

Creating an Accessible,  
Valley-Wide Child Care System

# Feasibility Study

---

2021



**Prepared for**

Walla Walla Early Learning Coalition  
500 Tausick Way  
Walla Walla, WA 99362  
[earlylearningwallawalla.org](http://earlylearningwallawalla.org)

**Prepared by**

Arrowleaf Consulting  
1857 Home Ave  
Walla Walla, WA 99362  
[arrowleafgroup.com](http://arrowleafgroup.com)

**Arrowleaf Consulting team**

Darin Saul  
Malea Saul  
Soren Newman  
Gemma Rivera



# Working group members

The following community members, employers, non-profit organizations, child care providers, and elected officials participated in monthly working group meetings.

<b>Angel Camacho</b>	Owner, Little Angels Bio Dome
<b>Beth Swanson</b>	Former director, Mom's Network
<b>Brooke Lovgren</b>	ECEAP Teacher, Dayton School District
<b>Eiledon McClellan</b>	Program Manager, Walla Walla Valley Early Learning Coalition
<b>Erika Lindholm</b>	VP Senior Business Lender – Team Manager, Craft 3
<b>Greer Buchanan</b>	Grants Manager, Blue Mountain Community Foundation
<b>Jan Nealey</b>	Dayton community member, early learning advocate
<b>Jennifer Beckmeyer</b>	Community Development Block Grant Coordinator, City of Walla Walla
<b>Jennifer Mayberry</b>	Walla Walla County Commissioner, small business owner
<b>Jessica Cook</b>	Executive director, Walla Walla Community College Foundation
<b>Julia Leavitt</b>	Program director, Sherwood Trust
<b>Kathryn Witherington</b>	Executive director, Downtown Walla Walla Foundation
<b>Kol Medina</b>	Executive director, Blue Mountain Community Foundation
<b>Kyle Tarbet</b>	Director, Walla Walla Valley Chamber of Commerce
<b>Maria Marin</b>	Licensed in-home child care provider
<b>Martha Lanman</b>	Director, Columbia County Public Health
<b>Meagan Anderson Pira</b>	Director of Early Learning, Children's Home Society of Washington
<b>Michelle Jenkins</b>	Nurse, Columbia County Health District
<b>Paul Ihle</b>	Social worker, Columbia County Health System
<b>Rob Blethen</b>	Executive Vice President, Baker Boyer Bank
<b>Ruth Triebwasser</b>	Family navigator, Children's Home Society of Washington
<b>Ryan Rundell</b>	Columbia County Commissioner
<b>Samantha Bowen</b>	Director of Early Learning & Family Engagement, Walla Walla Public Schools, Center for Children and Families
<b>Tabitha Haney</b>	Director, My Friends' House
<b>Terry Nealey</b>	Retired 16th District legislator
<b>Yazmin Bahena</b>	Walla Walla City Council Member, kindergarten teacher





# Contents

<b>Working group members .....</b>	<b>3</b>
------------------------------------	----------

<b>Introduction .....</b>	<b>8</b>
---------------------------	----------

Project participation .....	9
-----------------------------	---

Project coordination team.....	9
--------------------------------	---

Walla Walla Valley Early Learning Coalition.....	9
---	---

Arrowleaf Consulting .....	10
----------------------------	----

Working group .....	10
---------------------	----

Feasibility study goals and priorities	11
--	----

Project area .....	13
--------------------	----

Executive Summary .....	14
-------------------------	----

Data collection approach .....	22
--------------------------------	----

Interviews.....	22
-----------------	----

Focus groups.....	22
-------------------	----

Surveys.....	22
--------------	----

Existing data and case studies.....	28
-------------------------------------	----

<b>Situational overview .....</b>	<b>29</b>
-----------------------------------	-----------

Walla Walla and Columbia counties are child care deserts .....	29
---	----

Walla Walla Valley characteristics .....	33
--	----

Population.....	33	Few options in Dayton and Columbia County.....	70
Families and children.....	35	What child care options are most desired in Columbia County?.....	72
Income, poverty, and employment characteristics.....	36	What child care options are most desired in Walla Walla County? .....	74
The subsidies and middle-income dilemma .....	39	When family responsibilities affect work time .....	75
Child care costs.....	45	Parent interest in types of support employers could provide.....	77
<b>Family needs and interests .....</b>	<b>47</b>	<b>Employer needs and interests .....</b>	<b>80</b>
Employment and career impacts .....	48	Impacts on employers .....	80
Overview of challenges for families..	50	Current employer strategies.....	82
Subsidies .....	53	Employer interest in strategies.....	84
Dependent care flexible spending accounts .....	55	Child care onsite and availability of space.....	87
Ease or difficulty of accessing child care by age of children.....	57	Contracting with a third party for care.....	88
Children with disabilities .....	58	Types of support employers would find helpful .....	88
Seasonal needs.....	60	<b>Child care provider needs and interests.....</b>	<b>90</b>
Non-standard schedules .....	60	Waiting lists, wait times, and open slots .....	90
Distance to child care providers.....	62	Referrals, navigation, and communication.....	92
Transportation .....	64	Interest and capacity to serve more children .....	93
Logistics of multiple children .....	65		
Transportation from one child care arrangement to the next .....	65		
Communications, navigation, and resources for families.....	67		
Navigation and resources for Spanish-speaking families.....	68		
Parent cooperative preschool .....	68		

Interest in expanding hours of operation .....	96	Child care slots .....	114
Interest in providing sick child and back up care .....	98	Classrooms .....	115
Providers need more information about ECEAP and Head Start.....	98	Scenario 1: Child care for CCHS employees.....	115
Challenges .....	99	Goal .....	115
In-home providers .....	99	Overview .....	116
Unlicensed in-home care .....	101	Results .....	117
Low wages.....	103	Constraints and opportunities .....	118
Licensing .....	103	Scenario 2: A center in Dayton.....	119
Child care provider survey results on challenges.....	103	Goal .....	119
Interest in support and strategies to address problems and costs .....	105	Overview .....	119
Helpfulness of select supports.....	105	Results .....	120
Interest in partnering with other child care providers.....	106	Constraints and opportunities .....	121
Provider interest in partnering with employers.....	108	Scenario 3: Center-based child care in the city of Walla Walla .....	121
Interest by in-home providers in becoming a center.....	109	Goal .....	121
<b>Cost modeling scenarios.....</b>	<b>110</b>	Overview .....	121
Scenario overview .....	111	Results .....	123
Center-based model assumptions .	112	Constraints and opportunities .....	125
Licensing .....	112	Scenario 4: Home-based child care	125
Subsidy and tuition rates .....	113	Goal .....	125
Staff salaries and benefits.....	113	Overview .....	125
		Results .....	128
		Constraints and opportunities .....	129
		<b>Recommendations .....</b>	<b>130</b>
		Summary .....	131
		Recommendation rankings.....	134

Priority 1 recommendations.....	135
R1: Develop a new center in Dayton .....	135
R2: Expand capacity at existing private licensed centers in Walla Walla County.....	136
R3: Increase licensed provider capacity across both counties over the next 6 years.....	137
R4: Increase employer engagement .....	142
R5: Build navigation and in-person support across the system.....	145
R6: Improve communications and engagement with Spanish-speaking families .....	148
R7: Develop WWVELC as an independent nonprofit organization .....	149
R8: Increase resources.....	151
R9: Create enabling local policies	154
Priority 2 recommendations.....	155
R10: Bridge the 6-year subsidy eligibility gap for middle-income families .....	155

Priority 3 recommendations.....	156
R11: Implement multi-sectoral capacity building targeting rural areas.....	156
Priority 4 recommendations.....	158
R12: Implement multi-sectoral capacity building targeting infant and toddler care.....	158

## **Appendix I: Case Study Highlights 161**

## **Appendix II: Detailed Cost Models 164**

## **Appendix III: Funding Options .....168**

Federal funding .....	168
Washington State funding .....	170
Foundation funding .....	171
Impact investing and micro lending .....	173

## **Appendix IV: Available licensed child care .....174**

## **Appendix V: Resumen de las recomendaciones del estudio de viabilidad .....176**

# Introduction

Thanks to careful listening and much community involvement, we know the Walla Walla region, from Burbank to Dayton, is ready for bold action to improve access and affordability in our child care and early learning system.

The need for a feasibility study was identified in the Walla Walla Valley Early Learning Coalition (WWVELC) Early Learning Action Plan, which was developed through an 18-month process involving the City of Walla Walla, community stakeholders, and the National League of Cities.

To fund the study, the WWVELC, in partnership with the City of Walla Walla and Columbia County Health System (CCHS), applied for and received a Child Care Partnerships Grant from the Washington Department of Commerce, which they used to hire Arrowleaf Consulting to develop this feasibility study.

---

*El proceso de recopilación de datos de este estudio de viabilidad incluyó la participación de proveedores y familias de habla hispana. Un resumen de nuestras recomendaciones y sub-recomendaciones está disponible en español en la Sección V de este informe.*



# Project participation

---

## Project coordination team

The project coordination team met weekly to plan and discuss the feasibility study and coordinate activities. The coordination team consisted of

Eiledon McClellan, Walla Walla Valley Early Learning Coalition  
Paul Ihle, Columbia County Health System  
Jennifer Beckmeyer, City of Walla Walla  
Darin Saul, Arrowleaf Consulting  
Malea Saul, Arrowleaf Consulting

## Walla Walla Valley Early Learning Coalition

### Mission statement

The Walla Walla Valley Early Learning Coalition (WWVELC) leads the community to prioritize the care and education of young children through advocacy, education, and engagement.

### Vision

A community devoted to the wellbeing of young children and families.

### Priorities

- Build the capacity of the local early learning system.
- Empower families and the community to care for our youngest children.
- Champion early learning as a community development investment.

### History

The WWVELC was founded in 2008 with the primary goal of raising awareness of the importance of early childhood development from birth to five. In 2009, with grants from local funders, the WWVELC hired a full-time program coordinator, developed a strategic framework, and began holding regular meetings with agencies, non-profit organizations, and others with a common interest of promoting early learning and coordinating services for children and families. The Walla Walla Community College Foundation is the fiscal agent of the WWVELC.

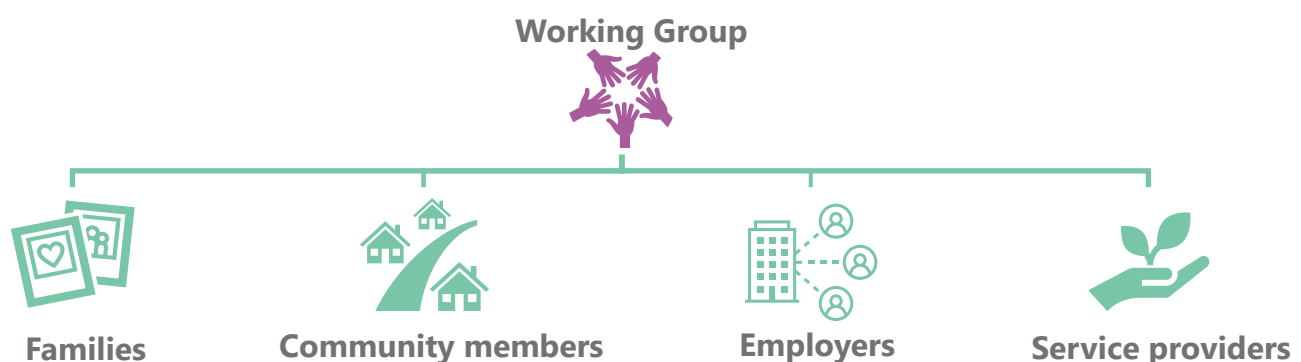


## Arrowleaf Consulting

This report was prepared by the Arrowleaf Consulting, which works with non-profits, agencies, and tribes to research, assess, plan, and resource efforts to create social value on community and regional scales.

## Working group

Throughout the feasibility study, the WWVELC held monthly meetings with a working group of local community members, employers, elected officials, representatives of non-profit organizations, and child care providers. The goal of this working group was to provide feedback and information and connect the effort to other sectors of the community. See Page 3 for a list of working group members.



## Feasibility study goals and priorities

---

The main goals of this study are to identify best strategies to

- 1) Reduce the out-of-pocket costs of early child care and education for families and
- 2) Reduce the upfront and operational costs of early child care and education for child care providers.

The WWVELC knows that many local employers and community organizations are committed to these goals. This feasibility study is intended to understand what each sector offers and what solutions will work best for the Walla Walla Valley. As part of the process, we identified specific strengths, gaps, and opportunities for expansion.

The feasibility study addressed the following priorities:

1

**Making the child care system accessible for all families, especially immigrant and undocumented families.**

2

**Increasing child care affordability for middle-income families who do not qualify for public financial assistance but cannot afford to pay the out-of-pocket cost for child care.**

3

**Increasing licensed child care availability in the extremely rural areas of our region.**

4

**Increasing new and existing child care providers' capacity to serve infants and toddlers.**



The study was also designed to address the following activities and questions:

### Inventory, assess, and analyze

- What resources, assets, and existing programs are available in our region?
- Are they being used to their full capacity?
- How could they be used to their full capacity?
- How could we expand these resources or make them more effective?

### Explore

- What have other similar cities, counties, and employers done to address child care and early education challenges?
- Which of these examples could be feasible in the Walla Walla region?
- What needs to be in place in our area for these initiatives to work?

### Listen to the community

- Families
- Child care providers (informal and licensed)
- Employers
- Other stakeholders

### Cost estimations and analysis

- What is the cost per child?
- What would be the cost for starting and maintaining a program?
- What would be the return on investment or cost savings over time?

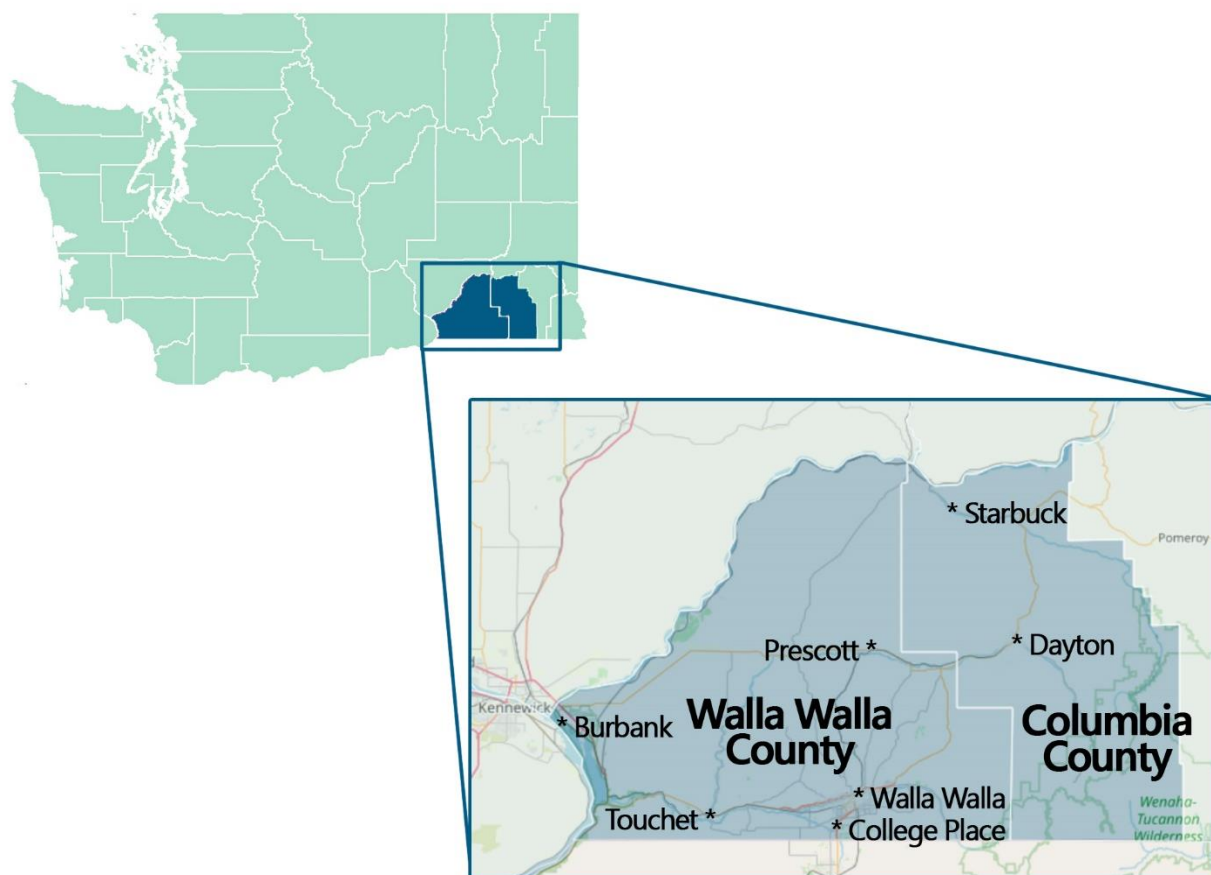
### Path to implementation

- What are the responsibilities and actions for each sector or stakeholder group to move recommended programs and initiatives forward?

## Project area

The feasibility study focused on Walla Walla and Columbia counties. We collected data across the study area that includes survey responses from families, providers, or employers in all of the towns identified in Figure 1. Based on discussions with the project coordination team and working group, we focused scenario development on the cities of Walla Walla and Dayton, which was seen as a manageable next step in the process that would build upon recent planning and community involvement meetings and have the most immediate impact.

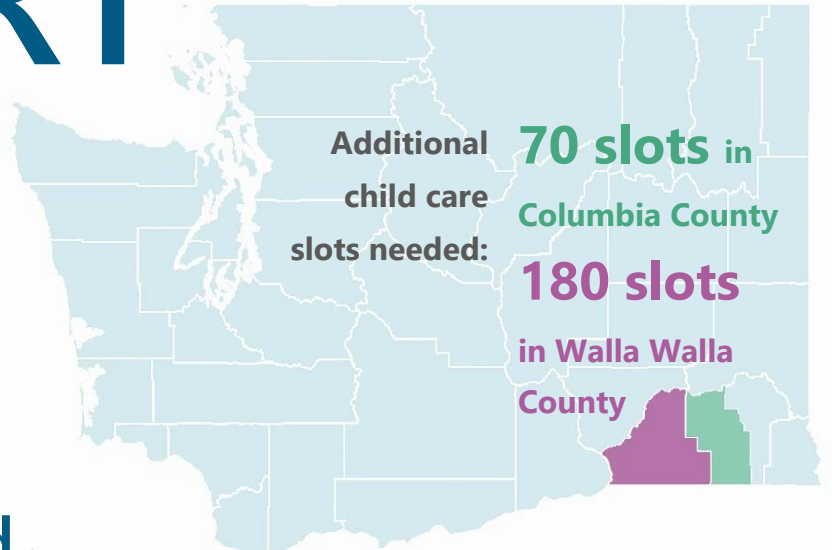
**Figure 1.** Project area



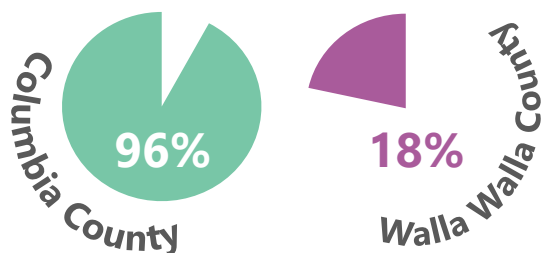
## Executive Summary

# WE LIVE IN A CHILD CARE DESERT

We do not  
have enough  
licensed child  
care slots to  
meet demand.



Percent of families that do not have  
the child care they need...



In Columbia County, three in-home  
providers closed in 2020-2021,  
pushing the county into a

## CHILD CARE CRISIS



*"We desperately need daycare in [Columbia] County." –Family survey respondent*



# THE SITUATION

## CHILD CARE IS EXPENSIVE...

Depending on operation size, salaries, and licensing level, the annual cost for centers to provide child care is...

**\$13,000-\$19,300/infant**

**\$8,800-\$12,300/toddler**

**\$7,000-\$9,300/preschooler**

**\$2,800-\$3,900/school-age child**



The average percent of two-parent family income required for full-time child care in the Walla Walla Valley is...

**20.1% for infants**

**17.6% for toddlers**

**15.1% for preschoolers**

*"You can't make it on one income, but you can't afford the child care to work."  
- Parent focus group participant*

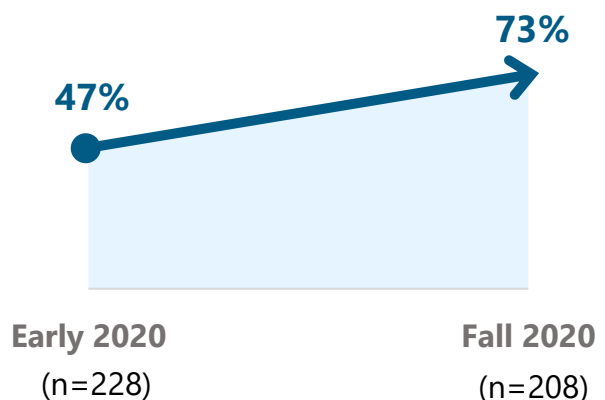
## ...AND THE COVID-19 PANDEMIC HAS MADE THINGS WORSE.

*"Finding infant care has been our biggest issue for our employees. Also, with school closures and zero tolerance on sickness at care centers, our employees are stuck choosing between work and their kids."*

*- Employer survey respondent*



The proportion of children whose families were unable to access affordable child care increased during the COVID-19 pandemic.

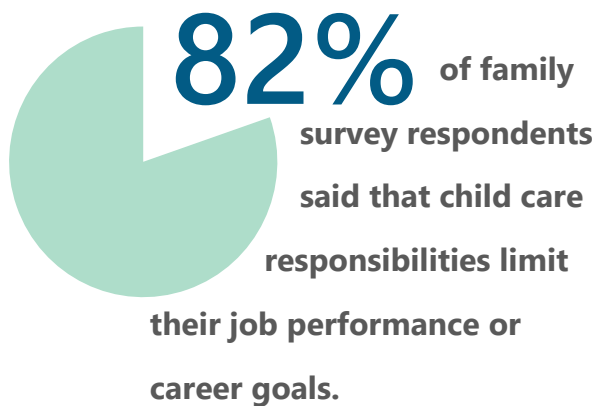
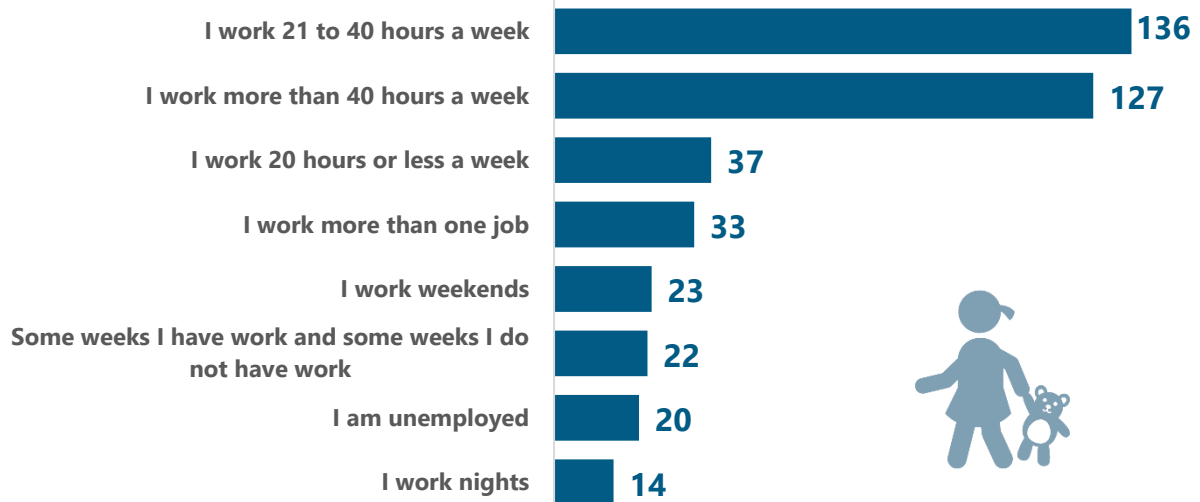


# FAMILY PERSPECTIVES

**77%** of family survey respondents said that finding affordable child care is a significant or moderate challenge for them (n=365).

**69%** said that finding child care at the times needed is a significant or moderate challenge for them (n=354).

## Many family survey respondents work more than 40 hours a week and some work weekends and nights (n=328)



### Because of child care difficulties

**47%** of parents have had to **limit their work hours** (n=359).

**47%** have had to **take time off work** (n=361).

**25%** have had to **quit a job** (n=358).

# EMPLOYER PERSPECTIVES

**15** out of 25 employer survey respondents are interested in offering a Dependent Care Flexible Spending Account, compared to 5 that already do.

**13** out of 25 employer survey respondents are very or moderately interested in working with a coalition to pool resources and carry out shared child care projects.

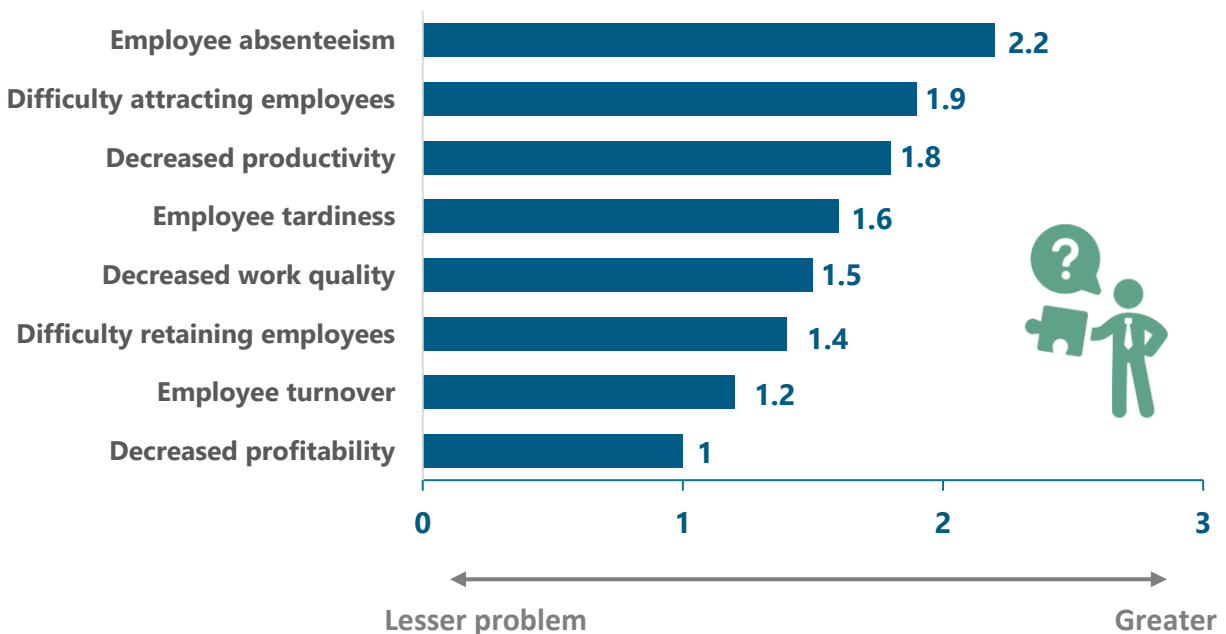
---

*"Employees view providing adequate child care benefits as increasingly important in rating us highly as a place to work."*

*– Employer survey respondent*

---

**When employees cannot access the child care they need, costs increase, productivity goes down, and it is harder to hire and maintain a workforce. Average amount issues are a problem (0-not a problem to 3-significant problem) for employers (n=27).**





# PROVIDER PERSPECTIVES

**6** providers typically have more than five children on their waiting lists (n=14).

**9** say it typically takes more than three months to have an opening to enroll a new child (n=14).

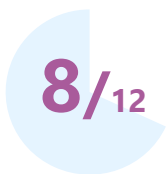
**10** have fewer than six openings a year (n=14).



**10** identified these issues as a significant or moderate challenge (n=13):

- Licensing and regulation fees and costs
- Reduced income related to COVID-19
- Inadequate paid sick leave
- Finding and retaining quality staff

## Child care providers are very or somewhat interested in



collaborating with other providers to form a local child care substitute service,



collaborating with other providers to form a health insurance cooperative, and



negotiating a reduced rate for the employees of a business in exchange for the business making a contribution to their child care program.

# COST MODELS

## Findings from our cost model analysis include:

- ◆ Caring for older children can help offset the cost of caring for younger children;
- ◆ The more classrooms, the more cost effective; and
- ◆ Paying living wages dramatically increases costs.

# RECOMMENDATIONS

## Priority 1: Making the child care system accessible for all families, especially immigrant and undocumented families

- 1 | Develop a new center in Dayton
- 2 | Expand capacity at existing private licensed centers in Walla Walla County
  - 2.1 | Develop consistent funding for small upgrades or other projects
  - 2.2 | Hire someone to help providers overcome expansion constraints
- 3 | Increase licensed provider capacity across both counties over the next 6 years
  - 3.1 | Expand and develop new centers
  - 3.2 | Expand ECEAP and Head Start
  - 3.3 | Recruit new in-home licensed providers in all areas of the Walla Walla Valley
  - 3.4 | Increase support for Spanish-speaking providers
  - 3.5 | Develop a pathway to licensing for undocumented child care providers
  - 3.6 | Develop a purchasing cooperative to reduce costs
  - 3.7 | Develop a facility cooperative to reduce costs and expand services
- 4 | Increase employer engagement
  - 4.1 | Connect employees to child care resources
  - 4.2 | Provide flexibility and support for employees with children
  - 4.3 | Provide economic support
  - 4.4 | Provide child care onsite or nearby
  - 4.5 | Support employee transportation needs
  - 4.6 | Subsidize and incentivize care, including sick, drop-in, backup, and overnight care
  - 4.7 | Participate in child care coalitions

- 5 | Build navigation and in-person support across the system
  - 5.1 Coordinate online resources to help everyone find what they need
  - 5.2 Develop a single online platform to connect families to child care
  - 5.3 Improve the referral system
  - 5.4 Create and support child care navigator positions
  - 5.5 Provide training, support, or resources to build organizational capacity
- 6 | Improve communications and engagement with Spanish-speaking families
  - 6.1 Use multiple communication modes and outlets
  - 6.2 Prioritize hiring bilingual staff
  - 6.3 Expand the Garrison Night School program
- 7 | Develop WWVELC as an independent nonprofit organization
  - 7.1 Hire a development director
  - 7.2 Hire navigators and support staff
  - 7.3 Expand WWVELC communication and coordination roles
- 8 | Increase resources
  - 8.1 Increase federal and state funding
  - 8.2 Increase funding and support from private foundations
  - 8.3 Develop a dedicated child care fund for the Walla Walla Valley
  - 8.4 Increase use of impact investing and micro lending
  - 8.5 Build capacity at existing groups to advance their mission related to child care
- 9 | Create enabling local policies

## Priority 2: Increasing child care affordability for middle-income families

- 10 | Bridge the 6-year subsidy eligibility gap for middle-income families
  - 10.1 Increase subsidies for middle-income families
  - 10.2 Increase use of tax credits and dependent care flexible spending accounts
  - 10.3 Encourage and support parent cooperatives



### Priority 3: Increasing licensed child care availability in the extremely rural areas of our region

- 11 | Implement multi-sectoral capacity building targeting rural areas
  - 11.1 Incentivize and support child care in rural areas
  - 11.2 Target rural areas with information specific to their needs
  - 11.3 Hire a navigator to work with rural families, employers, and providers
  - 11.4 Engage employers who have employees who live and work in rural areas
  - 11.5 Build capacity at existing organizations working in rural areas
  - 11.6 Access funding to support child care efforts in rural areas

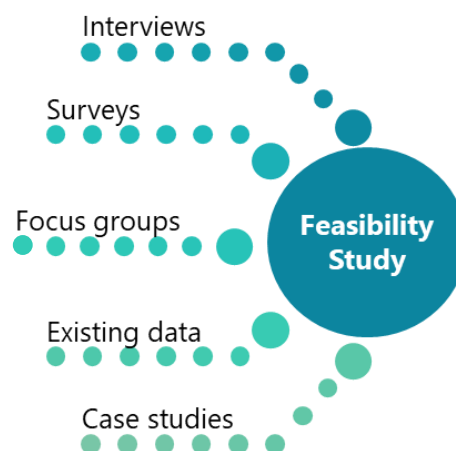
### Priority 4: Increasing new and existing child care providers' capacity to serve infants and toddlers

- 12 | Implement multi-sectoral capacity building for infant and toddler care
  - 12.1 Incentivize in-home providers to serve infants and toddlers
  - 12.2 Employers provide a subsidy to employees with infants and toddlers
  - 12.3 Offer free space to existing providers if they serve more infants and toddlers
  - 12.4 Expand Early ECEAP and Early Head Start
  - 12.5 Build navigation and referral capacity for infant and toddler care
  - 12.6 Develop employer consortiums and expand community coalitions
  - 12.7 Employers provide access to dependent care flexible spending accounts and other programs

# Data collection approach

## Interviews

We conducted 26 in-depth, semi-structured interviews involving 29 participants from Columbia and Walla Walla counties. Interviewees included child care providers, parents, employers, public school district leaders, representatives of non-profit organizations, and other key informants. The interviews ranged from 45-90 minutes, were audio recorded with permission, and transcribed to facilitate analysis.



