Family Child Care Associations in Minnesota:

Report of the 2011 statewide survey of local associations

Conducted for the Minnesota Department of Human Services by Wilder Research

July 2012
Family child care associations in Minnesota

*Report of the 2011 statewide survey of local associations*

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Executive summary and recommendations

In the spring of 2011, Wilder Research, in partnership with the Minnesota Department of Human Services (DHS), identified and contacted 110 family child care associations, including an estimated 49 county associations and 61 community or neighborhood groups, throughout Minnesota to gather information about their characteristics, the professional development opportunities they provide, their attitudes toward family child care licensing requirements, and their awareness of early childhood organizations and resources. The findings will be used to inform the development of policies and programs that are part of the Minnesota Professional Development System for practitioners serving children in early childhood and school-age settings, which ultimately support the school readiness of children and improve the quality and availability of child care, especially for low-income families.

Profile of family child care associations

Of the 110 associations contacted, 94 associations, representing about 4,000 members, completed surveys. They vary by size, age and form.

- Forty percent of the associations are located in the 7-county metro area, 31 percent are located south of the metro area and 29 percent are north of the metro area.
- Three-quarters of the associations have less than 50 members, whereas 6 percent have 100 or more.
- Associations have existed for an average of 20 years; only 8 percent have existed for less than five years. Large associations have existed longer than medium and small associations.
- Two-thirds of the associations allow center-based staff to be members; 55 percent invite family, friend and neighbor caregivers, and 40 percent invite individuals who aren’t providers to join.
- Twenty-eight percent of associations have no membership fee. Fee-bearing associations have membership fees of up to $75, at most. Metro-area associations and smaller associations are less likely to have membership fees. Those with a membership fee have existed longer, on average, than those without.
- Three-quarters of the associations meet monthly. Associations in the north and those that have a membership fee meet more frequently.
- On a scale from 1 (very weak) to 10 (very strong), associations rate themselves, on average, strongest in their connectedness of members (7.2), followed by attracting new members (5.8) and extent to which members are active (5.7).
- Half are affiliated with the Minnesota Licensed Family Child Care Association (MLFCCA).

**Professional development resources and opportunities provided by family child care associations**

The local associations provide members and non-members formal and informal supports and trainings.

- About 2 out of 5 associations provide e-newsletters or listservs, teaching materials, print newsletters and/or social networking. A quarter have a website. Seventeen percent provide curricula resources to members, and 10 percent provide bulk purchasing benefits. Large associations generally provide more resources than smaller associations.

- Eighty-two percent invite speakers to meetings.

- Two-thirds provide informational sessions on Minnesota Professional Development System resources. Associations in the north are more likely to provide these sessions than those in the south (81 percent vs. 52 percent).

- Half arrange mentoring and coaching.

- A quarter sponsor conferences, mostly on an annual basis.

**Partnerships and other community connections**

- Ninety-four percent allow non-members who are licensed providers to attend the professional development opportunities they provide, and about 85 percent allow parents and family, friend and neighbor caregivers to attend their professional development opportunities.

- Fifty-eight percent partner with schools, public health, libraries and other organizations to provide professional development opportunities.

- Eighty-five percent use professional trainers, and half use trainers approved by the Minnesota Center for Professional Development (MNCPD), the organization that provides and coordinates many of the supports and programs of the Minnesota Professional Development System. A third use members to conduct professional development opportunities. Half use other local resources to conduct trainings, such as health care professionals, licensors, Red Cross, tax professionals and attorneys.

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1 The 2007 Legislature authorized the Minnesota Department of Human Services and the Minnesota Department of Education to develop and phase in a Professional Development System (PD System) for providers serving early childhood and school-age programs. For further information see: The Annual Report of the Minnesota Professional Development System for Early Childhood and School-age Practitioners (2010).
teachers and professors, and librarians. Associations with a membership fee are more likely to use professional trainers (91 percent vs. 67 percent).

Eleven associations (12 percent) are approved training sponsors in the MNCPD registry. Associations without membership fees are more likely to be approved training sponsors than those with a membership fee (27 percent vs. 9 percent).

**Formal trainings**

- Ninety-four percent plan or host formal trainings or workshops; half do so at least monthly.
- A total of 85 associations provided 700 formal trainings and conferences in the 12 months prior to the survey. Half of the associations sponsored between five and nine trainings during that time, though a quarter (24 percent) sponsored 10 or more. On average, those associations hosting trainings hosted 7-8 trainings in the 12 months prior to the survey. Large associations sponsored almost twice as many trainings and conferences in the 12 months prior, on average, than small or medium-sized associations (13 vs. 7).
- About half of the trainings sponsored by local associations were approved by MNCPD (319 of the 640 for which data are available). They ranged from a half hour to 36 hours long, with an average of 2.5 hours. Attendance ranged from 3 to 200 people, with an average attendance of 20 people. Training fees ranged from $0 to $135, with an average fee of $20.
- The most common topics of association-sponsored trainings include first aid and safety, child abuse, and behavior and discipline (60 or more trainings on each topic), followed by business topics, language and literacy, food and nutrition, child development and play activities (30 to 43 trainings on each topic).
- Trainings on motivation and children’s socialization, and recognition events were the most well attended (average of 35 attendees); those on career development have been least attended (average of 12 attendees).

**Attitudes and awareness related to professional development**

For the most part, local associations are aware of the professional development system and support licensing requirements. They tend to be less enthusiastic about 1) the minimum preparation hours or credentials that are required for licensing, 2) the process used to approve trainers, and 3) the Professional Development Registry.

- When asked if the licensing requirements are appropriate, over 80 percent of association representatives feel that the minimum number of annual training hours required is appropriate and that pre-service requirements are appropriate. Fewer (61
percent) believe the requirements for minimum preparation hours or credentials are appropriate, with those in the north less likely to feel this requirement is appropriate than those in the south. Most who do not feel the minimum preparation hours or credentials are appropriate are concerned providers could not get necessary trainings in their area in a timely manner or note their members are not interested in being credentialed.

- Association representatives are most aware of the Child Care Resource and Referral (CCR&R) training and grants, Minnesota Licensed Family Child Care Association (MLFCCA), National Association of Family Child Care (NAFCC), Parent Aware and Minnesota Center for Professional Development (MNCPD) Registry. They are least aware of the International Family Child Care Association.

- Sixty percent of those who are aware of MNCPD support its process for approving trainers and encourage its members to join the Registry. Metro-area associations and informal associations are more likely to support the process.

- Twenty percent of associations take official positions on Minnesota child care policies or issues.

- In response to an open-ended question about how DHS and the Minnesota Professional Development System can support associations, representatives suggested increasing access to affordable training and approved trainers, communicating with associations and providers, and updating and consistently applying licensing requirements (Rule 2).

