight standards established in this sub chapter [Subchapter II-B - Child Care and Development Block Grant (Sections 9857-9858r)] and in state law (including state regulations);

- To improve child care and development of participating children; and

To increase the number and percentage of low-income children in high-quality child care settings (Child Care and Development Block Grant Act, 2014).

The intended outcomes for child care assistance programs were conveyed by the Office of Child Care within the Administration of Children and Families after the Final Rule was published in 2016 (Office of Child Care, 2016). The stated focus of the programs was to propel low-income families and their children toward financial independence. The policy proposes to accomplish this through several tactics relevant to this brief, two of which are directly tied to the provision of cash assistance for child care services, one linked to supportive quality programming.

- First, education provided to parents and child care providers assists in the selection of high-quality child care arrangements and ensuring children’s safe, healthy growth and development. These supports are necessary to promote children’s well-being and long-term outcomes (Coalition on Human Needs, 2016).

- Second, elongated eligibility periods enable a parent to continue to work or finish an educational program even when their income has increased beyond the eligibility threshold, supporting the success of enrolled families (Office of Child Care, 2016).

- Third, a proportion of funds must be set aside to improve child care and support the quality of the child care workforce (Child Care and Development Block Grant Act, 2014). Rates are to be set at the 75th percentile to ensure children receiving subsidies can access three quarters of all available child care (Office of Child Care, 2016). These mandates are meant to incentivize providers to equitably enroll children receiving and not receiving assistance while they meet the financial obligations of their business.
Background

Inspired by a major limitation of CCA programs, the child care cliff effect, as well as the positive effects state CCA programs may have on children, families, and their communities (through supports aimed at the provision of high quality and consistent early childhood care and education (Office of Child Care, 2020), this project engaged in an examination of the CCDBG policy in the areas of cash assistance and quality supports offered through state CCA programs. The research included a review of data reported to the Office of Child Care by each state program, an in-depth analysis of Iowa’s CCA program database, and an early childhood literature review. The culmination of this exploration resulted in a focus on the associations between the goals of the policy, the intended outcomes of the programs, and the results highlighted by the available data sources.

The cumulative results pointed to the need for a dialogue related to data collection, analysis, and outcomes. The results also pointed to the need for heightened collaboration among public and private stakeholders to resolve issues impacting children and families living in poverty. The framework utilized in this exploration can be replicated by those interested in exploring opportunities to analyze their programs and should be considered by state programs to augment their analytic and decision-making capacity. The process, results, and recommendations related to this purpose are shared to facilitate this potential.
Exploring Iowa’s Child Care Assistance Program

A major component of this project was realized through a partnership with the Iowa Department of Human Services’ Child Care Assistance program. An analysis of the state’s eligibility database, KinderTrack, was completed in 2019. This database contains information on recipients of child care assistance in Iowa and includes data about the families, children, providers, attendance, and payments gathered at intake and during active enrollment. Users include DHS income maintenance workers, social workers, PROMISE JOBS (Iowa’s TANF employment & training program) staff, clerical staff, payment specialists, registration staff, licensing staff, childcare providers, and families seeking Child Care Assistance. This information is used to meet federal reporting requirements and for program management.

The purpose of this analysis was to assess what was known about the program and its users through the data collected by the state. This understanding was then compared against the federal goals of the CCDBG policy. The results were used to develop recommendations for enhancements to the program’s implementation.

Nine data queries were developed for the project. The queries were influenced by the goals of the CCDBG policy, the literature, and the suggestions of subject matter experts. The topics were: typical family structure, household size, annual income, reasons families use the program, children’s attendance, payments for care, family copays, provider characteristics, and proximity of families to their providers.