## Focus groups

Between March and May 2021, we completed seven focus groups that involved a total of 36 participants. Each focus group engaged a different stakeholder group: parents whose preferred language is English, parents whose preferred language is Spanish, current child care providers, retired child care providers, and Walla Walla Community College students enrolled in an early learning program course taught in Spanish. One focus group in Dayton included a mix of parents, providers, and staff from local agencies. We facilitated the focus groups remotely over Zoom and in person in places where COVID-19 pandemic safety precautions could be followed. Focus groups lasted approximately one hour and were audio recorded with permission. Focus group participants were offered a \$25 per hour incentive for participation, made possible by the Blue Mountain Community Foundation.

## Surveys

We conducted four surveys using convenience sampling that were administered online via SurveyMonkey. The surveys administered to parents and providers were available to participants in English and Spanish. We analyzed the data and created figures using Microsoft Excel software. Survey incentives were made possible by the Blue Mountain Community Foundation.

## WWVELC working group survey

In March 2021, we surveyed the working group to identify the mailing lists, listservs, social media outlets, and stakeholder groups we used subsequently to recruit participants for other data collection activities. Ten working group members participated.

**Table 1.** Employer survey respondent characteristics

	n	%
<b>Sector/Industry</b>		
Agriculture	2	7%
Banking/Finance	2	7%
Child care	3	11%
Education	1	4%
Health care	4	15%
Manufacturing	1	4%
Non-profit	9	33%
Restaurant	2	7%
Retail	1	4%
Other	3	11%
<b>Position</b>		
Owner	8	32%
Director/Executive Director	10	40%
Human Resources	4	16%
Other	3	12%
<b>County</b>		
Columbia	11	50%
Walla Walla	9	41%
Both Walla Walla and Columbia	1	5%
Benton	1	5%
<b>Operates in &gt; 1 location</b>		
	6	29%
<b>Operates ≥ 1 shifts outside of the standard 8am-5pm workday</b>		
	11	52%
<b>Number of employees</b>		
Less than 5	7	33%
5 to 19	6	29%
20 to 49	1	5%
50 to 99	1	5%
100 to 499	3	14%
500 to 1,000	2	10%
More than 1,000	1	5%
<b>Gross revenue</b>		
Less than \$50,000	3	16%
\$50,000 to \$199,999	3	16%
\$200,000 to \$999,999	6	32%
\$1 million to \$4.9 million	3	16%
\$5 million to \$10 million	0	0%
More than \$10 million	4	21%

**Employer survey**

In May 2021, we surveyed employers in Walla Walla and Columbia counties—including businesses, non-profit organizations, public entities, and others—to understand the extent and nature of the child care-related challenges their organization and employees experience, their interest in participating in different options to address challenges, the benefits they currently provide, and perspectives on what families need. The Walla Walla and Dayton chambers of commerce, Downtown Foundation, and WWVELC working group members sent an invitation and the survey link to businesses in the two counties. Blue Mountain Community Foundation sent the survey link to its list of nonprofit employers. Twenty-seven employers participated in the survey.

Table 1 summarizes employer survey respondent characteristics.

## Child care provider survey

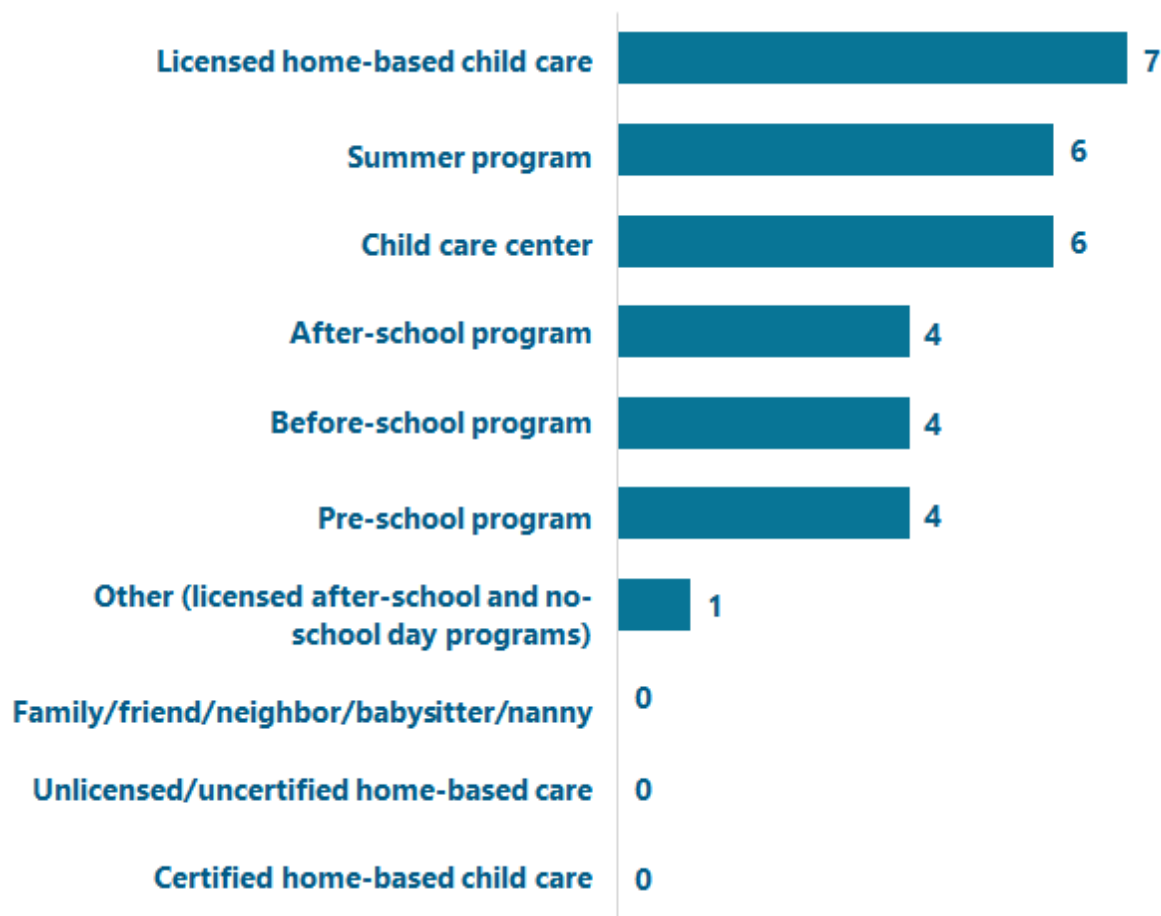
In May 2021, we surveyed child care providers in Walla Walla and Columbia counties regarding their current and potential capacity to enroll additional children, challenges, interest in expanding into additional types of care and participating in various options to address local child care and early education challenges, the benefits they currently provide, and perspectives on what families need. Steering committee members from the WWVELC, City of Walla Walla, and CCHS sent the survey to their child care provider contact lists. The survey was also forwarded through email lists of WWVELC working group members. We offered a \$10 incentive to all child care respondents. Fifteen child care providers participated in the survey: 13 (87% opted to take the English version and 2 (13%) took the survey in Spanish.

Table 2 and Figure 2 show child care provider survey respondent characteristics.

**Table 2.** Child care provider survey respondent characteristics

	n	%
<b>Position</b>	15	
Owner	10	67%
Director	7	47%
Manager	2	13%
Lead teacher	2	13%
<b>Number of employees</b>	15	
1 employee	4	27%
2 to 5 employees	7	47%
6 to 10 employees	2	13%
More than 10 employees	2	13%
<b>Location</b>	12	
Burbank	1	8%
Dayton	1	8%
Prescott	1	8%
Walla Walla	7	58%
Pomeroy	1	8%
Walla Walla year-round, College Place summer only	1	8%

**Figure 2.** Type of child care that best describes child care provider survey respondents' organizations, by number of respondents. They could select all that applied. (n=15)



### Family survey

Finally, in May 2021, we surveyed families in Walla Walla and Columbia counties to build on a study completed in 2020, which focused on Walla Walla Valley families' child care needs and challenges before and during the COVID-19 pandemic.<sup>1</sup> The May 2021 survey we implemented gathered demographic information, level of ease or difficulty accessing care for children by age group, times child care is needed, types of additional child care-related services families need, child care-related challenges, employment impacts of child care-related challenges, and helpfulness of various potential employer benefits, among other topics. WWVELC working group members sent out a personalized note and survey link through their email lists, newsletters, and social media accounts to

<sup>1</sup> Janning, Michelle. December 2020. Walla Walla Valley Early Learning Coalition 2020 Child Care Survey Results.



recruit survey participants. We offered a \$10 incentive to all family survey respondents. A total of 401 respondents participated in the family survey: 392 (98%) opted to take the English version and 9 (2%) opted to take the Spanish version.

Tables 3 and 4 characterize the family survey respondents. While the survey was conducted as a convenience sample, respondents represented a range of demographic characteristics. They were also distributed across both counties: 52% percent live in Columbia County and 48% live in Walla Walla County (n=340). Figure 3 reports the industry or sector of family survey respondents' employment. Five out of 16 in the "other" category identified themselves as stay-at-home parents.

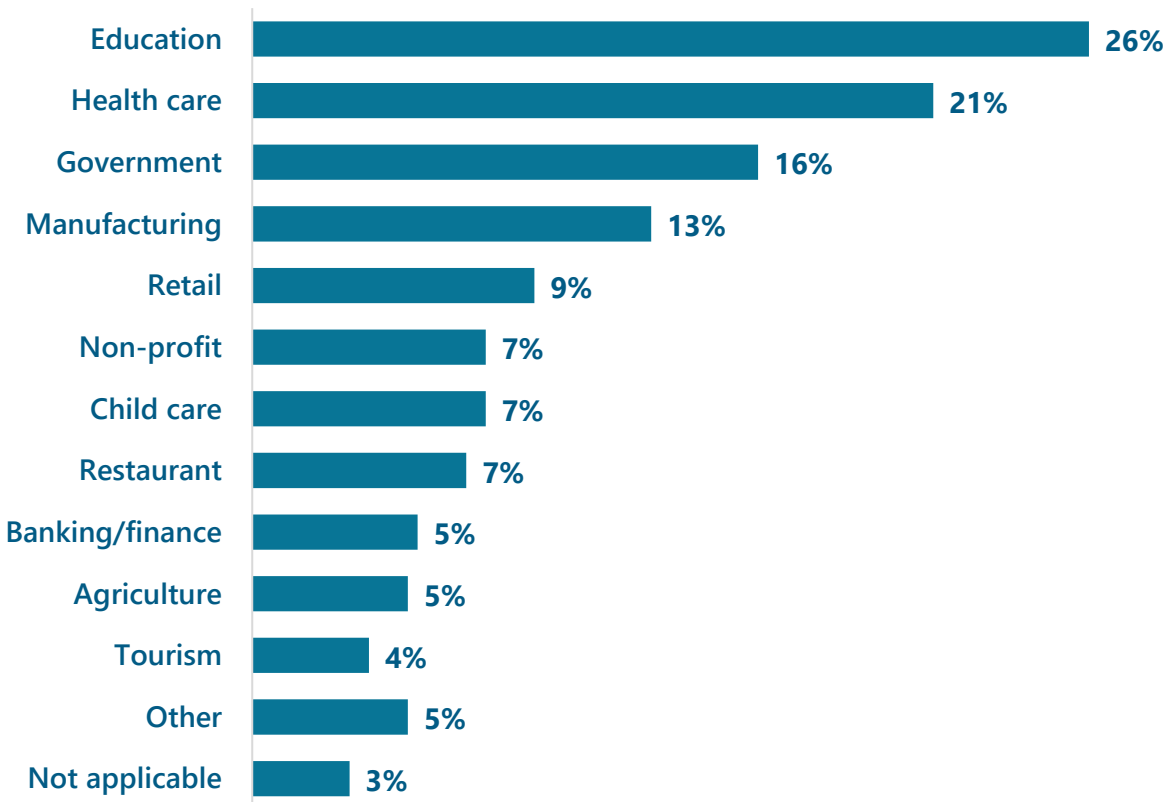
**Table 3.** Location of family survey respondents

Location	n	%
<b>Columbia County</b>	<b>177</b>	<b>52%</b>
Dayton	99	55%
Starbuck	28	16%
Elsewhere in Columbia County	49	27%
<b>Walla Walla County</b>	<b>163</b>	<b>48%</b>
Burbank	5	3%
City of Walla Walla	103	64%
College Place	27	17%
Dixie	3	2%
Lowden	6	4%
Prescott	6	4%
Touchet	4	2%
Waitsburg	3	2%
Elsewhere in Walla Walla County	5	3%
<b>Other county</b>	<b>3</b>	<b>1%</b>

**Table 4.** Demographic characteristics of family survey respondents

Demographic characteristic	n	%
<b>Race</b>		
African American/Black	27	8%
Asian/Pacific Islander	38	12%
Native American/American Indian/Alaska Native	45	14%
White	218	68%
Other	13	4%
<b>Ethnicity</b>		
Hispanic	119	38%
Non-Hispanic	196	62%
<b>Primary language in household</b>		
English	281	87%
English and Spanish equally	20	6%
Spanish	20	6%
Other	2	0.6%
<b>Sex</b>		
Male	50	21%
Female	190	79%
<b>Marital status</b>		
Now married	207	64%
Divorced	38	12%
Widowed	29	9%
Never married/single	31	10%
Separated	18	6%
<b>Annual household income</b>		
Under \$25,000	31	10%
\$25,000-\$49,999	77	25%
\$50,000-\$74,999	88	28%
\$75,000-\$100,000	73	23%
More than \$100,000	44	14%
<b>Live in one location year-round</b>	307	97%

**Figure 3.** Family survey respondents' industry or sector of employment (they could select all that applied) (n=327)



### Existing data and case studies

We gathered and analyzed existing data to help inform scenario development and recommendations. Existing data included sources such as the US Census Bureau for demographic data and local and state reports for child care.

We also used case studies of efforts in other places to identify best practices, suitable program models and strategies, and lessons learned from other projects around the country. Many case studies were suggested by WWVELC working group members over the length of this project. The coordination team and working group discussed several during the February 2021 project meeting. For a brief overview of five case studies, see Appendix I.

# Situational overview

## Walla Walla and Columbia counties are child care deserts

According to the 2020 Washington Department of Commerce “Washington Child Care Industry Assessment,” Walla Walla and Columbia counties are both “child care deserts”—that is, areas that do not have sufficient supply of licensed child care slots to meet demand.<sup>2</sup> The “Washington Child Care Industry Assessment” estimates that 96% of families in Columbia County and 18% of Walla Walla County families do not have the child care they need (Table 5). The Industry Assessment estimates an additional 180 slots (140 center-based and 40 family home child care slots) are needed in Walla Walla County and an additional 40 slots (30 center-based and 10 family home child care slots) are needed in Columbia County to address the problem (Table 5).<sup>3</sup>

## Definitions

“**Infants**” are children ages birth to 11 months old.

“**Toddlers**” are children one to two years old.

“**Preschool-age**” refers to children ages three to five years old.

“**School-age**” refers to children from Kindergarten to 12 years old.

---

<sup>2</sup> Washington Child Care Industry Assessment Volume I, ICF June 2020 pgs. 113-114.

<sup>3</sup> Washington Department of Commerce, Washington Child Care Industry Assessment, Volume I: Report, pages 113-114, published June 30, 2020

**Table 5.** Total families and estimated slots needed by location, Washington Child Care Industry Assessment, 2020

	Columbia County	Walla Walla County
<b>Families</b>	<b>96</b>	<b>2,380</b>
Families with inadequate supply	92	432
Percent with inadequate supply	96%	18%
<b>Estimated additional slots needed</b>	<b>40</b>	<b>180</b>
Center based slots	30	140
Family home care slots	10	40

The “Washington Child Care Industry Assessment” provides the total number of slots needed by county but does not specify the number of slots needed by age group. Therefore, we calculated the percentage of referrals by age group that Child Care Aware of Washington made to families in the study area in 2019 and used those percentages to estimate the minimum number of additional center-based slots needed to meet demand by age group (Table 6).<sup>4</sup>

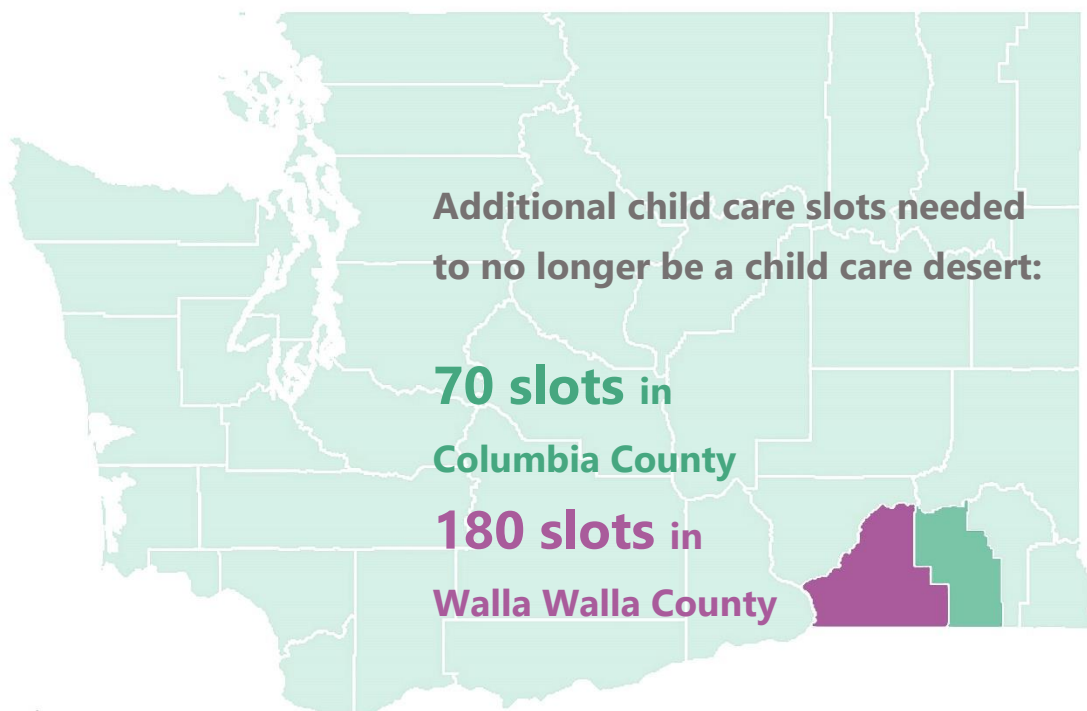
**Table 6.** Percent of referrals by age group in 2019 and resulting number of additional center-based slots needed by age to meet goal

Age	% of referrals made	# slots in Walla Walla County	# slots in Columbia County
Infants	28%	39	8
Toddlers	36%	50	11
Preschool age	17%	24	5
School age	19%	27	6
<b>Total</b>	<b>100%</b>	<b>140</b>	<b>30</b>

<sup>4</sup> ChildCare Aware of Washington (2021) Child Care in Walla Walla County, and Child Care in Columbia County, accessed via <https://childcareawarewa.org/wp-content/uploads/2021/01/2020-County-Data-Walla-Walla.pdf> and <https://childcareawarewa.org/wp-content/uploads/2021/01/2020-County-Data-Columbia.pdf>



Table 7 shows the number of child care providers and total capacity of those providers in Columbia and Walla Walla counties in 2019.<sup>5</sup> A list of licensed providers is in Appendix IV. Importantly, this table and the “Washington Child Care Industry Assessment” do not reflect recent changes in the child care landscape, including the effects of the COVID-19 pandemic. For example, Table 7 shows three family home-based child care providers in Columbia County in 2019; however, we know that these licensed home-based providers have since closed, leaving no current licensed in-home providers in Dayton. These three providers served about 30 children of all ages. This brings the current estimated need up to 70 slots total between center-based and family home-based care.



Source: 2020 Washington Child Care Industry Assessment and current study

---

<sup>5</sup> ChildCare Aware of Washington, 2019 Data Report: Trends, Child Care Supply, Cost of Care, & Demand for Referrals, accessed via <https://childcareawarewa.org/wp-content/uploads/2020/04/2019-Data-Report.pdf>

**Table 7.** Child care supply and capacity in terms of total slots by county, 2019

	Columbia County		Walla Walla County	
	Total # of providers	Total # of slots	Total # of providers	Total # of slots
<b>Type of care</b>	3	30	45	1,274
Center	0	0	11	760
Family home	3	30	27	274
School age only	0	0	7	240
<b>Schedule of care</b>				
Full time only	0	0	8	103
Part time only	0	0	5	160
Either full time or part time	3	30	30	833
Full year	3	30	36	902
School year only	0	0	6	254
Rotating	1	6	9	234
Temporary	3	30	13	200
Evening	0	0	5	51
Overnight	0	0	0	0
Weekend	0	0	2	18
<b>Subsidy acceptance</b>	1	6	36	832
State government	1	6	32	790
Local government	0	0	0	0
Other	0	0	2	70
Provider Financial Assistance	0	0	16	454
<b>Additional features</b>				
Drop in	3	30	23	439
Transportation to school	0	0	16	640
Speaks English & additional language	1	12	23	732
<b>Child age (duplicated)<sup>6</sup></b>				
Infants	3	6	24	118
Toddlers	3	6	32	262
Preschool	3	14	34	604
School age	3	10	33	685

<sup>6</sup> Duplicated slots indicate that the same child could be occupying multiple of the total slots because they are receiving care from different places at different times of the day or different days of the week. The child is then counted for the multiple slots they occupy at various places.

Though the primary goal is to increase the availability of child care in the Walla Walla Valley, it is also important to develop and encourage quality of providers. Early Achievers is the Washington State quality resource and tracking system that providers can use to enhance the quality of child care they provide and show their commitment to providing quality care.<sup>7</sup> In Walla Walla and Columbia counties, 80% of providers are enrolled in the program.<sup>8,9</sup> Table 8 shows the number of providers in each county by type of child care.

**Table 8.** Early Achievers participation by type of child care, September 2020

	Columbia County	Walla Walla County
<b>Total</b>	<b>1</b>	<b>36</b>
Centers	0	8
Family home	0	20
Head Start & state preschool sites	1	8

## Walla Walla Valley characteristics

To understand the needs and barriers for child care in Walla Walla Valley, it is important to understand the demographic context of the population. Many valley-wide population assessments have been completed in recent years characterizing the trends and changes in population characteristics in depth.<sup>10</sup> Therefore, instead of repeating those efforts for this study, what follows is a brief synopsis of the most relevant trends.

### Population

According to the US Census, as of 2019, 60,760 people lived in Walla Walla County, reflecting a 3.4% population growth since 2010.<sup>11</sup> Over 21% of the population in Walla

<sup>7</sup> For more information, visit the Washington State Department of Children, Youth & Families, Early Achievers website at <https://www.dcyf.wa.gov/services/earlylearning-childcare/early-achievers>

<sup>8</sup> Child Care Aware of Washington (2021) Child Care in Walla Walla County, accessed via <https://childcareawarewa.org/wp-content/uploads/2021/01/2020-County-Data-Walla-Walla.pdf>

<sup>9</sup> Child Care Aware of Washington (2021) Child Care in Columbia County, accessed via <https://childcareawarewa.org/wp-content/uploads/2021/01/2020-County-Data-Columbia.pdf>

<sup>10</sup> Examples include the WWVELC Cares for Kids Data Project and the Walla Walla Public Schools 2019 Head Start/ECEAP Community Needs Assessment

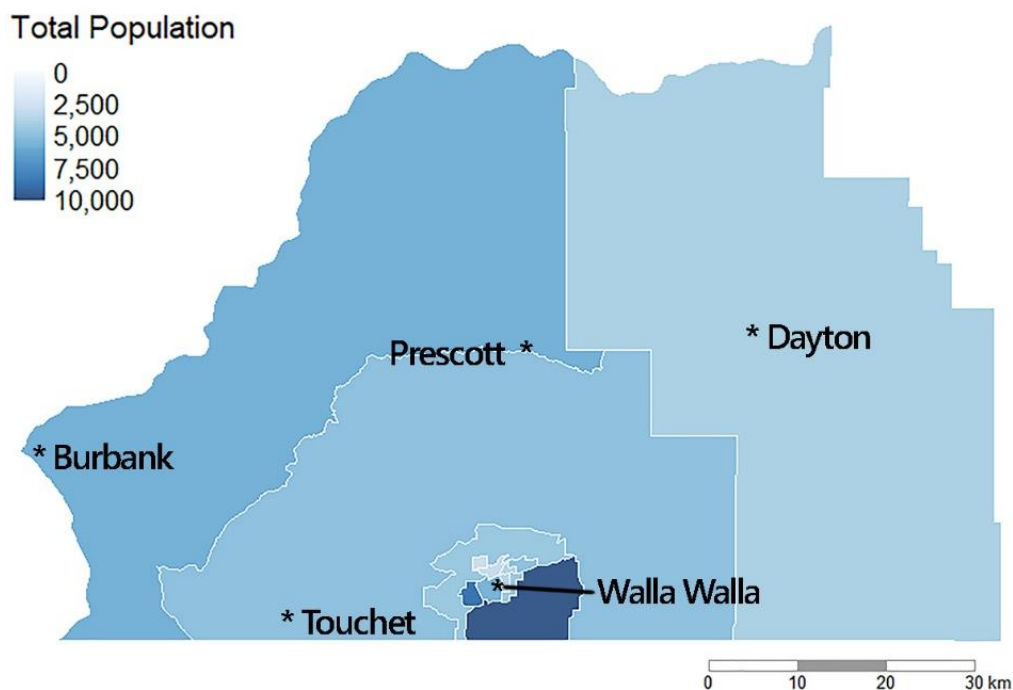
<sup>11</sup> US Census Bureau, QuickFacts: Walla Walla County, Washington, accessed via [census.gov/quickfacts](https://www.census.gov/quickfacts/)

Walla County was Hispanic and/or Latinx, 19% of the population 5 years old and older spoke a language other than English at home, and 10% of the population was not born in the United States in 2019.

Columbia County has about 1/15<sup>th</sup> of the population that Walla Walla County has, with an estimated 3,985 people living there in 2019.<sup>12</sup> Unlike Walla Walla County, the population in Columbia County has decreased by about 2.3% since 2010. In 2019, less than 8% of the population in Columbia County was Hispanic and/or Latinx, 9% of the population 5 years old and older spoke a language other than English at home, and 7.4% of the population was not born in the United States.

Figure 4 shows the total population by census tract for Walla Walla and Columbia counties in 2019.

**Figure 4.** Total population by census tract, 2019<sup>1</sup>



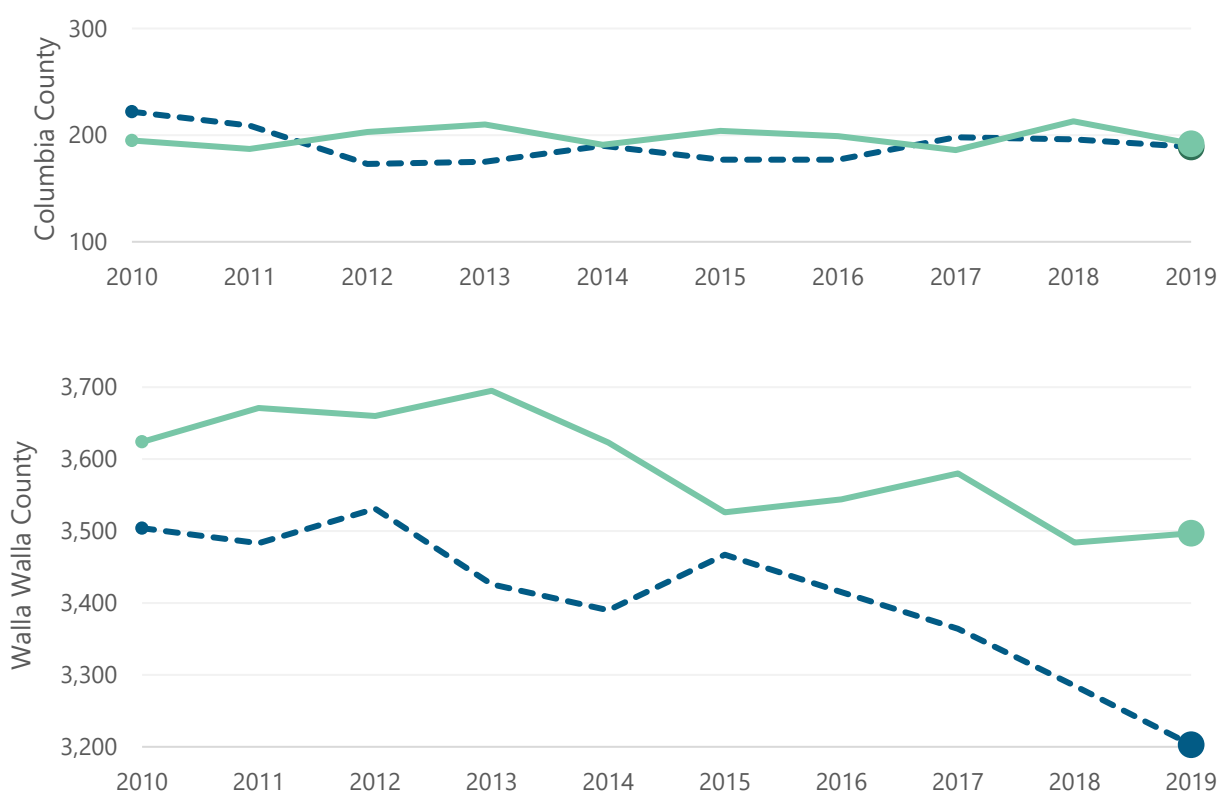
<sup>12</sup> US Census Bureau, QuickFacts: Columbia County, Washington, accessed via [census.gov/quickfacts](https://www.census.gov/quickfacts)

## Families and children

In 2019, an estimated 15,761 families lived within the study area: 14,678 in Walla Walla County and 1,083 in Columbia County.<sup>13</sup> The location of families follows the trends of the general population, with a larger concentration around the city of Walla Walla than in the rest of the project area.