**Comparison of associations by region**

Of the 110 family child care associations in Minnesota, 40 percent are located in the 7-county metro area; 31 percent are located south of the metro (southern and southwest regions), and 29 percent are located in the northern part of the state (central, northwestern, and northeastern regions). Here are some key differences by region:

- Metro-area associations are more likely to not have a fee for membership than those in the south or north (46 percent vs. 13-21 percent). The north has the smallest proportion of associations with a fee of over $25 (14 percent vs. 34-52 percent).

- Associations in the northern part of the state are more likely to meet at least monthly (93 percent vs. 67-71 percent).

- In terms of common traits providers share, northern associations are more likely than those in the south to report that their members serve children from the same cultural or ethnic community (57 percent vs. 25 percent), whereas associations in the south are more likely than those in the metro area to report that their members have similar-sized businesses (87 percent vs.57 percent).
Metro-area associations are more likely to have a website than associations in the north or south regions (40 percent vs. 16-18 percent).

All the trainings on career development topics were sponsored by associations in the south, and a higher percentage of associations in the south (90 percent) offered first aid and safety trainings in the last 12 months than did associations in the metro (58 percent). However, associations in the north were less likely to offer food/nutrition trainings (22 percent) than those in the south (50 percent).

Metro-area associations are less likely than associations in the north or south to report inviting informal speakers to meetings (66 percent vs. 89-93 percent).

Associations in the south are less likely to provide informational sessions on Minnesota Professional Development System resources (52 percent) compared to associations in the north (81 percent).

Association representatives in the north are less likely than those in the south to feel that the minimum preparation hours or credentials required for licensing are appropriate (42 percent vs. 73 percent).

Associations in the metro area are more likely to support the MNCPD process for approving trainers (78 percent) than associations in the north (41 percent).

**Recommendations**

The results of this statewide survey of family child care associations provide a profile of associations and information on the professional development opportunities they provide, perceptions and attitudes toward licensing requirements, and awareness of early childhood and child development organizations. Based on the results of this study and discussion with the study advisory committee, the researchers recommend that the Department of Human Services and other organizations supporting family child care providers consider the following to support family child care associations and their members.

1. **Support local associations on their own terms, taking into account regional differences.**

Local associations are a valuable asset that connect family child care providers informally and advance the knowledge and skills of licensed and unlicensed home-based caregivers. However, they struggle with keeping their members involved and seem to have one foot in and one foot out of the professional development system. Though nearly all plan or host formal trainings, and most support the licensing requirements and MNCPD, others are, at times, at odds with the system, especially when it threatens their association’s independence or, in greater Minnesota, when they perceive metro-area rules being imposed on them. Efforts to assist associations and improve communication with them
should acknowledge their role in the early childhood and school age care system and take into account that the interpretation and consequences of licensing rules may vary by location in the state.

2. **Assist associations in accessing affordable training and approved trainers.**

The lack of approved trainers in some areas of the state and the cost of bringing trainers to outstate areas are two key inter-related issues requiring attention by DHS. These issues could be addressed by simplifying the process of approving trainers, providing grants or transportation stipends to associations to recruit approved trainers and providing lists of approved trainers to local associations to assist them in finding appropriate trainers. Other organizations that support family child care providers, including the Minnesota Licensed Family Child Care Association, may also be interested in pursuing these strategies.

3. **Communicate directly with associations.**

This study produced the first comprehensive list of local associations in the state. The Department of Human Services could use this list to open up two-way communication with the associations rather than relying solely on county family child care licensors to communicate directly with licensed providers. This communication could include information on legislation that may affect providers, events of interest to family child care association members and the resources available to assist local associations and providers. Communication could be provided both in hard copy and online to reach those associations with limited Internet access. Other organizations that support family child care providers, including the Minnesota Licensed Family Child Care Association, may also be interested in pursuing these strategies.
Introduction

Study purposes

In the spring of 2011, Wilder Research, in partnership with the Minnesota Department of Human Services (DHS), completed a study of family child care associations in Minnesota. The study included all types of associations, including county associations, community or neighborhood groups and networks; those with boards of directors, bylaws, and nonprofit status and those without; and those that collect fees for membership or trainings and those that do not. The goals of the study – the first of its kind in Minnesota – are to provide information on:

- The characteristics of family child care associations in Minnesota, including numbers and types of members; level and types of training, coaching, mentoring and other professional development activities; and any associated fees.
- Perceptions and attitudes towards family child care training requirements and professional development.
- Awareness of the Minnesota Professional Development System, Child Care Resource and Referral (CCR&R) training, Parent Aware quality rating and improvement system, and other child development organizations and how they can best serve family child care providers.

The Family Child Care Associations Study was completed in tandem with the Child Care Workforce Study, which will be completed in the summer of 2012. Together, the findings will be used to inform the development of policies and programs that are part of the Minnesota Professional Development System for practitioners serving children in early childhood and school-age settings, which ultimately support the school readiness of children and improve the quality and availability of child care, especially for low-income families.

Study methods

Wilder Research began by convening an advisory committee in coordination with DHS. The advisory committee included representatives from the Minnesota Licensed Family Child Care Association (MLFCCA), the Child Care Resource and Referral (CCR&R) Network, the Early Childhood Resource and Training Center and Metropolitan State University. The advisory committee assisted Wilder Research in identifying and contacting known or potential family child care associations in Minnesota, developing the survey instrument and clarifying and interpreting findings in the final report.

Working with DHS, MLFCCA, the CCR&R Network, the Minnesota Initiative Foundations’ Early Childhood coalitions, Early Childhood Resource and Training Center
and county licensors, Wilder Research staff compiled a list of all known family child care associations. This list included county associations and community or neighborhood groups and networks; those with boards of directors, bylaws, and nonprofit status and those without; and those that collect fees for membership or trainings and those that do not. Using existing lists, Wilder Research called the association contact persons to verify their existence. To ensure all associations were included on the list, the survey instrument also included a question that asked survey respondents to identify other associations and neighborhood groups in their area.

Once identified, letters were sent to association representatives describing the purpose of the study, listing the type of information to prepare in order to participate in the study and informing them of the incentive offer of $25 to participate. These association representatives were listed as main contacts and may have been elected or volunteer positions, as such their knowledge of the characteristics of individual association members may vary. Interviewers also made efforts to reach association representatives via email or contacted the alternative contacts, when available. Contact people were also offered an opportunity to complete the survey online rather than over the phone. Surveys were completed during the spring of 2011.

A total of 110 active associations, including an estimated 49 county associations and 61 community or neighborhood groups, were identified and, of those, 94 (85 percent) completed either a phone (91) or online (3) survey.²

In addition to computing frequencies for each survey item, researchers tested key variables to see if results differed in statistically significant ways by these characteristics:

- Region (metro area, north of metro area and south of metro area),³
- Association size (less than 20 members, 20 to 49 members and 50 or more members)
- Membership fee (fee or no fee)
- Years in existence

Statistically significant differences (p<.05) will be set in this indented format throughout the report. Only statistically significant differences are reported; therefore if there are statistically significant differences between two groups (e.g. north and south), only data for those two groups are reported.