The analysis resulted in recommendations for improvement as well as areas of success. KinderTrack’s data highlights who is using the program, how and why they are using the program, the availability of child care, and the financial impact of the program on providers and families. The data also reflected the impact of policy changes aimed at addressing programmatic challenges. Key changes recently incorporated into Iowa’s program include the CCA Plus program which extends eligibility for 12 months after a family’s income goes above the monthly eligibility threshold, providing child care services to people participating in activities approved under the PROMISE JOBS program (work and training services for families enrolled in the Family Investment Program), and supporting increases in provider registration requirements within the program. Evidence of these programmatic changes can be found on the State of Iowa’s website [https://dhs.iowa.gov/childcare/tool-and-resources](https://dhs.iowa.gov/childcare/tool-and-resources).
### Results

The following table highlights the results of the exploration using the federal policy goal, the state level data query used to evaluate that goal, and the result of the query using data from the State of Iowa. Additional information is included on insights other state CCA programs may gain into their own programs by evaluating similar data points.

<table>
<thead>
<tr>
<th>Goal One</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal</strong></td>
<td>To increase the number and percentage of low-income children in high-quality child care settings. (Child Care and Development Block Grant Act, 2014)</td>
</tr>
<tr>
<td><strong>Problem</strong></td>
<td>A low percentage of families and children who qualify for services receive them. In 2016, just 8 percent of eligible children participated in the program using federal eligibility guidelines and just 12 percent participated using state eligibility guidelines. (Ulrich et al., 2019)</td>
</tr>
<tr>
<td><strong>Intended Outcome</strong></td>
<td>States are to make investments to “increase access to programs providing high-quality child care and development services, to give priority for those investments to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs.” (Child Care and Development Block Grant Act, 2014)</td>
</tr>
<tr>
<td><strong>Data Query(ies)</strong></td>
<td><strong>Results of the Iowa Analysis</strong></td>
</tr>
<tr>
<td><strong>Family Structure</strong></td>
<td>Most families using CCA in Iowa were single-parent families, mostly single mothers.</td>
</tr>
<tr>
<td><strong>Household Size</strong></td>
<td>The average family consisted of 2 to 3 members, a parent and one or two children.</td>
</tr>
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<table>
<thead>
<tr>
<th>Goal Two</th>
<th></th>
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<tbody>
<tr>
<td><strong>Goal</strong></td>
<td>To promote parental choice to empower working parents to make their own decisions regarding the child care services that best suit their family’s needs. (Child Care and Development Block Grant Act, 2014)</td>
</tr>
<tr>
<td><strong>Problem</strong></td>
<td>CCDF families’ access to care may be limited due to the disparity between the cost of care and the payment rates for providers under the program, thereby limiting their ability to exercise choice. (HHS Office of the Inspector General, 2019)</td>
</tr>
<tr>
<td><strong>Intended Outcome</strong></td>
<td>States must include in their plans, payment structures that “provide stability of funding and encourage more child care providers to serve children who receive assistance.” (Child Care and Development Block Grant Act, 2014)</td>
</tr>
<tr>
<td><strong>Data Query(ies)</strong></td>
<td><strong>Results of the Iowa Analysis</strong></td>
</tr>
<tr>
<td><strong>Number of Providers</strong></td>
<td>A point in time methodology (one month’s enrollment) was used to assess the number of providers enrolled in the program by provider type. There was an increase in the percent of licensed centers and a decrease in the percent of non-registered child care homes participating in the program. Peak overall enrollment was 10,229 providers (all categories) in July 2012. The number of providers has decreased each year and in July 2018, just 5,501 providers were enrolled.</td>
</tr>
</tbody>
</table>
## RESULTS

### Provider Proximity

Most participating families were able to leverage care within their county of residence, increasing stability in care arrangements. Counties in Iowa range from 381 square miles to 973 square miles (USA.com, 2020).

**Insight Gained**

Increased ability to convey the average cost per child, per family, and per provider type, highlighting current costs and the ability to predict costs for program expansion including considerations for changes in enrollment and in the provider network.

### Payments for Care

A wide range in the amount of payments was found, although half of all biweekly payments were between $110 and $235. Calculations were made by age and number of children, and type of provider which assisted in a more granular view of resource allocation. Median annual payment amounts per child and per family were slightly less than the market rate, and this difference became more pronounced over time, with the median annual payments per child (family) about $90 ($160) lower than market rate in 2010 and $220 ($480) lower in 2018. This difference in reimbursement, along with the decrease in provider participation has a negative impact on parental choice.