From 2010 to 2019, an average of 650 babies in Walla Walla County and 35 babies in Columbia County were born each year. Figure 5 shows the number of children under 5 and between the ages of 5-9 for Columbia and Walla Walla counties every year from 2010 to 2019.<sup>14</sup> In Columbia County, the number of children in these age categories held steady, while in Walla Walla County, both the overall numbers of births and children in these age categories decreased.

**Figure 5.** Population under 5 and ages 5-9 by county, age group, and year



<sup>13</sup> US Census Bureau, 2015-2019 American Community Surveys, 5-year estimates, retrieved from data.census.gov

<sup>14</sup> US Census Bureau, County Population by Characteristics: 2010-2019: Annual County Resident Population Estimates by Age, Sex, Race, and Hispanic Origin, retrieved from census.gov/



## Income, poverty, and employment characteristics

In 2019, the median income was \$57,858 in Walla Walla County and \$53,423 in Columbia County, and per capita income was \$29,035 in Walla Walla County and \$36,551 in Columbia County. The disparities between the median and per capita income indicate that while there are households in higher-income categories, a greater proportion of households in the study area are in middle and low-income categories.

An estimated 12.7% of the population in Walla Walla County and 12.3% of the population in Columbia County lived at or below poverty levels in 2019. For comparison, Table 9 displays what poverty income was in 2020 based on household size and number of children.<sup>15</sup>

**Table 9.** Federal poverty thresholds by family size and number of children, 2020

Size of family unit	Related children under 18 years								
	None	One	Two	Three	Four	Five	Six	Seven	Eight+
Two people:									
Householder <65	\$17,331	\$17,839	-	-	-	-	-	-	-
Householder 65+	\$15,644	\$17,771	-	-	-	-	-	-	-
Three people	\$20,244	\$20,832	\$20,852	-	-	-	-	-	-
Four people	\$26,695	\$27,131	\$26,246	\$26,338	-	-	-	-	-
Five people	\$32,193	\$32,661	\$31,661	\$30,887	\$30,414	-	-	-	-
Six people	\$37,027	\$37,174	\$36,408	\$35,674	\$34,582	\$33,935	-	-	-
Seven people	\$42,605	\$42,871	\$41,954	\$41,314	\$40,124	\$38,734	\$37,210	-	-
Eight people	\$47,650	\$48,071	\$47,205	\$46,447	\$45,371	\$44,006	\$42,585	\$42,224	-
Nine or more	\$57,319	\$57,597	\$56,831	\$56,188	\$55,132	\$53,679	\$52,366	\$52,040	\$50,035

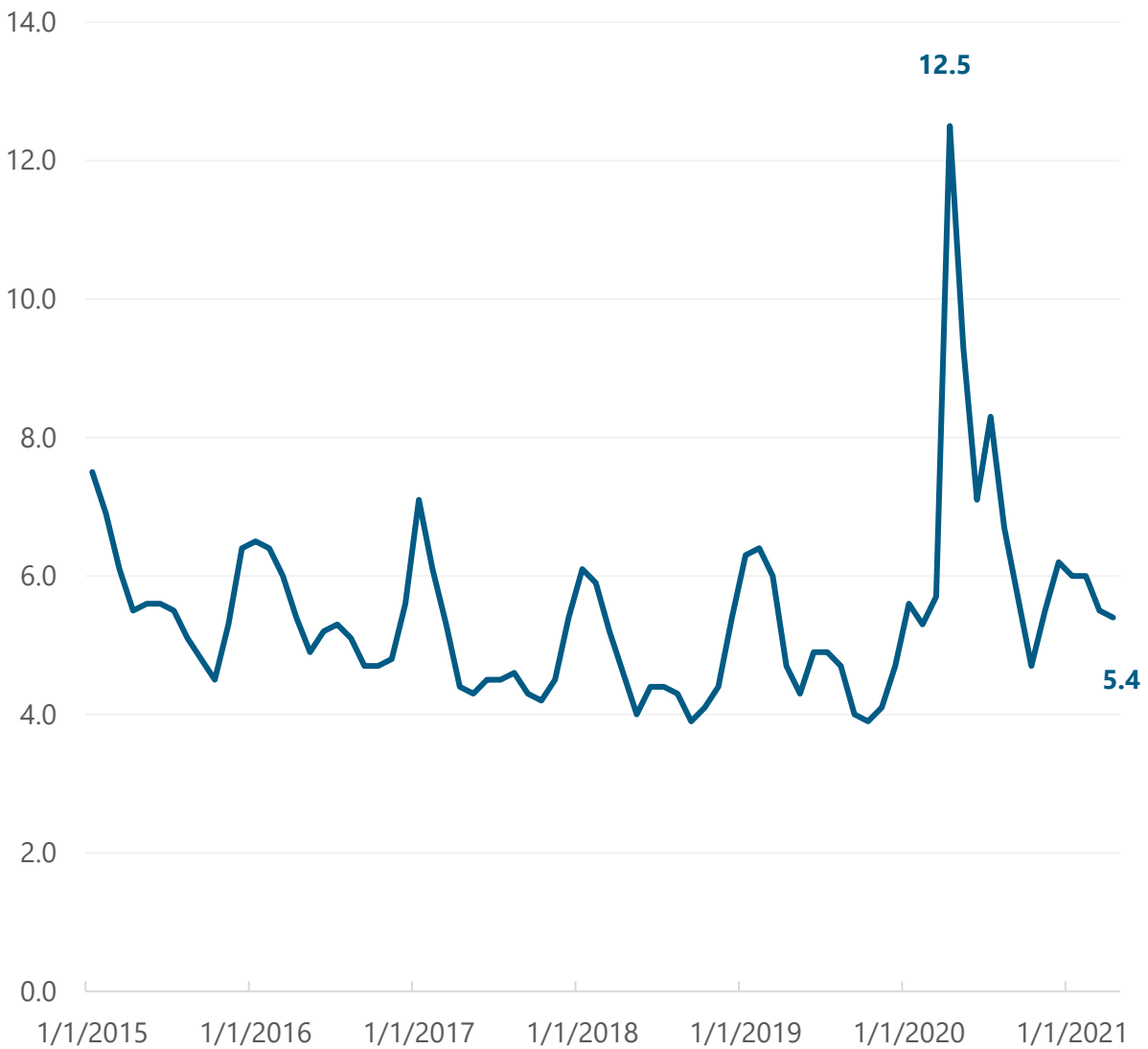
In December 2019, before the COVID-19 pandemic, the unemployment rates in the study area were low, although higher than for the state and country. The unemployment rate was 5.7% in Columbia County and 4.8% in Walla Walla County compared to 4.3% for the state as a whole and 3.4% for the United States.<sup>16</sup> The US Bureau of Labor

<sup>15</sup> US Census Bureau, Poverty Thresholds, accessed via [www.census.gov/data/tables/](http://www.census.gov/data/tables/)

<sup>16</sup> U.S. Bureau of Labor Statistics, Western Information Office, Walla Walla, WA Economy at a Glance, accessed via [https://www.bls.gov/regions/west/wa\\_wallawalla\\_msa.html](https://www.bls.gov/regions/west/wa_wallawalla_msa.html)

Statistics reports trends in unemployment by “area,” which includes Walla Walla and Columbia Counties. During the initial months of the pandemic, unemployment in the area skyrocketed to 12.5%, but near the end of 2020 and start of 2021, unemployment rates had returned to pre-pandemic levels (Figure 6).

**Figure 6.** Unemployment rates in Walla Walla area, 2015 to March 2021



Top employers in the Walla Walla Valley are in diverse sectors and represent a variety of work patterns and employee needs (Table 10).

**Table 10.** Top 25 employers in Columbia and Walla Walla counties, 2019<sup>17</sup>

Columbia County		Walla Walla County	
1	Columbia County Health System	1	Broetje Orchards
2	Ski Bluewood	2	Tyson Fresh Meats, Inc.
3	Dayton Public Schools	3	Providence St. Mary Medical Center
4	Columbia Pulp	4	Washington State Penitentiary
5	Columbia County	5	Walla Walla School District #140
6	USACE (Little Good Dam)	6	Whitman College
7	Seneca Foods Corporation	7	U.S. Dept. of Veterans Affairs
8	Warren Orchard	8	Walla Walla Community College
9	Broughton Land Company	9	Packing Corp. of America / Boise Paper
10	Dayton Mercantile	10	City of Walla Walla
11	Vestas Americas/Upwind	11	Walla Walla University
12	Northwest Grain Growers	12	Key Technology, Inc.
13	City of Dayton	13	U.S. Army Corps of Engineers
14	WDFW	14	Wal-Mart
15	Best Western	15	Walla Walla County
16	Chief Springs	16	Walla Walla Clinic
17	Columbia County Public Transportation	17	Washington Odd Fellows Home
18	Columbia Straw	18	College Place School District #250
19	Elk Drug	19	Banner Bank
20	Seimens	20	Valley Residential Services
21	Phoenix Pulp and Polymer	21	Nelson Irrigation Corporation
22	Starbuck School District	22	Baker Boyer Bank
23	Dayton Dental	23	J.R. Simplot Company
24	Blue Mountain Chiropractic	24	Walla Walla Nursing Co., Inc.
25	Dayton Tractor & Machine	25	Regency at the Park

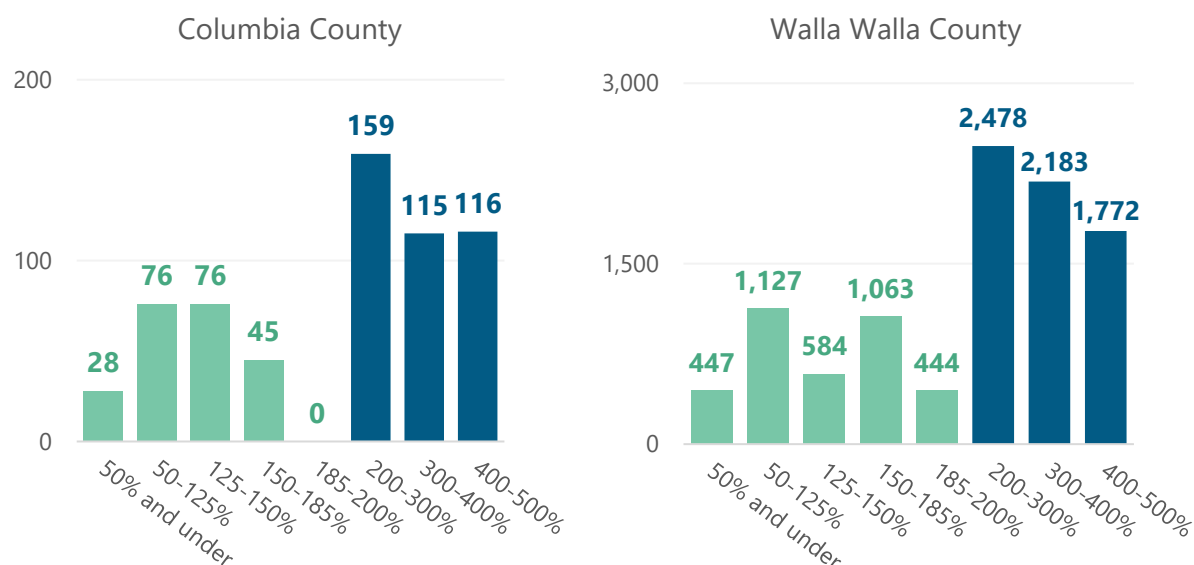
<sup>17</sup> Port of Walla Walla, Walla Walla County Largest Employers, 2019, accessed at [https://www.portwallawalla.com/images/pdf/ec\\_profile/ec\\_profile/charts/chart23.pdf](https://www.portwallawalla.com/images/pdf/ec_profile/ec_profile/charts/chart23.pdf) and Port of Columbia County, 2019, Columbia County Largest Employers, accessed at <https://www.portofcolumbia.org/wp-content/uploads/2020/01/Largest-Employers-2019.pdf>

## The subsidies and middle-income dilemma

Poverty rates are particularly important because they currently determine eligibility for subsidy programs. During this project, the State of Washington expanded eligibility and amount paid for subsidies. While these improvements are important, especially to low-income and middle-income families and the providers who serve them, expanded eligibility will initially only benefit a small percentage of those who need this resource.

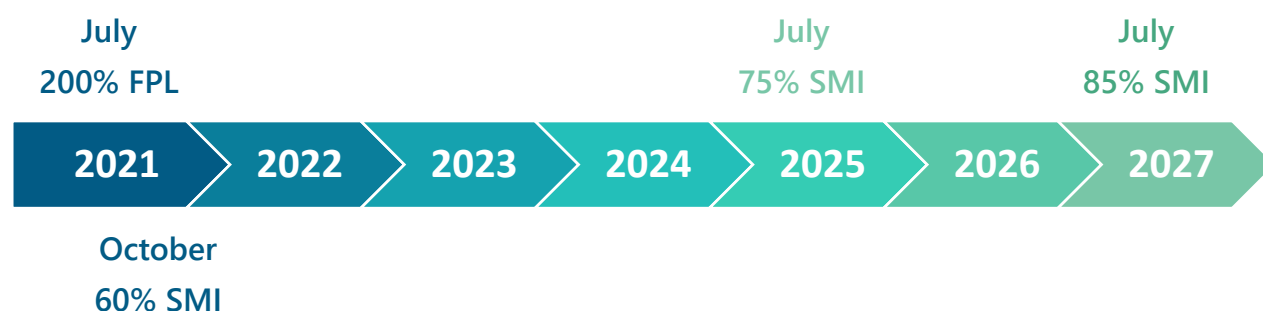
To qualify for the Working Connection Child Care (WCCC) subsidy beginning July 1, 2021, the family must live in Washington State, be a US citizen or legal resident, have income at or below 200 percent of the federal poverty level (FPL) when applying or 220% when reapplying, and the parent must be employed or in school fulltime.<sup>18</sup> The big change for the initial increases this summer includes a cap on the co-pay that families will be required to pay. Eligible families who currently pay a tiered co-pay depending on income will now pay no more than a \$115 co-pay. Figure 7 shows the number of families that fall in each income category as a percent of the federal poverty level (FPL), with green bars indicating families who are eligible for subsidy.

**Figure 7.** Number of families by ratio of income to federal poverty level by county, 2019. The green bars on the left of each chart capture the number families who are eligible for subsidies.



<sup>18</sup> Further eligibility requirements and information can be found at [www.dcyf.wa.gov/services/earlylearning-childcare/getting-help/wccc](http://www.dcyf.wa.gov/services/earlylearning-childcare/getting-help/wccc)

## Subsidy eligibility timeline



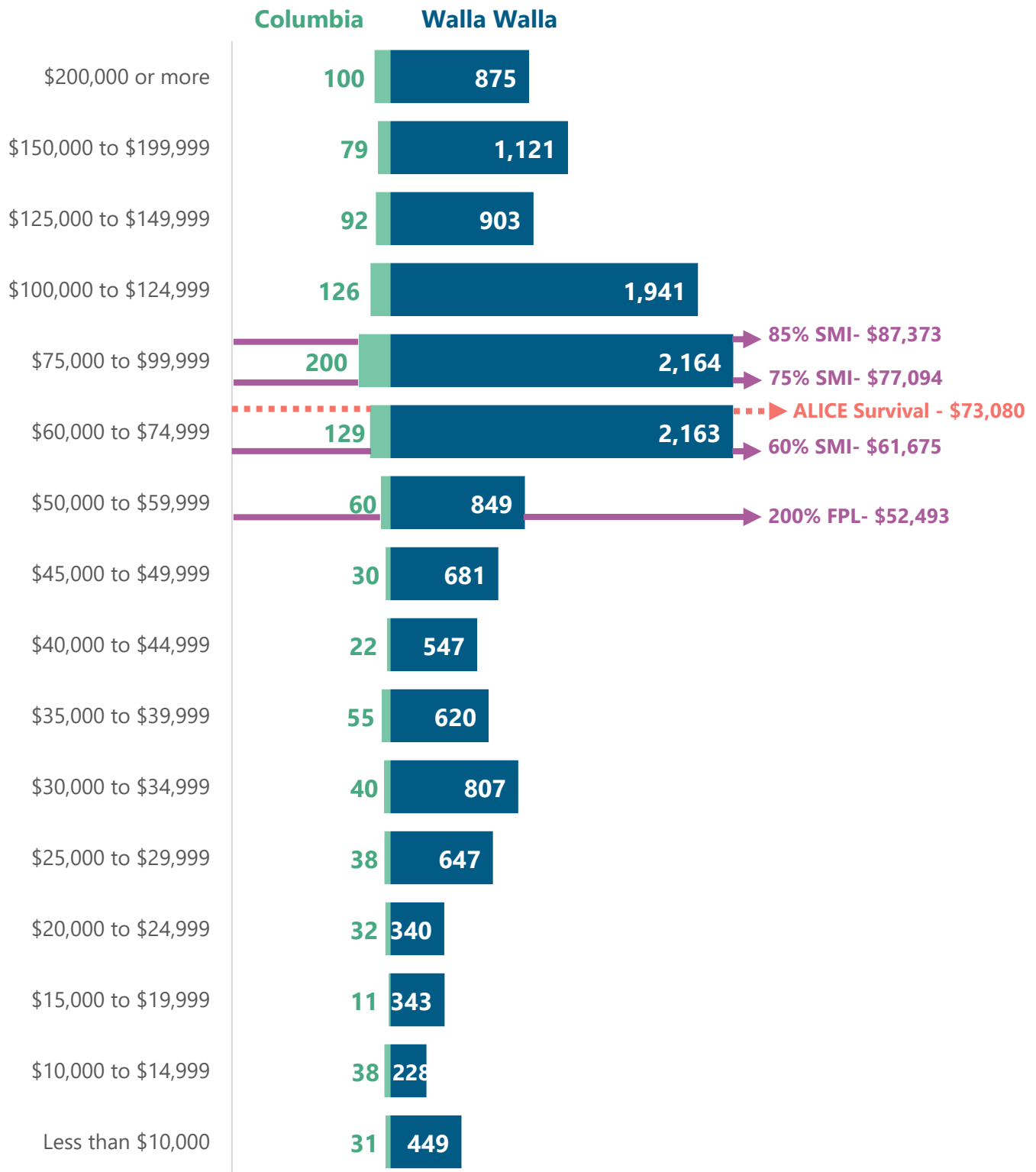
Eligibility will continue to expand for the next 6 years as indicated by Table 11. Starting October 1, 2021, eligibility will be determined by the state median income (SMI) instead of federal poverty level. This will increase the income limit for subsidy eligibility by about \$10,000. Additional expansions of eligibility will occur in 2025 and 2027. Figure 8 shows the number of families that fell in each income range in 2019 with arrows showing where the expansion levels will be. Since the SMI changes based on household size, the arrows reflect the eligibility range for a family of four.

**Table 11.** Child care subsidy eligibility expansion plan and resulting maximum eligible income for some families

Date of implementation	Child care eligibility (income at or below)	Max eligible income (based on 2021 FPL and SMI)	
		Two adults, one child	Two adults, two children
Current	200% FPL	\$41,664	\$52,493
October 1, 2021	60% SMI	\$51,804	\$61,675
July 1, 2025	75% SMI	\$64,755	\$77,094
July 7, 2027	85% SMI	\$73,389	\$87,373



**Figure 8.** Number of families in Columbia and Walla Walla counties by 2019 annual income with indicators of where subsidy eligibility thresholds will be in the various phases for a family of four



Some middle-income households can be characterized as Asset Limited, Income Constrained, Employed (ALICE) households. These families make more than the federal poverty level (FPL) but do not make enough to cover the basic costs of living. The United for ALICE Research Center provides county-level estimates for the basic costs of living and the proportion of households that they calculate to be living in the ALICE range.

The ALICE threshold is calculated based on the ALICE Household Survival Budget for each county. The ALICE Household Survival Budget is *“The minimal estimate of the total cost of household essentials — housing, child care, food, transportation, health care, and a smartphone plan, plus taxes and a miscellaneous contingency fund equal to 10% of the budget.”*<sup>19</sup> These county-based budgets are then used to calculate the number of ALICE families by filtering out the number of families who make more than FPL but less than the survival budget. The survival budget estimates costs by the age and number of people given cost estimations of adding people to a household of one adult (Table 12). Table 13 shows the breakdown of the survival budgets for Columbia and Walla Walla counties. ALICE households are the households that make less than the amounts provided in the “Annual Total” but over FPL for the family size (Table 9). Figure 8 shows also includes an arrow indication of the ALICE Survival budget for a family of four for comparison to the subsidy eligibility thresholds.

**Table 12.** Additional costs associated with adding one person by age to a household of one adult

Age of additional household member	Columbia County	Walla Walla County
+1 Adult	\$12,317	\$13,756
+1 Senior	\$15,381	\$15,871
+1 Infant	\$15,720	\$20,109
+1 Preschooler	\$16,008	\$18,801
+1 School-age	\$10,490	\$11,797

<sup>19</sup> United for ALICE, Research Center, Washington: 2018 County Profiles, retrieved from <https://www.unitedforalice.org/county-profiles/washington>

**Table 13.** ALICE Survival Budgets for Columbia and Walla Walla counties based on household size, 2018

	Single Adult	One Adult, One Child <sup>20</sup>	One Adult, One in Child Care <sup>21</sup>	Two Adults	Two Adults, Two Children	Two Adults, Two in Child Care <sup>22</sup>
<b>Columbia County</b>						
Housing	\$561	\$626	\$626	\$626	\$833	\$833
Child Care	\$0	\$237	\$607	\$0	\$473	\$1,238
Food	\$268	\$463	\$387	\$557	\$931	\$813
Transportation	\$346	\$504	\$504	\$518	\$815	\$815
Health Care	\$144	\$358	\$358	\$358	\$581	\$581
Technology	\$55	\$55	\$55	\$75	\$75	\$75
Miscellaneous	\$157	\$242	\$279	\$243	\$402	\$484
Taxes	\$196	\$179	\$254	\$298	\$315	\$482
Monthly Total	\$1,727	\$2,664	\$3,070	\$2,675	\$4,425	\$5,321
Annual Total	\$20,724	\$31,968	\$36,840	\$32,100	\$53,100	\$63,852
Hourly Wage	\$10.36	\$15.98	\$18.42	\$16.05	\$26.55	\$31.93
<b>Walla Walla County</b>						
Housing	\$592	\$665	\$665	\$665	\$885	\$885
Child Care	\$0	\$284	\$867	\$0	\$569	\$1,625
Food	\$307	\$529	\$443	\$637	\$1,064	\$929
Transportation	\$346	\$504	\$504	\$518	\$815	\$815
Health Care	\$144	\$358	\$358	\$358	\$581	\$581
Technology	\$55	\$55	\$55	\$75	\$75	\$75
Miscellaneous	\$166	\$261	\$324	\$259	\$438	\$554
Taxes	\$212	\$218	\$346	\$335	\$387	\$626
Monthly Total	\$1,822	\$2,874	\$3,562	\$2,847	\$4,814	\$6,090
Annual Total	\$21,864	\$34,488	\$42,744	\$34,164	\$57,768	\$73,080
Hourly Wage	\$10.93	\$17.24	\$21.37	\$17.08	\$28.88	\$36.54

<sup>20</sup> Includes costs for one adult and one school age child

<sup>21</sup> Includes costs for one adult and one infant

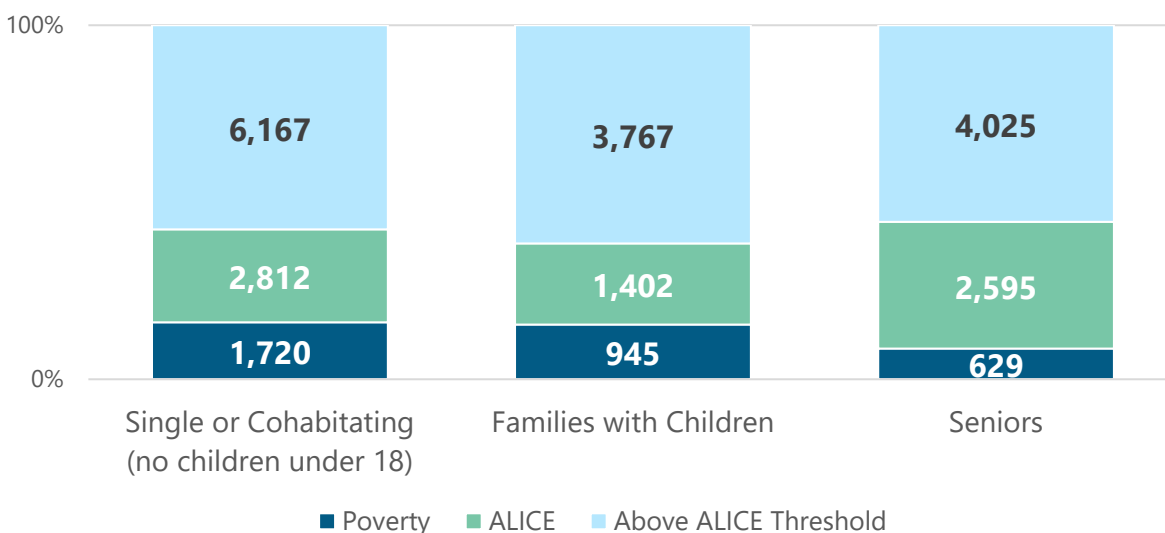
<sup>22</sup> Includes costs for two adults, one infant, and one preschooler

In 2018, 27.3% of households in Columbia County and 27.6% of households in Walla Walla County were ALICE households compared to 23% of Washington households.<sup>23</sup> From 2010 to 2019, the number of ALICE households in Walla Walla County increased 22.2% to 6,164 households, while the number of households living below poverty only increased 1.3% to 3,189 households. The proportion of ALICE households within the county increased from 23.5% in 2010 to 27.6% of all households in 2019.

Similarly, in Columbia County, the number of ALICE households increased 26.6% to 481 households, while households in poverty decreased by 13.2% to 236 households. The proportion of ALICE households within the county increased from 21.9% in 2010 to 27.4% in 2019.

Figure 9 shows the number of ALICE households in 2018 in the project area along with the number living above the ALICE threshold and below the poverty level. This data suggests that 1,402 households with children cannot afford to pay the full cost of child care and potentially do not qualify for subsidies.

**Figure 9.** Total households **Living Below Poverty**, **within ALICE** threshold, and **Above ALICE Threshold**, by Family Type in Columbia and Walla Walla counties, 2018



<sup>23</sup> United for ALICE, Research Center, Washington: 2018 County Profiles, retrieved from <https://www.unitedforalice.org/county-profiles/washington>

The average percent of two-parent family income required for full-time child care in Walla Walla Valley is

**20.1% for infants**

**17.6% for toddlers, and**

**15.1% for preschoolers**

Source: Walla Walla Cares for Kids Data Project

The average family survey respondent pays

**\$1,011** every month  
for child care.



Mean: \$1,011

Median: \$800

Mode: \$2,000

As Figure 8 shows, until the subsidy threshold expansion in 2025, a family of four with a household income between \$61,675 and \$73,080 does not qualify for subsidies and does not have enough income to cover their basic needs as determined by the ALICE survival budget. After the expansion in 2025, and then even more after 2027, the middle-income families that currently do not qualify for subsidies and also do not have enough income to cover basic costs of living, will mostly be eligible for subsidies. This changes the situation for middle-income families, although not fully for six years.

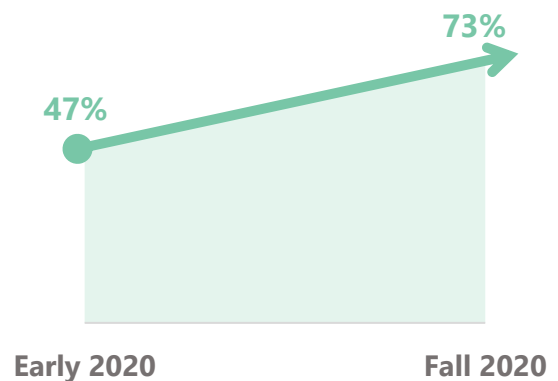
Subsidies are a big step for middle-income families; however, these families still must have access to licensed child care to use them, and licensed child care is currently in short supply. The increase in eligibility will result in substantially increasing the need for licensed care.

### Child care costs

Access to affordable child care is big problem for many families and has become even more so during the COVID-19 pandemic (Figure 10).

