

**PARENTS PERCEPTIONS OF THE CARE THEIR CHILD RECEIVES IN CHILD
CARE FACILITIES IN BARRON COUNTY WISCONSIN**

By

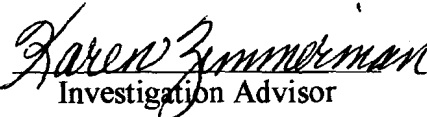
Abbie M. Thill

A Research Paper

**Submitted in Partial Fulfillment of the
Requirements for the
Master of Science Degree
With a major in**

Home Economics

Approved: 2 Semester Credits


Investigation Advisor

**The Graduate College
University of Wisconsin-Stout
Menomonie, WI 54751**

The Graduate School
University of Wisconsin-Stout
Menomonie, WI 54751

ABSTRACT

Thill	Abbie	M
(writer) (Last Name)	(First)	(Initial)

Parents' Perceptions of the Care their Child Receives in Child Care Facilities in Barron County Wisconsin
(Title)

Home Economics	Dr. Karen Zimmerman	12/2004	44
(Graduate Major)	(Research Advisor)	(Month/Year)	(No. of Pages)

American Psychological Association, 5th Edition
(Manual Used)

The purpose of this study was to describe the perceptions parents have of their child's child care facility in Barron County, Wisconsin. The research questions for the study were: What are parents perceptions of their child's teachers/caregivers in Barron County child care centers? What factors effect parent's perceptions related to the care their child receives in child care centers in Barron County? Parents were asked questions relating to health and safety, training and education of the child care teachers, child care affordability, group size and child to staff ratios, learning environment, and licensing and accreditation. The survey was developed by the researcher and used a Likert scale with 25 statements.

The study was conducted with 15 child care facilities in Barron County, Wisconsin. The child care centers requested that the surveys be anonymous. In June, 2003 parents were given surveys at their child's child care facility in Barron County. The

survey consisted of 25 attitude statements on a 5 point Likert Scale. The responses from the survey were computed using mean, standard deviation, and rank order.

Specific findings in this study were: (1) Parents perceptions were positive about the quality of care their child receives, (2) Parents were not familiar with state licensing procedures and health requirements for child care centers in Wisconsin.

Recommendations for future research concerning child care would be: (1) Include demographics and conduct a follow-up study in five years , (2) Find a way to identify which center had surveys returned.

ACKNOWLEDGMENTS

I would like to thank my family, especially my husband, Brian, for his patience and support through out the process of completing this research paper. My ten month old son, Blake, who was a major contributing factor in motivating me to finish this paper.

I would also like to give a huge thank you to Dr. Karen Zimmerman who has been there to help me for the last seven years, without her I would not be where I am today. She is a major asset to the University of Wisconsin Stout.

Table of Contents

	Page
.....
ABSTRACT.....	ii
List of Tables.....	vii
Chapter 1: Introduction.....	1
<i>Statement of the Problem</i>	4
<i>Research Questions</i>	4
<i>Definition of Terms</i>	4
<i>Assumptions</i>	5
<i>Limitations</i>	5
Chapter 2: Review of Literature.....	6
<i>Introduction</i>	6
<i>History and Past Studies of Child Care</i>	7
<i>Health and Safety</i>	9
<i>Training and Education</i>	13
<i>Child Care Affordability</i>	16
<i>Group Size and Child to Staff Ratios</i>	17
<i>Learning Environment</i>	18
<i>Licensing</i>	20
<i>Accreditation</i>	21
<i>Barron County</i>	22
<i>Summary</i>	22

Chapter 3: Methodology.....	25
<i>Introduction</i>	25
<i>Subject Selection and Description</i>	25
<i>Instrumentation</i>	25
<i>Data Collection</i>	25
<i>Data Analysis</i>	27
<i>Limitations</i>	27
Chapter 4: Results and Discussion.....	28
<i>Parents Perceptions of Teachers/Caregivers</i>	29
<i>Parents Perceptions of Child Care Quality</i>	31
<i>Discussion</i>	33
Chapter 5: Summary of the Study.....	36
<i>Conclusions</i>	38
<i>Reccomendations</i>	38
References.....	39
Appendix A: Research Questionnaire.....	41
Appendix B: Letter to Parents.....	44

List of Tables

Tables	Page
1. Parents Perceptions of their Child Care Teachers/Caregivers.....	29
2. Parents Perceptions of the Quality of Child Care.....	31

Chapter One

Introduction

Every day in America 13 million preschool children are left in child care arrangements, 24 million school-age children are in need of educational programs, and an estimated 5 million are without any adult supervision (Valentine, 2001). These statistics support the need for quality child care. Over the course of a child's developmental years they will spend many hours in child care centers. Approximately 17 million parents are in need of child care and rely on several different arrangements such as home based programs, center-based programs, employment child care centers and church child care centers.

“Kathy Spivack has her schedule down to a science. While her son, Jeffrey, was in Kindergarten this past spring, the divorced mother from Closter New Jersey, arranged her work as an executive with Tupperware so she could drop him at school at 9 a.m. and pick him up at 3 p.m., except on Tuesdays and Thursdays, when Jeffrey's school ended at 11:30. For those days Spivack enrolled him in the Jack in the Box Early Learning Center, which bused him from school to its premises, where he played until three. Cost \$214 a month. Now that school is out for the summer, Jeffrey attends an all day camp near home. Spivack has again arranged her work so she can drop him off in the morning and pick him up in the afternoon. She considers herself lucky when it comes to care for Jeffrey, yet still says, “If there is just one little flaw, the entire day is screwed up”(Caminiti & Welsh, 1997, p.2).

Spivack's child care arrangement is typical for today's parents. The National Association for the Education of Young Children in Washington, D.C. estimates that some 80,000 child care centers look after four million preschool children and a million school-age children. Another 3.1 million are in family child care, also called neighborhood child care, mainly homes of people the parents are not related to (Caminiti, & Welsh, 1997). Statistically, 28 percent of children are being cared for by a parent, 19 percent are being cared for by a relative, 28 percent are in commercial child care, 20 percent of children are in neighborhood child care and 5 percent have other arrangements (Caminiti & Welsh, 1997).

What are indicators of quality care? State licensing of child care providers can help create a baseline to determine the quality of care a child is receiving and a second means of defining quality is accreditation. However, many experts will disagree. Mimi Graham, a director of the Center for Prevention and Early intervention at Florida State University in Tallahassee and Pauline Koch director of the National Association for Regulatory Administration in St. Paul Minnesota say quality can be hard to measure without rigorous enforcement and clear rules (Jacobson, 2000). The best way to determine the quality of care a child receives is their readiness for school, level of training for providers, and the comfort level of the child at the child care center (Jacobson, 2000).

Child care centers in Wisconsin have a wide range of indicators for quality. Standards are set high in Wisconsin. Wisconsin's child care facilities must be licensed,

and meet minimum standards established by the Wisconsin Department of Human Services (Wilson & Tweedie, 1996). These standards include health and safety, adult-child ratios for age groups, training requirements for staff, equipment, daily programs, nutrition, and behavior and guidance. Licensing regulations apply to all programs serving children more than 15 hours a week (Wilson & Tweedie, 1996). There are 2,343 licensed regulated child care centers in Wisconsin, which makes it difficult for The Department of Human Services to check on all 2,343 centers (The Children's Foundation, 2002).

The cost of child care has been increasing nationally and many parents cannot afford quality care. A survey of child care costs in the 50 States reveals that child care is one of the biggest expenses that families face in raising their children. Child care can easily cost an average of \$4,000 to \$10,000 per year (US Department of Human Services, 2002). Families with infants have even higher costs. The average cost for an infant in a center is \$1,100 more than the average cost for a four year old child (US Department of Human Services, 2002).

In Wisconsin, 78% of children under six have working parents, and 58% of children ages six to twelve have working parents, and lastly, 21% of children under age 13 are living in low-income families (US Census Bureau, 1998). The need for quality child care is a must for all parents, especially with the high number of parents in the workforce. When parents are looking for quality child care they should consider the following as important indicators: teachers are highly trained and have a degree in child care, teachers encourage communication between parents and staff, children are in a healthy and safe environment free of dangerous toys and equipment, the child care center

follows the child to staff ratios, the center promotes parents to keep children up to date with immunizations and regular check-ups, curriculum and learning materials are available for all ages of children, and emotional, social and physical development is taught and learned by children (Willer, 2000).

In Barron County there are 245,000 children enrolled in child care centers, but we do not know what parents perceptions are of the care their child is receiving in child care centers. This study will research parents perceptions of that care, and whether or not they agree, disagree or are undecided about the quality of care in Barron County child care centers.

Statement of the Problem

The purpose of this study is to determine parents perceptions of the quality of care children receive while enrolled in Barron County child care centers. with enrollment of 20-30 children. Surveys will be given to the parents in the fall of 2002.

Research Questions

1. What are parents perceptions of their child's teachers/caregivers in Barron County child care centers?
2. What factors effect parents perceptions related to the care their child receives in child care centers in Barron County?

Definition of Terms

Accreditation- to authorize; certify

(Webster's New World Dictionary, 1996)

Licensure-formal or legal permission to do something specified.

(Webster's New World Dictionary, 1996)

Assumptions

Parents will take time to fill out the survey and answer the questions honestly.

Limitations

The surveys were handed out to the centers and not directly to the parents. Some of the centers might not have handed them out or parents might not have taken the time to fill them out.

Chapter Two

Literature Review

Introduction

This chapter will discuss the general content of quality child care. The following indicators of quality will be discussed in this chapter; health and safety, training and education for all child care providers, group size and child to staff ratios, learning environment that promotes physical, emotional and social skills in children, affordability, and licensing and accreditation.

Selecting child care is a very important decision for parents. Quality child care arrangements can greatly improve the lives of both the parents and child. In addition, children who attend child care centers of high quality will have greater success later on in the educational system. In 1972, 30 percent of mothers with children under the age of 6 were working, that figure is now 60 percent. Only 6 percent of children were in child care centers in 1972 and now we have 30 percent of children in child care arrangements (Jacobson, 2000).

Every day, scores of parents try to navigate through numerous child care services, searching for affordable programs and providers they feel comfortable with. Vast numbers of parents, however leave their children with child care providers who are operating illegally or do not meet their states requirements (Jacobson, 1997). Parents need to be informed on state regulations and understand key indicators of quality in child care centers. Indicators of quality range from child care providers with college degrees, health and safety, child to staff ratios, affordability and the learning environment. Indicators of quality will be discussed and explained in the following paragraphs.

History and Past Studies of Child Care

In the aftermath of the Industrial Revolution, the American family has had two of its traditional functions taken away: serving as one unit for economic production and as a school for the education of their children. The family was once one unit providing all their needs. It produced most of the goods needed to survive; they produced crops, made their own clothes and relied on the land to live. However, as industries increased farmers could no longer keep up and were required to work in the factories to make ends meet. Children no longer worked on the farm; instead, they were required as substantial outlays for their upbringing. Large commercial firms replaced this function. The second function, education, is now provided by the state. However, parents still have two very important functions, providing emotional, physical and intellectual support for the family and making sure that children have the opportunity to socialize with the community and promote development (Eisenberg, 1999).

Women's roles in the family have also changed. At the turn of the century, women spent their time rearing children and caring for their family. Women have entered the work force in high numbers and now have more responsibilities than ever. With both parents having to work in order to pay the bills, child care and household chores become a large burden on families (Eisenberg, 1999).

Caring for infants and young children is not just a problem for single parents. Caring for children is a responsibility of two parent households and single parent households. More than half of all mothers with pre-school children are in the work force, which is 50 percent more than the proportion employed out of the home a decade ago.

The Labor Department reports that the number of women working two or more jobs has greatly increased since 1970 (Eisenberg, 1997). Many mothers have to work two jobs in order to pay for child care and single parents have even more of a challenge affording quality child care.

Quality child care has been a growing need for many years with the high level of dual employed families. Many mothers are returning back into the work force because of the high cost of living. The percentage of working mothers using center-based care for their preschoolers grew from 13% to 29% from 1977 to 1994, according to the U.S Bureau of the Census (1998). In past studies high quality care is not the only cause or predictor of positive outcomes, nor is poor quality the main cause or predictor of negative outcomes. Nonetheless, findings from the NICHD (1998) and The Children's Foundation (2002) indicated that high quality child care facilities do effect future outcomes. Children who were in quality care had better future outcomes. There is even more evidence from a longitudinal experimental study that indicates high-quality preschool has substantial, long-lasting, positive effects on the development of children whom have families living in poverty (Burchinal, 1999). The Abecedarian Project observed a group of 104 infants from low-income families, half of whom received high-quality, educational child care starting in early infancy, and half whom did not. The infants that received high-quality child care had higher reading, math, and mental test scores form toddlerhood through age 21, and they were also more likely to attend college after high school, than those who had poor child care (Carolina Abecedarian Project, 1999, pp.1-3).

A study done by Ghazvini and Mullis (2002) compared children who had been part of a high-quality preschool with those who had not. Researchers documented a higher likelihood of responsible behaviors, and higher IQs when children entered kindergarten. In general, higher ratings of quality in child care have been correlated with positive outcomes later in life.

Child care typically begins in the early ages for most children. On average, 44 percent of infants under the age of one spend 31 hours in nonparental care, 84 percent of four to five year olds spend 28 hours a week in child care (Vandell, 1999). The use of nonparental care in the United States is expected to grow even higher in the future. The need for quality care is crucial for the development of today's children.

Health and Safety

To improve the quality of care for children in this country who are in child care settings outside of the home a complimentary goal is to support families and child care providers to provide a healthy, safe nurturing and stimulating environment for children to grow and develop to their greatest potential. In order for child care centers to do that they need to provide a healthy and safe environment for the children (Lucarelli, 2002).

In 1995, the Child Care Bureau and the Maternal and Child Health Bureau collaborated on a mutual vision to encourage healthy development of children in child care settings. Thus, the Healthy Child Care America Campaign, coordinated by the AAP was launched under the direction of Donna Shalala, Secretary of the U.S. Department for Health and Human Services. For the first time, health and early childhood professionals partnered to encourage associations between their programs to encourage communities to focus and develop quality child care centers for their children (Lucarelli, 2002).

In order to improve quality care for children in communities states need to encourage and promote health and safety guidelines for all child care settings. Minimal health and safety requirements vary from state to state, and those that are required are rarely enforced. Such requirements include ensuring that all caregivers are certified in CPR training, cleanliness is stressed by both the parents and the caregivers, hands are always washed before meals and after using the bathroom facilities, children are properly immunized to prevent the spread of infectious diseases, and that there is sufficient number of advisors to help take care of the children (Almanac of Policy Issues, 2002). There are several guidelines for child care centers stating that they must provide a safe and healthy environment for the children (Child Care Aware, 2002). For example, if a child is diagnosed with pink eye, the center must send home letters to parents of all the children in the center. The care givers also need to sanitize all of the toys, tables and equipment that the children have contact with to prevent the disease from passing on to the other children. Often times letters are not sent home and materials are not sanitized causing the illness to spread and parents are not informed of this outbreak. Illness plays large part of a child's life at this young age, and the centers must follow the guidelines to help stop the spread of disease in their center.

Child care centers have standards that they need to follow in order to keep their centers healthy. The following are the standards set by Health Consultants of the American Academy of Pediatrics for protecting and promoting healthy environments for children:

1. Standard 3.001- each day, a trained staff member will conduct a health check on each child. This will be done as soon as possible when the child enters the center or when a child has a change or illness. Health checks should address:
 - a) Changes in attitude or appearance.
 - b) Skin rashes, itchy skin, itchy scalp or any other unusual characteristic.
 - c) High temperatures after taking the child's temperature.
 - d) Complaints of pain or just not feeling the best.
 - e) Other signs or symptoms a child has.
 - f) Reported illness or injury of family members.
2. Standard 3.002- Documentation of the daily health checks. The child care center must keep, for 3 months, a record of any concerns they have for each child in the center.
1. Standard 3.003- Routine Health Supervision. The center must require that all children attending the center have routine exams by the child's health provider, according to the standards of the American Academy of Pediatrics (AAP, 2002). Exams should include routine screening tests, immunizations, and documentation of the child's growth (if they are younger than 24 months). Charts should include height, weight and head circumference. School health services can perform these exams as long as they met the AAP's requirements for school-age children and if they are shared with the child care provider
2. Standard 3.004- Assessment and planning of nutrition for individual children. Child care centers must have on record individual records of each child that have nutritional needs.

3. Standard 3.005- Immunization Documentation. The child care center must require that all children attending the center have written documentation of immunizations appropriate for their age.
4. Standard 3.006- Under-immunized Children. If a child did not receive immunizations because of a medical condition, they must provide documentation stating why the child did not receive the immunizations. If immunizations were not given because of a religious belief, the parent may sign a waiver, but parents need to be informed of the risk of spreadable diseases.
5. Standard 3.007- Immunization of Child Care Providers. Child care providers must have all current immunizations recommended for adults.

(Child Care Information Services, 2004)

These standards are very important to maintaining a healthy environment for children. Providing a safe and healthy environment should be important to the providers and parents.

Another large factor in safety is playground equipment. Parents need to check out the center to make sure that proper toys and equipment are being used (Child Care Aware 2004). Parents need to make sure that equipment is sturdy, toys are not sharp or easily breakable, doors are locked, and make sure that all caregivers screen all individuals who enter the center and keeps a list of all persons that may pick up the children from the center.

Children need to be safe and protected from dangerous situations, most safety problems have been found on the playground. There are several falls each year that hurt

or cause death to small children. Parents need to be aware of the centers surroundings. The playground area should be fenced, soft material should be below all climbing equipment, climbing equipment should not be too high and lastly, equipment should be well-maintained and appropriate for all ages.

Training and Education

The training of child care providers is a key factor in the provision of quality child care for young children. However, little is known about what types of training for child care providers are most effective in promoting development in children (Burchinal, 1999).

As more mothers of small children enter into the work force, the provision of quality child care is increasingly becoming a major concern for early childhood educators, researchers, employers and parents. A key factor in quality care is the provision of specific training for child care providers. Both the National Child care Study and The National Child Care Home Study have found that training is a powerful measurement of competence for child care providers and is strongly and positively linked to program quality (Eheart, 1999).

The issues of teaching approaches and credentialing lead to the question of how much training should be required for child care providers. The answer depends, in part, on what type of setting the child is in, homes, child care facilities and schools are all different environments that a young child can be a part of. Most early childhood educators will stress that college-level preparation in early childhood or child development, with supervised experience working with young children, is essential for child care providers and staff (Eheart, 1999).

Research clearly indicates that quality training and education for child care providers has a direct correlation to improved quality of child care centers and homes (Patten & Ricks, 2000). The child care providers relationship with the families they serve is one of the most important factors in child care settings. Research shows that parents with providers of higher education and training are much happier than parents who choose child care centers where the providers meet the minimum requirements (Almanac of Policy Issues, 2002). Well educated and trained providers are more cooperative, understand how children grow and learn and they are familiar with age appropriate materials and activities to help the children grow and prosper.

Child care providers who have a variety of experiences with children and have an education in early childhood development have the skills and knowledge to develop activities that promote brain development and social skills in children. Parents should not be afraid to ask the providers about their education and training. Many parents are not aware of the requirements and should familiarize themselves in this area. The following initiatives were developed by the National Cooperative Extension system to help improve the training and education of the teachers in child care centers:

- ◆ Provide high quality, research based training and education for child care providers that is easily accessible.
- ◆ Provide quality research, great practices and educational resources related to child care by developing multi-lingual web sites, and providing technology education.
- ◆ Provide research-based educational training, technical assistance, and information on content areas related to specific child care areas.

- ◆ Bring researchers and practitioners together to help design resources for child care providers.
- ◆ Conduct surveys of materials that have already been developed to see what changes need to be made to improve certification programs and curriculum.
- ◆ Develop, implement and evaluate non-formal certification for programs for all child care givers.
- ◆ Provide curriculum to child care centers.
- ◆ Provide information to parents on how to select quality care for their children.

(The Children's Foundation, 2002)

The parent's role in selecting child care and monitoring progress is very critical in their child's development. Parents need to ask questions and find out what type of education the child care providers have. Parents need to do some research to find out what characteristics to look for in the providers. Parents often acknowledge that they need some assistance in selecting child care for their children, so they need to either talk with other parents and do a little research for themselves, or contact professionals and find out what characteristics to look for in the centers. When parents are selecting child care, a well trained provider would demonstrate the following characteristics: Sensitivity towards children, dependability, communicate well with parents, maintain self-control when demands are high, enthusiastic and energetic (National Child Care Information Services, 2004).

Sixty years ago, there were 157 nursery schools, nationwide. Early childhood teacher's did not need training to take care of children. Today, there are over 67,000 child care centers and at least 1.8 million family child care homes and training is considered a

must for a child to receive quality care (Eheart, 1999). With child care becoming an American institution, these training issues must be addressed, questions answered and conflicts resolved (Eheart, 1999).

Child Care Affordability

Most parents want to ensure that their children have good early child care, but many are unable to afford the cost. Nearly half of working families and mothers who are able to find child care rely on family members, including their own parents or even relatives. The rest of the population relies on private child care providers. Parents often struggle to find quality care for a low price. Family incomes cannot support the current cost of child care, let alone provide the resources needed for their child's education. Relying on family income to stimulate programs will not work; it will only serve the families who have the money to put towards the program. An approach such as that, limits participation of good programs to families with lower incomes (Willer, 2000).

A recent survey of 600 American families revealed that nearly 40% of parents felt that they could not afford their child's current child care arrangement or the arrangement they would like to have for their child (Willer, 2000). Child care expenses can range from \$4,000 to \$10,000 per child for one year of care in the United States (Almanac of Policy Issues, 2002). In Wisconsin, average child care costs for an infant or preschooler is \$4,000 to \$8000 per year (Adams & Schulman, 1998). Often times quality child care is found for extremely high costs. Lower and middle class families are often left with mediocre care. One third of families with young children earn less than \$25,000 a year and a family with two adults working full time on minimum wage only brings home

\$21,000 a year combined (Almanac of Policy Issues, 2002). At this rate, child care can easily take one third or more of a couples income.

The problem with affordability comes from retaining qualified staff. For years, child care providers have subsidized early childhood programs by accepting compensation far below their value of work. Many child care teachers and staff receive income below the poverty level. A new survey by the National Committee on Pay, found that child care is the second most underpaid profession in the United States. Turnover rates are extremely high and when a staff member leaves it can take months to find a qualified replacement (Willer, 2000). This is where quality and affordability come together. In order for parents to find quality they have to pay higher prices, the only way for child care providers to maintain qualified staff is to pay them the money they deserve, which means quality child care is hard to find and is very expensive for today's working families.

Group Size and Child to Staff Ratios

Research has proven that lower child-staff ratios and smaller group sizes is associated with higher scores and measures in a child's development. When child:adult ratios are higher caregivers spend more time managing children and less time teaching and interacting with them. When child:adult ratios are lower caregivers can offer more stimulating, warm and supportive care and provide the children opportunities to learn (Vandell, 1999).

The number of children attending a child care plays a key role in a child's development. A study done by the NICD Study of Early child care found that group size is associated with providing a more positive environment for small children. Also,

caregivers are more responsive, socially stimulating and less restrictive when there are fewer children in the child care center (Vandell, 1999).

Group size and child to staff ratios are standards for quality. Wisconsin's child to staff ratios are four six week old infants per one child care provider, four nine month old infants to one child care provider, four 18 month children to one child care provider, six 27 month old children to one child care provider, 10 three year old toddlers to one child care provider, 13 four year old children to one child care provider and 17 five year olds to 1 child care provider (Child Care Information Services, 2004).

There is also a maximum number of children allowed for each age group. There may be only eight children in the six week old age range, nine month old age range and the 18 month age range. Child care centers may only have twelve 27 month old children, 20 three year olds, 24 four year olds and 30 maximum for the five year olds (Child Care Information Services, 2004).

Learning Environment

A parent has a wide variety of choice when it comes to selecting child care program. The learning environment provided by the center can foster a child's development physically, emotionally, and intellectually. The child care environment is affected by the teachers' beliefs about child-rearing practices, and affects children's outcomes (Patten & Ricks, 2000).

A quality program is mostly play and learning through a variety of experiences with teachers, proper materials, and other children in the center. The center does not have a strict environment where the children sit and listen, instead the children have a say in what they like to do. The center needs to be structured, but not so structured that the

children do not have their own opportunities to explore. The following are questions a parent should ask and observe before selecting the right environment for their child:

- ✓ Are the children content?
- ✓ Are they involved in a variety of activities in small groups?
- ✓ Is the environment more like a home or an institution?
- ✓ Would the noise level be comfortable for your child?
- ✓ Is the group small enough so that children receive individual attention, or would the number of children be too much for your child?
- ✓ Is there enough equipment for children and is it available for them on low shelves, or must they wait for an adult to hand things to them?
- ✓ Are the rooms clean, safe, comfortable and not crowded?
- ✓ Is the day's schedule posted and are activities right for your child?
- ✓ Does there seem to be a balance of indoor and outdoor, active and quiet, and child-selected and teacher directed activity?
- ✓ Are the TV time, video games, and other structured activities limited an appropriate for the children's ages?
- ✓ Do children have many chances to be creative?
- ✓ Is there a safe and pleasant place for outdoor play?

(Child Care Aware, 2004).

Discipline is another important aspect of a child's environment. How do you want your child disciplined? In quality child care programs caregivers use a positive discipline approach and use the same procedure time after time so the children do not become confused (Early Stars, 2004). They offer children direction and choices when

they behave badly. Physical punishment or threatening a child is not appropriate in child care programs. There needs to be space for all children and enough equipment for all children to play with. Play equipment allows children to build their large and small muscle skills, language and social skills. The standards specify a minimum amount of space for both indoor and outdoor activities, which helps to create a safe environment for the children attending child care (Early Stars, 2004).

Licensing

When a family decides to eat at a restaurant, the parents do not walk through the kitchen to make sure it is clean and sanitary. Public licensing and inspection processes help to ensure consumers that they are receiving quality products and services (Willer, 2000). Licensing in early childhood programs serves the same purpose for families with children in child care. Licensing requirements set forth the public definition of acceptable program quality for children. The differences in licensing from state to state reflect the differences in parents understanding of and support for needed provisions. Parents play an important role in monitoring the licensing process, but the state sets the level of acceptability for child care programs.

Licensing standards help to keep out unqualified child care providers. More importantly, an effective licensing system helps providers in finding information and support when it comes to recruiting children and getting the insurance they need (Willer, 2000). Easing licensing standards would cause the quality of care to decline. Furthermore, easing standards may compromise the health and safety of children attending child care centers that do not meet the requirements for licensing.

Child care programs in Wisconsin must meet minimum standards required by the state for a child care program to be open (Child Care Aware, 2001). These requirements include standards for training and education for staff members, health and safety, safe play equipment for all ages, adult:child ratios, group size, and a safe learning environment. A parent should make sure the child care facility is licensed and meets all state requirements before allowing their child to attend.

Accreditation

Unlike licensing, which is required by law for certain types of child care, accreditation is a decision made by the provider. Accreditation means a provider has successfully shown that he or she meets the required standards based on a national scale of providing professional quality child care for the children attending their center (Early Stars, 2004).

The National Academy of Early Childhood programs, a part of the National Association for the Education of Young Children conducts accreditation of child care centers in the U.S (Child Care Information Services, 2004). This is a voluntary program for child care centers to undergo. The program is evaluated by their standards of care, high quality staff and views of parents. To become accredited the National Association for the Education of Young Children evaluates programs using the following criteria: Interactions among teachers and children; curriculum; relationships among teachers and families; staff qualifications and professional development; administration; staffing; physical environment; health and safety; nutrition and food service; and an ongoing evaluation of effectiveness (Early Stars, 2004).

Barron County

Every day, about 245,000 children younger than six are in child care in Wisconsin. This is three out of five young children and half of all children under the age of three spend their day being cared for by someone other than their parent (Adams, Schulman, 1998).

The population of Barron County is 45,514. Of those there are 5,587 family households with children under the age of 18. There are 4,198 married-couple families with own children under the age of 18, and 959 female headed households with children under the age of 18. The average household size is 2.48 and the average family size is 2.97 (US Census Bureau, 2003). These statistics show the need for quality child care in Barron County.

Barron County has 17,883 females over the age of 16, and 11,115 are working. There are 2,544 children under the age of five with 532 currently enrolled in preschool. Lastly, there are 404 grandparents living in a household with one or more of their grandchildren under the age of 1 and 175 of them are responsible for their grandchildren (US Census Bureau, 2003).

Summary

Family lifestyles have changed resulting in the need for quality child care. Dual-career families are on the rise and mothers are no longer staying home with their children. There is also an increase in single parent families. The need for quality child care has never been greater with so many parents in the workforce.

Child care centers contribute to children's developmental outcomes and readiness for school. In order for children to grow and develop, they need a child care center that is

clean and safe. Child care centers are required to meet state standards and satisfy children's needs. Children must be safe from disease and equipment that endangers their safety.

Parents need to be familiar with training and education regulations for child care centers. Educated child care teachers/caregivers provide children the opportunities necessary to enhance brain development. Child care providers who have higher levels of training in early childhood education have the skills required to teach young children social, emotional and physical skills needed later in life.

Affordability is linked to quality, however, many parents cannot afford child care centers that come at a higher price. Most parents want the best for their children, but if parents are in the lower or middle class bracket they have a hard time finding child care centers that meet their needs at a low price.

The number of children can greatly indicate the quality of a child care center. A key indicator of center quality is child to staff ratios. Child care centers that have lower child to staff ratios provide children more one on one time, which is linked to higher intellectual outcomes.

A child's learning environment also needs to be stimulating. Quality programs offer children a variety of materials. A child's environment needs to be comfortable with positive interaction between teachers and with other children. Child care environments that encourage children to be creative and independent will provide children the opportunities needed to grow and prosper.

Child care centers are required to meet state licensing standards. An effective licensing system serves as a reference for both parents and child care programs. Parents

know what requirements their center should be following and teachers can use it to make sure they have the insurance they need, and as a resource center. Licensing serves a very important purpose for both parents and child care teachers.

Accreditation serves as a quality indicator for parents. The National Academy of Early Childhood programs conducts evaluations on child care programs who choose to receive accreditation. This is a voluntary program, but helps parents to be reassured when choosing child care for their children.

Chapter 3

Methodology

Introduction

This chapter includes information on the sample that was selected, a detailed description of the sample, and the instrument that was used for the study. How the data was collected and analyzed will also be included in this chapter. Lastly, the chapter concludes with limitations.

Subject Selection and Description

Permission was sought through the child care directors of 12 child care centers in Barron County, Wisconsin. The centers were: Bizzy Bee's, Rice Lake, Busy Beavers, Cumberland, Cornerstone Learning Center, Cameron, Kiddie Corner, Rice Lake, Kid's Corner, Chetek, Kids World, Rice Lake, Little Bear's, Rice Lake, Red Balloon, Barron, Rice Lake Kids Club, Rice Lake, Preschool Playhouse, Turtle lake, Hilltop Day Care, Rice Lake, Little Britches Child Care, Rice Lake. This occurred in the fall of 2002.

Permission was granted by the child care directors. The child care directors preferred that the surveys be anonymous. After receiving permission to survey the 12 child care centers in Barron County, Wisconsin. All child care centers with enrollment of 20-30 children in Barron County received hand delivered letters for the parents stating the intent of the study and asking for their participation. The researcher hand delivered the parent surveys to each center and explained it to the child care directors. All parents with children in the center were asked to participate in the study.

Instrumentation

The survey portion of this study was designed in a two page format. The items were developed by the researcher using a variety of quality child care resources including The National Child Care Information Services (2004), Child Care Aware (2002), Child Care Information Services (2004), Early Stars (2004), and The Children's Foundation (2002).

Section one of the survey asked parents their perceptions of the care their child receives from the caregiver (See appendix A). Parents were asked to respond by circling the following options: never, rarely, sometimes, frequently and always. The questions related to the teachers/caregivers of the child care centers. Parents were asked questions relating the their child care teachers/caregivers. Concepts included were: children are greeted when they arrive, caregivers are willing to answer parents questions, parents ideas are welcome, lessons are appropriate for all ages, and teachers/caregivers keep up to date in child care.

Section two of the survey asked parents questions relating to health and safety, curriculum, affordability, child to staff ratios and licensing. Parents used a Likert scale ranked from one to five with one being strongly disagree, three undecided and five strongly agree. (See appendix B).

Data Collection

The researcher hand delivered letters of intent to the 12 child care centers in Barron County, Wisconsin. The letter requested parent's participation in the study (See Appendix B). Once permission was granted, parents filled out the surveys. All of the centers had surveys hand delivered by the researcher. The surveys were placed in a box

by their child's things, or if allowed, the researcher placed one survey in each child's mailbox. After the surveys were completed, parents returned them by mail. One week later a reminder was posted by the researcher to complete and return the surveys at all 12 child care centers.

Data Analysis

The responses of the survey were analyzed by the University of Wisconsin Stout Computer User Support Services. Objective numbers one through seven in section one, which relate to parents perceptions of their child care teachers/caregivers, were analyzed to determine the number of frequencies for each attitude statement. Objective numbers one through twenty-four in section two, which relate to health and safety, child to staff ratios, learning environment, licensing, and accreditation, were analyzed to determine the number of frequencies for each attitude statement. Results were tabulated.

Limitations

One limitation of the instrument is that it has no measures of validity or reliability. All of the centers might not agree to the survey. Participants might not understand a question or questions on the survey. The instrument might not be developed for all levels of readers. Surveys will not be returned or returned on time.

Chapter 4

Results and Discussion

In this chapter, results of the survey given to parents in Barron County Wisconsin with children enrolled in child care facilities. The survey was based on the quality of care their child receives. The first section of this chapter shows the compilation of parent's views of the caregivers. The second section discusses the care the child receives, health and safety, nutrition, social skills and state licensing procedures.

Results

Surveys were handed out to 12 child care centers in Barron County with enrollment of 20-30 children. Of the twelve child care centers, 59 surveys were returned. The researcher had no idea which center the surveys were returned from. Most of the child care directors read through the surveys before giving them to parents. Overall the child care centers were willing to participate as long as it was kept confidential.

Table one shows responses to parent's perceptions of their child's child care teacher/caregivers. Parents were asked to respond to the following statements: caregivers are willing to answer questions, teachers offer appropriate lessons, caregivers keep up to date in child care, children are greeted when they arrive, programs keep up with changing interests, parents ideas are welcome, and caregivers speak to children at their level.

The mean, standard deviation, and rank order of the survey returned by the parents are represented in Table 1. The parents were to circle the number that reflected their level of agreement to an attitude statement. The numbers ranged from 1-5 with number one being strongly disagree and number five being strongly agree.

Table 1

Parents perceptions of their child care providers			
Item	X	SD	RO
3. Caregivers are willing to answer questions.	4.63	.522	1
7. Teachers offer appropriate lessons.	4.63	.584	1
4. Caregivers keep up to date in child care.	4.62	.557	3
2. Children are greeted when they arrive.	4.61	.588	4
6. Programs keep up with changing interests.	4.54	.597	5
5. Parents ideas are always welcome.	4.52	.599	6
1. Caregivers speak to children at their level.	4.22	.767	7

Parents were asked to respond to the survey on a 1 to 5 scale with one being strongly disagree and five strongly agree. Statements 3 and 7 in table 1 had strong agreement. Most parents felt strongly that their caregivers were willing to answer questions and teachers taught appropriate lessons to the children. Parents also agreed strongly with statements 4 and 2. Most parents felt that their caregivers kept up to date with child care and their children are greeted when they arrive to the child care center. Statements 6 and 5 had slight agreement. Parents agreed slightly that the programs kept up with changing interests and their ideas are always welcome. Lastly, parents agree that caregivers speak to children at their level. This was the parent's lowest level of agreement. Table one shows that parents seem over all satisfied with the teachers/caregivers in Barron County, Wisconsin.

Table two represents parent's perceptions of the care their child receives. Parents were asked a range of questions relating to their child's learning environment, emotional

and social development, brain development, health and safety, training and education of the child care providers, affordability, and child to staff ratios. They are all indicators of quality.

Table 2 shows the mean, standard deviation and rank order of the survey returned by the parents. Parents were to circle the number that reflected their level of agreement to an attitude statement. The numbers ranged from 1-5 with number one being strongly disagree and number 5 being strongly agree. Table 2 indicates parents perceptions on the care their child receives.

Table 2

Parent's perceptions on the care their child receives

Item	X	SD	Ro
17. Child care center provides a variety of learning materials.	4.64	.517	1
5. Have seen an improvement in my child's social skills.	4.59	.591	2
18. Childcare providers maintain self-control when demands are high.	4.54	.597	3
19. Childcare providers are full of energy and enthusiasm.	4.54	.536	3
14. The center is very clean.	4.53	.679	4
22. Caregivers are comforting and understanding	4.49	.569	5
21. My child receives care from highly trained teachers.	4.47	.568	6
2. Caregivers and children enjoy being together.	4.44	.534	7
4. My child participates in activities that promote brain development.	4.44	.565	7
24. Child care providers listen to my concerns.	4.43	.678	8
1. Child's facility provides a safe environment.	4.42	.593	9
8. The playground equipment is safe.	4.42	.675	9
9. Satisfied with the education my child receives.	4.42	.622	9
20. Childcare provider helps my child with emotional feelings.	4.39	.720	10
7. Child care center made sure my child was immunized.	4.22	.892	11
15. My child care center is affordable.	4.14	.899	12
10. My center sanitizes the toys after an illness breaks	3.95	.839	13
6. Parents are asked to keep up with routine exams.	3.78	1.204	14

11. I know what the group size and child to staff ratios are in Wisconsin.	3.51	1.165	15
23. I am familiar with the state licensing procedures in	3.47	1.237	16
12. Receive letters home when illness breaks out.	3.42	1.117	17

Parents were asked to respond to attitude statements on a one to five scale with one being strongly disagree and five being strongly agree. The highest level of satisfaction with parents was with statement 17; child care centers provide a variety of learning materials. Parents strongly agreed with this statement. The following statements: 5, 18, 19, and 14 had strong agreement. Parents noticed a slight improvement in their child's social skills, child care providers maintain self-control when demands are high, child care providers are full of energy and enthusiasm, and the centers are very clean. The next statements parents agreed slightly with: 22, 21, 2, 4, 24, 1, 8, and 9. Caregivers are comforting and understanding, my children receive care from highly trained teachers, caregivers and children enjoy being together, my child participates in activities that promote brain development, child care providers listen to my concerns, and lastly, I am satisfied with the education my child receives.

Parents were asked to respond to attitude statements relating to the quality of care their child receives at a child care center in Barron County, Wisconsin. The scale was ranked one to five, with one being strongly disagree and five being strongly agree. Parents had less agreement with the following statements, 20, 17 and 15. The statements were as follows: The child care provider helps my child deal with emotional feelings, my child care center made sure my child was immunized, and my child care center is affordable. So parents agreed to the above statements, but did not agree strongly with

them. The last statements in table 2 parents were undecided with. The statements were numbers, 10, 6, 11, 23, and 12. Parents were undecided on the following statements, centers sanitizes toys after an illness breaks out, parents are asked to keep up with routine exams, I know what the child/staff ratios are in Wisconsin, I am familiar with the state licensing procedure, and I receive letters at home when an illness breaks out.

Overall parents are satisfied with the care their child receives. Parents did not disagree or strongly disagree with any of the statements in Table 2, thus they were positive about the care their children received at child care centers in Barron County.

Discussion

In this study, we examined important predictors of quality child care programs serving young children. In general, findings on caregiver characteristics and quality mirrored previous findings (Ghazvini & Mullis, 2002; Jacobson 2000). Parents were relatively positive with their child care providers and felt that the children were receiving satisfactory care. In large part, parents reported high levels of agreement with the caregivers training and education. On average all parents felt that their children were receiving care from highly trained individuals and age appropriate lessons were being taught.

A caring relationship between caregivers and a young child is also a very important aspect of child care. Parents gain high levels of satisfaction when communications between them and the caregivers are frequent. More communication often facilitates a greater knowledge base regarding the child for both parties, which usually leads to agreement on child-rearing practices, and more appropriate caregiving (Patten, 2000). Caregivers who speak to children at their level and offer a warm

environment for children, have a much higher success rate with growth and development in child care centers (Ghazvini & Mullis, 2002). Over all parents in Barron County feel that their children have improved socially and relationships between their child and the caregivers are in good standing.

Parents and child care teachers/caregivers must recognize the role child care plays in a child's future. Child care centers are meeting the basic needs of today's children, but are not excelling at what they are offering (Jacobson, 2000). Parents in Barron County indicate that their children are being well taken care of and have the opportunity to grow and learn intellectually, physically and socially. Children are learning in a safe environment and have a variety of learning materials to choose from. Parents perceptions are that the playground equipment is safe, and the environment the children play in is clean.

Results from parents in Barron County are consistent with past studies. Caregivers who are sensitive and nurturing provide children with a classroom rated higher in quality (Ghazvini & Mullis, 2002). The researchers findings highlight the importance of caregivers behaviors to quality of care. Caregivers who are warm and caring when interacting with children are likely to provide more optimal quality care and good outcomes for children in their centers, this was proved in the study done in Barron County.

Parents perceptions of the quality of child care in Barron County is positive. Children are developing new skills physically, socially and intellectually. Child care teachers/caregivers are offering children an abundant amount of materials and lessons that are improving their skills needed when they begin school, communication between

parents and teachers is open and is frequently taking place. Lastly, children are content and safe in their learning environment. Barron County child care centers are addressing the needs of the children and parents perceive that their children are in high quality child care centers.

Chapter 5

Summary, Conclusions, and Recommendations

This chapter presents an overview of the study of parents with children in child care centers and their perceptions of the care their child receives. A summary of the purpose, methods, data analysis, limitations, and results were included. The conclusions and suggestions for further research were given.

Summary of the Study

The purpose of this study was to describe the perceived level of agreement parents have with their child's child care center. The specific research questions to be addressed were:

- 1: What are parents perceptions of their child's teachers/caregivers in Barron County child care centers?
- 2: What factors effect parents perceptions related to the care their child receives in child care centers in Barron County?

A questionnaire, designed by the researcher, was used as the primary data collection instrument for this study. The survey instrument consisted of two parts. For the first part of the survey, the respondents were asked to give their opinion on seven attitude statements regarding their perceptions of their child's child care provider. The second part of the survey asked the respondents 24 attitude statements using a 5 point Likert Scale in regard to which factors they perceived their child received while at child care.

Surveys were handed out to 12 child centers in Barron County. The centers were: Bizzy Bee's, Rice lake, Busy Beavers, Cumberland, Cornerstone Learning Center,

Cameron, Kiddie Corner, Rice Lake, Kid's Corner, Chetek, Kids World, Rice Lake, Little Bear's, Rice Lake, Red Balloon, Barron, Rice Lake Kids Club, Rice Lake, Preschool Playhouse, Turtle lake, Hilltop Day Care, Rice Lake, Little Britches Child Care, Rice Lake.

Tabulation and analysis of the surveys was done through Computer Services at the University of Wisconsin-Stout in Menomonie, Wisconsin. The number of frequencies, means, percentages and the standard deviation were obtained for attitude statements 1-7 and 1-24, which correlated with research questions one and two.

Research Question 1: What are parents perceptions of their child's teachers/caregivers in Barron County child care centers?

Parents over all felt strongly that their children were receiving care from highly skilled teachers. None of the surveys returned had any disagreements with the level of training their child's teacher has. The teachers provide a wide range of curriculum for all ages and it changes with interests. Lessons promote brain development and are age appropriate. Parents also perceived that the teachers were certified in CPR. Parents also feel that the providers are full of energy, enthusiasm, and maintain self-control when demands are high. Overall parents were positive about the quality of care provided by their child's teacher/caregiver. The highest level of satisfaction was the willingness of caregivers to answer questions, and provide appropriate lessons.

Research Question 2: What factors effect parents perceptions related to the care their child receives in child care centers in Barron County?

Parents were satisfied with all of the following factors relating to child care centers: centers provide a safe and clean environment for children, children have a balance of playtime and story time, curriculum promotes social skills, playground

equipment is safe, child care affordability and communication. However, parents were unsure or undecided about the following factors: parents were not sure whether or not the child care centers checked to see if their child was immunized, parents were unaware if children had regular medical visits, parents did not know the child to staff ratios for Wisconsin and parents were not familiar with the state licensing procedures.

Conclusions

Overall, the results of this survey indicated that parents in Barron County, Wisconsin are positive about their child's teacher/caregiver. Parents perceive that their children are receiving quality care.

Recommendations

Recommendations for further research include; (1) Demographic information on the survey, (2) Include a tracking system to identify parents response in relation to the child care center, (3) Follow-up study five years later in Barron County.

References:

- Adams, G. & Schulman, K. (1998). *Wisconsin: Child Care Challenges*. Children's Defense Fund. P1-14.
- Almanac of Policy Issues. (2002) *Child care*. Retrieved June 13, 2002 from: www.policyalmanac.org/social_welfare/childcare.
- Burchinal, M.R. (1999). Child care experiences and development outcomes. In Suzanne Helburn (Ed.), *The silent crisis in U.S. child care (special issue)*. *Annals of the American Academy of Political and Social Science*, 563, 73-97.
- Caminiti, S. & Welsh, T. (1997). Who's minding America's kids. *Fortune*, 126, 1-5.
- Carolina Abecedarian Project. (1999). *Early learning, later success: The Abecedarian Study*. Executive Summary. Retrieved June 17, 2002 from: www.fpg.unc.edu/abc/
- Child Care Aware. (2002). *Looking for quality*. P 1-4. Retrieved June 6, 2002 from: www.cmidcareaware.org/
- Child Care Aware. (2001) *The daily parent*. Retrieved June, 17 2002 from: www.childcareaware.org/en/daily
- Child Care Aware.(2004) *Selecting Quality Child Care Centers*. P1-6. Retrieved August 11, 2004 from: www.nccc.org/Choose.Quality.Care./Select.center.html
- Child Care Information Services (2004). *Licensing and Accreditation*. P1-3. Retrieved August 11, 2004 from: www.ccisnepnna.com/forproviders
- Early Stars.(2004) *Child Care Centers*.P1-2. Retrieved August 11, 2004 from: www.earlystars.com
- Eisenberg, L. (1999) *What's happening to American families?* ERIC Clearing House on Elementary and Early childhood Education Urbana IL.
- Eheart, B. (1999). Day care quality and children' development. *Early Childhood Quarterly* 9: 167-192.
- Ghazvini, A. & Mullis, R. (2002). Center-based care for young children: examining predictors of quality. *Journal of Genetic Psychology*, 163, 1-11.
- Jacobson, L. (2000). Problems in child care found to persist. *Education Week*, 19, 1-2.
- Jacobson, L. (1997). In the arms of the providers. *Education Week*, 16, 1-6.

- Lucarelli, P.(2002) Raising the bar for health and safety in child care. *Journal of Pediatric Nursing*, 22, 239-253.
- National Child Care Information Services (2004). *Center Child Care Licensing Regulations Child:Staff Ratios and Maximum Group Size requirements*. Retrieved August 12, 2004 from: www.nccic.org/pubs/ratios.html
- NICHD Early Child Care Research Network (1998). *How is child care quality measured*. Retrieved November 15, 2004 from: www.aspe.os.dhhs.gov/
- Patten, P.& Ricks, B. (2000). *Child care quality; An overview for parents*. Eric Digest.
- The Children's Foundation. (2002). *Child care center-licensing study*. Retrieved June 11, 2002 from: www.chfound.org
- U.S. Bureau of the Census. (1998). Historical time-series tables. *Primary child care arrangements used for preschoolers by families with employed mothers*. Retrieved June, 17 2002 from: www.npin.org/library/2001/Ericdigest.
- US Census Bureau.(1998). Demographic information. Retrieved June 11 2002 from: www.nccic.org/statepro/wiscons.
- US Census Bureau. (2003). Demographic Information. Retrieved November 1, 2004 from: www.factfinder.census.gov/
- US Department of Human Services. (2002). *The administration for children and families*. Retrieved June 14 2002 from: www.nccic.org/average
- Valentine, N. (2001). *US Cooperative Extension System Education and Research*. Retrieved June 11 2002 from: www.reusda.gov/extensioncares/concept.htm
- Vandell, D. (1999). Daycare quality and children's free play activities. *American Journal of Orthopsychiatry* 53: 493-500.
- Websters New Dictionary. (1996). Promotional Sales Book. United States of America.
- Wilson, E. & Tweedie, P. (1996). *Selecting quality child care*. Retrieved June 12 2002 from: www.nncc.org/choose.quality.
- Willer, B. (2000). *Quality or affordability: Trade-offs for early childhood programs*. ERIC digest.

Appendix A

Research Questionnaire

This questionnaire is part of a study designed to explore parent perceptions of the quality of child care in Barron County. Your cooperation in this study would be of great help. Please answer all of the following questions to the best of your ability. Your answers are confidential. Thank you.

Section I: Circle the response that best describes your child care facility.

N=Never R=Rarely S=Sometimes F=Frequently A=Always

- N R S F A 1. The caregivers/teachers get down to speak to the children at their level.
- N R S F A 2. The children are greeted when they arrive.
- N R S F A 3. The caregivers/teachers are willing to answer any questions I have.
- N R S F A 4. The caregivers/teachers continue to keep up to date in child care.
- N R S F A 5. Parents ideas are always welcome.
- N R S F A 6. The program keeps up with children's changing interests.
- N R S F A 7. The teachers offer lessons appropriate for my childs level of understanding.

Section II: Choose a number between 1 and 5 that best describes your attitude and enter that number on the blank in front of each question.

1	2	3	4	5
strongly disagree	disagree	undecided	agree	strongly agree

___ 1, My child's facility provides a safe environment.

- ___ 2. The caregivers and children enjoy being together.
- ___ 3. There is a daily balance of play time, story time, and activity time.
- ___ 4. My child participates in activities that promote brain development.
- ___ 5. I have seen an improvement in my child's social skills.

1	2	3	4	5
<hr/>				
strongly disagree	disagree	undecided	agree	strongly agree

- ___ 6. I have been asked by the center to keep up with routine exams for my child.
- ___ 7. The child care center made sure my child was immunized.
- ___ 8. The playground equipment is safe.
- ___ 9. I am satisfied with the education my child receives.
- ___ 10. My center sanitizes the toys after an illness breaks out.
- ___ 11. I know what the group size and child to staff ratios are in Wisconsin.
- ___ 12. I have received a letter home when an illness is reported, example- pink eye.
- ___ 13. My child's center has caregivers/teachers who are certified in CPR.
- ___ 14. The center is very clean.
- ___ 15. My child care center is affordable.
- ___ 16. I struggled to find quality child care at an affordable price.
- ___ 17. My childcare center provides a variety of learning materials (books, toys, etc).
- ___ 18. My childcare provider can maintain self-control when demands are high.
- ___ 19. My childcare provider is full of energy and enthusiasm.
- ___ 20. My childcare provider helps my child with their own emotional feelings.

- ___ 21. I feel that my child receives care from highly trained and educated teachers.
- ___ 22. My child's caregiver/teacher is comforting and understanding.
- ___ 23. I am familiar with state licensing procedures of Wisconsin child care centers.
- ___ 24. The child care providers listen to my concerns

Appendix B

Dear Parent,

My name is Abbie Thill and I am currently working on my thesis for my master's degree in Home Economics. I have decided to research child care in Barron County. I am asking for your help and cooperation. Attached to this letter is a survey. The survey asks basic questions relating to the care your child receives in his or her child care center. The information collected from this survey will help me to complete the research for my thesis. The information will be kept confidential.

If you could please take 10 minutes to fill out the survey and return it in the self-addressed envelope it would be greatly appreciated. Thank you for your time and cooperation. Have a great day!

Sincerely,

Abbie Thill

P.S. If you have any questions or concerns please contact me at 715-986-4190.