**Insight Gained**

Increased ability to identify shortages in provider participation. A geographic representation along with the quantitative analysis expands this capability. Extending this query to include the address of the family’s employer could provide a more granular view of the issues surround the network and insight about use of the program.

### Goal Three

#### Goal

To assist states in delivering high-quality, coordinated early childhood care and education services to maximize parents’ options and support parents trying to achieve independence from public assistance. (Child Care and Development Block Grant Act, 2014)

#### Problem

Low exit thresholds cause the cliff effect and stall progress toward financial independence (Indiana Institute for Working Families, 2012)

#### Intended Outcome

States will have policies and procedures in place to allow for provision of continued assistance at the beginning of a new eligibility period for children of parents who are working or attending a job training or educational program and whose family income exceeds the State’s income limit to initially qualify for such assistance, if the family income for the family involved does not exceed 85 percent of the State median income for a family of the same size. (Child Care and Development Block Grant Act, 2014)

### Data Query(ies)

#### Need for the Program

Trends over time indicated an increase in the number of families who used the program for work and a decrease in the number of families who used the program for increasing their education. (Families can select all applicable options when answering this question) The query was also broken out by two-parent households and single mothers, where similar trends were present.

**Insight Gained**

Identification within the major categories of need for the program by family type can inspire a thoughtful approach to supporting families as they work toward independence; a key consideration in addressing the cliff effect. Insight into partnerships needed with workforce and education programs to ensure achievement of the goal.

#### Annual Income

Median family income has increased over time and with the institution of the 12-month expanded eligibility.

**Insight Gained**

Assessment of the impact of programmatic changes, the limitations surrounding the eligibility limits, and the gap between financial stability and the incomes earned by enrolled families. Baseline information needed to address changes in entrance and exit incomes.
To improve child care and development of participating children. (Child Care and Development Block Grant Act, 2014)

“In several states, licensed child care providers are required to participate in the QRIS (Quality Rating and Improvement System). In other states, QRIS participation may be voluntary or only required for programs receiving subsidies or other funds. QRISs are not available everywhere.” (ChildCare.gov, n.d.) Lack of standardization for CCA quality programs limits pathways to improving care and assuring the influence of child care on child development. While relationships among children, their families, and the provider are important to child care and development (Zero to Three, 2010), these elements are not exclusively named in the policy.

The plan shall describe child care standards for child care services for which assistance is made available, to provide for the safety and developmental needs of the children served, that address group size limits for specific age populations; appropriate ratios between the number of children and the number of providers, in terms of the age of the children; and required qualifications for providers. (Child Care and Development Block Grant Act, 2014)

In addition to standards that increase the quality of child care services, continuity of care is also important. A high level of stability and continuity was experienced by most enrolled families. Over 90% did not have breaks in attendance lasting longer than one month and in most cases breaks occurred only once. Median attendance was 13 months across all age groups, with attendance decreasing as children age.

Identification of the impact of family copays on the resource allocations of the program and the level of investment made by families in each iteration of the program.
**Recommendations**

Analyzing administrative data, as demonstrated by Iowa’s analysis, is a foundational activity in strengthening the performance of state child care assistance programs.

The following recommendations are made to address four CCDBG goals through the integration of data into the decision-making process as it relates to state implementation:

*Identify the extent to which eligible children and families are not being served based on trends in utilization by family type and size.*

While population data can provide insight into the percentage of children and families who are eligible, programmatic data offers a more granular perspective. Through a more thorough understanding of who is being served by the program (family type, family size, children’s ages, race, and ethnicity), leaders can begin exploring who is not being served and begin the process of discovering the underlying causes. Answering these questions can guide state outreach strategies and implementation tactics that expand the program’s reach to increase the number and percentage of low-income children who are enrolled. Child care is a cornerstone enabling families with young children to work (U.S. Chamber of Commerce, n.d.).

*Research the adequacy of the provider network by assessing the proximity of families to providers in terms of distance traveled from both home and work.*

Include an assessment of the number and types of providers by geographic location who are enrolled over time. Trends in rural and urban locations, the number of child care deserts, and the size and type of providers who are enrolled and those who disenroll should be included in the analysis. Mapping this data will assist by highlighting hotspots for intervention. Distance between a provider, home, and work is a factor parents weigh heavily as they choose a child care provider (National Survey of Early Care and Education Project Team, 2016).
Associate trends in reimbursement with the actual costs of providing care and the extent to which the voucher value influences provider’s decision to participate in the program. Highlight the impact of the voucher on economic stability for providers by type. Associate the results with the number of children who are enrolled and qualify to be enrolled in the program by geographic region. Align these results with provider participation in the state’s quality program by provider type. High quality early learning environments reduce the achievement gap for children from low-income families, improves health outcomes, and boost lifetime earnings (Heckman, n.d.). Education has been shown to be an important pathway to increasing family financial independence as research has shown adults with two- or four-year degrees have higher incomes than those with a high school diploma (Haskins et al., 2009).

Enhance data collection by encouraging applicants to prioritize their top two needs for the program and indicating the nature of their work or educational program (i.e. working full-time, working part-time, enrolled in a four-year educational program, enrolled in a two-year educational program, etc.).

This analysis can be used to answer key questions about how the program is used, why families enroll, and the benefit of the program’s extended eligibility period in supporting families who are seeking self-sufficiency. Associate copayment amounts with income level, family type and program type. Stable care arrangements support parents to maintain employment while they also provide important nurturing relationships critical to child development (Administration for Children and Families, 2014).
The results of the comparisons could assist in implementing more appropriate eligibility criteria and the development of innovations to address the cliff effect. The child care cliff effect is a disincentive to work, stalling job and career advancement (National Conference of State Legislatures, 2019).

Align this with the number of providers used by the family and the longevity of use, the quality ratings associated with those providers, and the types of providers by age of the child. The results of this analysis will highlight trends in the stability and type of care arrangements for enrolled children over time. The Office of Child Care (2011) recommends states take actions that increase stability in the child care network and recognizes the impact of instability on children, families, and the economy.

While this basic framework for analysis is useful, there is a critical need for collecting and analyzing additional data to support innovations in program implementation that benefit stakeholders across the child care system.

Additional recommendations are:

**Identify enhancements to eligibility requirements, aligning Federal Poverty Level benchmarks with annual income needed to support a basic needs budget by geographic location for analysis.**

**Trend the attendance rates of children enrolled in the program by counting the number of breaks lasting more than 30 days.**

Qualitative data should be systematically collected to reveal the details of the stories told by the quantitative data.

A data-driven approach considers the needs of all parties, establishes a shared vision, reduces assumptions, and results in assignment of collective meaning to the program (Strehlehner, 2015).

Select a core set of quantitative measures that are in addition to those reported federally and which meet the needs of multiple stakeholders to assist in the development and maintenance of an outcomes-based analysis.

These point-in-time measures should be aligned with the qualitative measures and should assist quality improvement and trend identification to encourage the replacement of a reactive approach with a proactive approach to program enhancement. The following are examples of such measures:
Connect CCA program data with data from other state programs, providers, communities, businesses, and advocacy organizations. The results should be used to outline the context within which the program exists and to reveal opportunities for system-wide improvements to government assistance programs.

Further analysis can underscore the strengths of the program, identify areas in need of improvement, and interventions that are likely to have a positive impact. At the center of this inquiry should be a systems approach, collaborative decision-making, and improved outcomes for families and children.

State child care assistance programs can use this analysis framework to assess the effectiveness of the CCA program in the production of the outcomes intended by the CCDBG policy and those articulated by early childhood literature. The results can also be used to incite advocacy organizations, family support programs, and other government assistance programs to collaborate in the development of innovative solutions to challenges associated with the policy. A robust process for analyzing administrative data can inspire process improvements, create the structure for data driven decision making, and leverage the program’s strengths to create better outcomes for children, families, providers, and communities.

The full report can be found here.
References


The Harkin Institute and Drake University

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