The cost of child care can also be understood as a percentage of family income. The US Department of Health and Human Services recommends limiting

**Figure 10.** The proportion of children whose families are unable to access affordable child care increased during the COVID-19 pandemic



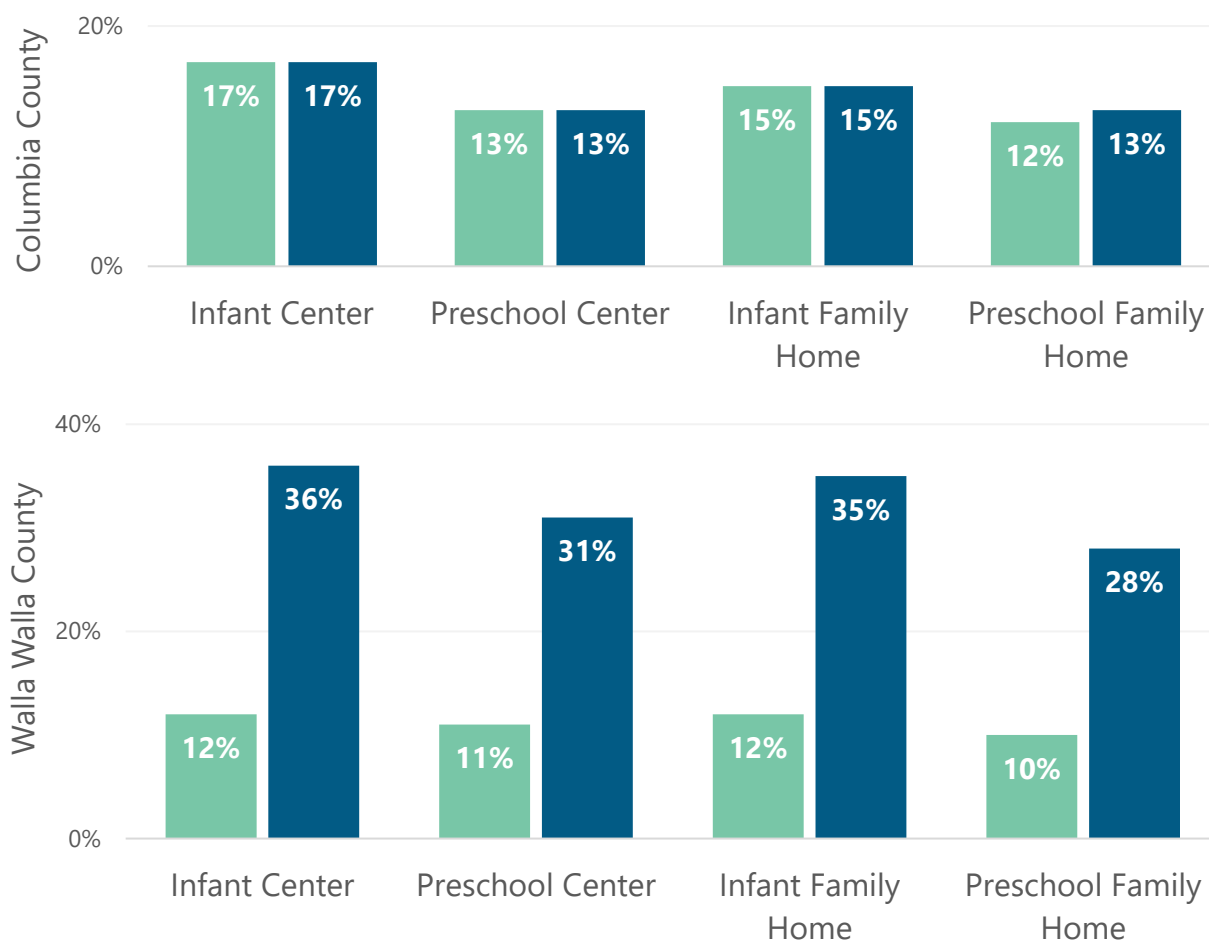
Source: Walla Walla Valley Early Learning Coalition 2020 Child Care Survey

family co-payments to 7% of family income.<sup>24</sup> The percentage is much higher than that in both counties. The impact of child care on single parents is particularly evident in Walla Walla County as shown in Figure 11.<sup>25</sup>

**Table 14.** Median monthly cost of licensed child care by age and type in Walla Walla County<sup>1</sup>

Age	Family-home	Center
Infant	\$758	\$1275
Toddler	\$758	\$1023
Preschool	\$655	\$869

**Figure 11.** Percent of **two-parent household** and **single-parent household** income required for full-time care for one child at median price in 2020, by county, age, and care type



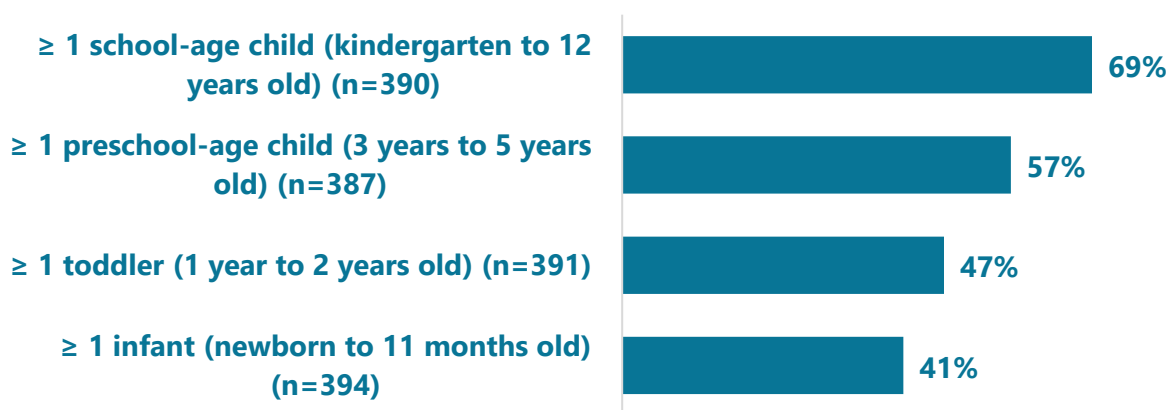
<sup>24</sup> Start Early, Working Connections Child Care Co-Payment Reform, January 2021, accessed via <https://startearly.org/app/uploads/2021/01/StartEarly-WA-Family-Co-Pay-Reform-Jan-11.pdf>

<sup>25</sup> Washington Department of Commerce, Washington Child Care Industry Assessment, Volume I: Report, pages 115-116, published June 30, 2020, accessed via [deptoocommerce.app.box.com/s/z61nky97huonpggq34of4ky68kvmtllx9](https://deptoocommerce.app.box.com/s/z61nky97huonpggq34of4ky68kvmtllx9)

# Family needs and interests

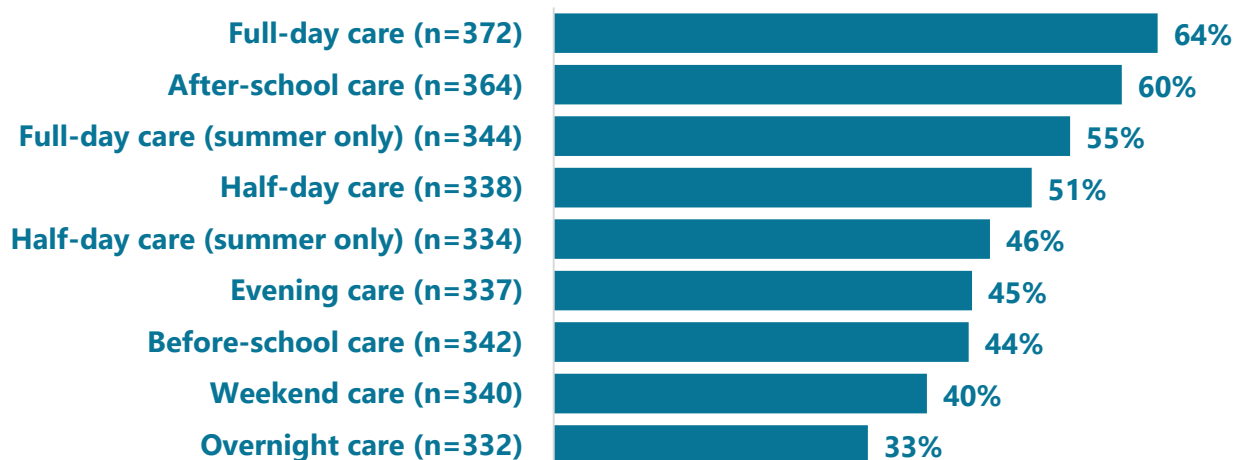
Most family survey respondents had at least one school-age child and a younger child. Figure 12 shows the percentage that had at least one child in each age category.

**Figure 12.** Percentage of family survey respondents who have at least one child in each age category



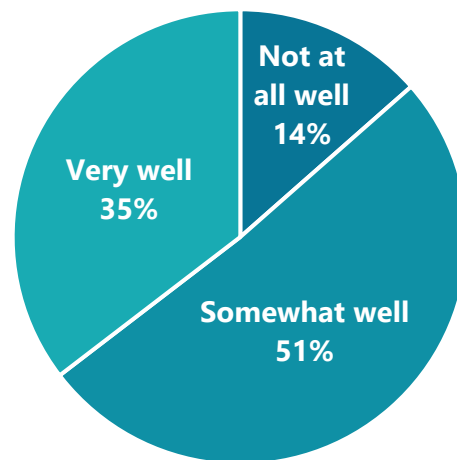
Focus group and interview participants identified a need for more child care options of all types, including infant care, after-hours care, and seasonal care. Large numbers of family survey respondents need child care during every period or schedule type we asked about (Figure 13), and only 35% said their current child care arrangements meet their needs “very well” (Figure 14).

**Figure 13.** Timing when family survey respondents said they need child care, regardless of whether they currently have it or not





**Figure 14.** How well family survey respondents' current child care arrangements meet their child care needs (n=370)



## Employment and career impacts

Inadequate access to affordable child care affects families' economic stability and outcomes, career trajectories, and productivity. It also negatively impacts employers' costs, productivity, and ability to hire and maintain their workforce. The consequences extend beyond the scale of individual families and employers. When parents and guardians "cannot fully participate in the labor force," opportunities are lost "for tax revenue that may bolster state resources": in 2019 alone, Washington State missed out on \$1.2 billion of tax revenue due to child care problems.<sup>26,27</sup>

### Because of child care difficulties...

**47%** have had to **limit their work hours** (n=359).

**47%** have had to **take time off work** (n=361).

**25%** have had to **quit a job** (n=358).

<sup>26</sup> McClellan, Bowen, Janning, Bloom, and Hess. 2020. A Collaborative Data Project between the Walla Walla Valley Early Learning Coalition and Whitman College.

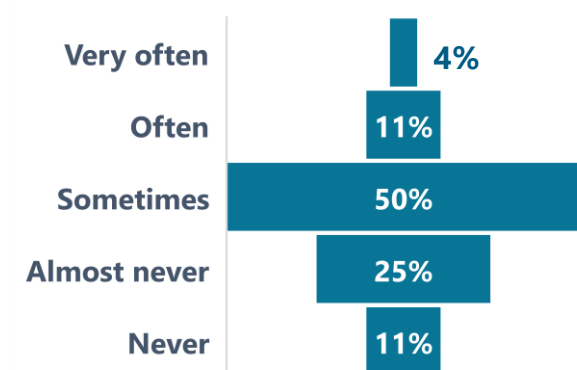
<sup>27</sup> Washington State Department of Commerce (2019 Data) <https://www.commerce.wa.gov/wp-content/uploads/2020/08/Child-Care-Collaborative-Task-Force-Industry-Assessment-Report.pdf>

Almost half of family survey respondents have had to limit their work hours, take time off, or both because of child care difficulties, and a fourth of respondents said they or someone else in their household have had to quit a job. Only 11% of family survey respondents say they never miss work because of child care challenges (Figure 15). The survey conducted in 2020 with families in the Walla Walla Valley found 38% of 137 parents had reduced their work hours in early 2020 before the Covid-19 pandemic compared to 58% who were in that situation in Fall 2020. Furthermore, many of our family survey respondents said they are limited in their job performance and career ambition because of child care difficulties (Figure 16). As one parent in a focus group said,

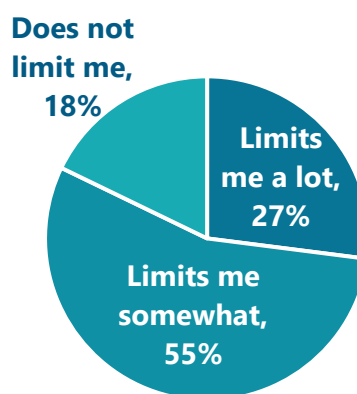
**“pues si me hubiese gustado trabajar... intentamos una vez mandarlos cuidar, lamentablemente lo que ganamos lo tuvimos que pagar**

(I would have liked to work...we tried once to take them to care, unfortunately we had to pay the money we earned).”

**Figure 15.** How often family survey respondents (or someone else in their household) has been late or had to miss work because of child care challenges (n=360)



**Figure 16.** Extent to which family survey respondents' child care responsibilities limit their job performance or career goals (n=359)





## Overview of challenges for families

---

Parent focus group participants identified high costs (especially if they do not qualify for a subsidy), finding trustworthy providers, concerns about unlicensed providers, and lack of available child care outside of the standard work day (including evenings and weekends) as difficulties.

Affordability was a salient theme throughout interviews, focus groups, and surveys. For example, participants shared the following comments:

**“You can’t make it on one income, but you can’t afford the child care to work.”**

**–Parent focus group participant**

**“My child care situation right now is stable but will be much more precarious this summer. I may have to leave my job if I can’t find affordable childcare.**

**Affordability is a major concern.” –Family survey participant**

**“Child Care was very expensive when it was available—at one point I was paying \$1,250 dollars a month for a newborn and toddler. There are no longer daycare options available where I live and work.” –Family survey participant**

According to participants, many Walla Walla Valley families, especially those with multiple children, are pushed out of child care because of the cost. Parents in focus groups reported cutting back their work hours because they could not pay for more child care. While many families cannot make ends meet on one income, inability to afford child care forces parents—often women—out of the labor force. As these family survey respondent comments illustrate,

**“I am a stay at home mom because we can’t afford child care. All my paycheck would go to child care, so I just stay home and watch my child. If I had an affordable trustworthy child care option, I would work.”**

**“Parents, especially women and single moms, should not have to choose between quality child care and feeding their families or paying our mortgage. We choose to have children and we try to be good parents, but half of my paycheck shouldn't have to go towards paying someone else to watch my children. Child care should be readily available to any parent who is willing to work to support their families.”**

**“[My] wife is a stay at home mom. We do not currently have outside child care as it is more economical for her to stay home than for us to seek full-time child care for our 3 year old.”**

Families are caught in a bind where neither option meets their needs. Unemployment is better financially for some single parents than working fulltime and paying for child care, especially for multiple children.

Based on the challenges focus group and interview participants identified and a literature review, we developed a list of potential challenges to further evaluate via the family survey (Figure 17). Affordability was the factor the greatest percentage of respondents identified as a “significant” or “moderate” challenge, although all challenges were significant to some families, and nearly all the issues we asked about challenged the majority of respondents to some extent. While not having a personal vehicle and the ability to find a child care provider that speaks their preferred language were the issues the greatest percentages of respondents said were “not a challenge,” even these were a challenge to half (or nearly half) of all respondents.

**Figure 17.** Extent to which select factors challenge family survey respondents

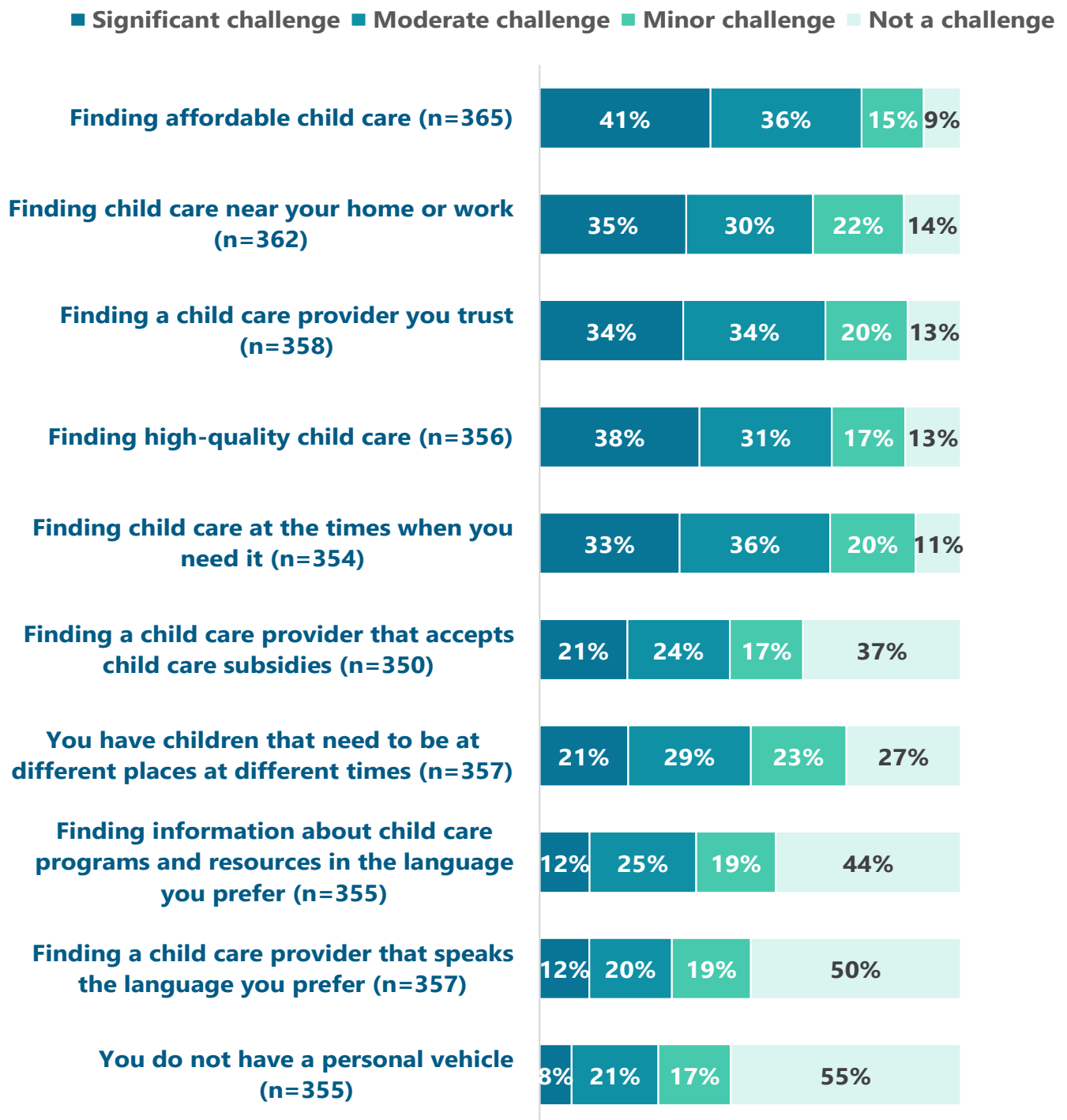


Figure 18 reports weighted averages to provide a sense of the comparative magnitude of these challenges by the primary language spoken in respondents' households. Several factors presented a greater challenge on average for those from households whose primary language is Spanish: affordability, quality, finding information in their preferred language, not having a personal vehicle, finding a provider who speaks their preferred language, and finding child care near their home or work. Interestingly, those from households whose primary language is English experienced a greater challenge on average finding a provider that accepts child care subsidies (perhaps because they are more likely to be aware of or have access to them) and in finding a provider they trust.

## Subsidies

---

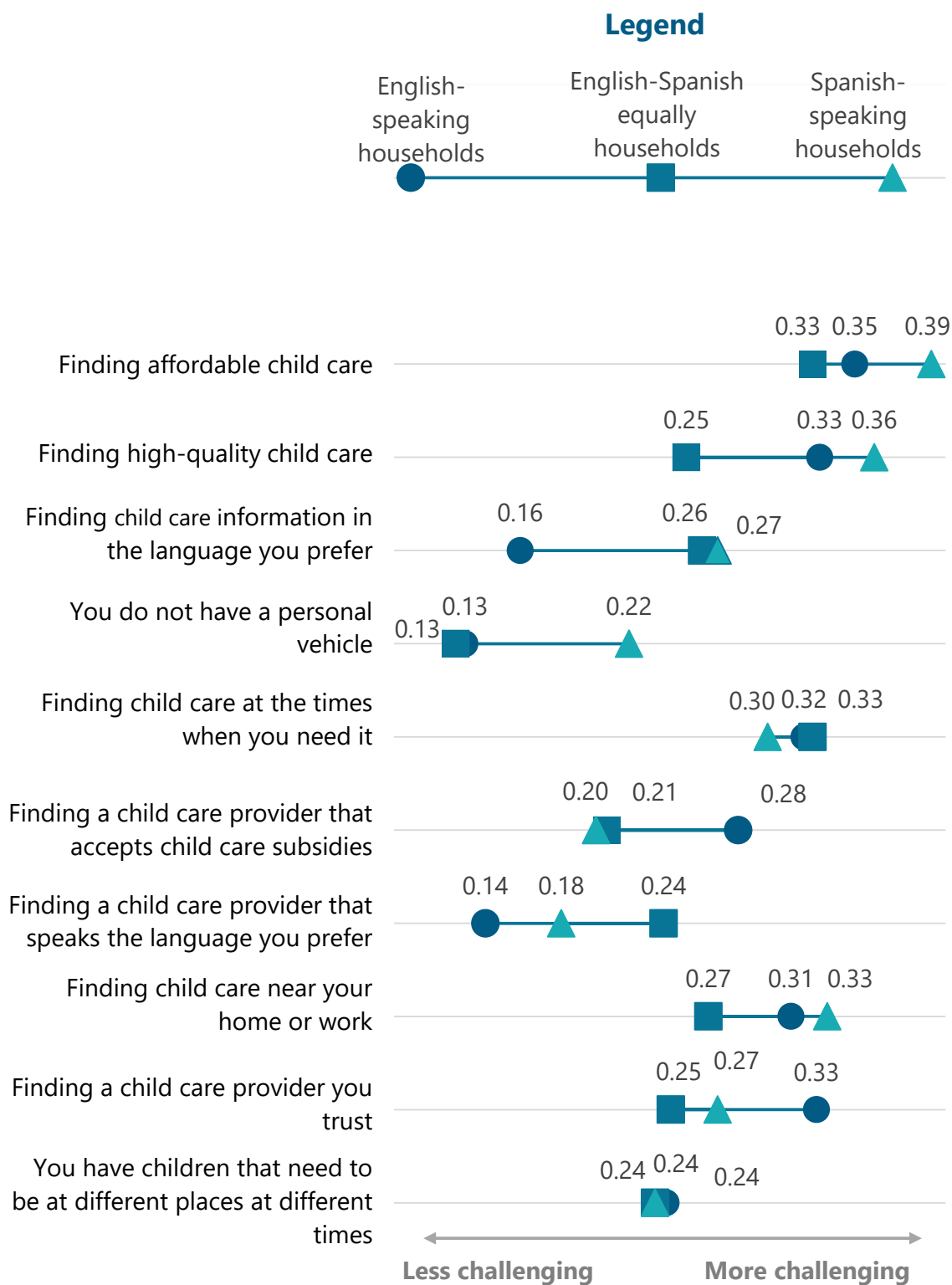
Unfortunately, state subsidies do not fully address the affordability problem. For example, parents in focus groups brought up the issue that many people who need state child care subsidies do not qualify for them. They shared examples of themselves or other households they knew making barely more money than the subsidy cut-off allows. They essentially described the plight of ALICE households and thought "middle-income" households suffered the most and needed financial support. Focus group participants further emphasized that subsidies are not high enough to make child care affordable for many of the families who do qualify. While the decrease in co-pay and the future expansion of eligibility is a big step for many families, this will help rather than solve the problem.

Parents in the focus groups also suggested financial support needs to be extended to afterschool programs, including athletics and music. Parents were concerned about children missing out on essential developmental experiences (an example was learning to swim) because they cannot afford the cost.

In addition, many interview and focus group participants viewed it as problematic that a child care provider needs to be licensed to accept state subsidies since there are not enough licensed spaces to meet the need, and a large portion of families cannot afford an unsubsidized price.



**Figure 18.** Extent factors challenge family survey respondents, by primary language spoken in household. The numbers are weighted averages where a larger number = larger challenge.





Finding a child care provider that accepted subsidies presented some level of challenge to 63% of all family survey respondents (n=350) (Figure 18). Nine out of 13 child care provider survey respondents said they accepted government child care subsidies, and 7 of 13 accepted employer subsidies (Figure 19). However, only 7 said any of the families they serve used a government subsidy and only 4 said any of the families they serve used a subsidy from an employer.

**Figure 19.** Percentage of child care provider survey respondents who accept subsidies compared to the percentage that have clients who use the subsidies (n=13)



## Dependent care flexible spending accounts

Dependent care flexible spending accounts (DCFSA) are briefly explained in Table 15 along with additional tax-related incentive programs available to parents in Washington State.

None of the parents who participated in focus groups had used a DCFSA. Some focus group participants said their employers offer a DCFSA benefit, but no one uses it because it can only be used for licensed child care providers. Due to the shortage of licensed child care providers in the Walla Walla Valley, they said that is not an option for many. Yet many parents are interested in this benefit: 46% of family survey participants said it would be “very helpful” if their employer offered a plan to pay for child care with employee pre-tax dollars and most of the others indicated it would be “somewhat helpful” (26%) or “slightly helpful” (21%) (n=348) (see Figure 34 in parent interest section).

**Table 15.** Tax incentives for parents in Washington

Credit/Deduction/Benefit	Description
<b>Dependent Care Assistance Program (DCAP)</b> (also known as Dependent Care Flexible Spending Accounts)	Pre-tax withholdings up to \$5,000 (as of 2020) from paychecks for eligible, licensed child care costs for children under 13 years old or any dependent incapable of self-care. This program is set up through employers and requires paying upfront costs and applying for reimbursement or setting the DCFSA to pay the child care provider directly. The program requires at least one working parent or guardian.
<b>Child and Dependent Care Credit</b>	Credit worth 20%-35% of child care costs for children under 13 years old or any dependent incapable of self-care. Credit percentage decreases with adjusted gross income and increases with more children (a family with adjusted gross income of \$26,000 and 2 children qualify for 29% credit or \$1,740). For married couples, both parents must be working or in school, for single parents, the parent must be working or in school.
<b>Child Tax Credit</b>	Eligible families will receive up to \$300 per month for each qualifying child age 5 and younger for the 2021 tax year. The monthly payout is up to \$250 per month for each qualifying child ages 6 to 17. No application is needed as children will automatically qualify and payments will be sent via direct deposit similar to the COVID-19 stimulus checks. You do not need to have filed taxes in 2020 to take advantage of this tax credit.

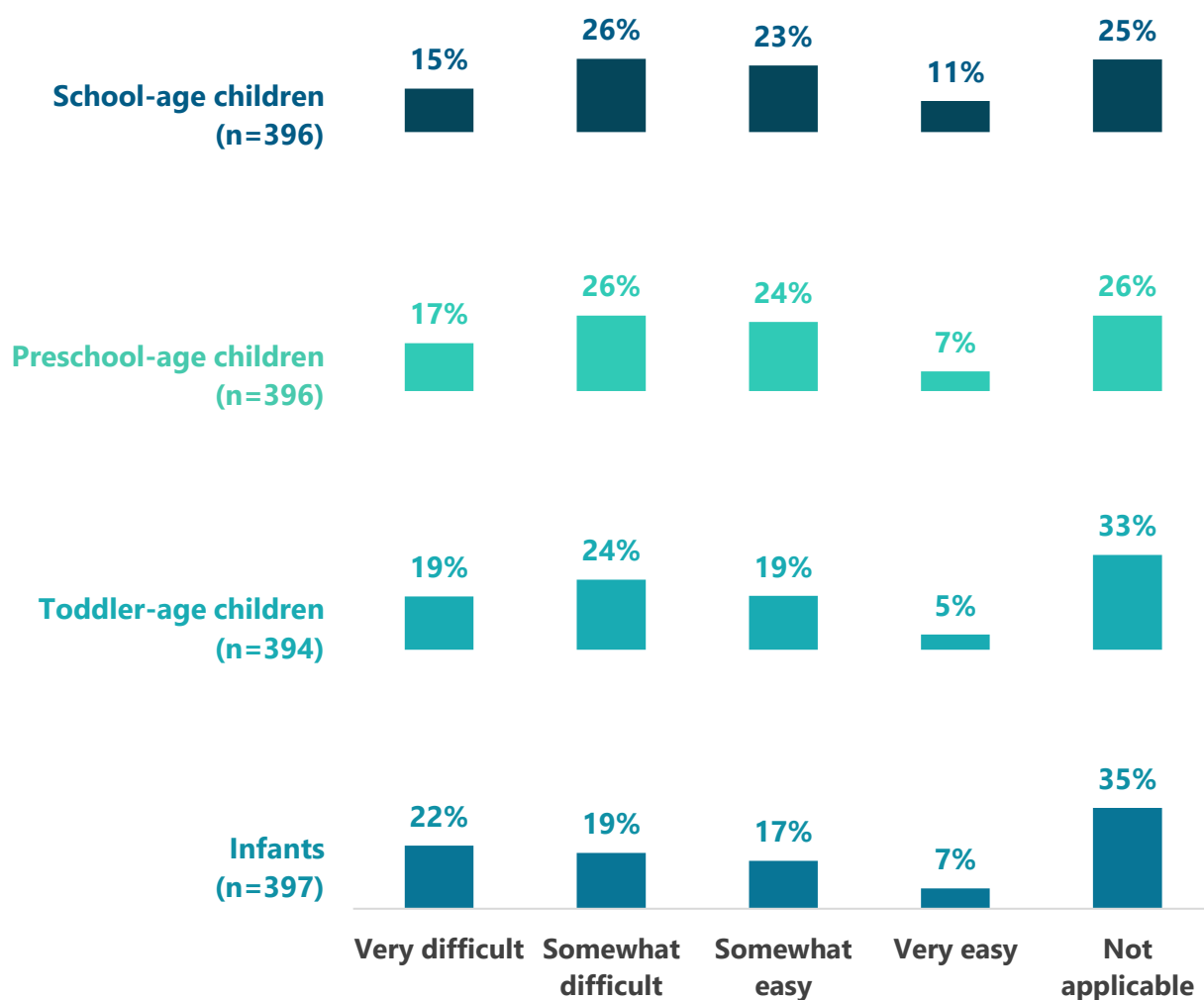
The employers we interviewed offer the benefit but thought it was not a common option, especially among smaller businesses. Only 24% of employer survey respondents currently offer a DCFSA (see Figure 34 in parent interest section), although almost half were very interested (12%) or somewhat interested (36%) in offering this benefit (see Figure 38 in employee interest section).

One employer spoke of the Family Care Act, which enables parents to use leave if they do not have child care. Several of their employees whose children had to stay home in the pandemic used the act to take leave.

## Ease or difficulty of accessing child care by age of children

Family survey respondents struggled to find child care for all ages of children (Figure 20).

**Figure 20.** How easy or difficult has it been for family survey respondents to get the child care needed, by age group



Interview and focus group participants emphasized a critical need for infant care in the Walla Walla Valley. They said that the limited options available to families for infant care in particular lead some parents to quit working.

Family survey respondents also illustrated the common experience, sharing comments including the following:

**“Finding infant care in 2020 was impossible. Child Care Aware was essentially useless [because] half the providers listed don’t actually take infants or only take one. Finally found care when daughter was 8 months after provider felt terrible we had been looking so long. Don’t know what we would have done if I hadn’t had such a flexible employer allowing me to bring her in office and work from home. I know many, many families that can’t find care for infants. Some have quit their jobs to stay home. Extremely frustrating.”**

**“Thank you for this work. Lack of affordable, quality child care is a huge problem in the Valley, particularly for infants.”**

Expanded infant care options are needed throughout the Walla Walla Valley; however, the need is especially critical in Columbia County where no options currently exist for infants.

## Children with disabilities

---

Twenty-three of the 360 children represented in the 2020 family survey conducted by Janning have

“one or more disabilities (respondents listed autism, speech or language issues, sensory issues, developmental delays, mental health issues, Down’s Syndrome, ADHD, heart defects, immune system issues, and dyslexia, among other issues). Of these 23 children, one was a toddler, seven were preschoolers, and fifteen were school age” (p. 3).<sup>28</sup>

The “Walla Walla Valley Early Learning Coalition 2020 Child Care Survey Results” report goes on to say

---

<sup>28</sup> Janning, Michelle. December 2020. Walla Walla Valley Early Learning Coalition 2020 Child Care Survey Results.

“For children with special needs, the results concerning whether child care arrangements met their needs were mixed. On one hand, a greater proportion of the 39 parents/guardians agreed that their children have had their current child care space needs met as compared to in January-March [before the pandemic]. However, a greater proportion of these parents/guardians also disagreed that their children’s needs were met. To put it another way, fewer parents/guardians remained neutral [in 2020 during the pandemic], suggesting a high degree of variation of child care needs being met (or not) for children with special needs” (p. 13).

Interview and focus group results reiterated the need to expand and improve child care for children with disabilities. Particularly in equipping providers to care for this group:

“what we find with our families is that they don’t necessarily ask if our children are disabled, but it seems like they will be in about a week, or maybe it’s even a day, and they’ll get the call from the child care center saying, ‘Sorry, his behavior or her behavior is not acceptable for our child care center.’ And then they will say that he cannot be served there.”

The analysis of open-ended comments from the family survey reinforces the challenges and needs:

**“[I need] respite care for twins with autism and appropriate activities.”**

**“As someone with a child with an intellectual disability, we have had to be very selective with child care, and quite frankly have only trusted family members. This has almost forced our hand, and my partner only works late evenings because of this.”**

**“Este cuidado de niños tiene que estar preparado para niños con autismo y ADHD.** (This child care must be prepared for children with autism and ADHD.)”

**“Having special needs kids makes everything even MORE difficult when it comes to child care.”**

**“You should consider kids with special needs and how limited the childcare options are for parents of those children.”**

## Seasonal needs

---

Focus group participants brought up that some parents' child care needs vary by season based on the sector or industry of their employment. They spoke of parents who work in agriculture as an example of those who need child care in spring through fall but perhaps not in the winter and of those who work in education as needing child care during the school year but not necessarily during the summer. Indeed, a larger proportion of family survey respondents are employed in education (Figure 3). Focus group participants thought it important that parents do not necessarily need child care year-round, but many must pay for it even when they do not need it to reserve their slot. Paying for child care when they do not have work can especially be a hardship for those who do not continue getting a paycheck during their off season, such as farmworkers. Many give up their slot and go to the bottom of a long child care waitlist.

