

# 2024 Child Care Market Rate Survey and Cost of Care Analysis

Rhode Island Department of Human Services (DHS)

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**PUBLIC**  
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## EXECUTIVE SUMMARY

The **2024 Rhode Island Child Care Market Rate Survey**, conducted by Public Consulting Group LLC (PCG) for the Rhode Island Department of Human Services (DHS), provides a comprehensive analysis of child care rates across the state. This survey, mandated by the federal Child Care and Development Fund (CCDF), aims to inform the setting of subsidy payment rates to ensure equal access to quality child care for families receiving assistance. Overall, the survey's key findings and implications below underscore the importance of continuous evaluation and adjustment of child care policies and funding to meet the evolving needs of providers, families, and the community.

### Key Findings

#### 1. Survey Methodology and Outreach:

- The survey targeted licensed child care providers, including both Center-based and Family Child Care Homes.
- Outreach efforts included emails, phone calls, postcards, and website postings to encourage participation.
- A total of 267 responses were collected, representing 32.5% of all providers in the state, with a margin of error of 4.93%.

#### 2. Market Rate Analysis:

- The survey analyzed the 75th percentile of market rates for different types of care and age groups.
- Rates were converted to a standard weekly rate for comparison with Rhode Island's current child care subsidy structure.
- Significant increases in market rates were observed from 2021 to 2024, particularly for Center-based care.

#### 3. Additional Survey Insights:

- Providers reported on various fees, including application, registration, and enrollment fees.
- Information on special programming and services for children with special needs was collected.
- Data on hours of operation, including non-traditional hours, was also gathered.

#### 4. Cost of Care:

- Personnel Expenses constitute 55% of the overall expenses for Center-based programs. The majority of these costs are allocated to salaries and wages. Teaching staff represent approximately 76% of the total personnel budget for wages and salaries, excluding benefits.
- It is difficult to properly estimate the total pay for Family Home provider licensees, as each program's definition of pay/wage/profit may differ. So total program expenses to operate a Family Home program are likely to be underestimated in this analysis. As such, a potential solution would be for these estimations be further analyzed through a more detailed study with Family Home providers, rather than via a general survey
- Facility Costs are the largest portion of all non-personnel expenses across both program types, especially significant in Family Home programs where it accounts for 66.6% of non-personnel expenses.

#### 5. Annual Cost per Child:

- The annual cost per child to providers, on average, was similar for Center-based programs (\$9,158) and Family Child Care programs (\$9,603).
- The cost of care in Center-based settings varies significantly by age group, with infants costing the most to care for due to smaller class sizes and the need for more intensive attention (approx. \$18,000 annually for infants in contrast to \$5,000 for school age children).

### Conclusion

The 2024 Rhode Island Child Care Market Rate Survey provides critical data to inform the setting of subsidy rates, ensuring that families receiving assistance have access to quality child care. The findings highlight the increasing costs of child care and the need for adequate subsidy rates to support providers and families. This comprehensive analysis will aid DHS in advocating for appropriate funding and support for the child care sector in Rhode Island.

### Implications:

#### For the State:

##### 1. Subsidy Rate Adjustments:

- The significant increase in market rates from 2021 to 2024 indicates a need to adjust subsidy rates to keep pace with rising costs. This ensures that families receiving assistance can access quality child care without financial barriers.
2. **Funding Allocation:**
    - The detailed cost of care analysis highlights the high personnel expenses, particularly for Center-based programs. Policymakers might consider allocating more funds to support wage increases and benefits for child care workers, which can help attract and retain qualified staff.
  3. **Support for Providers:**
    - The survey identifies various barriers to participation in the Child Care Assistance Program (CCAP), such as administrative burdens and insufficient reimbursement rates. Addressing these issues through streamlined processes and higher reimbursement rates could encourage more providers to participate in CCAP.

**For Child Care Providers:**

1. **Financial Planning:**
  - Understanding the detailed breakdown of costs and revenues can help providers better plan their budgets and identify areas where they can optimize expenses or seek additional funding.
2. **Quality Improvement:**
  - The survey results suggest that providers need support in areas like professional development, facility improvements, and materials. Access to grants and low-cost loans could help providers enhance the quality of their services.
3. **Special Programming:**
  - Providers offering special programming for children with special needs can use the data to advocate for additional funding or support to cover the higher costs associated with these services.

**For Families:**

1. **Access to Quality Care:**
  - Adjusting subsidy rates to reflect current market rates ensures that families receiving assistance have access to a broader range of quality child care options, promoting equal opportunities for all children.
2. **Affordability:**
  - By addressing the cost disparities and ensuring that subsidy rates are adequate, families can avoid the financial strain of high child care costs, making it easier for parents to work or pursue education.

**For the Community:**

1. **Economic Impact:**
  - Supporting the child care sector through adequate funding and subsidies can have a positive economic impact by enabling more parents to participate in the workforce, thereby contributing to the local economy.
2. **Child Development:**
  - Ensuring access to high-quality child care supports the developmental needs of children, preparing them for future educational success and overall well-being.

## I. INTRODUCTION

In 2024, Public Consulting Group LLC (PCG) was contracted by the Rhode Island Department of Human Services (DHS), Office of Child Care, to conduct a federally-mandated Market Rate Survey of child care providers throughout the state. This report details the findings of the 2024 Market Rate Survey.

The United States Department of Health and Human Services (HHS), Administration for Children and Families (ACF) currently administers the Child Care and Development Fund (CCDF), which distributes child care subsidy dollars to states through a block grant (the Child Care and Development Block Grant, or CCDBG). Under the 2014 reauthorization of the CCDF by Congress, states are required to conduct a Market Rate Survey or alternative methodology every three years to assist in establishing subsidy payment rates. This survey is intended to provide enough information to guide states in setting subsidy rates at a level where children and families receiving assistance have equal access to child care services that are of comparable quality to children who do not receive assistance. Federal guidance has set the 75<sup>th</sup> percentile of market rates to be the appropriate indicator of equal access.

The 2014 reauthorization of CCDF also required states to consider the cost of providing care in their states when setting subsidy rates. This cost of care analysis must consider both the cost of “child care providers’ implementation of health safety, quality, and staffing requirements,” and “the cost of higher-quality care.”<sup>1</sup> Utilizing what ACF considers a “narrow cost analysis,” DHS and PCG included detailed cost of care questions in this year’s survey, collecting information about program expenses, revenues, wages, staff education levels and accreditations, and other data to be able to calculate an approximate cost per child. This estimated cost per child and other cost information collected will be used to inform the state during its rate setting process.

## Methodology

### *Drafting the Survey*

DHS and PCG chose to conduct a census survey for licensed providers (Center-based and Family Child Care Homes), with a target of approximately one-third of all child care providers in the state completing the survey to align with best practices observed in similar studies in other states. Sampling one-third of a population is typically seen as a rule of thumb in statistical significance, generally achieving high confidence levels (95% in this instance) in the surveyor’s estimations. Together, DHS and PCG drafted a survey instrument that captured information on rates, enrollment, general demographics, subsidy participation, other fees, salaries and wages, education level, and BrightStars rating.

The survey was drafted by DHS and PCG and presented to the Market Rate Survey Advisory Group, which was composed of providers and provider advocacy groups convened to advise the state and PCG in the creation of the survey, its implementation, and promoting participation among the provider community. After receiving final approval, the survey was built into an online survey collection tool which served as the primary portal for gathering completed surveys.

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<sup>1</sup> 2018. U.S. Department of Health and Human Services, Administration for Children and families, Office of Child Care. CCDF-ACF-PI-2018-01. Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2018-01>

## Outreach and Survey Collection

Once the surveys were built into the online tool, PCG distributed an initial email announcement to the statewide provider community with a URL link to access the survey beginning June 12<sup>th</sup>, 2024. Between June 12<sup>th</sup> and August 5<sup>th</sup>, 2024, PCG and DHS promoted the survey through various means, including:

- Sending emails to providers who had not yet completed the survey.
- Employing an outbound call team to contact providers who had not yet completed the survey and offering them the opportunity to take the survey over the phone. During this time, the call team made over 1,000 calls to the provider community. Other correspondence provided a toll-free number for providers to call-in themselves to take the survey over the phone.
- Mailing reminder postcards via USPS encouraging individual providers to take the survey.
- Posting information about the survey and the survey link on the DHS website.
- Tapping the Advisory Group to call and contact providers to promote the survey.

## Data Cleanup and Analysis

After closing the survey on August 5<sup>th</sup>, 2024, PCG exported the survey data as Excel files for data cleanup and analysis. PCG also worked to determine the threshold to which a survey would be included in the analysis if it were a partial response, which hinged on a complete response to *at least* a completion of the rate reporting section of the survey. It was also during this time we verified that the surveys were submitted by actual licensed providers and there were no duplicate responses by matching the ID numbers submitted for each survey against DHS Provider Licensing IDs. After initial data cleansing, the raw data were compiled into an Excel database for further analysis and calculations.

We followed the conversion methodology below to convert the rates into one standard rate comparable to Rhode Island's weekly subsidy structure:

**Table 1. Conversion Methodology**

Reported Rate Units	Conversion Methodology
Hourly	The reported hourly rate was multiplied by the higher end of the reported interval of hours. For 30+ hour category, the hourly rate was multiplied by 30.
Daily	Divide operational hours by 7.5 and multiply by daily rate.
Monthly	Monthly rates divided by 4.33 weeks.
Annually	The annual reported rate was divided by 48 (the average number of weeks providers reported operating per year)

After rates were converted, PCG reviewed the rates for reasonableness and excluded those that were far outside what would be expected in their respective geographic areas and age formats or if they were outliers +/- two standard deviations from the mean of responses. After cleanup, survey data were then analyzed to produce the remainder of this report.

The most important factor in the MRS is determining the 75<sup>th</sup> percentile of market rates by type of care and age range, geography, and provider type. In this report, PCG followed current ACF guidelines that encourage states to weight the 75<sup>th</sup> percentile by the number of child care slots available within a given unit of analysis. In this case, current enrollment was used for weighting responses by licensed providers as the representative sample for infant/toddler, preschool, and school age age-ranges by each geographic region, provider type, and other groupings.

## Response Rates



Overall, PCG and DHS were able to collect a total representative sample size for licensed providers of 267 responses, which means that approximately one-third of all providers completed the survey, achieving the initial stated goal of the project. With this large sample, we estimate that there is a 4.93 percent Margin of Error in our data, assuming a 95 percent confidence level. This means that 95 percent of the time, we can estimate that the true mean (average) of the full population will be within plus or minus 4.93 percent of our sample's mean. The rationale for considering a sample size of approximately one-third of a population as statistically significant is grounded in the principles of statistical sampling and the law of large numbers. The following points elucidate this reasoning:

- **Representation:** A sample size constituting one-third of the population is generally sufficient to capture the diversity and variability inherent within the population. This ensures that the sample is representative, thereby minimizing sampling bias.
- **Central Limit Theorem:** According to the Central Limit Theorem, the distribution of the sample mean will approximate a normal distribution, irrespective of the population's distribution, provided the sample size is adequately large. A sample size of one-third typically satisfies this requirement, facilitating reliable inferences about the population.
- **Margin of Error:** Larger sample sizes contribute to a reduced margin of error, enhancing the precision of estimates. A sample size of one-third strikes a balance between precision and practicality, offering reliable estimates without necessitating a full census.
- **Confidence Levels:** A sample size of one-third allows for the attainment of high confidence levels (e.g., 95% or 99%) in the estimates. This implies a high degree of certainty that the sample accurately reflects the population.

Though PCG conducted a census survey which may imply a small self-selection bias, this sample size suggests a high degree of reliability in our data including at smaller subdivisions in Center-based care and Family Home child care.

**TABLE 2. FINAL SAMPLE SIZE AND MARGIN OF ERROR**

Sample Information	#
Total Survey Responses	267
Final Margin of Error	+/- 4.93%

**TABLE 3. PROVIDER RESPONSE RATE, BY DEMOGRAPHIC FACTOR**

Analysis Metrics		Total		
		Total Population	Responses	Percent of Total
Total	Total	821	267	32.52%
Provider Type	FCC	399	155	38.85%
	CCC	422	112	26.54%
Language	English	525	145	27.62%
	Spanish	276	116	42.03%
	Other	4	2	50.00%
County	Bristol	32	6	18.75%
	Kent	80	19	23.75%
	Newport	41	13	31.71%
	Providence	608	217	35.69%
	Washington	60	12	20.00%
CCAP	Participates in CCAP	709	244	34.41%
	Does not Participate	112	23	20.54%
Urban Core	Urban Core	608	217	35.69%
	Non-Urban Core	213	50	23.47%

### III. MARKET RATE SURVEY

The U.S. Administration for Children and Families' guidance in conducting market rate surveys notes that "[t]he benchmark for equal access established by ACF Office of Child Care (OCC) is the 75th percentile of the current child care market. OCC considers payment rates set at the 75th percentile or higher as providing equal access."<sup>2</sup> A percentile is a measure used in statistics to indicate the relative standing of a value within a dataset. It represents the percentage of values in a dataset that fall below a particular value. For example, if a score is in the 50th percentile, it means that 50% of the values in the dataset are lower than that score. As it applies to child care market rates, when a rate is set at a certain percentile, such as the 65<sup>th</sup> noted previously, it means that a family can afford to attend 65% of the child care programs in their area.

#### Market Rate Analysis

DHS sets child care subsidy rates at a weekly frequency for Center-based care and Family Child Care Homes. To receive subsidy, child care programs must be licensed and participate in the state's quality rating and improvement system (QRIS) known as BrightStars, which grades programs by level of quality, using a 1 to 5 star rating system, where 5-star programs are rated as having the highest level of quality. Current child care subsidy rates are posted on DHS' website.<sup>3</sup> Current (as of July 2024) weekly subsidy rates by provider type, age group, and BrightStars rating are listed in the two tables below.

**TABLE 4. DHS CENTER-BASED WEEKLY SUBSIDY RATES (JULY 2024, BY BRIGHTSTARS RATING)**

Age Group	1 Star	2 Stars	3 Stars	4 Stars	5 Stars
Infant and Toddler	\$278.25	\$283.50	\$296.10	\$303.45	\$315.00
Preschool	\$236.25	\$246.75	\$255.15	\$262.50	\$273.00
School Age	\$210.00	\$215.25	\$231.00	\$249.90	\$262.50

**TABLE 5. DHS FAMILY CHILD CARE HOME WEEKLY SUBSIDY RATES (JULY 2024, BY BRIGHTSTARS RATING)**

Age Group	1 Star	2 Stars	3 Stars	4 Stars	5 Stars
I/T	\$262.66	\$266.86	\$270.02	\$273.16	\$276.31
Preschool	\$220.63	\$231.14	\$239.54	\$251.10	\$262.66
School Age	\$194.37	\$199.62	\$215.38	\$236.40	\$246.90

Using the data collected in the 2024 market rate survey, the results showed the following 75<sup>th</sup> percentiles of market rates for Centers and Family Child Care programs (for all programs, not distinguishing programs participating in BrightStars from programs that do participate).

**TABLE 6. 75TH PERCENTILE OF MARKET RATES, ALL PROGRAMS, WEEKLY**

	Infant	Preschool	School Age
<i>Percentile</i>	75%	75%	75%
<b>Center Based</b>	\$355.50	\$311.78	\$280.00
<b>Family Child Care Home</b>	\$275.00	\$250.00	\$225.00

<sup>2</sup> [CCDF Payment Rates - Understanding the 75th Percentile \(hhs.gov\)](https://www.hhs.gov/child-care/policy-reports/ccdf-payment-rates-understanding-the-75th-percentile)

<sup>3</sup> [CCAP Provider Rates, Financial Information & Portal Help | RI Department of Human Services](https://www.dhs.gov/child-care/policy-reports/ccap-provider-rates-financial-information-portal-help)

The next two tables detail the reported 75<sup>th</sup> percentile of market rates reported in the survey by age group, provider type, and BrightStars rating (note that the “none” rating means that the program does not participate in BrightStars, and thus likely does not receive CCAP subsidy reimbursements).

**TABLE 7. 75TH PERCENTILE OF REPORTED MARKET RATES, CENTER-BASED**

Star Rating	Infant	Preschool	School Age FT
<b>None</b>	\$427.50	\$330.25	\$387.19
<b>1</b>	\$366.25	\$320.57	\$232.50
<b>2</b>	\$338.75	\$296.25	\$253.75
<b>3</b>	\$337.50	\$275.00	\$275.00
<b>4</b>	\$353.75	\$317.25	\$295.00
<b>5</b>	\$227.25	\$276.60	\$280.00

**TABLE 8. 75TH PERCENTILE OF REPORTED MARKET RATES, FAMILY CHILD CARE HOMES**

Star Rating	Infant	Preschool	School Age FT
<b>None</b>	\$325.00	\$290.00	\$250.00
<b>1</b>	\$280.00	\$256.06	\$237.66
<b>2</b>	\$276.25	\$250.00	\$233.36
<b>3</b>	\$300.00	\$265.00	\$222.50
<b>4</b>	\$267.00	\$248.75	\$246.25
<b>5</b>	None	None	None

The following tables show the percent increase of the overall reported 75<sup>th</sup> percentiles from the 2021 Market Rate Survey compared to the 75<sup>th</sup> percentiles from the 2024 survey (combining non-BrightStars and BrightStars-participating programs). In all cases, weekly rates rose 5% to 25% depending on age group, other than school-age children being served by Family Child Care providers, where the 75<sup>th</sup> percentile remained the same between the two survey periods.

**TABLE 9. DIFFERENCE IN 75TH PERCENTILE FROM 2021 TO 2024, CENTER-BASED**

Age Category	2021	2024	\$ Increase from 2021 to 2024	% Increase from 2021 to 2024
	75 <sup>th</sup> Percentile	75 <sup>th</sup> Percentile		
Infants (Birth-18 months)	\$289.00	\$355.50	\$66.50	23%
Preschool (3 – 5 years old)	\$250.00	\$311.78	\$61.78	25%
School Age Full Day (6 and above)	\$244.00	\$280.00	\$36.00	15%

**TABLE 10. DIFFERENCE IN 75TH PERCENTILE FROM 2021 TO 2024, FAMILY CHILD CARE HOMES**

Age Category	2021	2024	\$ Increase from 2021 to 2024	% Increase from 2021 to 2024
	75 <sup>th</sup> Percentile	75 <sup>th</sup> Percentile		
Infants (Birth-18 months)	\$250.00	\$275.00	\$25.00	10%
Preschool (3 – 5 years old)	\$238.75	\$250.00	\$11.25	5%
School Age Full Day (6 and above)	\$225.00	\$225.00	\$0.00	0%

The tables below detail the reported 75<sup>th</sup> percentiles of 2024 market rates for center-based and family child care providers compared to the current (July 2024) CCAP rates by BrightStars rating. An important observation, particularly for center-based care, is that higher-rated (particularly 5-star) programs had significantly lower

enrollments for infants and toddlers. Most responding programs at higher levels had only preschool and school age classrooms, which is likely a key contributing factor to the ongoing decline in infant and toddler capacity in Rhode Island. This is why the typical weekly rates were lower at the highest quality levels than at the lower quality levels, as they were not having to fund infant and toddler classrooms at a rate similar to non-BrightStars or low-star programs. We should further note that the total number of higher-star programs is significantly lower than lower-star programs, meaning there is a much smaller pool/sample of providers data can be gathered from.