² This study focused on local associations. As such, the statewide association, Minnesota Licensed Family Child Care Association (MLFCCA), was not surveyed. The number of county associations and community groups surveyed was estimated based on the name of the group.
³ Metro consists of the 7-county metro area; north includes the central, northwest and northeast region, and the south includes the southwest and southern regions used by the Minnesota Initiative Foundation and Minnesota Compass. Due to the small sample size, analysis could not be done by each of the seven regions individually; thus they were combined.
Profile of family child care associations

Number and location of associations

Of the 110 family child care associations in Minnesota, 40 percent are located in the Twin Cities metro area, 17 percent are in southwest Minnesota, 14 percent each in the central and southern regions, 8 percent in northwest Minnesota, 6 percent in the west central region and one association is in northeastern Minnesota. The associations that completed surveys are representative of all the associations in the state.

1. Number of associations

<table>
<thead>
<tr>
<th>Region</th>
<th>All associations</th>
<th>Associations completing surveys</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>110 100%</td>
<td>94 100%</td>
</tr>
<tr>
<td>Twin Cities metro area (7-county)</td>
<td>44 40%</td>
<td>35 37%</td>
</tr>
<tr>
<td>South of metro area</td>
<td>34 31%</td>
<td>31 33%</td>
</tr>
<tr>
<td>Southwest</td>
<td>19 17%</td>
<td>19 20%</td>
</tr>
<tr>
<td>Southern</td>
<td>15 14%</td>
<td>12 13%</td>
</tr>
<tr>
<td>North of metro area</td>
<td>32 29%</td>
<td>28 30%</td>
</tr>
<tr>
<td>Central</td>
<td>15 14%</td>
<td>13 14%</td>
</tr>
<tr>
<td>Northwest</td>
<td>9 8%</td>
<td>8 9%</td>
</tr>
<tr>
<td>West Central</td>
<td>7 6%</td>
<td>6 6%</td>
</tr>
<tr>
<td>Northeast</td>
<td>1 1%</td>
<td>1 1%</td>
</tr>
</tbody>
</table>
2. Locations of family child care associations in Minnesota, and their service reach
Size and age of associations

Three-quarters (76 percent) of the associations have less than 50 members, whereas 6 percent have 100 or more. The median number of members associations have is 30. The associations completing surveys represent a total of about 4,000 members, which could include up to 36 percent of the state’s licensed family child care providers.4

Over half of the associations (57 percent) have existed for 20 or more years; 8 percent are new, starting within the past four years.

Large associations have existed longer than medium and small associations (22 years vs. 18 years, on average), indicating associations may grow over time.

3. Size of associations

<table>
<thead>
<tr>
<th>Number of members</th>
<th>N=94</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 20</td>
<td>37%</td>
</tr>
<tr>
<td>20 – 49</td>
<td>39%</td>
</tr>
<tr>
<td>50 – 99</td>
<td>17%</td>
</tr>
<tr>
<td>100 – 199</td>
<td>2%</td>
</tr>
<tr>
<td>200 or more</td>
<td>4%</td>
</tr>
<tr>
<td>Range</td>
<td>1-308</td>
</tr>
<tr>
<td>Mean</td>
<td>43</td>
</tr>
<tr>
<td>Median</td>
<td>30</td>
</tr>
</tbody>
</table>

4 In June 2010, there were 11,200 family child care providers that were licensed in Minnesota, though association members may include others (see figure 5 for a list of who is eligible to be members).

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Association membership and fees

In addition to licensed family child care providers, two-thirds (64 percent) of associations allow center-based staff to be members and over half (55 percent) invite family, friend and neighbor caregivers to be members. Forty percent allow individuals who are not child care providers to be members, including parents, foster parents, grandparents, students, nannies, former providers, licensors and the general public.

Over a quarter (28 percent) of associations have no membership fees. Those with a membership fee are about equally split between having a fee of $25 or less (38 percent) and over $25 (34 percent).

Given the large number of smaller neighborhood groups in Hennepin and Ramsey Counties that do not have membership fees, overall the metro-area associations are more likely than those in the south or north to have no membership fees (46 percent vs. 13-21 percent).

Compared to the other regions, the north has the smallest proportion of associations with a fee of over $25 (14 percent vs. 34-52 percent).

Smaller associations, those with less than 20 members, are also more likely to have no fee (51 percent vs. 16 percent of medium-sized associations and 9 percent of large associations).

Associations with a membership fee have existed for longer than those without membership fees (20 vs. 16 years).

Five associations have two levels or types of membership – one for licensed family child care providers and one for others, such as non-licensed providers, centers or community members. In all five cases, the non-providers get fewer benefits; they cannot vote, cannot advertise on the website, or have fewer training benefits. All five have membership fees and in two cases, the second type of membership costs more. Two additional associations only have one type of membership, but offer a sliding fee scale or discounts for members who pay their fee once per year, rather than on a more frequent basis.

5. Members

<table>
<thead>
<tr>
<th>Percent who invite this population to be members</th>
<th>N=87-94</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensed family child care providers</td>
<td>100%</td>
</tr>
<tr>
<td>Center-based staff (directors, teachers, aides)</td>
<td>64%</td>
</tr>
<tr>
<td>Family, friend and neighbor caregivers</td>
<td>55%</td>
</tr>
<tr>
<td>Others*</td>
<td>40%</td>
</tr>
</tbody>
</table>

* Others include parents, foster parents, grandparents, the general public, students, grandparents, nannies, former providers, licensors.
6. Membership fees

<table>
<thead>
<tr>
<th>Membership fees (annual)</th>
<th>N=94</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0</td>
<td>28%</td>
</tr>
<tr>
<td>$1-$25</td>
<td>38%</td>
</tr>
<tr>
<td>$26-$50</td>
<td>33%</td>
</tr>
<tr>
<td>$51-75</td>
<td>1%</td>
</tr>
</tbody>
</table>

Frequency of association meetings

Three-quarters (76 percent) of associations meet at least monthly, and most of the rest (16 percent) meet every couple of months. Associations in the northern part of the state are more likely to meet at least monthly than those in the metro area or in the south (93 percent vs. 67-71 percent). Associations with a membership fee are more likely to meet at least monthly than associations without a membership fee (84 percent vs. 54 percent).

7. Meeting frequency

<table>
<thead>
<tr>
<th>Frequency of meetings</th>
<th>N=92</th>
</tr>
</thead>
<tbody>
<tr>
<td>Several times a month</td>
<td>3%</td>
</tr>
<tr>
<td>Once a month</td>
<td>73%</td>
</tr>
<tr>
<td>Every couple of months</td>
<td>16%</td>
</tr>
<tr>
<td>Twice a year</td>
<td>4%</td>
</tr>
<tr>
<td>Annually</td>
<td>1%</td>
</tr>
<tr>
<td>Less than once a year</td>
<td>2%</td>
</tr>
</tbody>
</table>

Experience and connections of association members

Though association representatives reported their members have been providers between 1 and 53 years, all but one reported that most of their members have been providers for at least five years. In fact, in a third of associations (31 percent), most members have at least 15 years experience as licensed providers.

Almost all association representatives report that their members are located in the same geographic area (97 percent) and have common values and philosophies of child care (90 percent). Four out of five (82 percent) report members serve children of the same age group. Three-quarters report that members have similarly-sized businesses. Two-thirds
report that members serve children from the same school district. Less than half (42 percent) report that members serve children from the same cultural or ethnic community and a quarter (29 percent) report that members serve children from the same faith community (either the same denomination or attend the same worship space).

Providers that are part of larger associations, those with 50 or more members, have a larger range of years being licensed.

Providers that are part of associations with membership fees also have a larger range of years being licensed.

Associations whose members serve children from the same cultural or ethnic community vary by region, with association representatives in the north most likely to report their members are connected this way (57 percent) compared with those in the south (25 percent).

Association representatives from the south are more likely to report their members run similar-sized businesses (87 percent) than those in the metro area (57 percent).

8. Length of time members have been licensed providers

<table>
<thead>
<tr>
<th>Number of years most members have been licensed providers</th>
<th>N=91-94</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 5</td>
<td>1%</td>
</tr>
<tr>
<td>5 – 9</td>
<td>30%</td>
</tr>
<tr>
<td>10 – 14</td>
<td>39%</td>
</tr>
<tr>
<td>15 or more</td>
<td>31%</td>
</tr>
</tbody>
</table>

9. How members are connected

<table>
<thead>
<tr>
<th>Membership traits reported by association representative</th>
<th>N=94</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members are located in the same geographic area</td>
<td>97%</td>
</tr>
<tr>
<td>Members have common values and philosophies of child care</td>
<td>90%</td>
</tr>
<tr>
<td>Members serve children in same age group&lt;sup&gt;5&lt;/sup&gt;</td>
<td>82%</td>
</tr>
<tr>
<td>Members' businesses are of similar size</td>
<td>72%</td>
</tr>
<tr>
<td>Members serve children from the same school district</td>
<td>67%</td>
</tr>
<tr>
<td>Members serve children from the same cultural or ethnic community</td>
<td>42%</td>
</tr>
<tr>
<td>Members serve children from the same faith community</td>
<td>29%</td>
</tr>
</tbody>
</table>

<sup>5</sup> Though licensed family providers are licensed to serve children of all age groups, they may choose to serve certain age groups.
Strength of the local associations

Association representatives were asked to rate the strength of their associations in three areas on a 1-10 scale with 1 being very weak and 10 being very strong. Overall, associations are strongest in their connectedness of members, with an average rating of 7.2. In comparison, the extent to which associations are attracting new members and members are active in the association were rated more in the middle, 5.8 and 5.7, on average.

Representatives of associations with a membership fee rated their association stronger in attracting new members than those without a fee (6.3 vs. 4.4).

Larger associations also rated themselves higher in attracting new members (7.0) compared to both medium (6.1) and small associations (4.7).

<table>
<thead>
<tr>
<th>10. Strength of associations (N=92-93)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Connectedness of members</td>
</tr>
<tr>
<td>Extent to which association is attracting new members</td>
</tr>
<tr>
<td>Activity level of members</td>
</tr>
</tbody>
</table>

Affiliation with Minnesota Licensed Family Child Care Association

Half (49 percent) of surveyed associations reported being affiliated with the Minnesota Licensed Family Child Care Association (MLFCCA). MLFCCA is a statewide network of providers, associations and support groups with a mission to support the highest standard of care for children in Minnesota's diverse licensed family child care homes through education, resources, recognition, and advocacy. Those that have not joined MLFCCA noted the following reasons in their comments: they do not have the budget to pay the fees; are not familiar with the organization; did not know they were invited to join; do not see the benefit of joining; are local, small or do not have a membership fee and want to stay that way; or feel MLFCCA is pro-union when they are not.\(^6\)

Affiliation varied by size of associations, with small associations less likely to be affiliated with MLFCCA (37 percent) and larger associations more likely to be affiliated with MLFCCA (68 percent).

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\(^6\) MLFCCA is neutral on the union issue.
Resources and professional development opportunities provided by family child care associations

Resources for members

E-newsletters or listservs and teaching materials are the most common resources provided by associations; 40 percent provide these resources. Over a third provide print newsletters (38 percent) and social networking (37 percent). A quarter (26 percent) have a website. Seventeen percent provide early childhood curricula, and 10 percent provide bulk purchasing. Few (5 percent or less) have a lending library, coordinated insurance, bookkeeping or billing, or local business discounts.

Metro-area associations are more likely to have websites than associations in the north or south regions (40 percent vs. 16-18 percent).

Large associations provide more benefits overall than small or medium-sized organizations, including websites (55 percent), print newsletters (59 percent), e-newsletters/listservs (55 percent), curricula (32 percent) and teaching materials (59 percent).

Associations with a membership fee are more likely to have print newsletters (49 percent vs. 12 percent).

Associations with print newsletters have existed longer, on average, than those without (21 years vs. 17 years).

11. Resources provided to members

<table>
<thead>
<tr>
<th>Percent of associations providing the following resources</th>
<th>N=94</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-newsletter or listserv</td>
<td>40%</td>
</tr>
<tr>
<td>Teaching materials</td>
<td>40%</td>
</tr>
<tr>
<td>Print newsletter</td>
<td>38%</td>
</tr>
<tr>
<td>Social networking</td>
<td>37%</td>
</tr>
<tr>
<td>Website</td>
<td>26%</td>
</tr>
<tr>
<td>Curricula</td>
<td>17%</td>
</tr>
<tr>
<td>Bulk purchasing</td>
<td>10%</td>
</tr>
<tr>
<td>Lending library</td>
<td>5%</td>
</tr>
<tr>
<td>Coordinated insurance</td>
<td>3%</td>
</tr>
<tr>
<td>Bookkeeping, billing</td>
<td>3%</td>
</tr>
<tr>
<td>Discounts to local businesses</td>
<td>3%</td>
</tr>
</tbody>
</table>
Types of professional development provided by associations

Almost all associations (98 percent) encourage informal support among members. Almost all (94 percent) also provide formal trainings and workshops. Eight out of ten (82 percent) invite speakers to meetings, and six out of ten (64 percent) provide information sessions on MN Professional Development System resources. Half (47 percent) arrange mentoring and coaching. A quarter sponsor conferences. Only 2 percent do not provide any of these types of professional development opportunities.

Associations in the metro area are less likely to invite speakers to meetings (66 percent) than associations in the north (11 percent) or south (7 percent).