Others commented on the need for child care for school-age children during summer break only. For example, family survey respondents made the following comments:

**"Dates and times [we need child care] vary depending on school schedules and breaks."**

**"[We need] full-day [child care] on school holidays/closures."**

**"My wife stays home at the moment, but when my youngest is in school, we will need summer day care if she decides to go back to work."**

**"When preschool is out, I will need a summer child care!"**

## Non-standard schedules

---

Most family survey respondents find it challenging to some extent to find child care at the times when they need it: only 11% of 354 respondents said this is not a challenge for them (Figure 17). Interview and focus group participants emphasized the acute need for child care at non-standard hours, such as those needed by nurses and others who work on weekends and nights. Some parents work three long days per week rather than five. They need child care that covers their entire shift for the days they need it rather than five days per week. Focus group participants discussed the need for synchronizing with

shifts for Columbia Pulp in Starbuck, which runs two 7-7 shifts. As family survey respondents illustrated:

**“I am a nurse working 12-hour or longer shifts irregularly any day of the week. It is very difficult to find care to cover my shift if my spouse or family can’t do it.”**

**“I need full day care but only one day per week and not always the same day.”**

Figure 21 shows 23 family survey respondents said they work weekends and 14 said they work nights (n=328). Although respondents who work weekends and nights constitute relatively small percentages of all respondents, they still make up a substantial number who need child care at those times. It is also noteworthy that 39% of family survey respondents said they work more than 40 hours a week (n=328).

**Figure 21.** Family survey respondents’ work schedule characteristics by number of respondents (they could select all that applied) (n=328)



While relatively few family survey respondents work weekends, nights, or both, substantially larger percentages indicated they need child care during non-standard hours: 45% said they need child care in the evening (n=337), 40% need it on the weekend (n=340), and 33% need it overnight (n=332) (Figure 13). The considerable percentages that said they need child care on the weekend or overnight that do not work at those times may need child care to complete non-employment tasks, such as



studying. Those who need child care in the evening may work longer shifts than a standard 9am-5pm or have travel times from work to their child care provider that make it difficult to pick up their children before the provider closes for the day.

## Distance to child care providers

The Washington Department of Commerce “Child Care Industry Insights Dashboard” depicts the distance families must travel to access child care. In both Columbia and Walla Walla counties, the drive time to child care providers varies depends on where in the counties you live. In Walla Walla County, with substantially more child care options, average drive times range from about 4 minutes to the nearest provider to about 11 minutes to specific providers who operate at Early Achievers Levels 4 and 5, meaning it is farther to reach higher quality care. Drive times to high-quality child care centers in Walla Walla County are on average about 4 minutes less than drive times to high-quality in-home home child care operations, reflecting that they are more centrally located.

We also asked family survey respondents to report the distance they travel one way from their home to their child care provider and from their child care provider to their workplace (Table 16).<sup>29</sup> The average distance family survey respondents traveled to their child care provider was similar but higher than the data reflected in the Washington Department of Commerce dashboard. Family survey respondents traveled 13 miles on average one way to child care and then another 15 miles one way on average to their workplace. However, the family survey

**Table 16.** Family survey respondents’ one-way travel distances from home to child care, child care to work, and total (n=231)

	Distance (mi.)
<b>Distance to child care</b>	
Average	13
Median	8
Mode	10
Minimum	0.25
Maximum	100
<b>Distance child care to work</b>	
Average	15
Median	8
Mode	10
Minimum	0.1
Maximum	130
<b>Total one-way trip</b>	
Average	25
Median	15
Mode	20
Minimum	0
Maximum	210

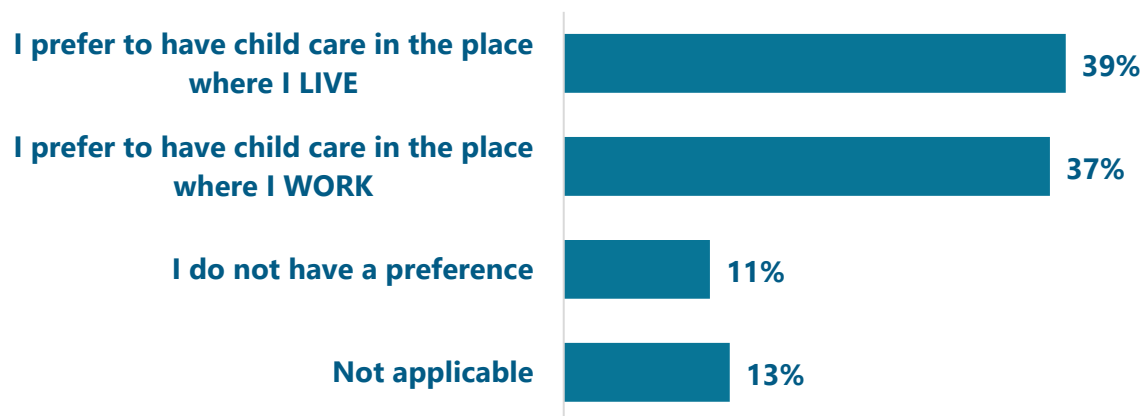
<sup>29</sup> If they have more than one child care provider, we asked them to report the number of one-way miles to the one that is farthest from their home.

respondent travel distance ranges varied widely, with some families commuting over an hour one way.

Finding child care near their home or work is a “significant challenge” for 35% of family survey respondents and another 30% and 22% identified it as a “moderate” and “minor” challenge, respectively (n=362) (Figure 17). Distance to child care was not surprisingly a greater challenge for rural focus group participants and others who lived, worked, or both farther from child care options. The distance of parents’ total commute was also important. For example, some parents in focus groups commute to the Tri-Cities, which can be well over an hour one way depending on where one lives in the Walla Walla Valley. Additionally, they talked about how many people have long commutes to workplaces in remote places, such as Wallula and Starbuck, and how some parents commute for work to Milton-Freewater and other places in northeast Oregon.

Focus group participants preferred to have their children with them during the commute rather than have their children spend more time at child care. They described how challenging it is for parents who commute to communities with no child care options. One common example was that people who commute from Walla Walla to work in Dayton do not have child care options in Dayton. Based on the focus group results on this topic, we asked family survey respondents if they would rather have child care in the place where they live or the place where they work, if they are different. Survey respondents were evenly split on their preference (Figure 22).

**Figure 22.** Percentages of family survey respondents who prefer to have child care in the place they live versus the place where they work, if they live and work in different places (n=329)



## Transportation

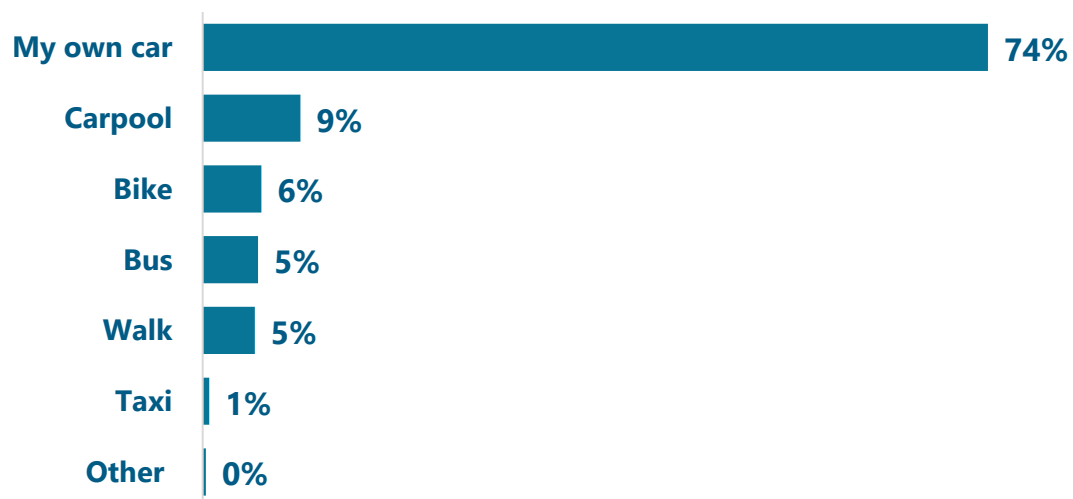
Transportation can be a barrier for some households, particularly those who rely on public transportation and are constrained by the route and schedule, do not have consistent access to a reliable personal vehicle, or both. As a family navigator said,

**“I’ve seen that happen, where a mom didn’t have transportation or just time in the mornings. She has a job. She has to get the kids ready for school and just can’t get the kiddo there to the center.”**

Of course, lack of public transportation options and not having adequate (or any) access to a personal vehicle is especially problematic the more rural a household is. Not having a personal vehicle was a greater challenge on average for family survey respondents whose primary language is Spanish compared to those whose primary language is English (Figure 18).

The majority of family survey respondents said their primary form of transportation is a personal vehicle; however, a substantial number (26%) indicated they had a different form of primary transportation, including carpool, bike, bus, walk, and taxi—all of which offer considerably less flexibility and require greater time and energy (Figure 23). While 55% of family survey respondents said not having a personal vehicle is “not a challenge” for them, for 8% it is a “significant challenge,” for 21% a “moderate challenge,” and for 17% a “minor challenge” (n=355) (Figure 17).

**Figure 23.** Family survey respondents’ primary form of transportation (n=325)



## Logistics of multiple children

Another transportation-related theme that arose in the focus groups regarded the logistical complications of having multiple children—generally of different ages—who need to be in different places at the same time. We therefore asked about this topic on the family survey: 21% said having children that need to be at different places at different times is a “significant challenge,” 29% said this is a “moderate challenge,” 23% said this is a “minor challenge,” and 27% said this is “not a challenge” (n=357) (Figure 17). Getting children where they need to be can also be difficult if these transitions need to happen during parents’ workday.

## Transportation from one child care arrangement to the next

Another transportation-related theme from the focus groups and interviews was that many parents, especially those working long or other non-standard hours, have multiple child care arrangements on the same day, but cannot easily transport their children from provider to provider. This is another issue complicated for those with inadequate (or no) access to a personal vehicle.

**55%** of family survey respondents **have child care at more than one location on the same day** (n=388)

For example, even when a family owns a car, participants explained, often another family member needs it to go to their job, and so it might not be available for transportation to child care.

We found these challenges are also common among family survey respondents, 55% of which have child care at more than one location on the same day (n=388) and 49% of whom find it very or somewhat difficult to get their children from one provider to the next (n=212) (Figure 24).

**Figure 24.** How easy or difficult has it been for family survey respondents who have child care at more than one location on the same day to get their children from one child care provider to the next (n=212)

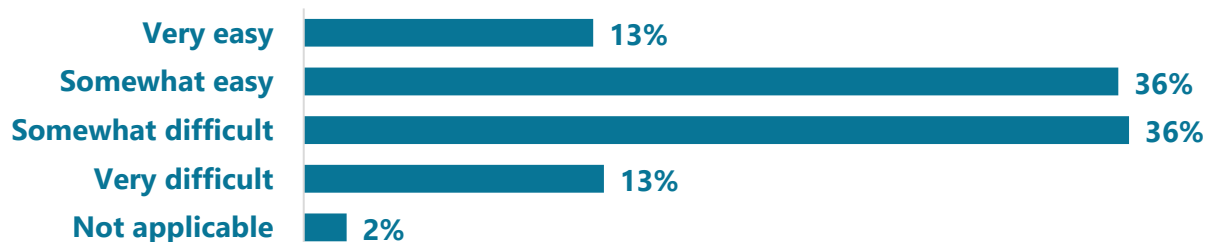
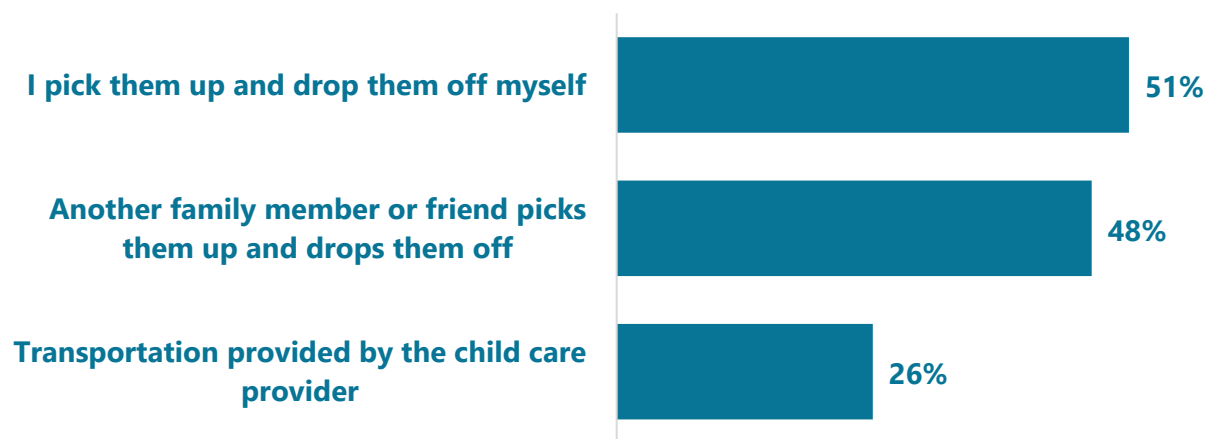


Figure 25 shows family survey respondents commonly transport their children from one provider to the next themselves or have made transportation arrangements with another family member or friend. Some (26%) have transportation provided by their child care provider (n=214). While family survey respondents have found ways to make their arrangement work, a very large proportion (75%) said they need help getting their children from one provider to another (n=214).

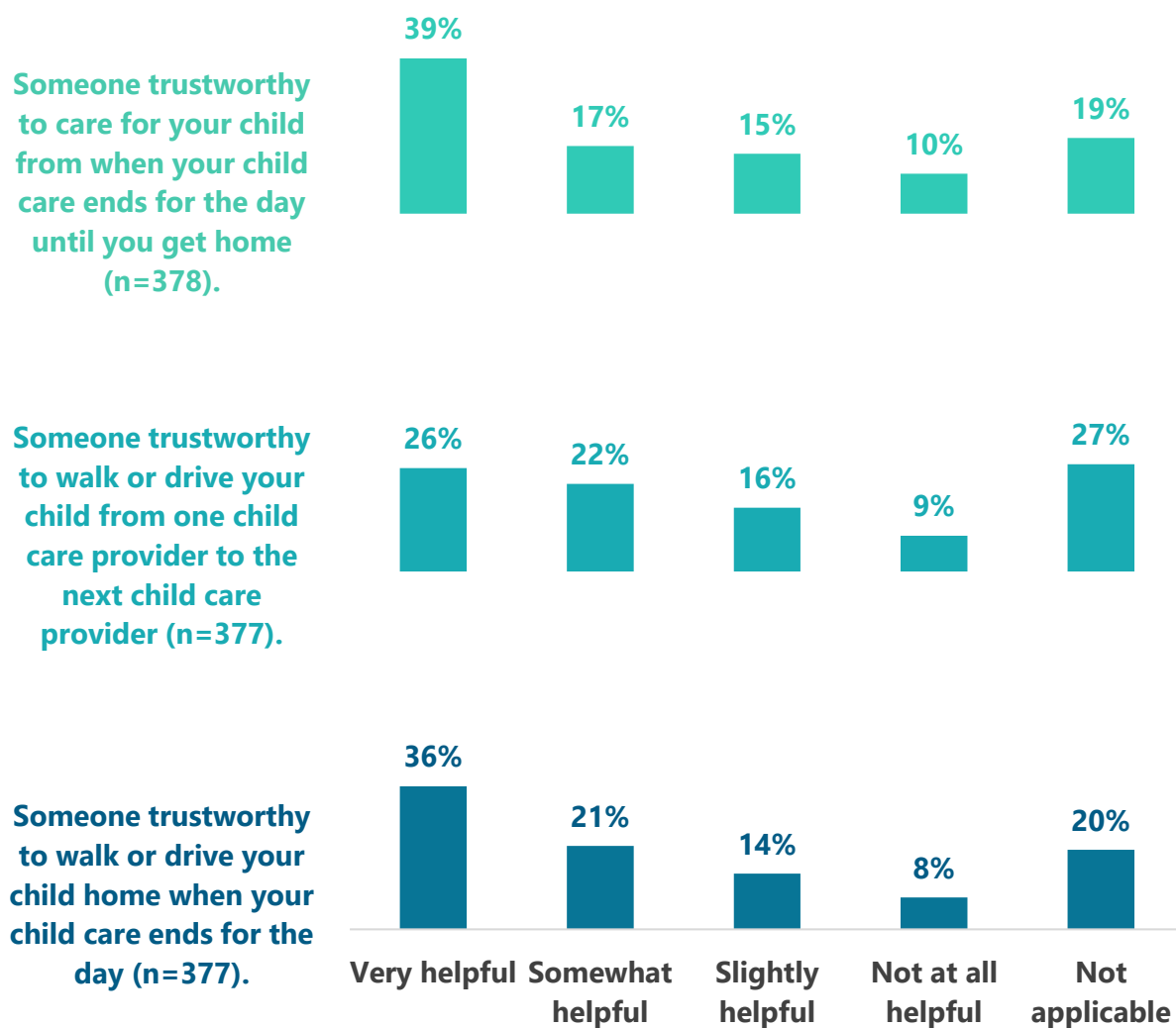
**75%** of families who have child care at more than one location on the same day said they **need help getting their child/children from one provider to another** (n=214).

**Figure 25.** How family survey respondents who have child care at more than one location on the same day get their children from one child care provider to the next. They could select all that applied. (n=214)



We asked all family survey respondents how helpful three types of support would be to facilitate the transition from one child care arrangement to the next or from child care to home. The largest proportion of respondents said all three types of support would be “very helpful” (Figure 26).

**Figure 26.** How helpful select types of support would be for family survey respondents



## **Communications, navigation, and resources for families**

Focus group results suggest child care information is fragmented for parents who often rely on word-of-mouth to navigate the process of finding child care. Parents in focus groups said there is a need for more information that is easy to navigate about local resources.

They wanted a single resource where they can find and evaluate child care options, including the following types of information:

- A map showing where child care providers with openings are located so they can evaluate how long it will take them to get there.
- Information on costs and financial assistance.
- Staff information, including qualifications.
- Ages served and type of care.
- Whether food is provided.

Parents in focus groups said there is a general trend toward presenting information and applications online. They pointed out that some families do not have personal computers to access the information posted to program websites and therefore need a way to access resources through additional methods, such as by phone or printed materials.

### **Navigation and resources for Spanish-speaking families**

Spanish-speaking parents said they had experienced communication and language constraints, including trouble navigating websites and resources. They said in-person support in Spanish is lacking across multiple organizations, and they wanted a Spanish speaker available at all programs. The limited availability of resources in Spanish across various settings means parents miss out on important program information and application deadlines. Finding information about child care programs and resources in their preferred language presented some level of challenge to 56% of family survey respondents (n=355) (Figure 17). On average, this was a greater challenge for respondents for which the primary language spoken in their household is Spanish and English equally or Spanish (Figure 18). One community partner shared the following:

**“If all of your information was in English and you don’t have a Spanish/English speaking, a bilingual person, then it makes it difficult because parents might take the information home, but it’s difficult for them to read it.”**

## **Parent cooperative preschool**

---

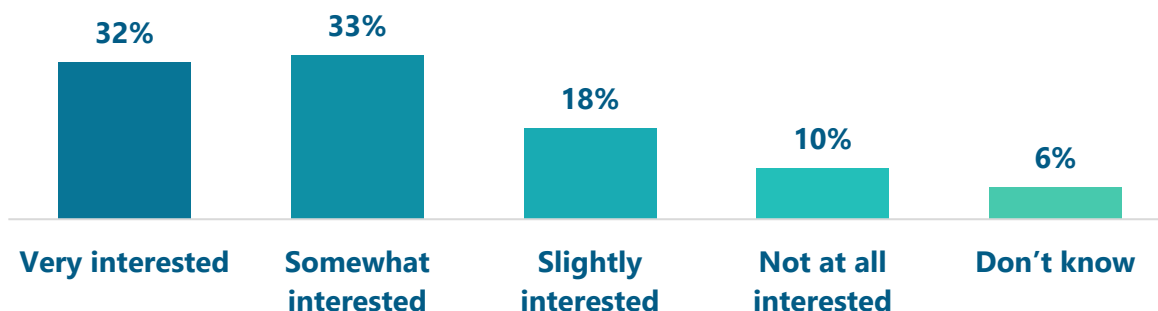


In parent cooperative preschools, a group of families come together to develop, administer, and maintain a preschool program. The cooperative hires a trained lead teacher, but parents are actively involved, participating as assistant teachers on a rotating schedule and sharing in the operational responsibilities. Walla Walla Community College has a program wherein parents can learn the information and skills necessary to start their own cooperative preschool.<sup>30</sup>

In the focus groups, parent interest in participating in cooperative preschools or other efforts was not strong because of the heavy time and energy commitment required of parents to make it work. Several parents who had participated in cooperative efforts said that informal parent cooperatives are unreliable. If children in one family become sick, for example, the other families—even those whose children are not sick—can be left suddenly without child care, causing parents to miss work. Some parents do not have flexibility in their work schedule to take their turn as an assistant teacher. Interview and focus group participants said that, for many years, Dayton had a parent cooperative but that it finally disbanded because they did not have enough volunteers, and they were constantly fund raising.

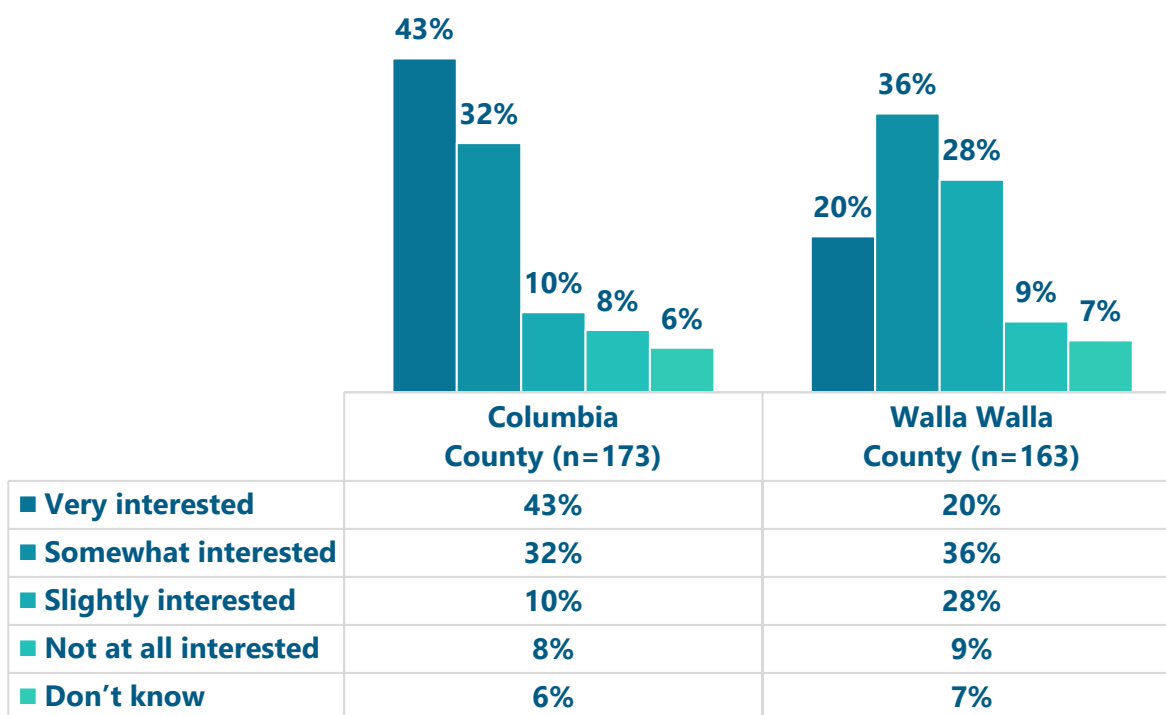
On the other hand, most survey respondents were very or somewhat interested in participating in a parent cooperative, suggesting the model has the potential to impact the current child care shortage (Figure 27). Interest seems particularly high among family survey respondents in Columbia County (Figure 28).

**Figure 27.** Family survey respondents' level of interest in participating in a parent cooperative child care or preschool arrangement (n=371)



<sup>30</sup> For more information, visit [www.wbcc.edu/student-resources/parentchild-resources/parenting-education/parent-cooperative-preschool-programs/](http://www.wbcc.edu/student-resources/parentchild-resources/parenting-education/parent-cooperative-preschool-programs/)

**Figure 28.** Family survey respondents' level of interest in participating in a parent cooperative child care or preschool arrangement, by county



## Few options in Dayton and Columbia County

Dayton is in a child care crisis: all three of its licensed home-based providers closed due to the COVID-19 pandemic. There is one Early Childhood Education and Assistance Program (ECEAP) classroom with 18 slots in Dayton, which is enough for the number of children who are eligible according to one interviewee. Parents in the focus group indicated they and others in Dayton would pay for child care but nothing is available, or they are ineligible.

Dayton focus group participants said that other than the ECEAP preschool, which does not take children until they are three and only serves eligible families, no options exist other than to hire a personal babysitter. They said typically either the mother does not have employment outside the home or households rely on friends and family for child care, which is

---

**“Child care and options for child care has been lacking for years in Dayton. [I] always wished the hospital and WWCC could coordinate programs.”**  
**- Family survey respondent**

---

especially problematic for those who are new to the community and do not have established relationships. While reliance on grandparents and other family members can be ideal in some ways, these types of arrangements can have limitations. For example, little flexibility for the parent if the family member is unavailable. Furthermore, providing child care is a lot of work and can strain family members and relationships. As one family survey respondent said,

**“I think one thing missing in the conversation is the strain this is putting on the older generation. Grandparents end up being full-time or regular part-time child care providers and often don't know how to say “no” or don't want to damage the relationship. My mother-in-law has raised 9 children and, because she won't say “no,” watches multiple grandkids for long days each week. It is now affecting her health and they have to cut back on using her.”**

Households that do not make income requirements for the ECEAP program in Dayton must take their children to child care in another town. The nearest child care is in Starbuck, which has a state-funded transitional kindergarten. However, Starbuck is a 20 to 30-minute drive, which makes for a long day for children and parents. Also, no one in the focus groups wanted to be 20 to 30 minutes away from their child if there was a problem. The challenge of securing a workable child care arrangement is compounded for those with multiple children or who live farther from town.

Focus group participants also discussed the economic impacts of the child care shortage for Dayton and Columbia County. They told of single parents who had been forced to quit good-paying jobs and go on unemployment. Focus group participants feared that without expanded child care options, young families would not move to or stay in Dayton. They also discussed how Dayton's small businesses owners and employees need full-day care five days per week. Several participants said that Columbia Pulp gets few employees with families because child care is unavailable, and Walla Walla is too far to travel. Focus group participants believe the child care shortage is limiting who moves to Columbia County for work. They told of someone who moved away from Dayton because they could not get the child care they needed. Parents thought it was reasonable for people to move away or choose to not live there because they need two incomes and cannot find reliable, affordable child care.

Family survey respondents made the following comments relevant to Dayton, Columbia County, or both when asked if they had any “additional” comments related to child care or early learning programs:

**“After June, Dayton will no longer have any licensed day care providers. We are fortunate to have a family member help, but it has been a challenge. Our previous provider closed during the pandemic. We have no backup and that is often difficult. We were paying over \$600 per month for one child for 4 days per week. With 3 kids at that price, it would be difficult for both of us to keep working. Having a drop-in option would be very helpful also.”**

**“I’d be willing to pay anything at this point to have child care in Dayton, WA.”**

**“Columbia County is in desperate need of a pre-K program and an early learning center.”**

**“Having a child care facility open from early morning hours to late in the evening would be a wonderful asset to Columbia County.”**

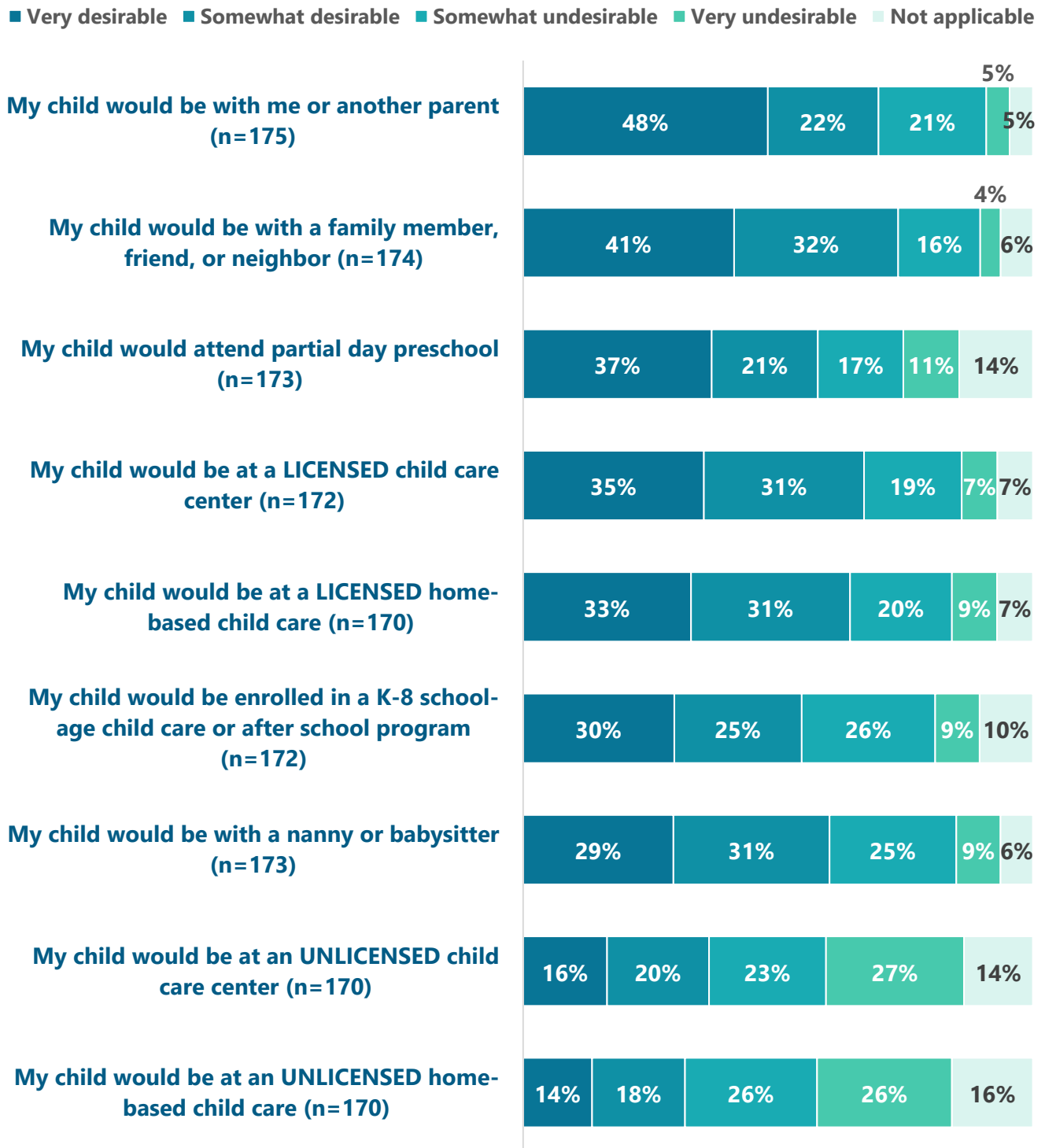
**“We desperately need daycare in our county.”**

## **What child care options are most desired in Columbia County?**

---

To understand the type of child care that family survey respondents in Columbia County would prefer, we asked them to indicate how desirable or undesirable a list of options would be (Figure 29). With the exception of the unlicensed options, substantial majorities found all types of child care arrangements we asked about “very” or “somewhat” desirable. Survey participants conveyed a similarly high level of interest (in terms of desirability) for licensed home-based and licensed center-based care. On one hand, these results suggest households represented would find a variety of options acceptable and, on the other hand, there are possibilities (such as licensed home-based care) beyond center-based care that families find desirable.

**Figure 29.** Family survey results on how desirable or undesirable select child care arrangements would be (COLUMBIA COUNTY respondents only)





## What child care options are most desired in Walla Walla County?

---

We did not ask the question regarding how desirable or undesirable a list of child care options would be for our Walla Walla County family survey respondents because this data was already collected in the survey conducted in 2020.<sup>31</sup>

A more detailed report of the 2020 survey data is available, but Figure 30 reports the percentage of children represented by survey respondents for whom the list of child care options would be “very desirable.” The most desirable child care option identified by the 2020 survey after the desirability of having the child with a parent, another family member, friend, or neighbor was a licensed child care center or home. Very few parents and guardians found it “very desirable” for their children to be at an unlicensed child care arrangement. In focus groups, parents indicated that the unlicensed providers are valued and respected in the community, but many parents have concerns and would prefer a licensed environment if it were available. Parents in the Spanish speaking focus

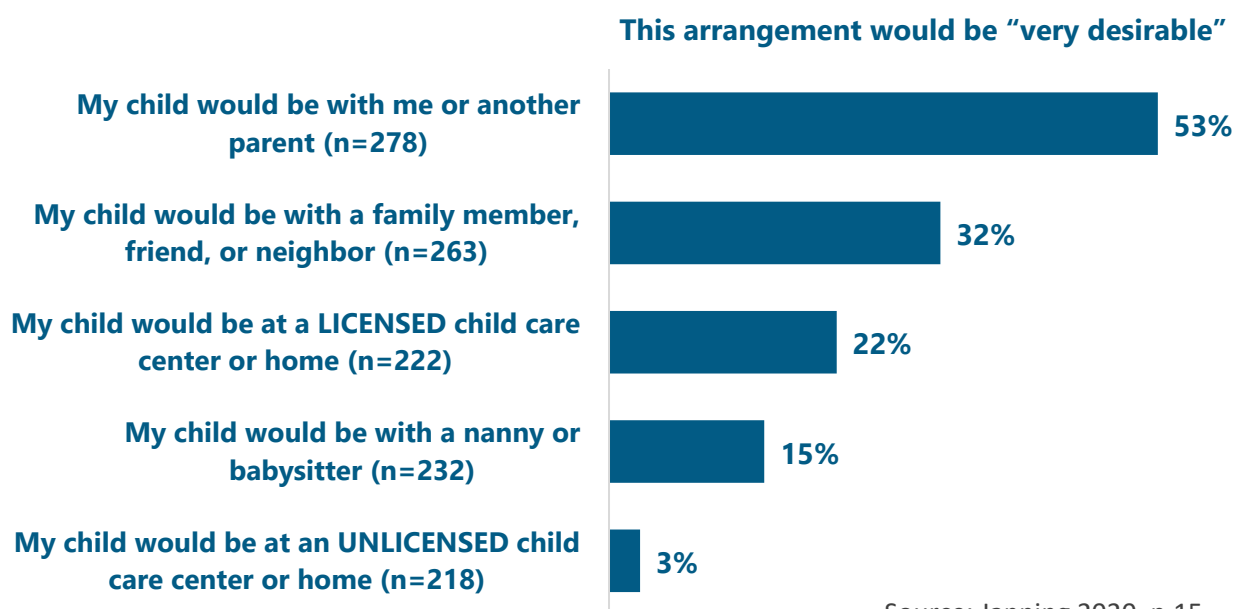
---

<sup>31</sup> Janning, Michelle. December 2020. Walla Walla Valley Early Learning Coalition 2020 Child Care Survey Results.



group voiced concerns about safety and emergency procedures, whether they provide an age-appropriate learning environment, and that providers have to serve too many children to earn enough income. Despite these concerns, they also indicated that this is the only option available to parents pushed out of licensed care due to cost.

**Figure 30.** Percentage of children represented by the respondents of the WWVELC survey conducted in 2020 for whom select child care arrangements would be “very desirable.” ‘N’s are the number of children represented rather than the number of survey respondents.<sup>32</sup>



Source: Janning 2020, p.15

## When family responsibilities affect work time

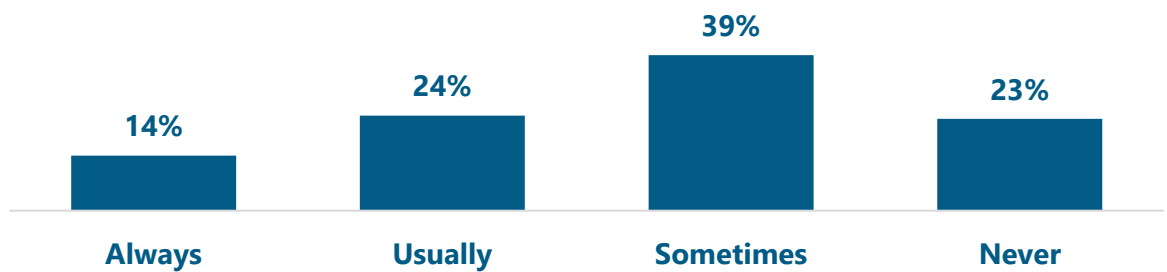
When children are sick, schools and child care providers recommend the child stay home to prevent the spread of infection. This creates a challenge for working parents that need to either take time off or quickly find an alternative arrangement. Of 368

<sup>32</sup> That is, 229 parents/guardians participated in this survey, but respondents answered this question for every child in their household (i.e., if a household has three children, then the respondent answered this question three times). Also, the majority of the 155 parents/guardians who reported where they live on this 2020 survey live in Walla Walla County; however, 17 (16%) live in Dayton (Columbia County) so these results oversample but are not completely specific to Walla Walla County.



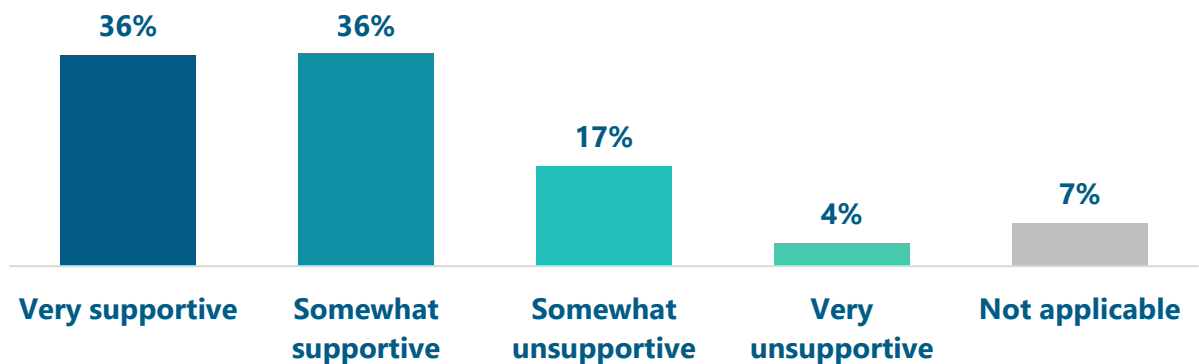
family survey respondents, 23% “never” have backup child care if their regular care giver is unavailable and another 39% said they only “sometimes” have backup child care (Figure 31).

**Figure 31.** How often family survey respondents have backup child care when their regular care is unavailable (n=368)

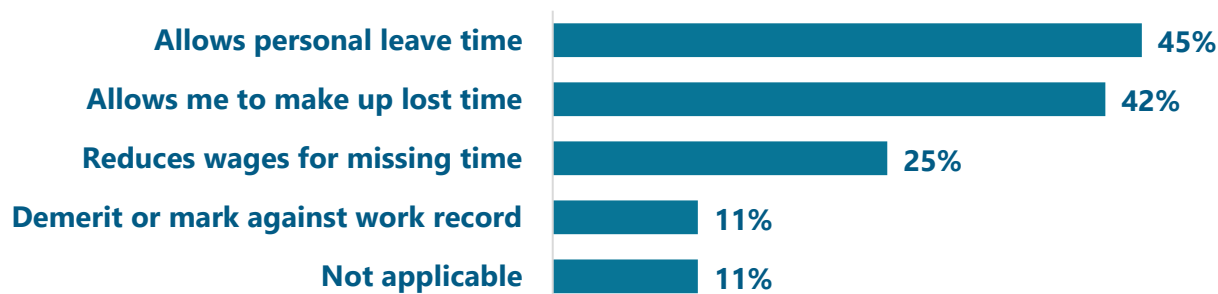


Seventy-two percent of family survey respondents said their employer is either “very” or at least “somewhat” supportive when their family responsibilities affect them during work time (Figure 32). The results shown in Figure 33 suggest most family survey respondents experience flexibility on the part of their employer as 45% are allowed to take personal time and 42% are allowed to make up lost time when they have family responsibilities (n=363). Some, however, experience more punitive responses, including demerits and lost wages (Figure 33). Several focus group participants spoke of not wanting to talk to their employer about child care difficulties. They thought that many people would not because they feared it would make them seem unreliable. At the same time, they spoke of their employers as being supportive and flexible within the limits of the expectations for their job.

**Figure 32.** How supportive or unsupportive family survey respondents’ employers are when their family responsibilities affect them during work time (n=355)



**Figure 33.** How family survey respondents' supervisor manages their absence when they need to be away from work for a short time for a child's appointment or a child care emergency (they could select all that applied) (n=363)



Given the opportunity to describe other ways their supervisor manages their absence, survey respondents made the following comments:

**"Allows it but you feel guilty."**

**"Makes me take a 1/2 or full-day sick day. We only get 8 a year."**

**"Sick time."**

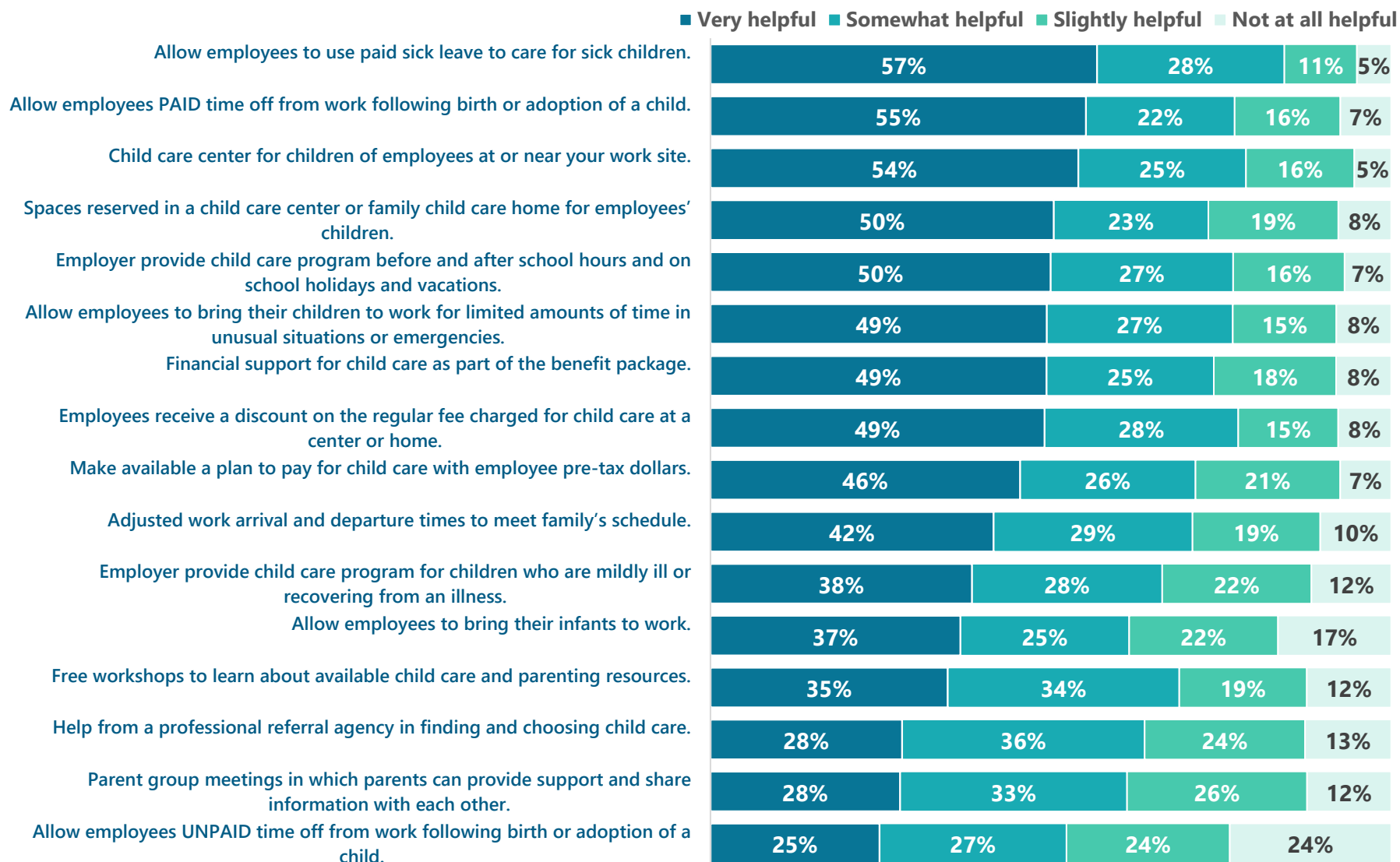
**"They have allowed me to cut my hours so that I can take care of my children without quitting."**

Several parents in focus groups said they do not want to send their children someplace if they are not feeling well and that they generally take sick leave when their children are sick. Another focus group participant worked remotely and said it is not a problem. Others had jobs that require they show up and they struggled to find alternatives.

### **Parent interest in types of support employers could provide**

More than half of family survey respondents said every kind of employer support we asked about would be either "very" or "somewhat" helpful (Figure 34).

**Figure 34.** Extent to which select ways employers can help employees with child care would be helpful to family survey respondents (n~348)



Survey respondents had the opportunity to describe ways their employer could help them meet their family and work needs that we did not include on the closed-ended question. Themes in their answers emphasized the need for flexibility, including ability to work remotely (telecommute) some of the time and chose their work hours. Another theme was the need for more paid sick and vacation leave. These options would be more suitable for workers in industries that are not compatible with digital platforms, such as in retail and agriculture. Here are some quotes that illustrate the primary themes:

**“Allow employees to work from home or pick their working hours to assist families to not need daycare. Such as working earlier in the morning to be home when school is out or work from home during summer months.”**

**“Allow remote workdays/flexibility.”**

**“Flexible work hours as long as all of the position responsibilities are met and to allow continued work from home part of the week since this year has proven it can be productive work time.”**

**“Give more vacation time so you have enough time for child care and flexible work hours.”**

**“Work from home when possible.”**

**“Work hours are a little more flexible.”**

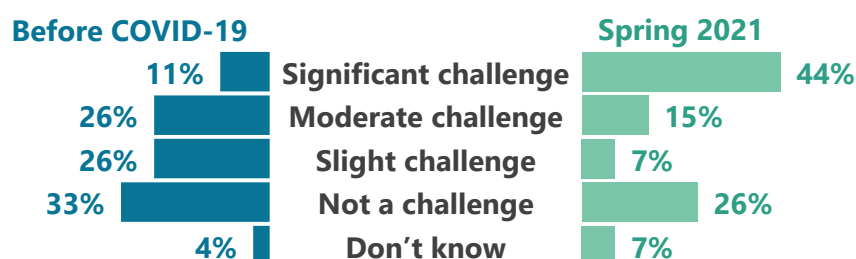
**“Working from home.”**

# Employer needs and interests

## Impacts on employers

Figure 35 shows the extent to which finding child care arrangements that meet their needs are a challenge for their employees from the perspective of employer survey respondents. While they perceived that inadequate child care presented some level of challenge before the COVID-19 pandemic, they indicated that those challenges have been exacerbated by the pandemic. Interviewed employers noted that preschool shut down during COVID-19 pandemic was very impactful on employees and businesses. And while employers have been flexible in enabling parents to work from home with their kids, this was not possible for many jobs.

**Figure 35.** Extent to which finding child care arrangements that meet their needs were a challenge for employer survey respondents' organization's employees before COVID-19 and in Spring 2021 (n=27)



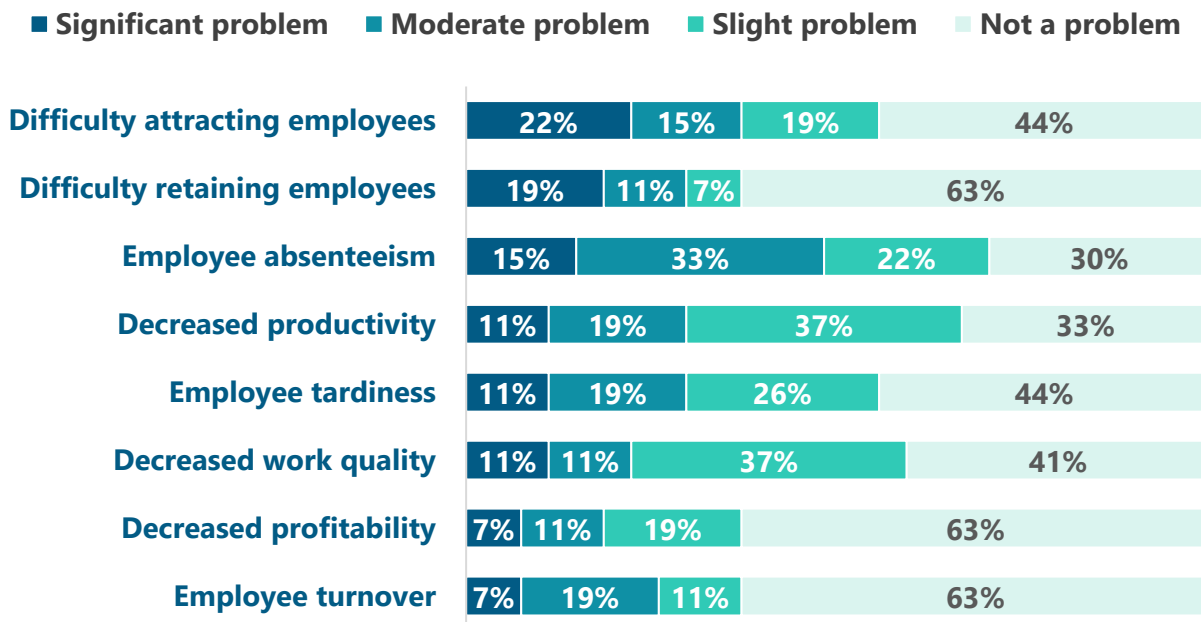
The employers we interviewed agreed that the current child care situation in the Walla Walla Valley has big impacts on their employees and their organization.<sup>33</sup> For one employer, employees with children make up a large portion of their workforce. Two employers spoke of impacts on long-term retention. One employer survey respondent reflected on the need to minimize absenteeism especially for small organizations saying,

**"We have a very small staff. When employees are gone taking their children to appointments, out with a sick child, etc., it is a burden to the rest of the staff to cover for them."**

<sup>33</sup> We use the term "organization" to refer to all types of employers, including businesses, non-profit organizations, agencies, and all others.

We asked employer survey respondents to indicate the extent to which their organization has had problems due to employees having trouble setting up child care arrangements that meet their needs. The results are presented in Figure 36.

**Figure 36.** Employer survey results related to the question “to what extent has your organization had the following problems due to employees having trouble setting up child care arrangements that meet their needs?” (n=27)



Some employer survey respondents provided additional comments that convey the challenges their organization experiences. Their perspectives reiterate the challenges parent participants themselves conveyed, including the need for more infant care, the worksite being in a remote area, and complications related to the pandemic:

**“We have very few options in our community and we lose or have difficulty recruiting for this reason.”**

**“Care for school age has been a problem.”**

**“Due to COVID, people are not able to find child care, if they can a runny nose and the child is sent home. This along with reduced hours, loss of income, higher child care costs due to school shut downs has resulted in multiple call ins, late arrival and leaving early along with a higher turnover rate.”**

**“Finding infant care has been our biggest issue for our employees. Also, with school closures and zero tolerance on sickness at care centers, our employees are stuck choosing between work and their kids. We have been able to be flexible with working from home, but I know we don't represent all the businesses in the area.”**

**“Thankfully, most of our employees have family living nearby to help with child care. But there are many times, especially when school went to remote learning, that parents had to scramble to ensure their child was cared for.”**

**“The majority of employees are production operators and have small families. Being in a smaller remote location they are challenged with 12-hours shifts and not enough child care. In Garfield County one of the smaller and most available child care (The LEEP Center) are closing their doors.”**

## **Current employer strategies**

---

Survey and interview results show employers in the Walla Walla Valley are using a range of strategies to help address the problem. Interviewed employers offered many of the benefits that parents wanted. Employer interviewees were committed to providing a supportive workplace for parents in part because they believe it is in the organizations' best interest to invest in and retain long-term employees. Surveyed employers also provided a range of benefits, with most offering flex time, use of sick leave, or time off (Figure 37). As one employer survey respondent commented:

**“Employees view providing adequate child care benefits as increasingly important in rating us highly as a place to work.”**

Three employer survey respondents provided comments regarding their current efforts:

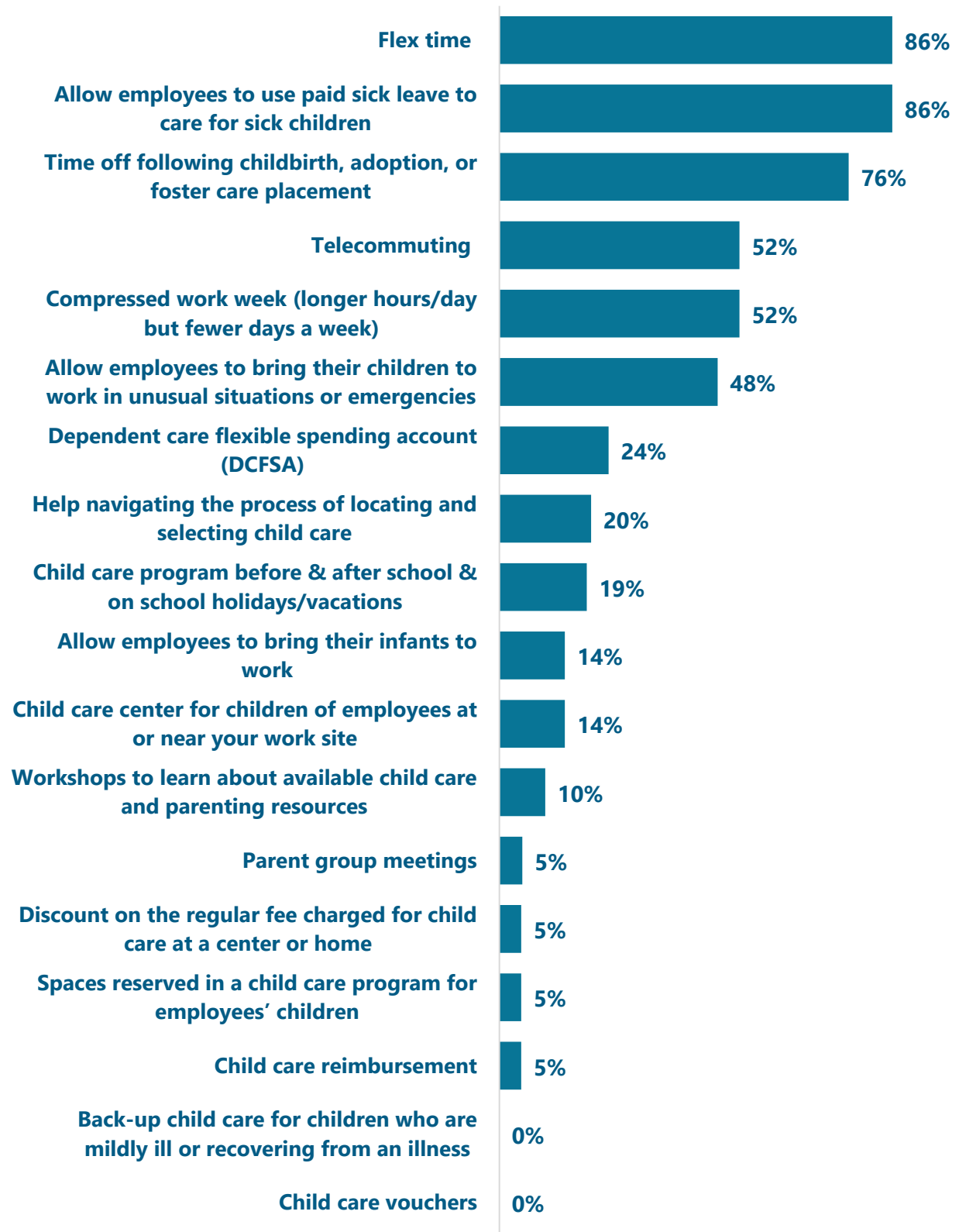
**“We are a small business but very family-oriented. We are very generous with sick time and allow employees to be off at ANY time when a sick/ill child is concerned if other arrangements cannot be made.”**

**“We offer resources through an EAP [employee assistance program] which can provide support and information on child care issues.”**

**“We've had very high interest in the past and looked into many child care options. Most options were not feasible (starting our own licensed center on site) but some are still in the works. We are reevaluating our current benefits package and vouchers/reimbursements are on the list to look at.”**



**Figure 37.** Percentage of employer survey respondents whose organization provide select benefits (n=21)



Interviewed employers said they allowed some employees to work remotely during the COVID-19 crisis and now are in conversation about transitioning back to the office. Half of employer survey respondents allowed telecommuting. One employer interviewee said flexibility has a cost though, and it is often harder to make up work than to do it on schedule. Focus group participants also made this point. Teachers, for example, can take sick days, but it is still a lot of work writing sub plans, which are harder to do when last minute. Few surveyed employers allow employees to bring infants to the workplace. As one interviewee pointed out, many workplaces are simply not safe to have infants or small children there.

One interviewed employer offered financial assistance to employees that need it for emergencies, including for child care. Several interviewees identified other employers they were familiar with, such as the Army Corps of Engineers and the Jonathan M. Wainwright Memorial VA Medical Center, as examples of employers who offer their employees child-care subsidies or stipends.

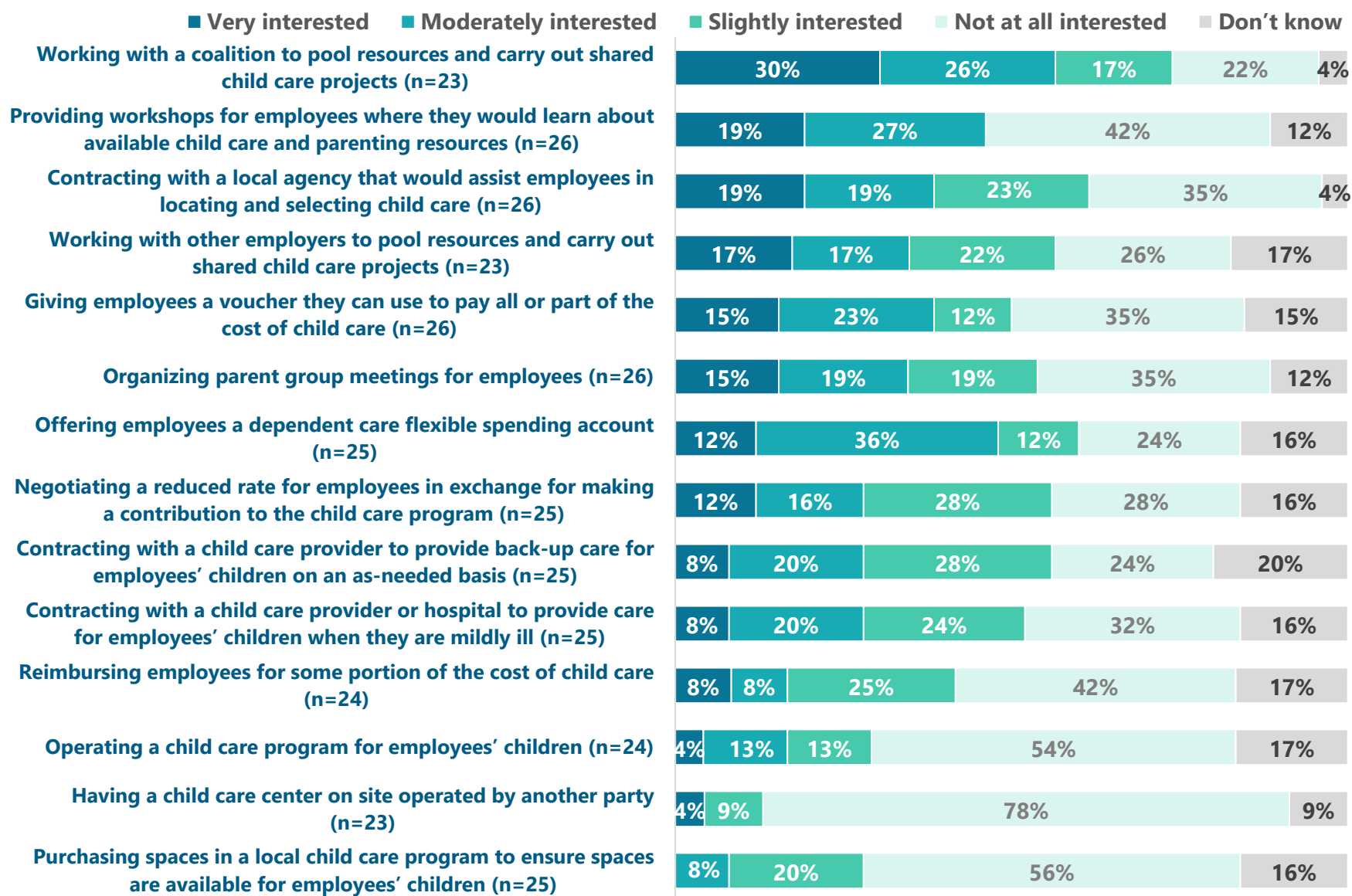
## Employer interest in strategies

---

We asked employer survey respondents to indicate their level of interest in different ways employers can help their employees address child care problems (Figure 38).



**Figure 38.** Employer survey respondents' level of interest in various possibilities



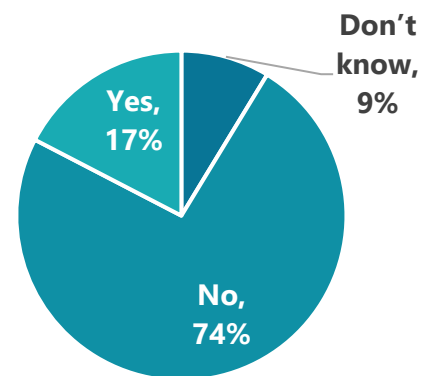
Respondents had some level of interest in nearly all the possibilities we asked about. This included considerable interest in collaborative strategies to pool resources and carry out shared child care projects, with 34% of employer respondents saying they are either “very” or “moderately” interested in working with other employers, and 56% saying they are either “very” or “moderately” interested in working with a broader coalition (n=23). A small percentage (17%) of surveyed employers are already working with other employers or community partners to carry out shared child care-related projects (Figure 39), although over half were “very” or “moderately” interested in the idea (Figure 38). One employer survey respondent commented:

**“I am interested in learning about programs or community pooling of a larger childcare facility.”**

One employer interviewee facilitated a learning community wherein the parents in the workplace met regularly and shared information about child care and related resources. This was an easy, low-cost activity that was successful. This is particularly useful as a participatory adaptive management strategy when a lot of uncertainty exists, a condition that characterizes many issues since the beginning of the COVID-19 pandemic. While only 10% of 21 employer respondents currently provide workshops for employees and only 5% facilitate parent groups (Figure 37), 46% are either “very” or “moderately” interested in providing workshops, and 34% are at least moderately interested in facilitating parent groups (Figure 38).

Three interviewed employers and several focus group participants were considering expanding employee benefit packages, including adding leave for child care and providing a child care subsidy or stipend. In the following subsections, we provide more in-depth information related to select topics that were salient during working group meetings and data collection.

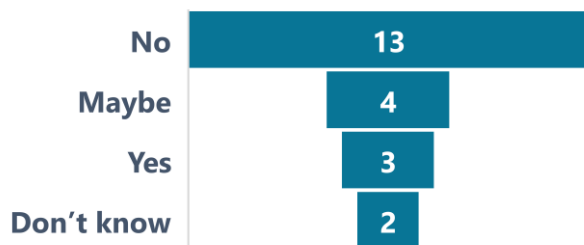
**Figure 39.** Percentage of employer survey respondents whose organization currently works with one or more other employers or other partners to carry out shared child care-related projects (n=23)



Child care onsite and availability of space

Having a child care center onsite operated by another party was among the possibilities that garnered the least interest from employer survey respondents (Figure 38). Yet, providing free or low-cost space to a child care program is also an important way to help address the child care bottleneck, and three surveyed employers said they have space where a child care program could be located (Figure 40). Another six were not sure but did not completely rule it out by answering “no.”

**Figure 40.** Whether employer survey respondents’ organization has building space where a child care program could be located, number of respondents (n=22)



One employer interviewee had investigated opening an onsite daycare and had determined that it would not likely be worth the money and effort. The primary challenges this organization encountered in their research were related to compliance with state regulations including those requiring expensive remodeling and more staff and management than practical.

Another employer interviewee said there is no possibility of onsite child care at their worksite due to safety concerns (e.g., heavy traffic and machinery).

Credit for employer-provided child care facilities and services

Who qualifies for the credit?

If you are an employer and you provide childcare facilities for your employees either on-site or through a contract or referral program with an outside childcare facility, then you can qualify for this child care tax credit.

How much is the credit worth?

The credit is for 25% of the amount paid for childcare expenditures (for such things as constructing and maintaining the property) and 10% for the amount paid to provide childcare resources or referral services to employees. The total limit for this credit is \$150,000 per year.

For more information, visit: <https://www.irs.gov/forms-pubs/about-form-8882>



## Contracting with a third party for care

Employer survey respondents had considerable interest in contracting with child care providers for specific types of care (e.g., backup care on an as-needed basis) (Figure 38). However, contracting with a child care program to ensure spaces are available for their employees' children was the possibility that survey respondents expressed the least amount of interest in.

That said, the employer interviewee whose organization had investigated and ruled out the idea of opening an onsite child care center is now considering an employee child care reimbursement benefit as the best option for their organization and employees.

Other employer interviewees liked the "Home Depot model," which involves several complementary strategies: Home Depot contracted with a third party to ensure spaces are available for employees at a given rate, provides a child care subsidy parents can use at any licensed child care of their choice, and provides navigation support for parents to find child care.<sup>34</sup> Home Depot can offer this level of child care benefit partly because they are a large, well-resourced company. This model has a lot of variations, and all the spaces might be with a particular provider or, like the Home Depot model, located according to employee need. Employer survey respondents were not as interested in general in these types of arrangements.

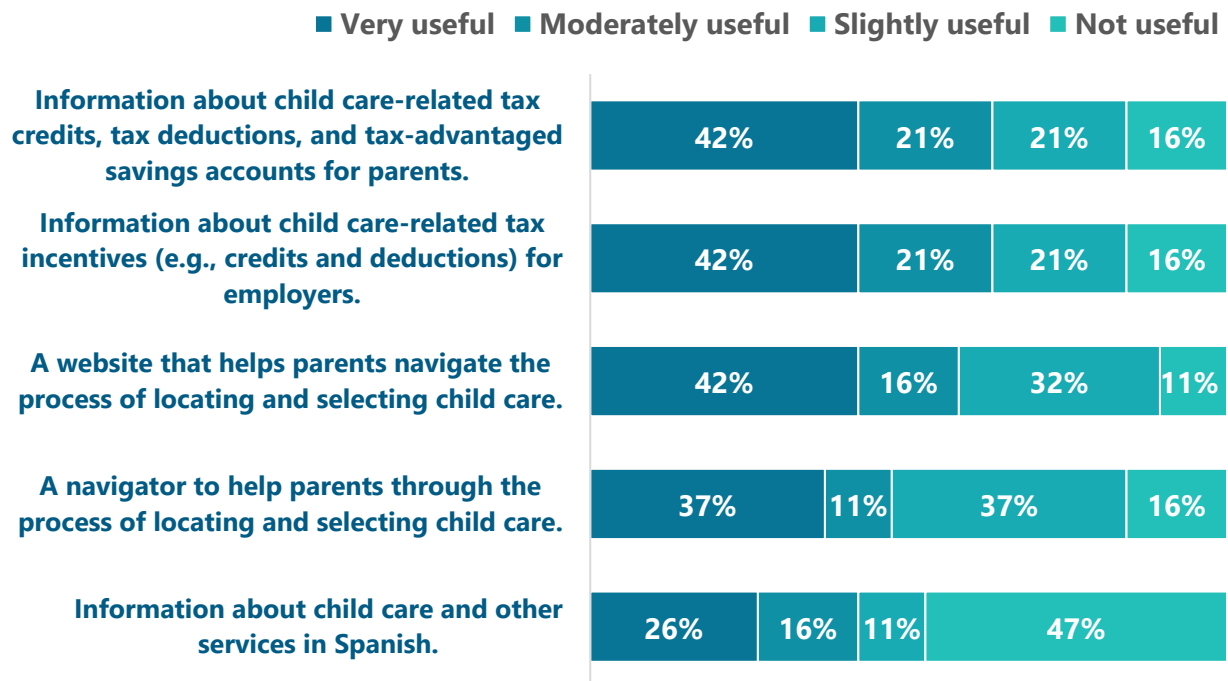
## Types of support employers would find helpful

Figure 41 shows how useful select types of support would be for employer survey respondents. Parents and employers who participated in focus groups and interviews said families need help navigating the various systems to successfully access suitable child care for their family situation. Asked how helpful a professional referral agency that helps families find and choose child care would be, 28% of family survey respondents said "very helpful," 36% said "somewhat helpful," 24% said "slightly helpful," and only 13% said "not at all helpful" (n=348) (Figure 34).

---

<sup>34</sup> US Chamber of Commerce Foundation, Case Study: Home Depot's Employer-Supported Childcare, accessed via <https://www.uschamberfoundation.org/case-study-home-depots-employer-supported-childcare>

**Figure 41.** Extent select types of support would be useful for employer survey respondents (n=19)



Interviewed employers said connecting people to resources or educating them about what is available is an important priority. At the same time, almost half of employers reported that providing information in Spanish would not be useful, indicating a potential disconnect between employee language access needs and employers' perceptions of that need. Some said they would appreciate an update of where the open child care slots are at the end of summer before the start of school each year so they could share the information with their employees. They also indicated that they wanted help connecting parents to available care. Based on this theme from the interviews, we asked employer survey respondents if there is a specific time of year when they would prefer to provide their employees with information about child care resources. Several said they would like the information about child care resources updated regularly throughout the year so they could share it at monthly staff meetings and provide it to prospective employees during the interview process or immediately upon hiring. Others said it would be most useful during their benefits open enrollment in the fall. Those who said it would be most helpful once a year specified it would be most useful in August.

# Child care provider needs and interests

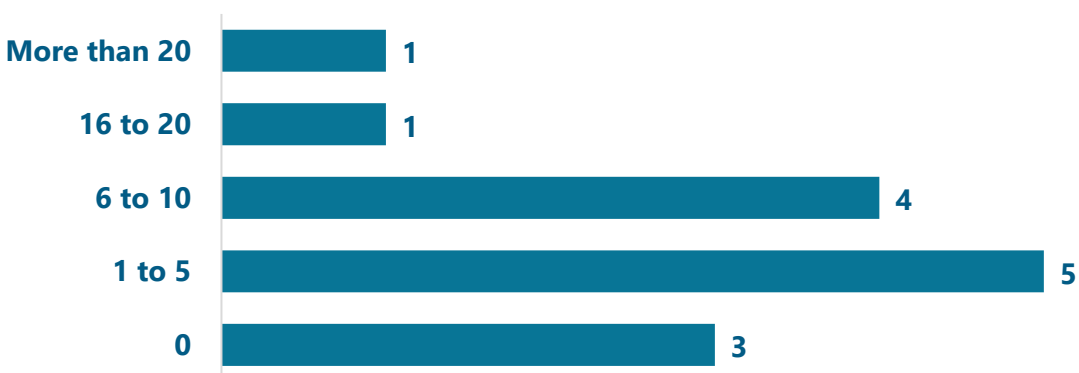
## Waiting lists, wait times, and open slots

Child care provider waiting lists are an indicator of the need for more child care. We know many Walla Walla Valley families encounter long waiting lists when they seek child care. As a parent survey respondent described:

**“When I first started looking for child care when my child was 2, I could only find 12-month waiting lists. Child care was critical for me to go back to school and start working part-time. We were lucky enough to find a spot for our child. We finally moved to be close to the daycare because it was so hard trying to find child care with our work schedules, and without having any family living nearby. It is still a struggle to find care sometimes since our work hours don’t always match the typical daycare timeframe.”**

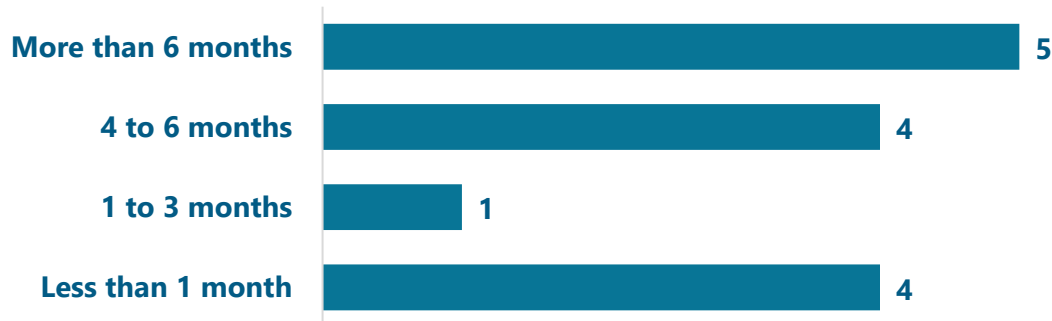
Eleven out of 14 child care provider survey respondents have children on waiting lists, some longer than others (Figure 42). All provider respondents have a delay in enrolling new children: five of 14 have a wait of more than 6 months (Figure 43). In addition, Figure 44 shows eight of the 14 provider respondents only have one to five openings and another three respondents had no openings each year.

**Figure 42.** Number of children child care survey respondents’ organizations typically have on their waiting lists by number of child care survey respondents (n=14)

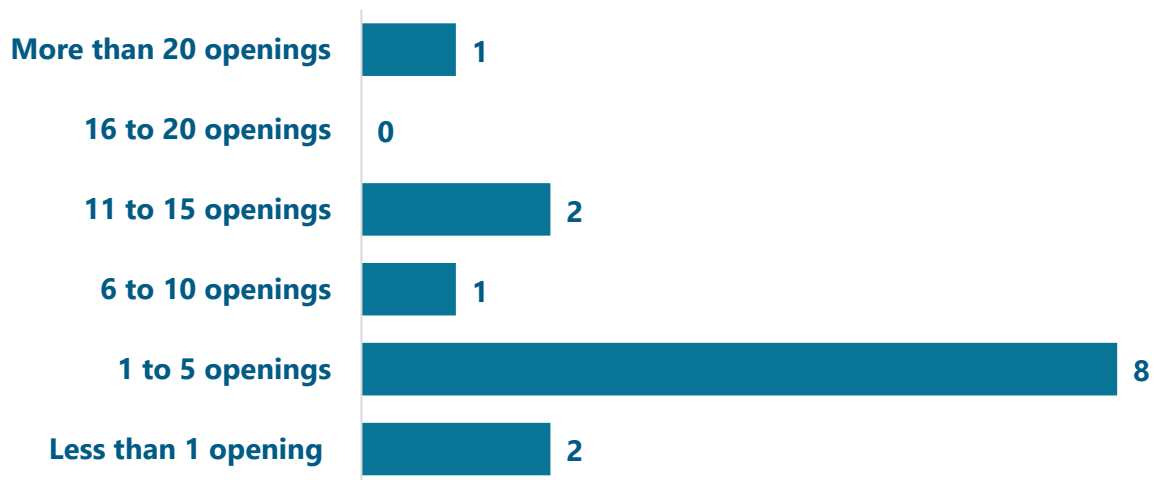




**Figure 43.** Number of months it takes for child care survey respondents' organizations to have an opening to enroll a new child in their care by number of child care survey respondents (n=14)



**Figure 44.** Number of openings child care survey respondents' organizations have a year, by number of child care survey respondents (n=14)



We asked child care provider survey respondents how many children they currently serve and the maximum they could serve by age group. Table 17 shows that nine out of 14 provider respondents have unused slots for infants, for example, for a total of 24 unused infant slots (10 in Walla Walla, 3 in Burbank, 2 in Dayton, and 7 in Prescott). We do not know if the slots reflected in this table are considered in the "Washington Child Care Industry Assessment" estimates (Tables 5 and 6). However, these survey results suggest unused capacity. The openings in Dayton reflect the situation before the last provider closed in June 2021.

**Table 17.** Child care provider survey results related to respondents' current capacity, by age group

	Infants	Toddlers	Preschool -age	School- age
<b>Number of providers</b>				
Not providing care for this age group	3	1	1	2
At capacity for this age group	5	4	4	4
Have unused slots for this age group	9	10	10	10
<b>Total unused slots for this age group</b>	<b>24</b>	<b>33</b>	<b>62</b>	<b>121</b>
Unused slots in Walla Walla	10	24	42	89
Unused slots in Burbank	3	1	1	8
Unused slots in Dayton	2	1	0	7
Unused slots in Prescott	7	0	11	0

## Referrals, navigation, and communication

Child care providers in focus groups spoke of not having enough time to keep up with updating websites and advertising. They wanted a one-stop website to post openings and advertise services to reduce the amount of work the current process takes and to make a more effective system. In addition to connecting with parents, providers wanted help navigating licensing and business information and services. Some providers were also interested in contracting with other groups to help recruit clients. Figure 45 illustrates child care provider survey respondents' level of interest in contracting with a local resource and referral agency that would help families locate and select their child care program. Five of 12 were either "somewhat" or "very" interested.

Child care providers in the focus groups said that when they are at capacity, they try to refer families to other providers but limited information is available about who has open slots.

**Figure 45.** Extent to which child care provider survey respondents are interested in contracting with a local resource and referral agency that would help families locate and select their child care program, by number of respondents (n=12)



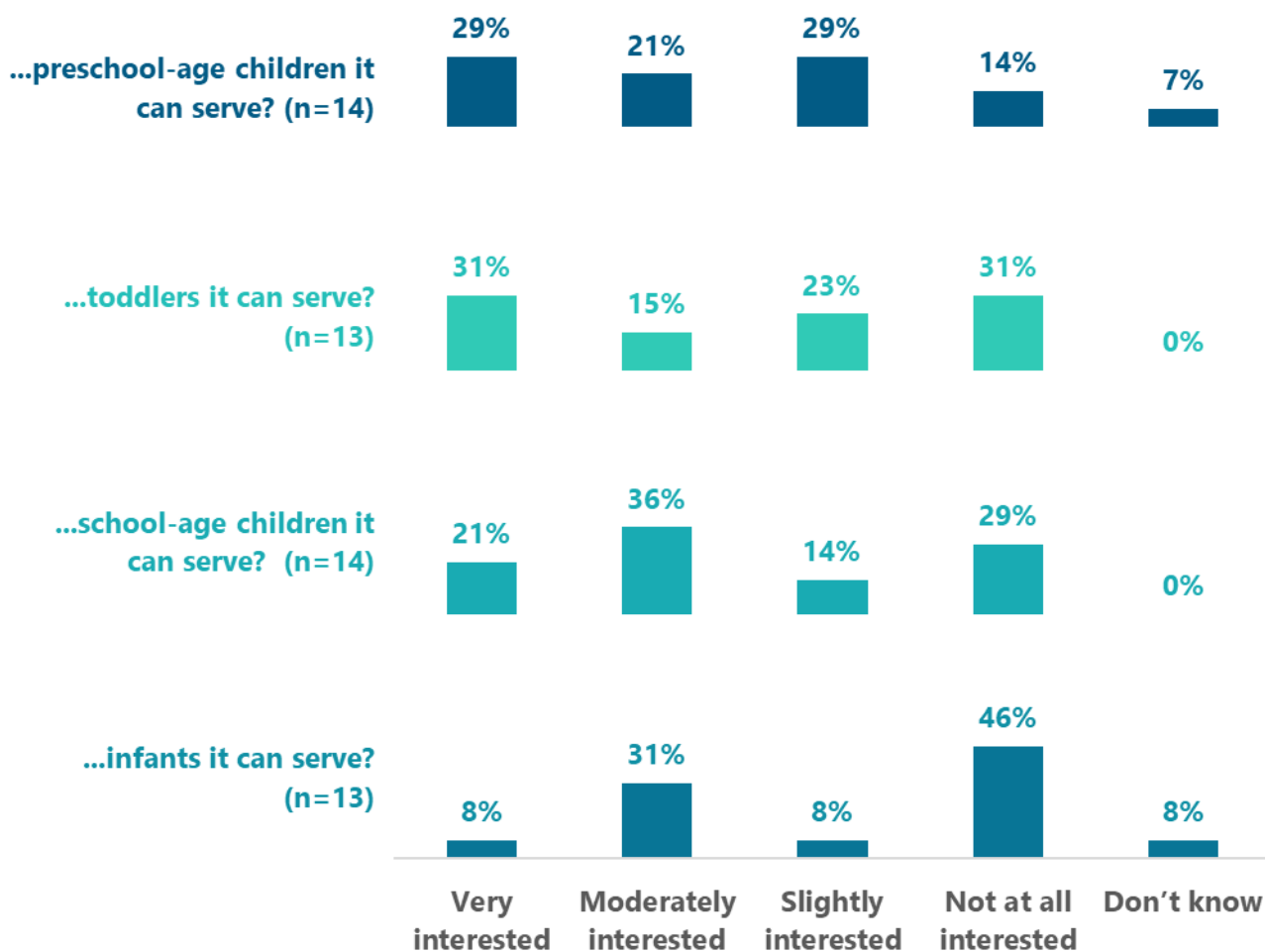
Providers indicated that peer-to-peer learning was important and that they were communicating with each other via text or phone when they have new information. Several mentioned that the Early Achiever Coach was very useful and had helped them prepare for their 3-year check, helped set up classrooms, and let them know when they were missing something. This support had stopped with the pandemic, and they hope it will be continued at some point.

## Interest and capacity to serve more children

We asked child care provider survey respondents to report their level of interest in increasing the number of children they serve by age group (Figure 46). Respondents had some level of interest in expanding in all age groups, although only one said they are “very interested” in increasing the number of infants they serve (n=13). In interviews and focus groups, providers who were not interested in expanding said they would be overstretched if they tried to care for more children. Some report that they are getting older and need to take care of their own bodies to provide quality care as a reason for not wanting to expand their business.

**Figure 46.** Child care provider survey respondents' level of interest in increasing the number of children they serve in select age groups

**How interested is your  
child care organization in  
increasing the number of...**



Survey respondents' answers explaining what, if anything, would make it possible for their child care program to increase the number of children served ranged from more advertising to funding for specific projects to staffing needs to help overcoming regulator constraints:

**"Advertisement to show we have availability."**

**"A bigger location and more staff."**

**“Reliable well qualified teaching staff.”**

**“Funding for a new building. Have the property but not the funding to build.”**

**“Adding another sink and equipment added to the environment.”**

**“Allowing us to have an ongoing waiver to care for more than 12 children.”**

**“State regulations.”**

**“State to raise capacity limits.”**

**“Have the infant group go back to 18 months instead of 2 years.”**

**“Right now we are only licensed for 20 children. We have space for more at each of our 5 after-school sites and would like to be licensed for more children.”**

We also asked respondents to specify how much money they would need to complete the projects that would enable them to expand, if relevant. Answers ranged from \$25,000 to \$500,000:

**“\$100,000”**

**“\$500,000”**

**“I have plenty of square feet. I need to replace decks, siding on the house that the children have destroyed, and play equipment that is old. I’m estimating \$25,000.”**

**“Para 40 niños más tal vez \$120,000 anuales por los costos de staff y beneficios.**  
(For 40 more children maybe \$120,000 per year for staff costs and benefits.)”

**“We offer scholarships for families who need financial assistance. Even with reimbursements for state funding, many families still struggle to pay for childcare. Additional scholarship funds would help, as well as anything that helps us keep our fees affordable (like free or low-cost staff training and development opportunities, free or discounted supplies and equipment).”**

In addition to the survey, from interviews and focus groups, we know of the following discussions about expansion:

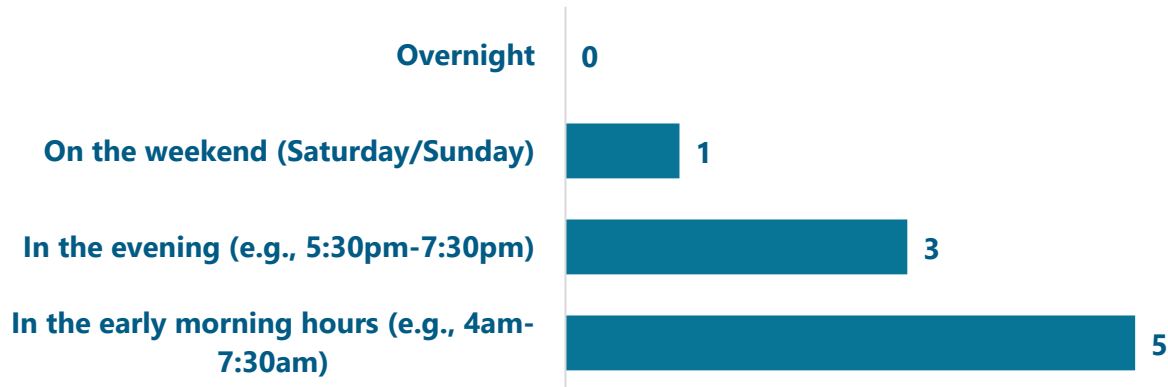
- Little Angels Bio Dome is in the process of adding another classroom.
- Children's Home Society of Washington (CHSW) wants to expand their number of child care slots. They expect to open a new center that will enable them to grow soon.
- Early ECEAP and Early Head Start both can expand. There is an opportunity to put an infant ECEAP or Early Head Start classroom at the Center for Children and Families for 10 infants. Walla Walla Public Schools has room at the Center for Children and Families to put an ECEAP classroom for 10 infants at the Center for Children and Families if \$50,000 worth of remodeling is completed. ESD123 is ready to secure funding for an infant ECEAP room, and CHSW is interested in contracting to provide the care. The opportunity to open new Early Head Start classrooms occurs every few years.
- YWCA provides child care, and they have facilities and want to expand.
- The YWCA has another space available at their Walla Walla site and will open another room if they can find the staff. They are working with CCHS to set up and run a center in Dayton.

## **Interest in expanding hours of operation**

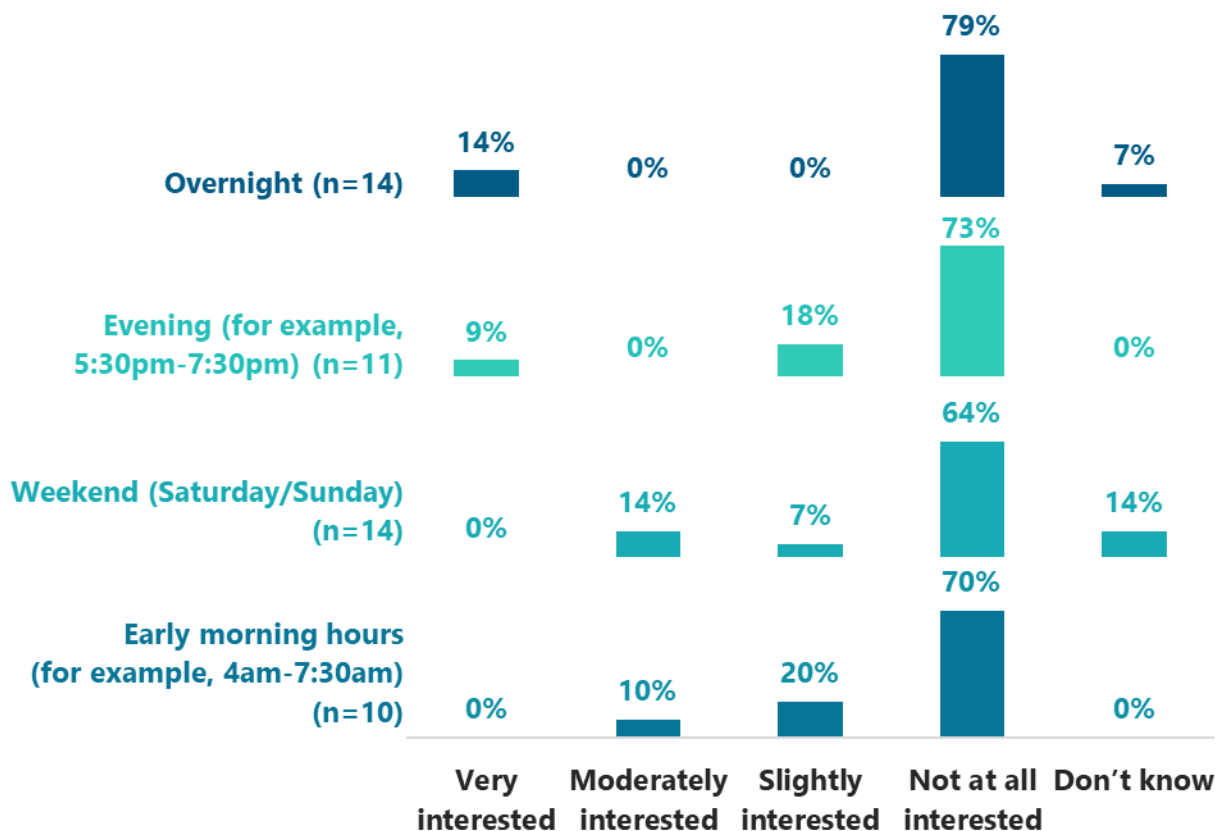
---

Child care providers in focus groups talked about needing time with their own families and were hesitant to expand their hours. Most wanted more time off not less. Survey respondents most commonly offered expanded hours in the morning, although only five of 14 do (Figure 47). Figure 48 conveys little interest among survey respondents in expanding their hours, although one out of 14 is "very interested" in expanding to offer evening care and two are "very interested" in expanding to offer overnight care.

**Figure 47.** Number of child care provider survey respondents that provide care at the following times (n=14)



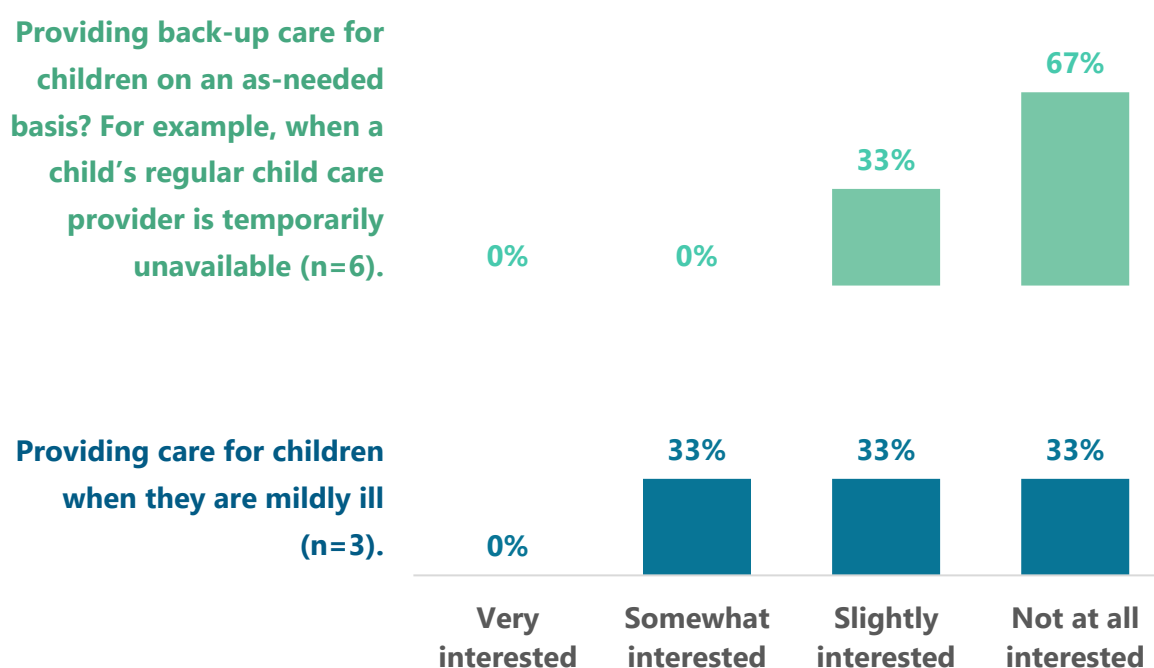
**Figure 48.** Extent to which child care provider survey respondents who do not currently offer care in the following times are interested in doing so



## Interest in providing sick child and back up care

Ten of 13 child care provider survey respondents provide care for children when they are mildly ill, and eight of 13 offer back-up care for children on an as-needed basis (for example, when a child's regular child care provider is temporarily unavailable) (n=13). Figure 49 shows the level of interest of child care provider survey respondents who do not currently offer these services in doing so.

**Figure 49.** Extent to which child care provider survey respondents who do not currently offer these services are interested in doing so

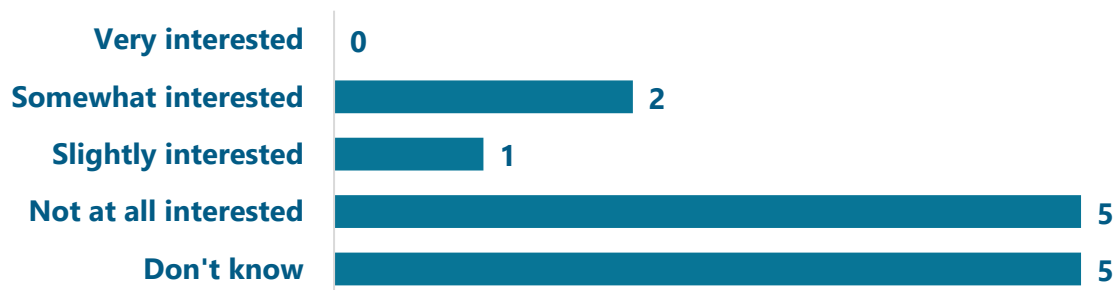


## Providers need more information about ECEAP and Head Start

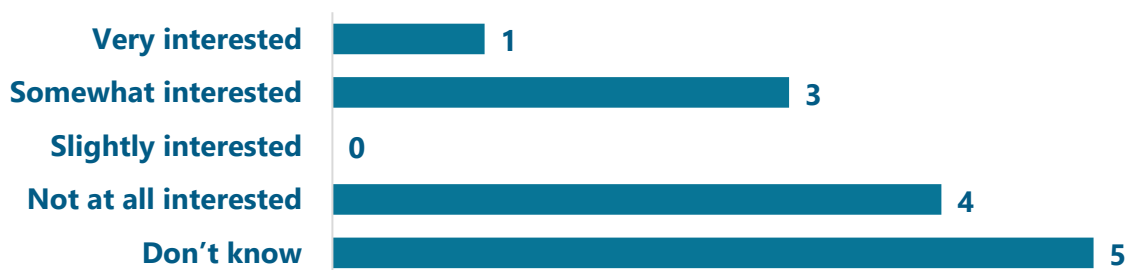
Figures 50 and 51 report the level of interest child care survey respondents expressed in running an ECEAP or Head Start classroom. Many respondents indicated they do not know enough about these programs to gauge their level of interest in participating.



**Figure 50.** Extent of child care provider survey respondents' interest in running an Early Childhood Education and Assistance Program (ECEAP) funded by Washington State for children ages 3 and 4, by number of respondents (n=13)



**Figure 51.** Extent of child care provider survey respondents' interest in running a Head Start classroom for children ages 3 and 4, by number of respondents (n=13)



## Challenges

### In-home providers

#### Disincentives

A consensus among interview and focus group participants is that in-home care has numerous disincentives, which are making it difficult to continue. Those in focus groups said that schools or center-based programs have the resources to hire multiple workers, whereas in-home providers fulfill the teacher, janitor, cook, and other roles in the same day. One provider shared that she used to stay up until 10 pm cleaning her classroom and preparing for the following morning. They indicated that because of licensing requirements and regulations it is easier to set up a center outside of the home rather than provide in-home child care. One of the most difficult problems they discussed was the impact that the use of their home for licensed child care had on their families. They reported that their businesses overly constrained their family use of their own home.

## Infants

Licensed in-home providers said they could not take infants because of their licensing requirements. They reported not having enough space to provide care for infants and older children simultaneously. Infants require individualized care in addition to adequate space for cribs and changing stations.

## Pricing

According to current and retired in-home providers who participated in the focus groups, it makes more sense to enroll children that need care five days per week rather than those needing only one or two days of care. Providers in focus groups indicated that they are in a bind when it comes to the prices they set because they want to have



accessible prices, but they work very long hours and have to cover expenses. They indicated that licensed in-home providers end up losing wages when parents do not qualify for subsidies because they look for the next affordable option, which is often an unlicensed provider. They indicated that expanding eligibility for subsidies will enable operation of more in-home licensed providers.

## Language

Some of the licensed Spanish-speaking providers need additional support in Spanish. They wanted help navigating licensing and subsidy processes and business systems. These included not only curriculum or licensing resources but help paying and reporting

payroll taxes and other common business needs. Even when providers can speak English well enough for day-to-day conversation, they may not be comfortable or able to navigate complex systems in English.

## Impact of COVID-19

COVID-19 had a big impact on many child care providers, with mixed results for child care in general in the Walla Walla Valley. Some providers said that early in the pandemic

there were not enough children to run a cost-effective program and costs for personal protective equipment and cleaning supplies went up, causing financial stress. They said that several in-home child care centers have closed and are not reopening, with Dayton being especially hard hit. Some centers were doing well though, with the Ark, Bio Dome, and YMCA, for example, expanding programs and number of children cared for during the pandemic. Providers in the focus groups said that the Washington Department of Children, Youth, and Families (DCYF) has offered grants to help providers stay in business, but numerous requirements made the applications inaccessible to small home-based providers.

Provider focus group participants indicated that many parents ended up losing their eligibility for state subsidies when businesses shut down and they lost their jobs during the pandemic. As parents started working again, they tried to reapply only to discover they were no longer eligible because they were over the income threshold, but this was only because employers asked workers to pick up extra hours to cover for people in quarantine

In the Spanish-speaking focus group, providers said they had felt taken advantage of by Washington State. When businesses started to close, the State asked in-home providers to stay open to meet working families' child care needs. Providers had to modify their in-home spaces to meet COVID-19 regulations, including implementing additional sanitation practices, purchasing sanitation supplies, adding furniture to accommodate safe distancing, and expanding their capacity to include children up to age 11. According to participants, when children started going back to school half day while continuing to attend in-home child care for the other part of the day, child care providers lost income since the State only paid for children attending a minimum of five hours a day.

### **Unlicensed in-home care**

Unlicensed in-home providers are primarily disadvantaged by the lack of supports available to them to operate a quality care setting. They do not have the means to access state subsidies because they cannot participate in the Early Achievers program without a license. To make ends meet financially, providers are needing to get creative with the way they operate, often caring for as many children as possible and offering

care during “non-traditional” hours (early morning or late evening). Unlicensed providers were also left out of COVID-19 relief funding.

As high costs limit parents’ options in finding child care, many see unlicensed providers as their only affordable option to be able to work. Parents raised safety, nutritional, and educational concerns regarding unlicensed settings. At the same time, parents expressed empathy for unlicensed providers. Several interview and focus group participants said many of these unlicensed child care providers are of exceptional quality and experience but are just not licensed. Parents recognize that providers need to make a sustainable income to cover operational costs and wages.

Focus group participants and interviewees also indicated that some unlicensed providers are undocumented and do not have the paperwork to become licensed or even get a business license. They said that alternative avenues for support, age-appropriate activities, safety protocols, and other child care-specific resources are needed so that unlicensed providers can provide quality care. They thought that unlicensed providers need a path to licensure and additional supports, such as access to learning opportunities. Unlicensed and undocumented providers, participants pointed out, could help address the child care shortage by becoming licensed providers with some support.

The strategy for unlicensed child care is risk mitigation rather than expansion. Unlicensed providers raise an equity issue since this is more common among minorities and those with low incomes. Expanding support for unlicensed child care providers, including helping them become licensed, could provide a pathway out of poverty and improve their economic self-sufficiency while serving an urgent community need.



## Low wages

There was consensus among participants that wages in the child care sector are very low for the work and sacrifice. Several indicated that, as a society, we are subsidizing child care by not paying child care providers a living wage. They thought that child care needs to be funded at the level of K-12 schools.

Parents in one focus group recognized that child care providers are not paid enough so while most people can only afford child care at a large sacrifice financially, providers are also sacrificing to provide care. Parents thought that wages of neither parents nor providers have kept up with the cost of living.

Several providers talked about how difficult it is to find reliable employees. Others described a migration of workers from private centers to the Head Start and ECEAP programs, which pay better. Another provider who paid higher wages did not have a problem finding employees. Several suggested that raising wages was key to attracting and retaining workers.

To further explore the costs associated with increasing wages, we included a scenario with living wages in one of the cost model scenarios in the next section of the report.

## Licensing

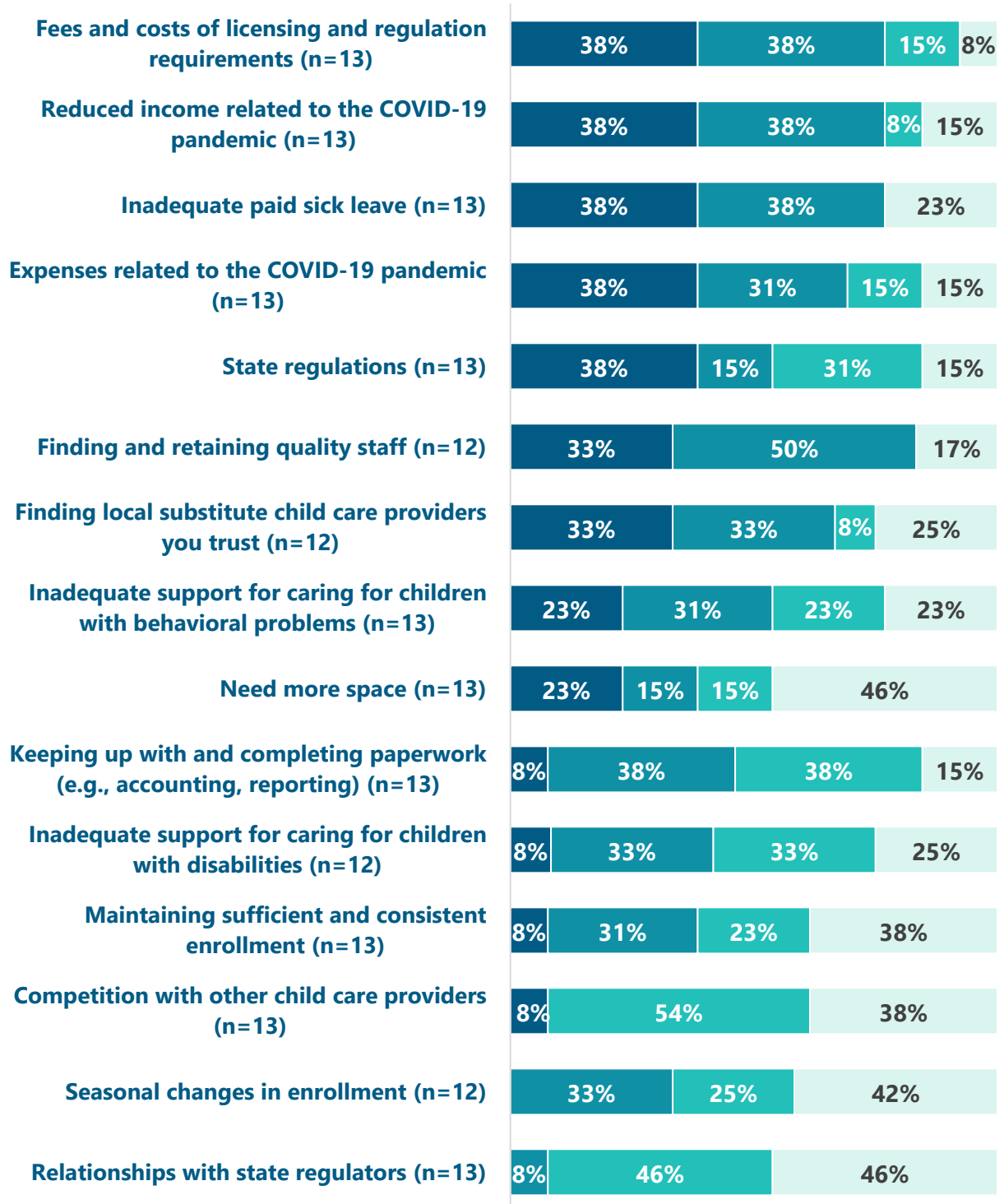
Providers said it is expensive and a lot of work to get and maintain a license. But a provider cannot accept subsidies unless they are licensed and actively enrolled in the Early Achievers program, which is an added burden. Those retired, as well as almost all of those currently operating, described the licensure process as exhausting and requiring a lot of personal sacrifice to make it work.

## Child care provider survey results on challenges

We asked child care provider survey respondents to indicate the extent to which select issues that arose in the interviews and focus groups are a challenge for their organization. The results are presented in Figure 53.

**Figure 52.** Extent to which select issues are a challenge for child care provider survey respondents' organizations, by number of respondents

■ Significant challenge ■ Moderate challenge ■ Slight challenge ■ Not a challenge





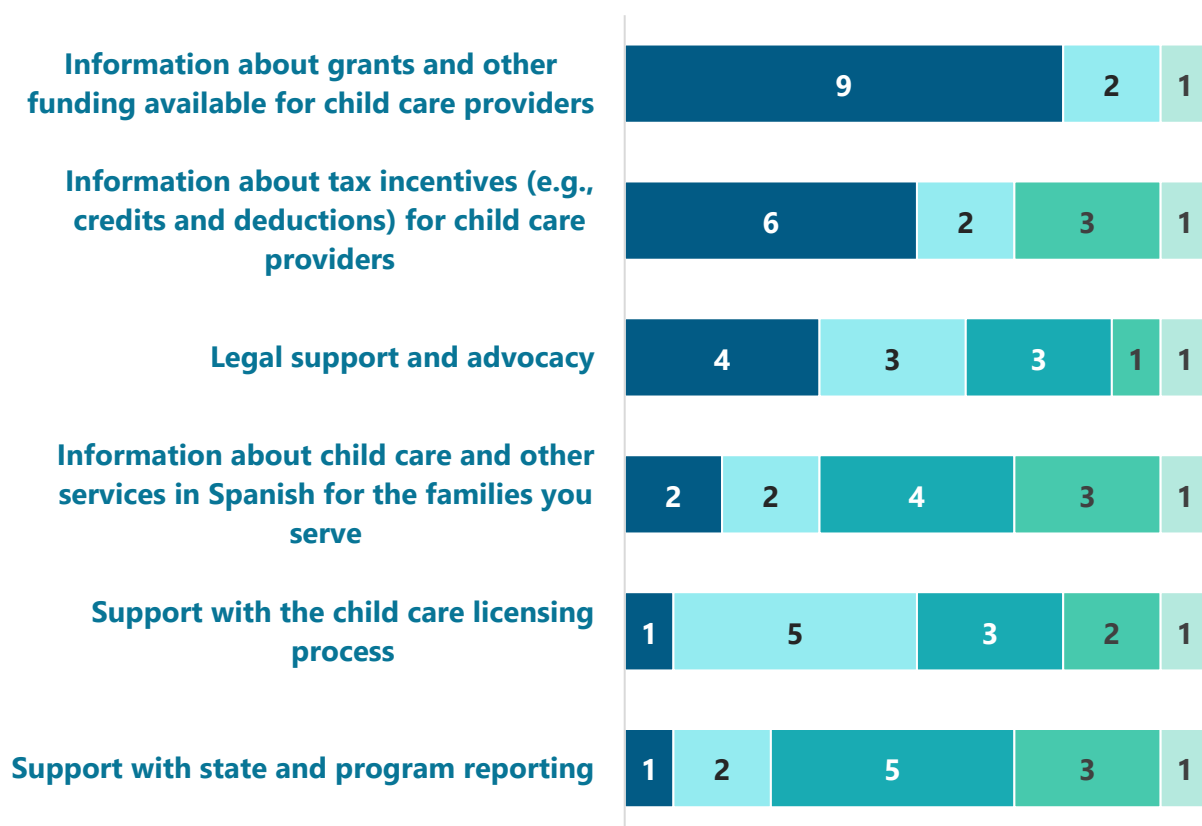
## Interest in support and strategies to address problems and costs

### Helpfulness of select supports

Figure 56 summarizes the extent to which child care survey respondents would find select types of support helpful. Survey respondents are especially enthusiastic in information about grants and other funding, tax incentives, and legal support and advocacy. It will be important to ensure resources on these topics are available in English and Spanish.

**Figure 53.** Extent to which select types of support would be helpful for child care provider survey respondents, number of respondents (n=12)

■ Very helpful ■ Somewhat helpful ■ Slightly helpful ■ Not at all helpful ■ Not applicable

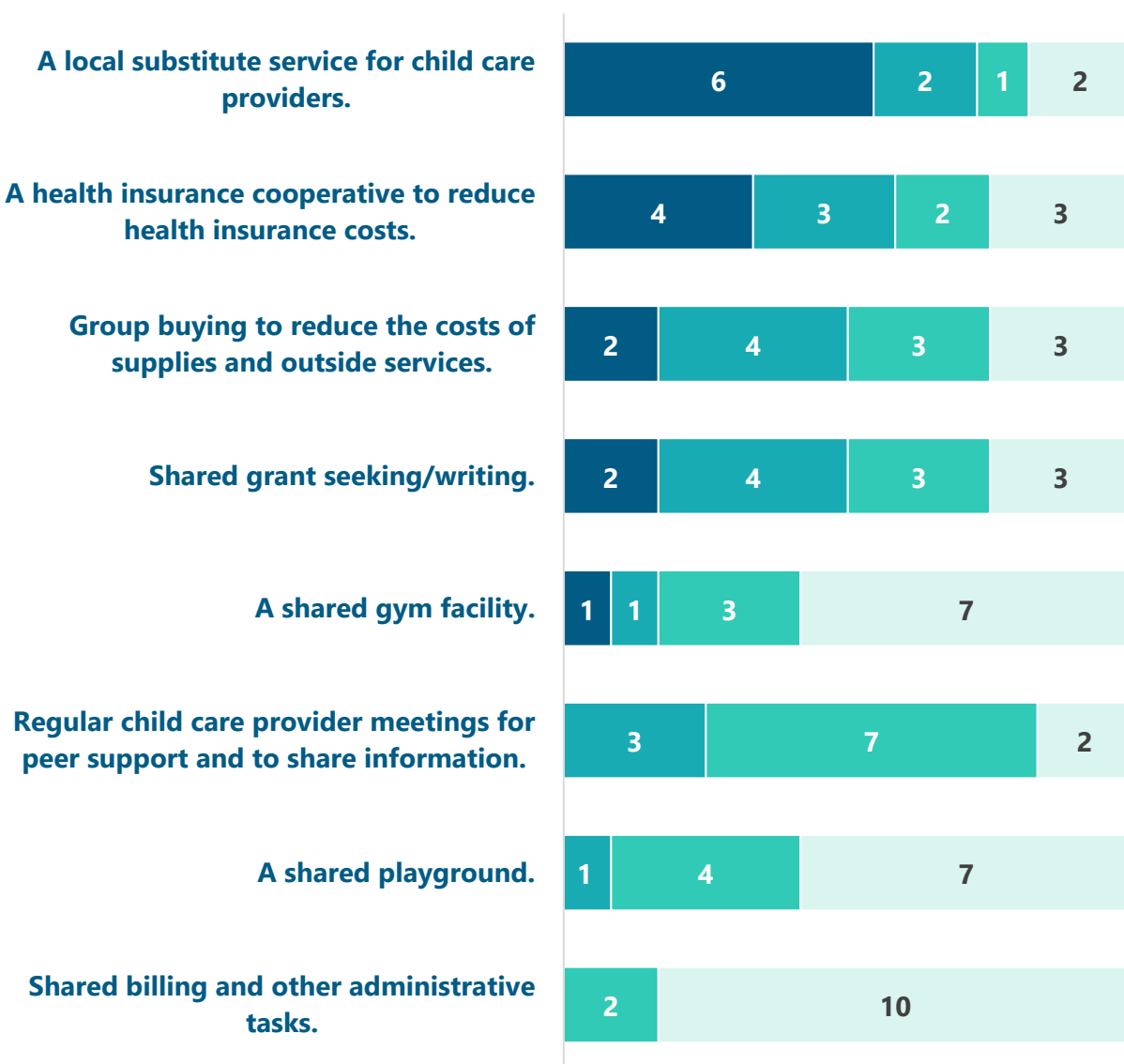


## Interest in partnering with other child care providers

Figure 54 shows child care survey respondents' level of interest in collaborating with other child care providers on select services and programs.

**Figure 54.** Extent child care provider survey respondents are interested in collaborating with one or more other child care providers on the following services or programs, number of respondents (n=12)

■ Very interested ■ Somewhat interested ■ Slightly interested ■ Not at all interested





Having a local substitute service for child care providers was the service that drew the most interest of any of the strategies listed in the survey (Figure 54). Providers in focus groups and interviews felt obligated to always be available to provide care to the families they serve, resulting in missed vacation time and conflicts scheduling personal appointments. Many said it would be helpful to have someone available locally with all the required education and training who was willing to substitute for providers.

Interviewed providers described a child care substitute program by Imagine institute as a model. The program pays the substitute, so the provider still gets their income while they are out, and families do not have to find alternative child care. They thought it important to communicate an absence to their licensing contact to assign an assistant (with required qualifications) to take charge. In this way, if something happens, the license is relayed to the assistant during that time reducing their liability. They also liked the idea of an opportunity to share a license with an assistant teacher and later transfer it to the assistant while they are gone.

There was strong and moderate interest in cooperative buying efforts for both employee health insurance and supplies and materials. Offering health insurance is an important benefit to retain employees and provide quality care, and it is an important part of treating employees fairly in this sector. Health insurance is expensive to provide, and any option that significantly reduces its cost will benefit child care employees and employers.

Surveyed providers had considerable interest in participating in cooperative buying of supplies and materials. Child care providers interviewed and in the focus groups spoke of personal protective equipment, cleaning supplies, and diapers as good candidates for bulk purchasing. However, providers in a focus group cautioned that they had tried this before, and it had failed because it was difficult to put their portion of a shared purchase on their own taxes, so they could not use an important tax deduction. They thought that whatever plan is developed needs to address this issue before they would participate. The YMCA offered to be the bulk buyer and distributor of supplies for child care providers.

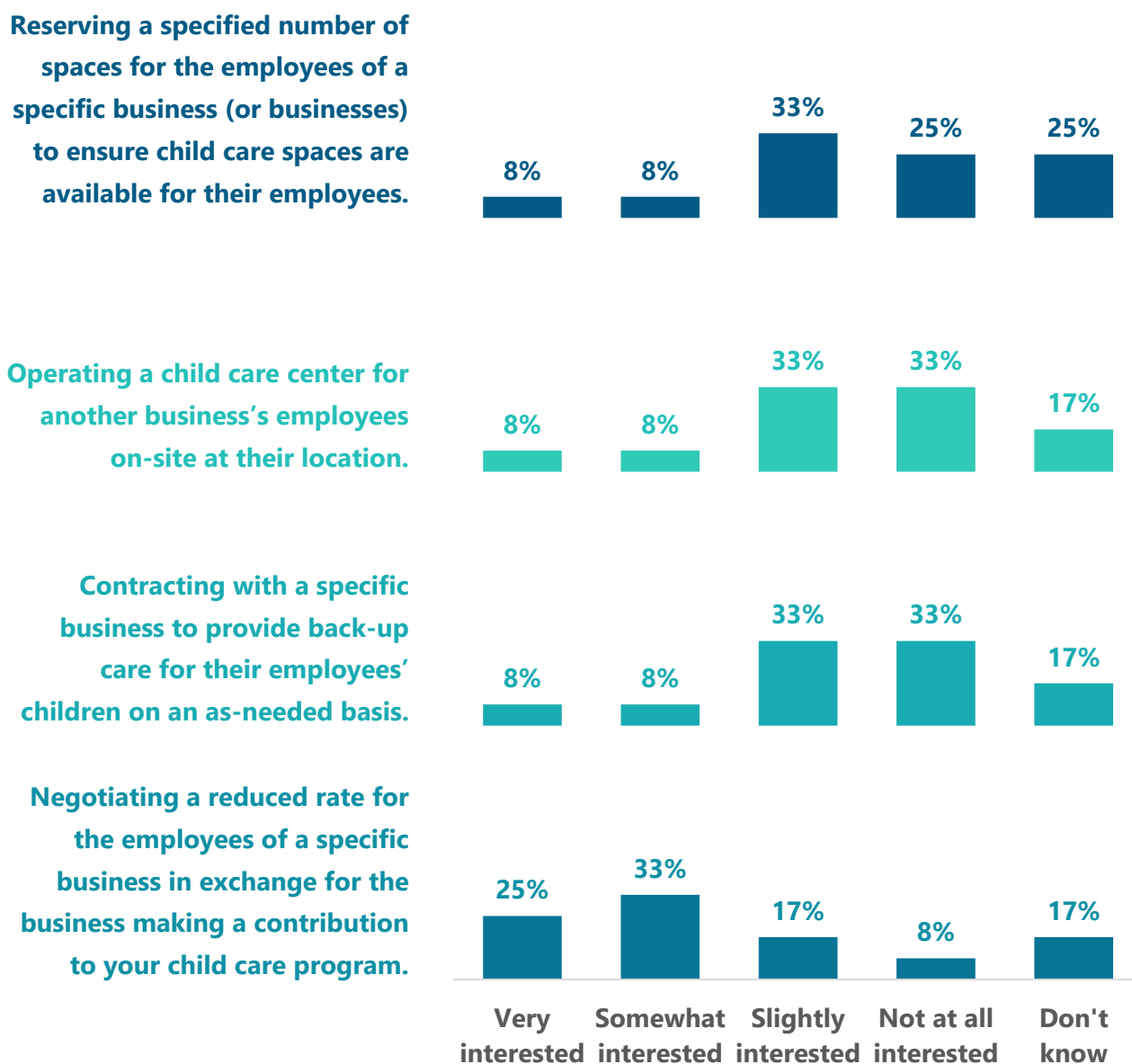
One of the strategies identified in the case studies—to share back-office services—has proven effective in other places in reducing cost and burden for providers (See Shared Services Alliances case study in Appendix I). Several providers in a focus group discussed

that it would be useful to have someone who was an expert in paperwork to provide support. They thought one person could support multiple providers.

### Provider interest in partnering with employers

Only two providers were “very” or “somewhat” interested in providing child care services for a specific business. More were interested in negotiating a reduced rate for a contribution (Figure 52).

**Figure 55.** Extent child care provider survey respondents are interested in collaborating with employers on select strategies (n=12)



## Interest by in-home providers in becoming a center

Parents in one focus group suggested that in-home licensed providers could grow their businesses into center-based care to serve more children. They thought transitioning from an in-home to a center-based child care program could be career advancement that also increases available care. Several in-home providers in focus groups were interested in moving into a center facility if they could afford the rent or facilities costs. Nearly everyone indicated that moving their business outside of their home would improve current in-home providers' business and personal lives. The cons are that larger spaces and additional teaching staff may be needed to meet licensing requirements. Child care providers believed there would be a lot of interest in that kind of space in both Dayton and Walla Walla.

Based on the qualitative results, we asked in-home child care survey respondents to indicate their interest in becoming a center-based program (Figure 55). Of the five in-home respondents, two were "very interested" and three were "not at all interested" in making this change.

**Figure 56.** Extent to which home-based child care provider survey respondents would be interested in becoming a center-based child care program if low-cost or no-cost space were available, by number of respondents (n=12)



# Cost modeling scenarios

Models used to estimate child care costs were originally developed by the Washington Department of Commerce as part of their Child Care Industry Assessment for the Child Care Collaborative Task Force, which was established by the Washington State Legislature. Specific methods, descriptions, and assumptions used for the models can be found in the “Washington Child Care Industry Assessment, Volume III: Child Care Cost Model Report” published in June of 2020 by the Washington State Department of Commerce.<sup>35</sup> Detailed cost model inputs and results can be found in Appendix II.

The “Cost Model Report” specifies the following goals for the models (p. 3):

1. *“To understand the cost to provide high-quality early care and education services in Washington, and how this varies by program type, size, location, and quality level,” and*
2. *“To understand the extent to which current revenues available to providers are able to cover the estimated costs.”*

For this study, we updated the variables in these models to better reflect the local child care situation. We gathered data needed to localize the model through interviews with representatives of center-based and home-based child care operations in the study area.

The models account for regional cost variations: Columbia and Walla Walla counties are in Region 2, along with Benton, Franklin, Kittitas, and Yakima counties. The regional cost multipliers for the base estimates reflect regional market differences and enable better estimation of differing costs around the state. The regional cost multipliers for Region 2 are 79% for center-based cost calculations and 88% for family home child care calculations. Every model developed for this report starts with these regional estimated costs and then defines specific costs to reflect local situations and goals.

---

<sup>35</sup> Washington State Department of Commerce, Child Care Collaborative Task Force, Washington Child Care Industry Assessment, Volume III: Child Care Cost Model Report, page3, available at <https://deptofcommerce.app.box.com/s/ga5pjyennvtgtx1t149ymm1nm1umzwek>

## Scenario overview

---

To no longer be considered child care deserts, the Washington Department of Commerce “Washington Child Care Industry Assessment” estimated that an additional 140 center-based and 40 family home child care slots are needed in Walla Walla County, and an additional 30 center-based and 10 family home child care slots are needed in Columbia County.<sup>36</sup> The WWVELC working group adopted these as the targets for Walla Walla and Columbia counties for this study; therefore, the cost estimates in the models reflect these numbers.<sup>37</sup>

Based on findings and working group input, we developed four scenarios to explore the various costs associated with meeting the goals for child care slot creation in the Walla Walla Valley: two targeting the needs of Columbia County, one targeting the center-based needs of the city of Walla Walla, and one targeting the need for home-based care in both Walla Walla and Columbia counties.

The focus of scenarios 1 and 2 are to develop a new child care center that, at a minimum, meets the needs of CCHS employees. Scenario 1 explores the costs of two classrooms (an infant classroom and a toddler or preschooler classroom) to meet the need for a minimum of 15 slots primarily serving CCHS employees. Scenario 2 explores the costs for a minimum of 30 center-based slots to account for an operation that builds upon the operation in Scenario 1 and includes additional classrooms of older children. Many families in Dayton need extended child care hours, with some needing weekend and overnight care (e.g., hospital employees). Although Dayton needs fewer slots overall than Walla Walla, Dayton needs the full spectrum of care rather than concentrating all care during standard work hours, which would be more cost effective. Luckily, CCHS and a myriad of partners are working hard to ease this constraint and intend to provide between 15 and 50 slots in the fall for all pre-K age groups.

---

<sup>36</sup> Washington Child Care Industry Assessment Volume I, ICF June 2020 pgs. 113-114.

<sup>37</sup> As indicated previously in this report, estimates from the Washington Department of Commerce “Washington Child Care Industry Assessment” do not reflect recent changes in the child care landscape, including the effects of the COVID-19 pandemic and the closure of the three in-home providers in Columbia County. These three providers served about 30 children of all ages. This brings the current estimated need up to 70 slots total between center-based and family home-based care in Columbia County. Cost estimates in Model 5 reflect this goal. All other Dayton based models are based on the work group goals.

Scenario 3 explores the costs of meeting the need in Walla Walla for the creation of 140 center-based slots by expanding existing child care centers. Scenario 3 also compares paying child care workers minimum wage versus a higher living wage.

Scenario 4 explores costs for in-home providers in both counties.

## Scenarios

---

1

Minimum of 15 slots in Dayton for CCHS employees

2

Minimum of 30 center-based slots in Columbia County

3

Minimum of 140 center-based slots in Walla Walla County

4

Home-based care in both counties

---

## Center-based model assumptions

---

In general, we set up individual cost models that could be compared to one another within and across scenarios. Models in Scenarios 1-3 include many of the same assumptions. Deviations from these assumptions are specified where they occur.

### Licensing

All center-based models presented in this section assume Early Achievers licensing Level 3. Models were run at this level based on our finding that most of the centers we interviewed had at least this licensing level. Models presented in Appendix II detail cost differences resulting from different licensing levels but, in general, higher licensing levels have higher associated costs.

## Subsidy and tuition rates

All individual cost models were run at three levels of children on subsidies: 0% of children, 50% of children, and 100% of children. In this section, we present results given 50% of children are on subsidies. The results for other subsidy ratios can be found in Appendix II.

Table 18 shows the subsidy and tuition rates for centers with Early Achievers Level 3 licensing. Rates presented in Table 18 were used for calculations in this report, though since calculations were made, subsidy rates have increased. The new rates that will be effective starting July 1, 2021 are presented in Table 19.

Since tuition rates vary among providers, the model uses the rates of the 75<sup>th</sup> percentile of providers by age group.

**Table 18.** Early Achievers Level 3 subsidy and tuition rates used in study models, 2019

Age	Subsidy Rate	Daily Rate	Tuition Rate
Infants	\$10,649	\$42.60	\$11,880
Toddlers	\$8,551	\$34.20	\$9,240
Preschool-age	\$8,251	\$33.00	\$9,300
School-age	\$3,862	\$25.75	\$7,224

**Table 19.** Licensed center daily subsidy rates, effective July 1, 2021

Age	Full-Day	Half-Day
Infants	\$48.00	\$24.00
Toddlers	\$36.59	\$18.30
Preschool	\$36.50	\$18.25
School-age	\$27.36	\$13.68

## Staff salaries and benefits

Staff salaries and benefits represented in the center-based models include a program director and lead and assistant teachers for each classroom. No other staff are included in these models. For most models, staff salaries are tiered starting at minimum wage.

This is true for all models except Model 7 in Scenario 3, which uses higher wages for staff positions.

Benefits for all staff at Early Achievers Level 3 licensing include 10 annual sick days, 15 annual paid leave days, \$3,000 annual contribution towards health insurance, and 4% retirement benefits.

### