

CSEA Child Care Contract Negotiation 2017 Member Survey

Welcome to the CSEA Child Care Contract Negotiation Survey. All responses will remain confidential. Our CSEA/VOICE negotiating team members will use this information to negotiate a third contract that reflects the priorities of our members across the state.

I am a: *(check one)*

- Registered Family Child Care Provider
 Licensed Group Family Child Care Provider
 Enrolled Legally-Exempt Child Care Provider

Years as a provider: _____

Enrollment

I have: *(circle one)* one site, multiple sites:

Indicate what best applies to current enrollment in your program. If you operate more than one site, estimate enrollment based on the total slots in all the programs you operate.

- 100% - fully enrolled, no vacant slots
 75% - more slots filled than vacant
 50% - about half filled, half vacant
 Less than 50% - more vacant than filled

CSEA Family Child Care Provider Resources and Programs

CSEA/VOICE \$500 Quality Program Grants

How many grants have you applied for since 2011? *(circle one)* 0 1 2 3 4 5 6 7

What did you purchase with the grant(s) *(check all that apply)*

- Health and Safety Materials / Supplies
 Educational Materials (art, books, puzzles, etc)

How did grant program purchases benefit you and the children and families in your program?

If you didn't apply, why not? _____

Early Childhood Education Tuition Assistance

(circle one)

Have you applied for tuition assistance to complete an AA or BA degree in Early Childhood Education? Y N

If yes, please describe how this assistance helped you further your education and benefits the children and families in your program:

If no, why not? _____

Child Development Associate Credential (CDA)

Have you applied for tuition to complete the CDA credential? Y N

If yes, please describe how this assistance has helped you improve your knowledge and skills and how the credential benefits the children and families in your program:

If no, why not? _____

National Association of Family Child Care Accreditation

Have you applied for a NAFCC Accreditation scholarship? Y N

If yes, please describe how this assistance has helped you improve your knowledge and skills and benefits the children and families in your program:

If no, why not? _____

First Aid / CPR

Have you taken and completed CSEA sponsored First Aid / CPR training? Y N

Have your staff taken and completed CSEA sponsored First Aid / CPR training? Y N

If yes, please describe how free First Aid / CPR training has helped you and benefits the children in your care:

If no, why not? _____

OCFS Required / Mandated Training Hours

Have you accessed OCFS approved training at no cost through CSEA? Y N

If yes, please describe how this has helped you and benefits the children in your program.

If no, why not? _____

Affordable Care Act Rebate

Have you applied for and received a rebate for the cost of health insurance purchased through NY State of Health / Affordable Care Act? Y N

If yes, please explain how this rebate benefits you and your family:

If no, why not? _____

Vision / Dental At No Cost to You

Have you applied for and received Vision / Dental Insurance for yourself? Y N

If yes, please describe how this insurance has helped you:

If no, why not? _____

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Day Care Regulations and Inspections

Have you ever been cited for a violation with which you disagreed? Y N

If yes, please describe briefly: _____

Does your current licensor / registrar offer a written exit interview explaining all violations at the end of an inspection? Y N

Have you attended a CSEA/VOICE sponsored training on regulations delivered by OCFS? Y N

If yes, please describe how this helped you stay in compliance: _____

Have you been able to correct a minor non-compliance violation in a timely manner and not have the violation appear on the OCFS website? Y N

Have you ever had a parent or potential client ask you about any violations appearing on your profile on the Office of Children and Family Services website? Y N

How long does it take for new staff to be approved or disapproved? (*circle one*)
1 week 2 weeks 3 weeks 1 month Longer than 1 month

Have you requested and received assistance from CSEA/VOICE to resolve licensing and registration disputes?
Y N

Have you requested and received union assistance with a program related CPS case? Y N

Have you requested and received union assistance with a fair hearing? Y N

If you answered yes to any of the above three questions, briefly explain your experience with CSEA assistance with registration and licensing matters: _____

CACFP

Do you participate in CACFP? Y N

If yes, what Tier is your program? (*circle one*) Tier 1 Tier 2

If you do not participate, please briefly describe why not: _____

QUALITYstarsNY

Do you know about QUALITYstarsNY? Y N

Are you currently participating in QUALITYstarsNY? Y N

If yes, please describe your current experience with QUALITYstarsNY: _____

If no, did you previously participate? Y N

If you discontinued participation, briefly describe why: _____

If you never participate, why not? _____

DSS Child Care Assistance / Subsidy

Complete this section if you serve families receiving DSS subsidies. Answer the question even if you do not currently have any children receiving DSS subsidy enrolled in your program. *(if not, skip this section)*

County in which your program is located: _____

Additional counties that you receive DSS payments from: _____

Are (or were) you enrolled in the automated Child Care Time and Attendance program (CCTA)? Y N

If yes, what works well with CCTA? _____

What could work better with CCTA? _____

If you aren't using CCTA, why not? _____

Do you generally receive your subsidy payments within 15 days of submitting all appropriate paperwork? Y N

If no, in the past year, how often has it taken longer than 15 days? 30 days?

What is the longest period of time you have waited? _____

How does waiting longer than 30 days for payment impact your program and business?

Would you like to have the option of direct deposit for child care subsidy payments?

In July 2016, OCFS changed reimbursement rates. Did your rates: increase, stay the same, decrease. Please explain:

In the last year, did any families leave your program because (*check all that apply*):
 DSS lowered parent eligibility DSS closed cases DSS raised parent fees

Do you sign a provider contract with a DSS agency? Y N

Does your county DSS pay for:
Child absences Y N If yes, how many? _____

Program closure days Y N If yes, how many? _____

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