Associations in the south are less likely to provide informational sessions on Minnesota Professional Development System resources (52 percent) compared to associations in the north (81 percent of which do this).

Associations with a membership fee are more likely to have formal trainings and workshops (99 percent vs. 81 percent).

Associations that plan and host formal trainings have existed twice as long, on average, than those that do not (19 years vs. 10 years). Similarly, those that invite speakers to meetings have also existed longer (20 years vs. 13 years).

<table>
<thead>
<tr>
<th>Type of professional development</th>
<th>N=89-94</th>
</tr>
</thead>
<tbody>
<tr>
<td>Informal support among members</td>
<td>98%</td>
</tr>
<tr>
<td>Formal trainings and workshops</td>
<td>94%</td>
</tr>
<tr>
<td>Speakers</td>
<td>82%</td>
</tr>
<tr>
<td>Informational sessions on MN Professional Development System resources</td>
<td>64%</td>
</tr>
<tr>
<td>Mentoring or coaching</td>
<td>47%</td>
</tr>
<tr>
<td>Conference</td>
<td>25%</td>
</tr>
<tr>
<td>None</td>
<td>2%</td>
</tr>
</tbody>
</table>

Who is eligible to attend professional development opportunities

In addition to members, almost all (94 percent) associations allow non-members who are licensed providers to attend professional development opportunities they provide. A large majority (84-85 percent) also allow parents and family, friend and neighbor caregivers to attend professional development opportunities. Two-thirds allow others to attend, such as center-based staff, foster parents, grandparents, teachers, school district staff, child care and teachers’ aides, and other members of the public.
13. **Who is eligible to attend professional development opportunities**

<table>
<thead>
<tr>
<th>Eligibility</th>
<th>N=92</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members</td>
<td>100%</td>
</tr>
<tr>
<td>Licensed family child care providers who are not members</td>
<td>94%</td>
</tr>
<tr>
<td>Parents</td>
<td>85%</td>
</tr>
<tr>
<td>Family, friend and neighbor caregivers</td>
<td>84%</td>
</tr>
<tr>
<td>Others*</td>
<td>67%</td>
</tr>
</tbody>
</table>

* Others include center-based staff, foster parents, grandparents, teachers, school district staff, child care and teachers' aides, and community members/the public.

**Professional development partners, trainers and training sponsors**

Over half (58 percent) of the associations partner with other organizations to provide professional development opportunities. Their partners include local Child Care Resource and Referral agencies (CCR&Rs), crisis centers, higher education institutions, fire departments, Early Childhood Family Education staff, libraries, school districts, child care coalitions, public health departments, hospitals and licensors. Many partner on topics related to health and safety that would be of interest to broad sections of the community, such as CPR, first aid, car seat safety, food safety and fire extinguishers. Others partner with organizations on child-specific topics, such as literacy, childhood development, activities, school readiness and sleep issues with children.

A large majority (85 percent) of associations use professional trainers, and half (52 percent) use trainers approved by the Minnesota Center for Professional Development (MNCPD). A third (30 percent) use members to conduct professional development opportunities. Half (52 percent) use other local resources to conduct trainings, such as health care professionals (doctors, nurses, nutritionists, etc.), licensors, tax professionals and attorneys, teachers and professors, police officers, librarians and staff at local organizations (Red Cross, Early Childhood Family Education, Minnesota Fetal Alcohol Association).

Associations with a membership fee are more likely to use professional trainers (91 percent vs. 67 percent).

Associations that use professional trainers have existed longer (19 years vs. 13 years).
14. **Who conducts professional development opportunities**

<table>
<thead>
<tr>
<th>N=92</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional trainers</td>
</tr>
<tr>
<td>MNCPD-approved trainers</td>
</tr>
<tr>
<td>Members</td>
</tr>
<tr>
<td>Others</td>
</tr>
</tbody>
</table>

Eleven associations (12 percent) are approved training sponsors in the MNCPD registry. Seven are in the metro area, three are in the north, and one is in the south. Associations without a membership fee are more likely to be approved training sponsors than those with a membership fee (27 percent vs. 9 percent).

Ninety-one associations (97 percent) report that their county licensors accept certificate hours for their trainings as meeting annual training requirements required by licensing. Eleven (12 percent) either know or believe all counties in the state will accept certificate hours for their trainings.

**Formal professional development opportunities**

Almost all associations (94 percent) plan or host formal training workshops; half do so at least monthly. A quarter sponsor conferences, mostly on an annual basis.

The frequency with which associations plan and host formal trainings and workshops is related to their size and fee. Most large associations (73 percent) host formal trainings and workshops monthly, compared to 46 percent of medium-sized associations and 34 percent of small associations. Associations with membership fees are also more likely to offer formal trainings monthly (56 percent compared to 27 percent).

15. **Frequency with which formal professional development opportunities are provided**

<table>
<thead>
<tr>
<th></th>
<th>Trainings and workshops (N=94)</th>
<th>Conferences (N=94)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly or more</td>
<td>48%</td>
<td>0%</td>
</tr>
<tr>
<td>Several times a year</td>
<td>38%</td>
<td>2%</td>
</tr>
<tr>
<td>Annually</td>
<td>3%</td>
<td>14%</td>
</tr>
<tr>
<td>Less than annually</td>
<td>4%</td>
<td>9%</td>
</tr>
<tr>
<td>Never</td>
<td>6%</td>
<td>76%</td>
</tr>
</tbody>
</table>
A total of 85 associations provided 700 formal trainings and conferences in the 12 months prior to the survey. Half of the associations (53 percent) sponsored between five and nine trainings during that time, though a quarter (24 percent) sponsored 10 or more. On average, those associations hosting trainings hosted 7-8 trainings in the 12 months prior to the survey.

Large associations sponsored almost twice as many trainings and conferences in the 12 months prior, on average, than small or medium-sized associations (13 events vs. 7 events).

### 16. Number of formal professional development opportunities associations provided in the last year

<table>
<thead>
<tr>
<th>Number of trainings</th>
<th>Percent of associations N=85</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 5*</td>
<td>25%</td>
</tr>
<tr>
<td>5 – 9</td>
<td>53%</td>
</tr>
<tr>
<td>10 – 14</td>
<td>18%</td>
</tr>
<tr>
<td>15 or more</td>
<td>6%</td>
</tr>
<tr>
<td>Mean</td>
<td>8</td>
</tr>
<tr>
<td>Median</td>
<td>7</td>
</tr>
<tr>
<td>Range</td>
<td>0-52</td>
</tr>
</tbody>
</table>

* Includes 4 associations that do formal trainings or conferences, but have not done any in the last 12 months.

About half of the trainings associations held in the last 12 months had MNCPD approval (319 of the 640 for which data are available). They ranged from a half hour to 36 hours long, with an average of 2.5 hours. Attendance ranged from 3 to 200 people, with an average attendance of 25 people. Training fees ranged from no fee to $135, with the average, out of those trainings with a fee, being about $20. Almost all (99 percent) of trainings were held in-person. Ten percent were part of series.

**Training topics**

Figure 17 lists the topics of the trainings held in the last 12 months. The most common topics of association-sponsored trainings include first aid and safety, child abuse, and behavior and discipline (60 or more trainings of each), followed by business topics, language and literacy, food and nutrition, child development and play activities (30 to 43 trainings). The topics that were most common were the same topics which had the most offerings with approval from MNCPD (17-65 trainings in each of these topics were

* Though how many of these opportunities were conferences is not known exactly, it is estimated by the frequency with which associations reported hosting conferences that at least 18 conferences are held each year by local associations.
MNCPD-approved). Only six trainings each were held on the topics of: career development, children’s socialization, and physical development and disabilities.

According to association respondents, MNCPD approved four or fewer trainings on the following topics: children’s socialization, kindergarten readiness and school transition, motivation, physical development and disabilities, and networking.

Overall, training sessions on motivation and children’s socialization and recognition events have had the highest attendance (average of 35 attendees); those on career development tracks have had the lowest attendance (average of 12 attendees).

Trainings on first aid and safety, and child abuse were offered by over half of the associations in the last 12 months. Less than 10 percent offered trainings on physical development and disabilities, events that motivate or recognize providers, children’s socialization, kindergarten readiness and school transition, and career development.

All the trainings on career development were sponsored by southern associations.

A higher percentage of associations in the south (90 percent) offered first aid and safety trainings compared with associations in the metro (58 percent).

The associations in the north were less likely to offer food/nutrition trainings (22 percent) than associations in the south (50 percent).

Large associations offered a greater variety of training topics.
17. Details of trainings offered in the past year, by topic

<table>
<thead>
<tr>
<th>Topics</th>
<th>Number of trainings</th>
<th>Number approved by MNCPF</th>
<th>Number part of a series</th>
<th>Average length (hours)</th>
<th>Median attendance</th>
<th>Percent of associations offering</th>
</tr>
</thead>
<tbody>
<tr>
<td>Art and music activities</td>
<td>15</td>
<td>5</td>
<td>1</td>
<td>1.8</td>
<td>30</td>
<td>17%</td>
</tr>
<tr>
<td>Behavior/discipline (general)</td>
<td>50</td>
<td>25</td>
<td>14</td>
<td>2.0</td>
<td>20</td>
<td>34%</td>
</tr>
<tr>
<td>Behavior/discipline (specific issues)</td>
<td>15</td>
<td>5</td>
<td>0</td>
<td>2.0</td>
<td>27</td>
<td>17%</td>
</tr>
<tr>
<td>Business</td>
<td>43</td>
<td>22</td>
<td>5</td>
<td>2.1</td>
<td>20</td>
<td>37%</td>
</tr>
<tr>
<td>Career development tracks</td>
<td>6</td>
<td>5</td>
<td>1</td>
<td>1.9</td>
<td>12</td>
<td>6%</td>
</tr>
<tr>
<td>Child development</td>
<td>31</td>
<td>17</td>
<td>6</td>
<td>4.2</td>
<td>15</td>
<td>28%</td>
</tr>
<tr>
<td>Child abuse</td>
<td>61</td>
<td>32</td>
<td>1</td>
<td>1.7</td>
<td>24</td>
<td>55%</td>
</tr>
<tr>
<td>Environments (indoor and outdoor)</td>
<td>13</td>
<td>6</td>
<td>0</td>
<td>2.6</td>
<td>18</td>
<td>15%</td>
</tr>
<tr>
<td>First aid/safety</td>
<td>116</td>
<td>65</td>
<td>5</td>
<td>3.2</td>
<td>17</td>
<td>74%</td>
</tr>
<tr>
<td>Food and nutrition</td>
<td>39</td>
<td>17</td>
<td>2</td>
<td>1.9</td>
<td>20</td>
<td>40%</td>
</tr>
<tr>
<td>Language and literacy</td>
<td>40</td>
<td>19</td>
<td>2</td>
<td>2.6</td>
<td>24</td>
<td>34%</td>
</tr>
<tr>
<td>Licensing</td>
<td>15</td>
<td>6</td>
<td>0</td>
<td>1.8</td>
<td>20</td>
<td>18%</td>
</tr>
<tr>
<td>Health</td>
<td>21</td>
<td>6</td>
<td>1</td>
<td>1.8</td>
<td>15</td>
<td>21%</td>
</tr>
<tr>
<td>Mental health (general)</td>
<td>19</td>
<td>7</td>
<td>5</td>
<td>2.0</td>
<td>17</td>
<td>21%</td>
</tr>
<tr>
<td>Mental health (specific disorders)</td>
<td>18</td>
<td>6</td>
<td>2</td>
<td>2.7</td>
<td>20</td>
<td>18%</td>
</tr>
<tr>
<td>Motivation/recognition</td>
<td>7</td>
<td>2</td>
<td>0</td>
<td>2.4</td>
<td>35</td>
<td>8%</td>
</tr>
<tr>
<td>Networking</td>
<td>9</td>
<td>1</td>
<td>0</td>
<td>2.3</td>
<td>15</td>
<td>10%</td>
</tr>
<tr>
<td>Parents and families</td>
<td>15</td>
<td>6</td>
<td>5</td>
<td>2.7</td>
<td>25</td>
<td>16%</td>
</tr>
<tr>
<td>Physical development &amp; disabilities</td>
<td>6</td>
<td>2</td>
<td>1</td>
<td>2.4</td>
<td>30</td>
<td>7%</td>
</tr>
<tr>
<td>Play activities</td>
<td>30</td>
<td>19</td>
<td>5</td>
<td>1.9</td>
<td>17</td>
<td>23%</td>
</tr>
<tr>
<td>School transition/kindergarten readiness</td>
<td>8</td>
<td>2</td>
<td>0</td>
<td>2.2</td>
<td>29</td>
<td>8%</td>
</tr>
<tr>
<td>Science and math activities</td>
<td>17</td>
<td>11</td>
<td>1</td>
<td>2.0</td>
<td>30</td>
<td>18%</td>
</tr>
<tr>
<td>Socialization (for children)</td>
<td>6</td>
<td>4</td>
<td>0</td>
<td>2.0</td>
<td>35</td>
<td>6%</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>40</td>
<td>29</td>
<td>10</td>
<td>2.4</td>
<td>20</td>
<td>30%</td>
</tr>
<tr>
<td>Multiple topics</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>4.5</td>
<td>21</td>
<td>NA</td>
</tr>
</tbody>
</table>

The most common way associations determine which trainings to provide is by getting feedback from members (75 percent). A quarter (26 percent) track licensing requirements against their training schedule to ensure the required safety training, such as CPR and first aid, is offered on a regular basis. Sixteen percent rely on feedback and recommendations from their licensor, other associations, providers, local Child Care Resource and Referral agencies (CCR&Rs), and evaluation forms to decide which trainings to offer. In nine percent of cases, a subgroup or an individual chooses which trainings to offer, such as the board, president or other association leader or staff member.
Nine associations (11 percent) reported offering the following statewide curriculum trainings: Essential Elements, Creative Curriculum, Building Cultural Connections, Program for Infant/Toddler Care, Project Exceptional, and School-age Care: Our Role and Purpose (each mentioned by one or two respondents).  

**Mentoring and coaching**

About half of the associations provide mentoring and coaching opportunities to their members. A third of those associations who do offer mentoring and coaching (19 percent of all) do so monthly or more often, and another quarter (13 percent of all) do so several times a year. Of those that provide mentoring and/or coaching, about two-thirds have informal mentoring processes, in which providers help each other. This can include phone calls, home visits, or sharing at meetings. In some cases, all new providers are paired with provider who is more experienced, but not necessarily trained to be a mentor. In other cases, coaching is done more ad hoc; providers call each other for help with specific situations. About a third have a formal process, in which trained mentors are assigned to work with new providers or those who request a mentor.

<table>
<thead>
<tr>
<th>Mentoring and coaching</th>
<th>N=93</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly or more</td>
<td>19%</td>
</tr>
<tr>
<td>Several times a year</td>
<td>13%</td>
</tr>
<tr>
<td>Annually</td>
<td>7%</td>
</tr>
<tr>
<td>Less than annually</td>
<td>9%</td>
</tr>
<tr>
<td>Never</td>
<td>53%</td>
</tr>
</tbody>
</table>

**Informal support**

Almost all (98 percent) encourage informal support among members, mostly on a monthly or more regular basis. Informal speakers are invited to meetings at 82 percent of associations, typically several times a year or annually. Information sessions on MN Professional Development System resources are provided by 64 percent of associations, typically several times a year or annually.

Associations in the south are more likely to invite informal speakers to meetings on a monthly basis (27 percent) than those in the metro area (6 percent).

---

8 Building Quality and Technical Assistance Center on Social Emotional Intervention for Young Children (TACSEI) were also mentioned by respondents; however Building Quality is not a training or curricula, and TACSEI is being offered in demonstration sites and is not yet statewide.
The frequency with which associations encourage information sharing and informal support among members is related to their size. Almost all (96 percent) large associations do this monthly, compared to two-thirds (69 percent) of small associations.

---

**19. Frequency with which informal professional development opportunities are provided**

<table>
<thead>
<tr>
<th></th>
<th>Informal support among members (N=94)</th>
<th>Informal speakers at meetings (N=93)</th>
<th>Information sessions on MN Professional Development System resources (N=89)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly or more</td>
<td>78%</td>
<td>16%</td>
<td>9%</td>
</tr>
<tr>
<td>Several times a year</td>
<td>18%</td>
<td>29%</td>
<td>26%</td>
</tr>
<tr>
<td>Annually</td>
<td>2%</td>
<td>25%</td>
<td>23%</td>
</tr>
<tr>
<td>Less than annually</td>
<td>0%</td>
<td>12%</td>
<td>7%</td>
</tr>
<tr>
<td>Never</td>
<td>2%</td>
<td>18%</td>
<td>36%</td>
</tr>
</tbody>
</table>
Attitudes and awareness related to professional development

Appropriateness of licensing requirements for members

Prior to or within the first year of being licensed, family child care providers must complete six to nine hours of training on child safety, and two hours of training on child development. They must also complete eight hours of training in specified subject areas on an annual basis. Association representatives were asked whether they felt these requirements were appropriate for their members.

A large majority of association representatives reported that the minimum number of training hours (87 percent) and pre-service requirements (83 percent) are appropriate licensing requirements for their members. Most of those who do not feel the requirements are appropriate believe their members get the required annual training hours easily. However, their opinions about the pre-service requirements were mixed with some reporting their members do not need pre-service training and others reporting that the requirement it is too low. A smaller majority (61 percent) believe the minimum preparation hours or credentials are appropriate. Most who do not feel the requirements are appropriate are concerned that providers could not get necessary trainings in their area in a timely manner or note that their members are not interested in being credentialed.

Association representatives in the north are less likely to feel the requirement for minimum preparation hours or credentials is appropriate than those in the south (42 percent vs. 73 percent).

<table>
<thead>
<tr>
<th>Percent of association representatives who report the following requirements are appropriate for their members</th>
<th>N=94</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum number of training hours</td>
<td>87%</td>
</tr>
<tr>
<td>Pre-service requirements</td>
<td>83%</td>
</tr>
<tr>
<td>Minimum preparation hours or credentials(^9)</td>
<td>61%</td>
</tr>
</tbody>
</table>

\(^9\) Currently, no credentials are required to hold a family child care license. Applicants must be at least 18 years of age and physically able to care for children. A license holder can qualify for a group family child care license with expanded license capacity with either one year substantial compliance as a family child care provider or a credential.
Awareness of child care resources

Association representatives were asked about their own awareness of a range of state, federal and international resources that support family child care providers. Almost all are aware of the Child Care Resource and Referral training and grants and the Minnesota Licensed Family Child Care Association. About three out of four are aware of the National Association of Family Child Care, Parent Aware and Minnesota Center for Professional Development (MNCPD) Registry. Over half are aware of the Minnesota Professional Development System, National Association for the Education of Young Children and Getting Ready or Building Quality. Association representatives are least aware of the International Family Child Care Association.

Association representatives in the south are less aware of Minnesota Licensed Family Child Care Association (84 percent), National Association of Family Child Care (61 percent), Parent Aware (52 percent) and National Association for the Education of Young Children (39 percent) than association representatives in the north and metro.

Associations with a membership fee are less aware of the National Association of Family Child Care than those without a membership fee (71 percent vs. 92 percent).

<table>
<thead>
<tr>
<th>Percent of association representatives aware of child care resources</th>
<th>N=94</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Care Resource and Referral (CCR&amp;R) training and grants</td>
<td>99%</td>
</tr>
<tr>
<td>Minnesota Licensed Family Child Care Association (MLFCCA)</td>
<td>95%</td>
</tr>
<tr>
<td>National Association of Family Child Care (NAFCC)</td>
<td>77%</td>
</tr>
<tr>
<td>Parent Aware quality rating system pilot</td>
<td>75%</td>
</tr>
<tr>
<td>Minnesota Center for Professional Development (MNCPD) Registry</td>
<td>70%</td>
</tr>
<tr>
<td>Minnesota Professional Development System</td>
<td>68%</td>
</tr>
<tr>
<td>National Association for the Education of Young Children (NAEYC)</td>
<td>61%</td>
</tr>
<tr>
<td>Getting Ready (in the metro area) or Building Quality (statewide)</td>
<td>54%</td>
</tr>
<tr>
<td>International Family Child Care Association</td>
<td>26%</td>
</tr>
</tbody>
</table>

Views of MNCPD process for approving trainers

Of those associations that are aware of MNCPD, 60 percent (35 percent of all) support the process used by MNCPD for approving trainers. By using approved trainers, a voluntary action, associations are assured the trainer meets certain standards. Associations that wish to co-sponsor trainings with a local Child Care Resource and Referral agency must use approved trainers. Sixty percent of associations that are aware
of MNCPD (40 percent of all associations) also encourage members to join the Professional Development Registry\(^{10}\), which assists providers in documenting their professional achievements, and recognizes providers when they achieve certain milestones.

- Associations in the metro area are more likely to support the MNCPD process for approving trainers (78 percent) than associations in the north (41 percent).
- Associations without a membership fee are more likely to support the process than those without (82 percent vs. 50 percent).
- Associations that encourage members to join the registry have existed for fewer years, on average, than those that don’t (16 years vs. 21 years).

Those that do not support the process for approving trainers feel the process takes too long or places too many requirements on those interested in pursuing approval. Associations in rural areas, in particular, feel the process limits the trainings they can provide because it is too difficult for local trainers to get approved and too costly to have metro-area trainers travel to rural areas. They feel that the trainer approval criteria may not accommodate trainers who may have experience or credentials that meet their association’s unique needs and forces metro-area standards on rural associations. Those that do not encourage their members to join the Registry provided the following reasons in an open-ended question: unfamiliar with the Registry and the benefits of joining, leave it up to their members to decide for themselves whether to join, or do not feel it is appropriate for their membership because it is too much work, they are in a remote area, or are a very small association.

**Policy positions of local associations**

One in five associations (20 percent) take official positions on Minnesota child care policies or issues. Here are the policy topics about which they take positions, though their positions on each topic were not shared:

- The Child and Adult Care Food Program
- Unionization of licensed child care providers
- Definition of infant age group in licensing statute and rule
- Child Care Assistance Program reimbursement rates
- Budget cuts that impact providers and/or families
- Fees for criminal background checks and other licensing issues
- Child development

\(^{10}\) The Professional Development Registry is hosted by the Minnesota Center for Professional Development. For more information on the Registry, visit [http://www.mncpd.org/registry.html](http://www.mncpd.org/registry.html).
Early childhood education and pre-Kindergarten

Quality rating and improvement system

Ideas for how DHS and the Minnesota Professional Development System can support associations

In response to an open-ended question about how DHS and the Minnesota Professional Development System can support associations, association representatives provided the following three suggestions.

Increase access to affordable training and approved trainers

About half of the association representatives reported challenges related to training, including finding approved trainers and providing affordable training to their members. Those in rural areas specifically noted challenges to accessing trainers and trainings in their area, either due to cost or transportation barriers. Respondents stated that the approval process through MNCPD for trainers is cumbersome and, as such, their area has few approved trainers, and it is costly to get approved trainers to travel to their community. Similarly, the process for associations to seek MNCPD approval for their trainings is viewed as burdensome. Though local trainers can be approved through MNCPD, association representatives may not be aware of this.

Though the MNCPD currently maintains an online list of approved trainers, association representatives noted they would like online and hard copy resource lists on which trainers are approved in which topics and their fees. In addition, they would also like to receive financial support to hire approved trainers; or for DHS, the Child Care Resource and Referral network (CCR&R), or the Minnesota Licensed Family Child Care Association (MLFCCA) to provide no or low cost trainings for their providers so they do not have to incur the expense of hiring and bringing trainers to their area.

Communicate with associations and providers

About a third of association representatives would like more direct communication pathways between providers and associations and DHS. About 20 representatives said they would like to hear about changes to laws or legislation that are being voted on and events for licensed providers, or be reminded about what benefits and services are available to help local associations and providers. Two people suggested providing this communication via a newsletter, both hard copy and online, and another suggested each association be assigned a contact person at DHS who could communicate directly with them and to whom they could go to for questions or concerns. Eight also said they would just like to be listened to, supported and have their hard work acknowledged. Two noted
that one way DHS could do this is support MLFCCA’s “provider of the year” recognition event.

**Update and consistently apply licensing requirements**

About a quarter of association representatives expressed concerns about the licensing requirements in statute and rule, the costs and how the law and rules are applied. They feel the requirements need to be updated. Nine representatives noted that the rules are inconsistently applied depending on who is the licensor. They would like to see the rules consistently applied and communicated so providers know what is expected of them and so that the rules do not change if the licensor changes or a provider moves to another county. Three feel the licensing fees are too high and limit who is able to become licensed. Two specifically mentioned that the current rules do not meet the needs of the families they serve and that the rules force family child care providers to operate like centers. Two representatives feel the requirements should be more stringent in regards to professional experience; for example, one felt that licensed providers should be required to have a Child Development Associate (CDA) to be licensed and another thought 12 hours of training annually was more appropriate than the current eight hour requirement.
Recommendations

The results of this statewide survey of family child care associations provide a profile of associations and information on the professional development opportunities they provide, perceptions and attitudes toward licensing requirements, and awareness of early childhood and child development organizations. Based on the results of this study and discussion with the study advisory committee, the researchers recommend the following to further support family child care associations and their members.

1. **Support local associations on their own terms, taking into account regional differences.**

Local associations are a valuable asset that connect family child care providers informally and advance the knowledge and skills of licensed and unlicensed home-based caregivers. However, they struggle with keeping their members involved and seem to have one foot in and one foot out of the professional development system. Though nearly all plan or host formal trainings, and most support the licensing requirements and MNCPD, others are, at times, at odds with the system, especially when it threatens their association’s independence or, in greater Minnesota, when they perceive metro-area rules being imposed on them. Efforts to assist associations and improve communication with them should acknowledge their role in the early childhood and school age care system and take into account that the consequences of licensing rules may vary by location in the state.

2. **Assist associations in accessing affordable training and approved trainers.**

The lack of approved trainers in some areas of the state and the cost of bringing trainers to outstate areas are two key inter-related issues requiring attention by DHS. These issues could be addressed by simplifying the process of approving trainers, providing grants or transportation stipends to associations to recruit approved trainers and providing lists of approved trainers to local associations to assist them in finding appropriate trainers. Other organizations that support family child care providers, including the Minnesota Licensed Family Child Care Association, may also be interested in pursuing these strategies.

3. **Communicate directly with associations.**

This study produced the first comprehensive list of local associations in the state. The Department of Human Services could use this list to open up two-way communication with the associations rather than relying solely on county family child care licensors to communicate directly with licensed providers. This communication could include information on legislation that may affect providers, events of interest to family child care association members and the resources available to assist local associations and providers.
Communication could be provided both in hard copy and online to reach those associations with limited Internet access. Other organizations that support family child care providers, including the Minnesota Licensed Family Child Care Association, may also be interested in pursuing these strategies.