**TABLE 11. DIFFERENCE BETWEEN 2024 75TH PERCENTILE OF MARKET RATES TO CURRENT CCAP RATES, CENTER BASED**

Star Rating	Infants and Toddlers			Preschool			School Age		
	2024 75th Percentile	Current Rate 2024	% Difference	2024 75th Percentile	Current Rate 2024	% Difference	2024 75th Percentile	Current Rate 2024	% Difference
1	\$366.25	\$278.25	24%	\$320.57	\$236.25	26%	\$232.50	\$210.00	10%
2	\$338.75	\$283.50	16%	\$296.25	\$246.75	17%	\$253.75	\$215.25	15%
3	\$337.50	\$296.10	12%	\$275.00	\$255.15	7%	\$275.00	\$231.00	16%
4	\$353.75	\$303.45	14%	\$317.25	\$262.50	17%	\$295.00	\$249.90	15%
5	\$227.25	\$315.00	-39%	\$276.60	\$273.00	1%	\$280.00	\$262.50	6%

In regard to family child care programs, the 75<sup>th</sup> percentiles by star rating were on average closer to current CCAP rates. Unfortunately, the 75<sup>th</sup> percentile of market rates for 5-star family child care programs was not able to be calculated, as no 5-star FCC programs responded to the survey. As noted previously, there are very few 5-star family child care programs in the total provider population.

**TABLE 12. DIFFERENCE BETWEEN 2024 75TH PERCENTILE OF MARKET RATES TO CURRENT CCAP RATES, FAMILY CHILD CARE HOMES**

Star Rating	Infants and Toddlers			Preschool			School Age		
	2024 75th Percentile	Current Rate 2024	% Difference	2024 75th Percentile	Current Rate 2024	% Difference	2024 75th Percentile	Current Rate 2024	% Difference
1	\$280.00	\$262.66	6%	\$256.06	\$220.63	14%	\$237.66	\$194.37	18%
2	\$276.25	\$266.86	3%	\$250.00	\$231.14	8%	\$233.36	\$199.62	14%
3	\$300.00	\$270.02	10%	\$265.00	\$239.54	10%	\$222.50	\$215.38	3%
4	\$267.00	\$273.16	-2%	\$248.75	\$251.10	-1%	\$246.25	\$236.40	4%
5	N/A	\$276.31	N/A	N/A	\$262.66	N/A	N/A	\$246.90	N/A

## IV. ADDITIONAL QUESTIONS – MARKET RATE SURVEY

Providers were asked additional questions including rates, whether they charge additional fees, whether they participate in the QRIS, whether they accept child care subsidy (CCAP), whether they provide special programming or services to children in their care, and to state their hours of operation.

### Rates, Quality, and Subsidy Participation

Providers across Rhode Island were asked if they accepted DHS subsidy (Child Care Assistance Program – CCAP) for prospective families. Of the 262 provider respondents to this survey question, 100 Child Care Centers (out of 113) and 139 Family Child Care Home providers (out of 149) replied as ‘yes.’ A follow-up question sought to understand the reasons why non-participant child care providers choose not to participate in CCAP. The figure below provides a summary view of the reasons across both types of child care providers:

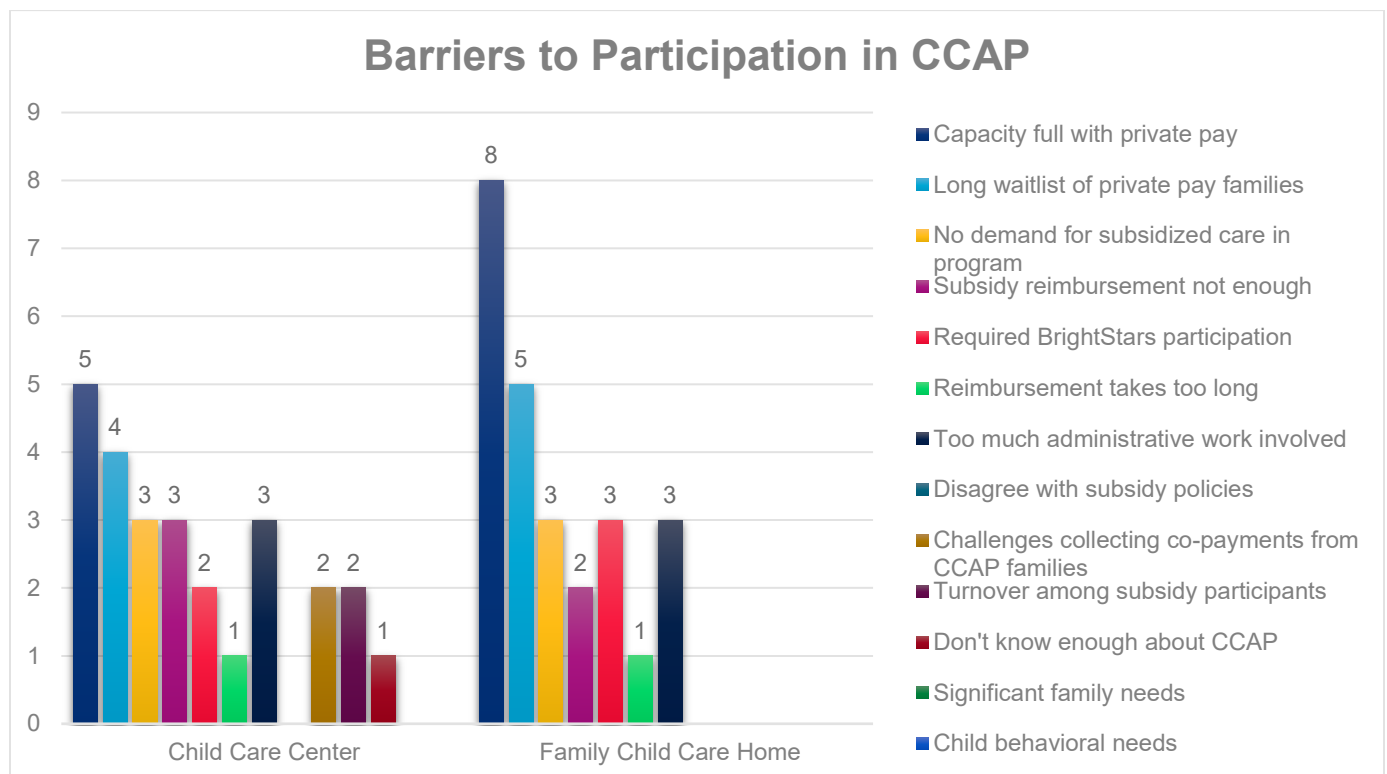
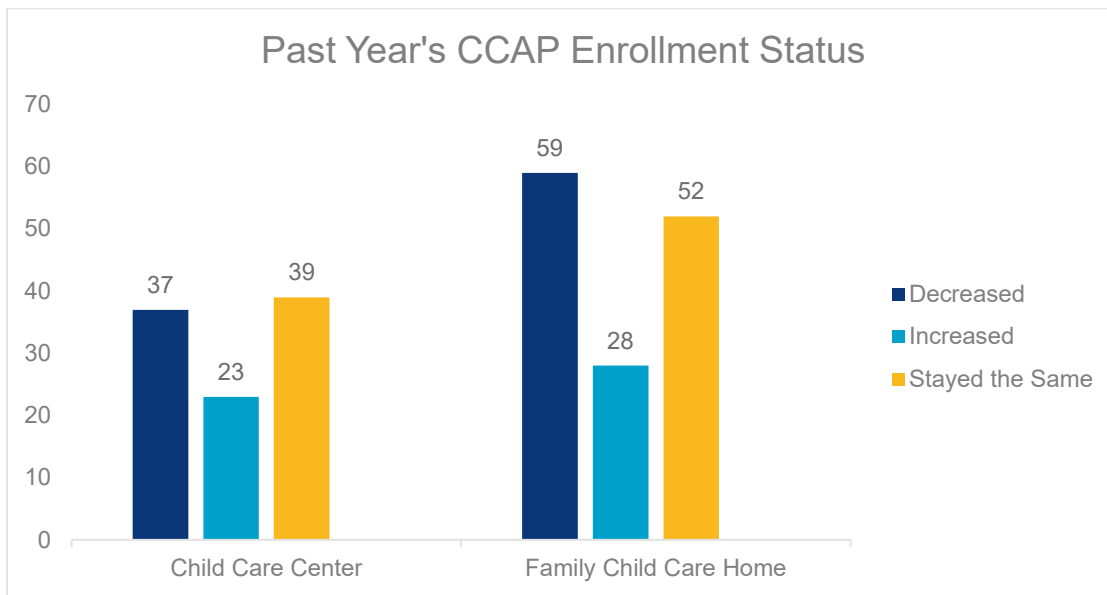


FIGURE 1. CCAP PARTICIPATION BARRIERS

TABLE 13. REASON PROGRAMS DO NOT PARTICIPATE IN CCAP

Reason	Child Care Center	Family Child Care Home
Capacity Full with private pay	5	8
Long waitlist of private pay families	4	5
No demand for subsidy	3	3
Subsidy reimbursement too low	3	2
Required BrightStars participation	2	3
Reimbursement takes too long	1	1
Too much administrative work	3	3
Challenges collecting co-payments	2	-
Turnover among subsidy families	2	-
Don't know enough about CCAP	1	-

Of those providers who accepted subsidy, 23 Child Care Centers (out of 99 total respondents) reported an increase in subsidy enrollments in the past year while 37 noted a decrease and 39 reported that the number of DHS/CCAP subsidized children stayed the same. In response to the same survey question, 28 Family Child Care Home providers (out of 139 total respondents) noted an increase while 59 reported a decrease and 52 said enrollment among CCAP subsidized children stayed the same. Additionally, of providers who accepted subsidy, 85 Child Care Centers (out of 100 total respondents) reported they do not cap the number of enrollments of children receiving subsidy. In response to the same survey questions, 106 Family Child Care Homes (out of 136 respondents) reported they also do not cap subsidy.



**FIGURE 2. CCAP ENROLLMENT STATUS OVER THE PAST YEAR**

The table below provides a summary of percent of child care slots where CCAP enrollments are capped by facility type:

**TABLE 14. PERCENT OF SLOTS WHERE CCAP ENROLLMENTS ARE CAPPED**

Facility Type	1-25%	26-50%	51-75%	76-100%	<i>n</i>
Child Care Centers	10	4	1	0	15
Family Child Care Home	11	2	6	8	27

When asked what supports would help improve programmatic quality, child care providers responded to a range of potential supports with the following results from highest to lowest responses:

- (1) Tiered Reimbursement (Higher DHS/CCAP Rates) - 195 providers
- (2) Grants for Facilities Improvements - 193 providers
- (3) Assistance with Cost of Materials and Supplies – 178 providers
- (4) Free/Low-cost Professional Development Opportunities – 159 providers
- (5) Bonus for Increasing your BrightStars Rating – 145 providers
- (6) Help improving compensation and benefits to recruit and retain qualified and effective early educators and afterschool staff – 136 providers
- (7) Scholarships for staff/employees (Free or low-cost college coursework) – 133 providers
- (8) Low Cost Loans for the Program – 101 providers

(9) Coaching, Mentoring, and Technical Assistance – 94 providers

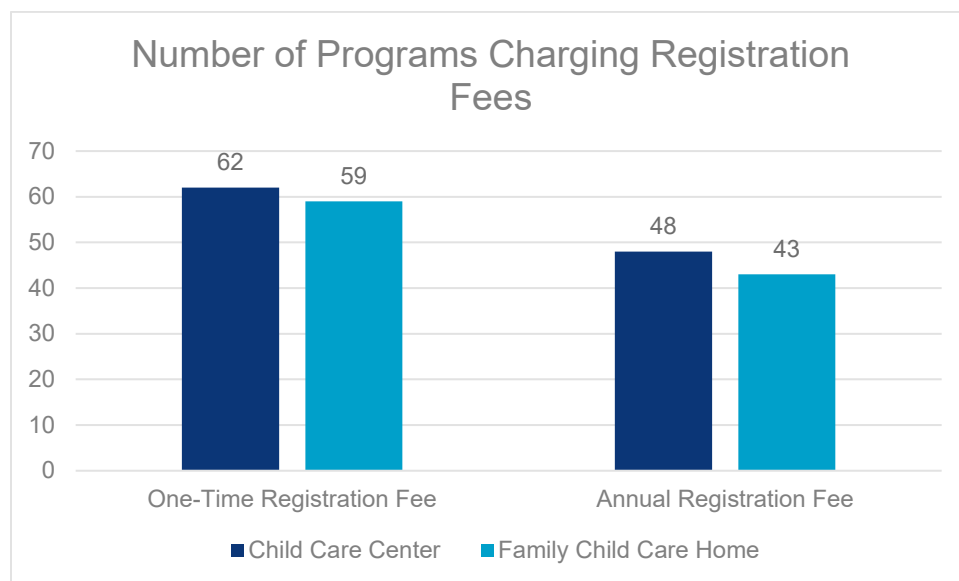
## Application, Registration, and Enrollment Fees

The table below highlights that the average amount of application fees is \$46.11 and \$9.62 for Child Care Centers and Family Child Care Home providers respectively.

**TABLE 15. COST OF APPLICATION FEES**

Facility Type	<i>n</i>	Average of Amount	Max of Amount
Child Care Centers	9	\$46.11	\$100.00
Family Child Care Home	23	\$9.62	\$50.00
<b>Grand Total</b>	<b>32</b>	<b>24.55</b>	<b>\$100.00</b>

Figure 2 indicates 62 of the 115 Child Care Centers charge one-time registration fees while 58 of the 154 Family Child Care Home providers charge the same type of fee.



**FIGURE 3. NUMBER OF PROGRAMS CHARGING REGISTRATION FEES**

The table below provides a summary overview of the cost of enrollment or registration fees with \$65.29 as the average fee for Child Care Centers Annually and \$76.80 being the average fee for Child Care Centers one – time payment. For the Family Child Care Home providers, the average fee for registration annually is \$59.64, and one-time payment is \$63.62:

**TABLE 16. COST OF REGISTRATION FEES**

Provider Types	<i>n</i>	Average Fee Price	Max Fee Price
Child Care Centers (Annual)	43	\$65.29	\$425.00
Family Child Care Home (Annual)	54	\$59.64	\$600.00
Child Care Center (One-Time)	58	\$76.80	\$750.00
Family Child Care Home (One-Time)	73	\$63.62	\$700.00

---

## Special Programming and Services

In Rhode Island, many child care providers provide an array of special programming and services for children in their care with special needs. These services may include, but are not limited to, the following:

- ▶ Behavioral Supervision/Supports for Children with Challenging Behaviors
- ▶ Special Education Services:
- ▶ Early Intervention: Programs may partner with families and Early Intervention to promote the growth and development of infants and toddlers who have a developmental disability or delay in one or more areas.
- ▶ Child Outreach and Early Childhood Special Education: Programs may partner with local education agencies to provide onsite outreach screenings and special education services through the Itinerant Model for Early Childhood Special Education in districts in which it is available. Examples of services that may be provided include speech, physical and occupational therapy.
- ▶ Health Needs: Many children have chronic health conditions such as asthma or food allergies that may require ongoing oversight, training, and attention.
- ▶ KIDS CONNECT - specialized services at licensed childcare centers and after-school programs for children with behavioral healthcare needs so that they can fully participate in classroom daily routines, activities, and learning opportunities
- ▶ SUCCESS: SUCCESS (Supporting Children's Competencies in Emotional and Social Skills) provides infant and early childhood mental health consultation (IECMHC) to support children, families, and early learning programs throughout Rhode Island. IECMHC promotes nurturing relationships and enhances the capacity of staff, families, programs, and systems to prevent, identify and address the social, emotional, and behavioral health needs of young children (newborn to 5 years).

The table below provides a summary of the percentage breakdown of children served at programs across Rhode Island with special needs. Overall, Family Child Care Programs reported that they are more likely to offer programming for children with special needs.



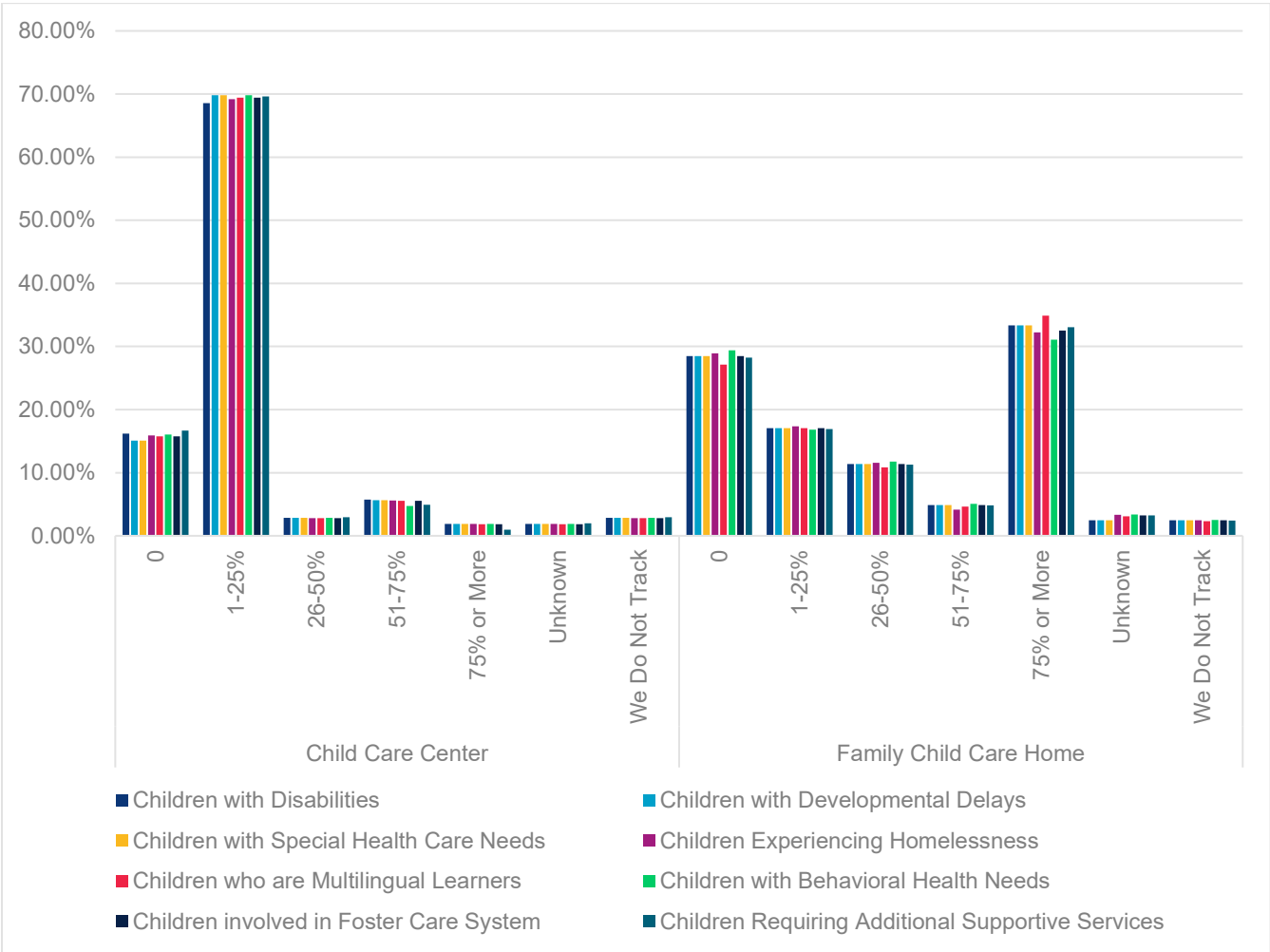


FIGURE 4. PERCENTAGE OF CHILDREN SERVED AT PROGRAMS WITH SPECIAL NEEDS

## Hours of Operation

The following table provides a summary of programs operating during non-traditional hour care (weekends, early mornings, late evenings).

**TABLE 17. PROGRAMS OPERATING DURING NON-TRADITIONAL HOUR CARE**

Type of Providers	Saturdays	Sundays	Open at or Before 6:00am	Close After 6:00pm
Child Care Centers	3	0	21	2
Family Child Care Home	13	9	83	27
<b>Grand Total</b>	<b>16</b>	<b>9</b>	<b>104</b>	<b>29</b>

## V. COST OF CARE

As noted in the first section of this report, the Child Care and Development Block Grant (CCDBG) Act of 2014 mandated that states begin to analyze the cost of providing care in their states. The requirements specify that “[s]tates carrying out a market rate survey may conduct a cost analysis that is more narrowly focused to ensure that base payment rates are adequate to cover the cost of child care services and to consider the cost of higher quality.”<sup>4</sup> This Narrow Cost Analysis allows for “a small-scale cost survey to examine the cost of child care services.”<sup>5</sup>

In 2024, as part of the 2024 Child Care Market Rate Survey, DHS, PCG, and the Market Rate Survey Advisory Group collaborated to develop detailed Cost of Care questions for child care providers to supply information on key cost drivers associated with operating their programs, which meets the requirements for a narrow cost analysis. The Cost of Care questions were listed as “optional” questions in sections three and four of the survey. Information was collected on the costs and revenues associated with the delivery of child care including program expenses such as staff wages and benefits, facility and food costs, training expenses, and other available data that could be used to calculate an approximate cost per child.

For the presentation of these results, we have provided data in percentage formats, to better compare major cost drivers and revenue sources for operating different sizes and types of child care providers.

### Overall Child Care Program Personnel Expenses

Program expenses in a child care program are broadly categorized into personnel and non-personnel costs. Personnel expenses are the most significant, encompassing salaries and benefits for staff including teachers, assistants, and administrative personnel. These costs directly impact the quality of care as they influence the ability to attract and retain qualified staff, maintain low child-to-staff ratios, and offer professional development opportunities. Table 18 below illustrates that Personnel Expenses constitute 55% of the overall expenses for Center-based programs. The majority of these costs are allocated to salaries and wages.

#### CHILD CARE CENTER-BASED PROVIDER PERSONNEL EXPENSES

**TABLE 18. OVERALL CENTER-BASED PERSONNEL STAFFING, WAGE, AND BENEFIT EXPENSES**

Personnel Benefits and Other Staff Expenses	Mean	Total \$	% Of Personnel Expenses	% of Overall Expenses	<i>n</i>
Total Personnel Salary/Wage Expenses	\$392,909	\$22,002,880	77%	55%	56
Program and personnel tax expenses	\$96,036	\$4,321,600	15%	11%	45
Employee benefit expenses (e.g., health insurance)	\$69,841	\$2,304,755	8%	6%	33
<b>Total Personnel Expenses \$</b>	<b>\$558,785</b>	<b>\$28,629,234</b>	<b>100%</b>	<b>72%</b>	<b>134</b>

Table 19 presents the approximate total expense per hour and the number of staff reported for 10 key role categories serving in Center-based child care programs. It also includes the total percentage of expenses allocated for each role, excluding any costs to provide benefits. It is notable that the teaching staff represent

<sup>4</sup> 2018. U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care. CCDF-ACF-PI-2018-01. Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2018-01>

<sup>5</sup> 2018. U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care. List of Potential options for Narrow Cost Analysis. Retrieved from <https://www.acf.hhs.gov/occ/resource/list-of-potential-options-for-narrow-cost-analysis>

approximately 76% of the total personnel budget for wages and salaries, excluding benefits. Part-time teachers earn the lowest average pay when compared to all other roles.

**TABLE 19. OVERALL SERVICE AND ADMINISTRATIVE PERSONNEL SALARY/WAGE EXPENSES AND # OF STAFF**

Role	Hourly Pay Mean (Average)	Total Approximate Expense Per Hour	Total % of Personnel	Avg. # Staff by Role	Total # Staff Reported
Director / Administrator	\$25.01	\$3,739.18	11%	2	150
Education Coordinator	\$23.57	\$2,227.40	6%	1	95
Full Time Teacher	\$18.29	\$9,069.86	26%	7	496
Part Time Teacher	\$15.50	\$4,945.12	14%	6	319
Lead Teacher	\$19.10	\$5,090.30	15%	5	267
Assistant Teacher	\$16.30	\$6,210.71	18%	6	381
Teacher Aid	\$16.54	\$1,058.87	3%	2	64
Substitute	\$16.76	\$863.34	3%	2	52
Administrative Functions	\$21.65	\$638.65	2%	1	30
Additional Staff (e.g. kitchen staff, bus drivers)	\$17.67	\$530.02	2%	2	30

### FAMILY HOME CHILD CARE WAGES

Family home programs are operated by one person licensed as a Family Home Care provider, therefore there are no typical personnel expenses to report for this provider type. The table below presents data collected for self-paid wages for Family Home Child Care providers and any wages paid to an assistant.

Note, it is difficult to properly estimate the total pay for Family Home provider licensees, as each program's definition of pay/wage/profit may differ. Some Family Home providers may consider the expenses for mortgage or rent (facility cost), as just program expenses. Others may consider mortgage/rent expense as dollars paid to the licensee's salaries. Reported program licensee salary / personnel costs are likely to be underestimated in these calculations, so total program expenses to operate a Family Home program are likely to be as well. As such, a potential solution would be for these estimations be further analyzed through a more detailed study with Family Home providers, rather than via a general survey.

**TABLE 20. FAMILY HOME CHILD CARE WAGES**

Family Home Program Reported Wages	<i>n</i>	Monthly / Hourly	Average Annual Expense	Cost to All Programs	% Of Personnel Expenses	% of Overall Expenses
Wages Self-Paid Per Month or Monthly Profit	46	\$1,934.91	\$23,218.96	\$1,068,072.00	35%	20.03%
Wages Paid to Assistant per Hour	32	\$19.00/hour	\$34,229.64	\$2,019,549.01	65%	37.87%
<b>Total Personnel Expenses \$</b>			<b>\$57,697.91</b>	<b>3,087,621.01</b>	<b>100%</b>	<b>57.90%</b>

### HEALTH, DENTAL, DISABILITY, LIFE AND/OR OTHER INSURANCE EXPENSES

Providers were asked if they were able to provide insurance benefits to staff and at what percentage does the employer match the premium costs. Table 21 indicates that most providers (54%) do not provide insurance

benefits. Among the 45% that do offer insurance benefits, on average, 57% of the premium costs are covered. It is notable in Table 22 that there is significant variation in the extent of premium support offered, ranging from 0% to full coverage.

**TABLE 21. NUMBER OF PROVIDERS OFFERING INSURANCE BENEFITS**

Able to provide benefits	# of Respondents	%
Yes	45	45%
No	54	55%
<b>Total</b>	<b>99</b>	<b>100%</b>

**TABLE 22. PERCENT OF PREMIUM MATCHED BY THE EMPLOYER**

Mean (Match %)	Minimum (Match %)	Maximum (Match %)
57%	0%	100%

## Non-Personnel Expenses by provider type

Non-personnel expenses include facility costs such as rent or mortgage payments, utilities, maintenance, and insurance. Additionally, substantial investments are required for educational materials, toys, and equipment that support a stimulating and safe learning environment. Other operational costs might include transportation, food service, and technology. This section of the report breaks down the various types of expenses incurred by both Center-based and Family Home child care programs.

### CHILD CARE CENTERS

**TABLE 23. CHILD CARE CENTER NON-PERSONNEL EXPENSES**

Expense Type	Mean	# w/ expense type	Total \$	% Of Non- Personnel Expenses	% of Overall Expenses
Facility costs	\$95,107	56	\$5,326,012	48.3%	13.4%
Professional and administrative expenses	\$43,207	50	\$2,160,341	19.6%	5.4%
Educational and curriculum support expenses	\$19,944	43	\$857,611	7.8%	2.2%
Staff or program training expenses	\$9,147	37	\$338,456	3.1%	0.9%
Food costs	\$34,012	42	\$1,428,522	12.9%	3.6%
Transportation costs	\$15,588	12	\$187,056	1.7%	0.5%
Other expenses	\$23,125	32	\$740,013	6.7%	1.9%
<b>Total Non-Personnel Expenses</b>			<b>\$11,038,011</b>	<b>100%</b>	<b>27.8%</b>
<b>Total Overall Expenses</b>			<b>\$39,667,245</b>		

### FAMILY HOMES

**TABLE 24. FAMILY HOME NON-PERSONNEL EXPENSES**

Expense Type	Mean	# w/ expense type	Total \$	% Of Non- Personnel Expenses	% of Overall Expenses
Facility costs	\$28,352	124	\$3,515,649	66.6%	65.9%

Expense Type	Mean	# w/ expense type	Total \$	% Of Non- Personnel Expenses	% of Overall Expenses
Professional and administrative expenses	\$3,370	92	\$310,024	5.9%	5.8%
Educational and curriculum support expenses	\$3,241	59	\$191,241	3.6%	3.6%
Staff or program training expenses	\$2,667	42	\$112,020	2.1%	2.1%
Food costs	\$7,685	117	\$899,157	17.0%	16.9%
Transportation costs	\$2,292	29	\$66,461	1.3%	1.2%
Other expenses	\$5,027	36	\$180,985	3.4%	3.4%
<b>Total Non-Personnel Expenses</b>			<b>\$5,275,537</b>	<b>100%</b>	<b>98.9%</b>
<b>Total Overall Expenses</b>			<b>\$5,333,235</b>		

## Key Takeaways:

- ▶ Facility Costs are the largest portion of all non-personnel expenses across both program types, especially significant in Family Home programs where it accounts for 66.6% of non-personnel expenses.
- ▶ Professional and Administrative Expenses are notably higher in Center-based Programs, contributing to 19.6% of non-personnel expenses.
- ▶ Child Care Centers have the highest overall non-personnel expenses, which is consistent with the broader range of services and facilities they typically offer.

## Revenue Sources

Although the highest percentage of revenue for child care providers comes from families paying privately funded tuition/fees, Child Care Subsidy funding contributes a significant percentage (29%) of revenue for both Center-based and Family Home programs.

**TABLE 25. TOTAL PROGRAM REVENUE SOURCES (ALL PROVIDER TYPES)**

Revenue Source	# Respon- dents	% Total Revenues	Mean Center Revenue	Mean FCC Revenue	Total Reported Revenue
Tuition/fees paid by families (private pay, co-pays, and sliding fees)	120	36%	\$453,543	\$182,910	\$27,232,987
Child Care Subsidy	97	29%	\$308,263	\$20,800	\$14,518,531
Head Start, Early Head Start, and/or State-Funded Pre-K Revenue	7	2%	\$1,718,347	N/A	\$6,873,387
Child and Adult Care Food Program (CACFP)	50	15%	\$212,156	N/A	\$3,124,986
Other governmental subsidies for families	6	2%	\$19,850	N/A	\$90,700
Local or community grants and fundraising	18	5%	\$14,923	N/A	\$181,398
Family Child Care Grant (if applicable just for FCC)	20	6%	\$38,500	\$1,500	\$706,632
Other	17	5%	\$93,178	N/A	\$1,133,390
<b>Total</b>			<b>\$2,858,760</b>	<b>\$205,210</b>	<b>\$53,862,011</b>

**TABLE 26. REVENUE SOURCES BY PROVIDER TYPE**

Revenue Sources Type	Center-based		Family Child Care or Group Family Child Care	
	Total #	%	Total #	%
Tuition/fees paid by families (private pay, co-pays, and sliding fees)	56	39%	64	33%
Child Care Subsidy	41	29%	56	29%
Head Start, Early Head Start, and/or State-Funded Pre-K: Revenue	4	3%	N/A	N/A
Child and Adult Care Food Program (CACFP)	13	9%	37	19%
Other governmental subsidies for families	4	3%	2	1%
Local or community grants and fundraising	11	8%	7	4%
Family Child Care Grant (if applicable just for FCC)	2	1%	18	9%
Other	12	8%	5	3%

## Annual Average Cost of Care per Child

Using the data gathered from the survey, particularly annual program expenses and average enrollments, an estimated cost or expense to a program per child can be calculated. The data presented in the table below reveals significant variations in total expenses, and cost of care per child across the different types of Center-based child care providers based on BrightStars quality ratings.

**TABLE 27. CENTER-BASED COST OF CARE PER CHILD BY BRIGHTSTARS RATING**

Type	Overall	None	1 Star	2 Star	3 Star	4 Star	5 Star
Average Personnel Expenses	\$511,236	\$956,466	\$352,031	\$442,176	\$326,292	\$936,928	\$226,246
Average non-personnel Expenses	\$88,661	\$199,798	\$138,464	\$232,911	\$196,300	\$195,066	\$145,038
Average Total Expenses	\$599,897	\$1,156,264	\$490,495	\$675,086	\$522,592	\$1,131,993	\$371,284
Avg % Personnel	85%	83%	72%	65%	62%	83%	61%
Avg % non-personnel	15%	17%	28%	35%	38%	17%	39%
Avg. Daily Enrollment	65.50	56.36	59.44	68.30	84.42	63.06	62.50
<b>Approx. Cost Per Child</b>	<b>\$9,158</b>	<b>\$20,517</b>	<b>\$8,251</b>	<b>\$9,885</b>	<b>\$6,191</b>	<b>\$17,950</b>	<b>\$5,941</b>

The data in Table 28 offers a detailed look at the average cost structure for family home child care providers. On average, the total annual expenses for a provider are \$110,083, which includes both personnel and non-personnel costs. Personnel expenses, which cover self-pay or compensation and assistant wages, benefits, and other staffing-related costs, make up 52% of the total expenses, averaging \$57,448 annually. Non-personnel expenses, such as supplies, rent, and utilities, account for the remaining 48%, averaging \$52,635 annually.

With an average daily full-time enrollment of 11 children, the approximate cost per child annually is \$9,603. This figure is calculated by dividing the total expenses by the number of children enrolled, giving insight into how much a provider spends per child.

The nearly even split between personnel and non-personnel expenses suggests that family home child care providers must balance how they are able to compensate themselves while meeting their needs with operational costs to remain sustainable. The cost per child figure is also significant, as it highlights the financial burden on providers and can help inform pricing decisions to ensure they cover their expenses. Overall, this data provides a clear understanding of the financial pressures these providers face in delivering child care services.

**TABLE 28. FAMILY HOME COST OF CARE PER CHILD**

Type	Cost/Expense
Average Personnel Expenses	\$57,448
Average non-personnel Expenses	\$52,635
Average Total Expenses	\$110,083
Avg % Personnel	52%
Avg % Non-Personnel	48%
Avg Daily Enrollment (FT ONLY)	11
<b>Approx. Cost Per Child</b>	<b>\$9,603</b>

The data in the final table below presents the cost of care per child by age group for Center-based child care providers. This provides insight into how costs fluctuate based on the age of the children and classroom sizes, reflecting the varying needs and resources required for different age groups.

1. **Infants (Birth to 18 Months):**
  - The cost per child for infants is the highest at **\$18,585.39**.
  - This high cost can be attributed to the small group sizes, with an average of **3 children per classroom**, making infant care resource-intensive. Providers must adhere to lower child-to-staff ratios, increasing personnel costs significantly.
2. **Toddlers (18 to 36 Months):**
  - For toddlers, the cost per child decreases to **\$11,668.78**.
  - This reduction in cost is due to slightly larger class sizes, averaging **5 children per classroom**. Though toddler care still requires more attention than older children, the increased group size allows for more efficient use of resources while maintaining quality care.
3. **Preschool (3 to 5 Years):**
  - The cost of care for preschool-aged children is **\$8,322.31 per child**.
  - Preschool classrooms have a higher average enrollment of **7 children per classroom**. As children become more independent and require less one-on-one attention, the cost of care decreases, and larger group sizes are manageable, which lowers the overall cost per child.
4. **School Age (Full Day):**
  - The cost for school-age children is the lowest at **\$5,202.94 per child**.
  - School-age classrooms have the largest group sizes, averaging **11 children per classroom**. The lower cost reflects the reduced need for intensive supervision and the ability to care for a larger number of children at once, creating efficiencies in resource use.
5. **Overall Costs:**
  - Across all age groups, the average cost per child is **\$10,944.85**.



- This average reflects the significant variation in care costs between infants and school-age children, with infant care being the most expensive and school-age care being the least costly due to differences in group size and care intensity.

**Implications:**

The cost of care in Center-based settings varies significantly by age group, with infants costing the most to care for due to smaller class sizes and the need for more intensive attention. As children grow older, the cost per child decreases due to larger group sizes and a reduced need for individualized care. The differences in cost per child underscore the financial challenges faced by child care providers in maintaining both quality and sustainability, particularly for younger age groups where care is more resource-intensive.

**TABLE 29 OVERALL COST OF CARE PER CHILD BY AGE**

Age	Total Class rooms	Avg Class rooms	Total Enrollment	Avg Enrollment	Avg Enroll/ Classrooms	Cost Per Child by Age
Infants (Birth to 18 Mos.)	124	2	681	6	3	<b>\$18,585.39</b>
Toddlers (18 to 36 Mos.)	165	2	1301	11	5	<b>\$11,668.78</b>
Preschool (3 to 5 Years)	332	4	3341	29	7	<b>\$8,322.31</b>
School Age Full Day	30	1	1018	9	11	<b>\$5,202.94</b>
Total	651	9	6341	66	26	<b>\$10,944.85</b>

## APPENDIX A. MARKET RATE SURVEY INSTRUMENT

### Rhode Island DHS Child Care Market Rate Survey

#### Rhode Island 2024 Child Care Market Rate Survey

*\*If you are unable to submit a response on the web portal, you may contact [RIDHSSurvey@pcgus.com](mailto:RIDHSSurvey@pcgus.com) or take it over the phone at 833-930-3538.*

Thank you for participating in the 2024 Rhode Island Department of Human Services (DHS) Market Rate Survey. This information will help DHS understand the landscape and accessibility of early childhood care and education across the state. DHS is federally required by the Administration for Children & Families to conduct a Market Rate Survey every three years to determine the costs associated with delivering child care.

**This survey will take approximately 30 minutes to complete** – Your participation is important to us as it will help to establish the Child Care Assistance Program (CCAP) reimbursement rates across all age categories!

Questions will include:

- Information about the services you provide
- Data around the children you serve
- Education services by type of care and geography
- Gathering rates paid for services
- 

Understanding the “market rate,” (i.e. the prices being charged for tuition) and the true cost of delivering child care services helps leaders in state government to better define and advocate for appropriate and accurate CCAP reimbursement rates.

We will treat your responses as confidential and will only share summary information. Any reports resulting from the survey will not include your name or the name of your business. Your choice to take part will not affect your ability to provide subsidized child care.

Prior to starting the survey, you will need to have your bookkeeping and payroll information. Upon completing the survey, you will have the chance to win one of four \$50 VISA gift cards!

After you complete the survey, be sure to click the link on the final screen to fill in additional information and be entered to win an additional \$50 gift card!

*Please note: if you are a program with multiple locations or sites, we ask that you complete a survey for each individually licensed program.*

#### Introduction

##### ALL Providers

**1) Please select your preferred language for completing this survey.**

English  
Español

##### ALL Providers

**2) Please enter your provider Licensing ID\*. This ID is located on the bottom left of your DHS Child Care License and starts with the number 1-5. This number is different than your license number.**

##### ALL Providers

**3) Please select your program type.**

CENTER-Based  
FAMILY Child Care Home or Group Family Child Care Home

**4. Please select which best describes your program’s structure.**

For-Profit

Non-Profit  
Government

[for centers]

5. Is your program part of an organization with more than one licensed site?

Yes  
No

**Enrollment**

**Logic: Hidden unless: #3 Question "Please select your program type" is one of the following answers ("Center-based")**

4) How many children do you currently have enrolled in your program and how many classrooms by age group do you normally operate? (Note: Enrolled children are considered children registered to participate in the program. This number does not assume attendance.)

	Currently Enrolled: Private Pay	Currently Enrolled: CCAP	Currently Enrolled: RI State PreK	Currently Enrolled: Head Start, Early Head Start)	# Classrooms Program Operates
Infant (Birth to 18 mos.)					
Toddler (18 to 36 mos.)					
Preschool (3 to 5 years)					
School Age (Kindergarten or above): Before/After School Only					
School Age (Kindergarten or above): Full Day					

**Logic: Hidden unless: #3 Question "Please select your program type" is one of the following answers ("Family Child Care Home")**

5) How many children do you currently have enrolled in your program and how many children you want to serve? (Note: Enrolled children are considered children registered to participate in the program. This number does not assume attendance.)

	Currently Enrolled: Private Pay	Currently Enrolled: CCAP
Infant (Birth to 18 mos.)		
Toddler (18 to 36 mos.)		
Preschool (3 to 5 years)		
School Age (Kindergarten or above): Before/After School Only		
School Age (Kindergarten or above): Full Day		

**Program Fees and Rates**

**ALL Providers**

6) For which age groups do you provide child care services? Check all that apply.

- Infants (Birth- 18 months old)
- Toddlers (18 to 36 months)
- Preschool (3- 5 years old, not in Kindergarten)
- School Age (In Kindergarten or above)

**ALL Providers**

7) Do you offer any of the following non-traditional hour schedules? Check all that apply.

- Weekend care
- Evening care (until 12am)
- Overnight care
- Other, please specify:
- None

8) What is the minimum number of hours per week a child needs to attend your program to be considered full time? (Numeric Response only)

9) What is the maximum number of hours a week a child can be enrolled in your program? (Numeric Response Only)

10) What is the minimum number of hours per week a child care be enrolled in your program? (Numeric Response Only)

11) What do you charge per child for full time and part time (minimum hour) care?

Age	Full Time Rate	Minimum Daily Rate	Frequency (Hourly, Daily, Weekly, Bi-Weekly, Monthly)
Infants (Birth to 18 months)			
Toddlers			
Preschool Age			
School Age Full Time			
School Age Before/After			

Logic: Hidden unless: #7 Question "Do you offer any of the following non-traditional hour schedules?" If any answer except "None" is selected.

12) Non-Traditional Rates. Please provide the rate you charge to private paying families, even if you do not currently care for any private-pay children. Do not include discounts, CCAP subsidies, sliding-scale rates, additional family fees or scholarships. If you do not offer the schedule listed, please enter "X."

	Rate	Number of Hours Covered in Rate	Frequency Charged	Count of Children Receiving These Services Weekly
Evening Care				
Overnight Care				
Weekend Care				
Extended Day				

**ALL Providers**

13) If your program offers any of the following discounts, please complete the table below. If there are any additional discounts not listed, please describe them in row titled 'other'

	Check if Yes	Amount (% or \$)	Number of Children Currently Receiving Discount	Comments
Sliding Fee				
Low Income Rate (Not including CCAP)				
Sibling Discount				
Student/Family Scholarship				
Employee Discount				
Vacation/Illness (child not attending)				
Other				

**ALL Providers**

14) Do you charge any add-on fees in addition to your base rate? Select all that apply.

Fee	Check if Yes	If Yes, how much?
Registration Fee: One time only (e.g. upon initial enrollment)		
Registration Fee: Annual		
Application Fee		
Waitlist Fee		
Deposit/Hold Fees (i.e., to hold future slot)		
Transportation		
Food/Meals		
Late Pick-up/Early Drop-off		
Late Payment		
Materials/Supplies		
Extended day		
Early Release Days		
Public School Closure Days		
Public School Vacation		
Summer Break		
Event/Field Trip		
Enrichment/Special Activity Fee		
Optional Services		
Bank Fees (e.g., bounced check)		
Other:		

**ALL Providers**

15) In order for DHS to look at true cost of care, it is helpful to understand what additional services providers are offering to children and families in their programs. If you provide these services and it is free for families but a cost to you, please specify in the per child cost. (If you are unsure of the per child cost, make your best guess)

Service	Offered? (Yes/No)	Per Child Cost (to you as a Provider)
Behavior Supervision/Supports for children with challenging behaviors		

Early Intervention Supports to children who are non-verbal or have language delays and includes a child with impaired vision and or hearing		
Health Monitoring for a child with a chronic medical condition and requiring ongoing medication & maintain recordkeeping; for a child who has food or texture sensitivities or physical challenges		
Physical Therapy - access for physical or occupational therapy services or providing activities to support child's therapy goals and a child limited mobility		
KIDS CONNECT - specialized services at licensed childcare centers and after-school programs for children with special healthcare needs so that they can fully participate in classroom daily routines, activities, and learning opportunities.		
Other – Please explain:		

**ALL Providers**

**16) What percentage of children served in your program are part of the following populations? (Drop down options: 0%, 1-25%, 26-50%, 51-75%, 75% or more, Unknown or we do not track)**

- Children with disabilities
- Children with developmental delays
- Children with special health care needs
- Children experiencing homelessness
- Children who are multilingual learners
- Children with behavioral health needs
- Children involved in the foster care system
- Children requiring additional supportive services not specifically related to a disability.

**ALL Providers**

**17) How would you like to enter your program's operating hours?**

- Standard Hours (Enter hours once and select days open)
- Non-Standard Hours (Enter the open/close time for each day of the week)

**Logic: Hidden unless: #17 Question "How would you like to enter your program's operating hours?" If any answer except "Standard Hours" is selected.**

**18) What are your program's standard operating hours? Note: For school-age programs, this is your full day/summer hours.**

Standard Operating Hours	
Open	
Close	

**Logic: Hidden unless: #17 Question "How would you like to enter your program's operating hours?" If any answer except "Standard Hours" is selected.**

**19) Select the days your program is open during standard operating hours.**

- Sunday
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday

**Logic: Hidden unless: #17 Question "How would you like to enter your program's operating hours?" If any answer except "Non-Standard Hours" is selected.**

**20) If operating hours vary by day, please complete the grid below with times XX:XXAM/PM. For example, 07:30 AM or 11:00 PM.**

Day	Start	End

Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

**ALL Providers**

**21) How many weeks per year do you operate, and do you operate only during the school year, summertime, or all year?**

School Year, Summertime, or All Year (dropdown)	Number of Weeks in Operation

**ALL Providers**

**22) What information do you use to set your private pay rates? Check all that apply.**

- DHS/CCAP Reimbursement Rates
- Rates of nearby child care programs
- Board of Directors/Corporate Office
- What I feel families can afford
- Overall operating costs
- Other, please specify

**Subsidy Section**

**ALL Providers**

**23) Do you accept DHS subsidy (Child Care Assistance Program- CCAP)?**

- Yes
- No

**Logic: Hidden unless: #23 Question "Do you accept DHS subsidy" is "Yes"**

**24) In the last year, has the number of DHS/CCAP subsidized children you serve:**

- Increased
- Decreased
- Stayed the Same

**Logic: Hidden unless: #23 Question "Do you accept DHS subsidy" is "Yes"**

**25) Does your program cap or limit the number of children with subsidies that you will serve?**

- Yes
- No

**Logic: Hidden unless: #25 Question "Does your program cap or limit the number of children with subsidies that you will serve" is "Yes"**

**26) What is the program percentage cap of subsidized slots?**

- 0-25%
- 26-50%
- 51-75%
- 76-100%

**Logic: Hidden unless: #25 Question “Does your program cap or limit the number of children with subsidies that you will serve” is “Yes”**

**27) My program caps or limits the number of children participating in subsidy because:**

\_\_\_\_\_

**Logic: Hidden unless: #25 Question “In the last year, has the number of DHS/CCAP subsidized children you serve” is “Decreased”**

**28) If you answered “Decreased” in the previous question, why? Select all that apply.**

- Decreased family demand
- Reimbursement Rate not sufficient to sustain budget
- Too much paperwork
- Families lost CCAP eligibility/no longer qualify
- Other, please specify:

**Logic: Hidden unless: #27 Question “Do you accept DHS subsidy” is “No”**

**30) Are you familiar with DHS’s child care subsidy program? If not, what would you recommend to increase awareness?**

Yes, and I feel that DHS could improve awareness by: \_\_\_\_\_

No, and to increase awareness DHS could: \_\_\_\_\_

**Logic: Hidden unless: #27 Question “Do you accept DHS subsidy” is “No”**

**31) Please select the reasons that may prevent you from participating in DHS CCAP. Select all that apply.**

- Capacity is full with private pay.
- Program has a long waitlist of private pay families
- No demand for subsidized care in the program’s area
- Subsidy reimbursement rates are not sufficient
- Required participation in BrightStars (Rhode Island’s Quality Rating and Improvement System)
- Reimbursement received too long after service is provided
- Too much administrative work involved.
- Disagree with policies associated with the subsidy program
- Challenges collecting co-payments from subsidy recipient families
- Turnover among subsidy recipient families
- I don’t know enough about DHS’s subsidy program to participate
- Significant family needs
- Child behavioral challenges.
- Other, please specify

**Logic: Hidden unless: #27 Question “Do you accept DHS subsidy” is “No”**

**36) Which would incentivize your participation in DHS subsidy program? Select all that apply.**

- Increased subsidy reimbursement rates
- Opportunity for additional support services (Example: Technical assistance, referral services, assistance with child/family needs)
- Opportunity for additional resources including professional development
- Assistance with quality initiatives (Example: Assistance with participation in BrightStars or accreditation)
- Provision of transportation reimbursement rate
- Provision of food reimbursement
- Assistance with subsidy management and administration
- None of the above.
- Other

### Quality Section

#### ALL Providers

**37) Does your program participate in BrightStars (QRIS)?**

- Yes
- No



**Logic: Hidden unless: #37 Question “Does your program participate in BrightStars?” is “Yes”**

**38) Is tiered reimbursement an incentive to maintain participation in BrightStars?**

Yes

No, because \_\_\_\_\_

**Logic: Hidden unless: #37 Question “Does your program participate in BrightStars?” is “No”**

**39) If you do not currently participate in BrightStars, why not? (Check all that Apply)**

- Too much paperwork
- DHS/CCAP Rates do not support quality
- Don't understand the process/tools
- Time-consuming
- Too costly
- Philosophical Differences
- Other (please specify)

**ALL Providers**

**40) What supports and resources would assist you in improving the quality of your program? Select all that apply.**

- Scholarships for staff/employees (Free or low-cost college coursework)
- Tiered Reimbursement (Higher DHS/CCAP Rates)
- Free/Low-cost Professional Development Opportunities
- Coaching, Mentoring, and Technical Assistance
- Grants for Facilities Improvements
- Assistance with Cost of Materials and Supplies
- Help improving compensation and benefits to recruit and retain qualified and effective early educators and afterschool staff.
- Low Cost Loans for the Program
- Bonus for Increasing your BrightStars Rating
- Other (please specify)

**ALL Providers**

**41) How did you hear about this survey**

- Email from [RIDHSSurvey@pcgus.com](mailto:RIDHSSurvey@pcgus.com)
- Email from RI DHS
- Postcard
- Telephone Outreach
- From your licensor or other technical assistance staff
- Text Message
- Social Media
- Someone Else
- Other, please specify: \_\_\_\_\_

**Cost of Care Section**

DHS is requesting cost of care (expense information) to better understand the provider’s true cost of providing child care to children. DHS will use this information in aggregate to assess how/if subsidy rates are sufficient in covering a provider’s true cost of care. Also, by answering the cost of care questions, you will be providing DHS with the information they need to continue advocating for systemic support and change in the early childhood system from state legislatures.

DHS is encouraging providers to complete the “Cost of Care” questions, as this information gathered will be used to understand the true cost of providing child care, which will be important as DHS reviews the CCAP subsidy reimbursement rates.

**42). From your perspective, are the rates you charge able to cover the cost you incur to provide child care?**

Yes

No

**Logic: Hidden unless: #3 Question “Please select your program type.” is “Centers”**

**42) Complete the following tables with the total number of staff and salary/wages for the following staff types in your program.**

Role	Number of Staff	Average Weekly Hours Working	Average Wage	Lowest or Minimum Wage	Highest or Maximum Wage	Average Wage Frequency (Hourly, Daily, Weekly, Monthly, Annually)
Director / Administrator						
Education Coordinator						
Full Time Teacher						
Part Time Teacher						
Lead Teacher						
Assistant Teacher						
Teacher Aid						
Substitute						
Administrative Functions (e.g. secretarial, financial staff)						
Additional Staff (e.g. kitchen staff, bus drivers)						

**Logic: Hidden unless: #3 Question "Please select your program type." is "Centers"**

**43) What is the education level of your staff?**

Education Level	Number of Staff
Less than High School	
High School or Equivalent	
Some College	
Child Development Associate	
Associates Degree	
Bachelor's Degree	
Graduate Degree	

**Logic: Hidden unless: #3 Question "Please select your program type." is "Centers"**

**43) If you had difficulties in recruiting and retaining staff over the past year, what are the primary reasons for this? (check all that apply)**

- My program has struggled to pay a competitive wage
- It is difficult to recruit staff who want to work in a child care setting
- I am unable to provide additional benefits such as health insurance, 401(k)/retirement, etc.
- I cannot find staff with the qualifications needed for quality rating
- Other, please explain: \_\_\_\_\_

do you currently have any space that is licensed or has been previously licensed for care that you are not using. If yes, what are the reasons? Select all that apply:

- Lack of staffing
- Lack of enrollment
- Age group the space was licensed for
- Other, please explain

Do you offer less hours per day than you would prefer due to lack of staff?

Have your program’s hours changed from before the COVID-19 Pandemic to today? If yes, how have they changed?

**Logic: Hidden unless: #3 Question “Please select your program type.” is “Family Child Care”**

**44) If you pay yourself a salary, provide the average cost for your program. Do not include any additional taxes or benefits you may pay for, such as health insurance. (select one).**

I pay myself a consistent monthly salary. The monthly amount is: \_\_\_\_\_

I pay myself the money that remains after subtracting expenses from my revenue.

I do not pay myself, please explain:

Other, please explain: \_\_\_\_\_

**Logic: Hidden unless: #3 Question “Please select your program type.” is “Family Child Care”**

**45) Do you officially employ an assistant or other support staff (meaning that you pay taxable wages to someone supporting your program)?**

Yes

No

**Logic: Hidden unless: #45 Question “Do you employ a teaching assistant or other support staff.” is “Yes”**

**46) How many hours per week do the teaching assistants or other staff typically work and what is their pay?**

	Average Weekly Hours Worked	Rate of Pay	Pay Frequency (hourly, daily, weekly, bi-weekly)
Teaching Assistant			
Administrative Functions (e.g. secretarial, financial staff)			
Additional Staff (e.g. kitchen staff)			
Substitute			

**Logic: Hidden unless: #3 Question “Please select your program type.” is “Family Child Care”**

**47) What is your level of education?**

Less than High School

High School or Equivalent

Some College

Child Development Associate (CDA)

Associates Degree

Bachelor’s Degree

Graduate Degree

**Logic: Hidden unless: #45 Question “Do you employ a teaching assistant or other support staff.” is “Yes”**

**48) Could you tell us more about the highest education level for each of your staff?**

Education Level	Number of Staff
Less than High School	
High School or Equivalent	
Some College	
Child Development Associate	
Associates Degree	
Bachelor’s Degree	

Graduate Degree

Logic: Hidden unless: #3 Question "Please select your program type." is "Centers"

49) Is your program normally able to provide an annual wage increase and/or performance-based increase?

- Yes
- No

Logic: Hidden unless: #49 Question "Is your program normally able to provide an annual wage increase." is "Yes"

50) If yes, what % \_\_\_\_\_

Logic: Hidden unless: #3 Question "Please select your program type." is "Centers"

53) Is your program normally able to provide a wage increase for obtaining a certificate or credential that elevates their education level?

- Yes
- No

Logic: Hidden unless: #53 Question "Is your program normally able to provide a wage increase for obtaining a certificate or credential that elevates their education level." is "Yes"

54) If yes, how much \$ \_\_\_\_\_

Logic: Hidden unless: #3 Question "Please select your program type." is "Centers"

55) Is your program normally able to offer health insurance benefits?

- Yes
- No

If yes,  
 Is the health insurance benefit just for the employee or does it include their family?  
 Employee-Only  
 Includes family

Logic: Hidden unless: #55 Question "Is your program normally able to offer health insurance benefits." is "Yes"

56) If yes, what percent of the premium does it match? \_\_\_\_\_%

Logic: Hidden unless: #3 Question "Please select your program type." is "Centers"

57) Is your program normally able to offer a retirement plan for full-time employees?

- Yes
- No

Logic: Hidden unless: #57 Question "Is your program normally able to offer a retirement plan." is "Yes"

58) If yes, how much does your program match contributions? \$ \_\_\_\_\_

Logic: Hidden unless: #3 Question "Please select your program type." is "Centers"

59) Is your program normally able to offer employee's paid time off?

- Yes
- No

**Logic Questions 60 – 62: Hidden unless: #59 Question “Is your program normally able to employee’s paid time off.” is “Yes”**

60) If yes, how many days do full-time employees receive on average per year? \_\_\_\_\_  
 61) If yes, how many days do part-time employees receive on average per year? \_\_\_\_\_  
 62) Do employees receive additional PTO for length of service?  
 Yes  
 No

**Logic: Hidden unless: #3 Question “Please select your program type.” is “Centers”**

**63) Does your program reimburse staff for professional development expenses (e.g., trainings, conferences)?**  
 Yes  
 No

**Logic: Hidden unless: #63 Question “Does your program reimburse staff for professional development expenses (e.g., trainings, conferences).” is “Yes”**

64) If yes, select all that applies to your program.  
 Our program pays our employees’ training fees (includes for reimbursement)  
 Our program pays employees for their time to attend professional development  
 Our program encourages/supports staff earning professional development by providing scholarships and/or grants

**Logic: Hidden unless: #3 Question “Please select your program type.” is “Centers”**

**65) Enter your total annual program expenses for the following personnel-related costs, including your own expenses.**

Personnel Expense	Cost	Monthly / Annually
Total Personnel Salary/Wage Expenses (does not include benefits)	\$	
Program and personnel tax expenses		
Employee benefit expenses (e.g., health insurance)	\$	

**ALL Providers**

**66) Enter your total expenses for the following categories, if applicable.**

Expense Type	Total Cost	Annually/Weekly/Bi-Weekly/Monthly
Facility costs (e.g., rent/mortgage, utilities, phone/internet expenses, maintenance, supplies)	\$	
Professional and administrative expenses (e.g., bookkeeping, insurance, dues, fees/permits, background screenings, TB tests)	\$	
Educational and curriculum support expenses (e.g., accreditation, educational/program supplies, assistive technology, child care administration systems)	\$	
Staff or program training expenses	\$	
Food costs	\$	
Transportation costs	\$	
Other expenses	\$	

**67) Which of the following revenue sources does your program receive (check all that apply)?**

Type of Revenue	Amount	Annually/Weekly/Bi-Weekly/Monthly

Tuition/fees paid by families (private pay, co-pays, and sliding fees)		
Child Care Subsidy		
Head Start, Early Head Start, and/or State-Funded Pre-K		
Child and Adult Care Food Program (CACFP)		
Other governmental subsidies for families		
Local or community grants and fundraising		
Family Child Care Grant (if applicable just for FCC)		
Other, please describe _____		

**68) With the closure of one-time grant and support dollars related to COVID-19 relief funds (e.g., PPP, ARPA, CCRSA), DHS is interested in learning more about how the expiration of those dollars will affect the child care industry. If you utilized relief funds, select what your program has used those funds for from the following chart.**

What have you been using COVID-19 relief funds for?	Will you continue to fund this? (Drop down yes or no)	How will you be able to continue funding?	If not, how are you addressing?
Employees/staff wages	Y/N		
Wage increases and/or bonuses for employees/staff	Y/N		
Employee benefits (e.g., health insurance, retirement)	Y / N		
Hiring additional educational staff	Y / N		
Hiring additional support staff	Y / N		
Rent or mortgage payments	Y / N		
Facility improvements	Y / N		
Supplies, equipment for the child care program	Y / N		
Other, Please Describe _____	Y / N		

#### END OF SURVEY PAGE

THANK YOU for completing the 2024 Rhode Island Market Rate Survey. This is the end of the survey. Your response is very important as it will help set the childcare subsidy rate for the next three years!

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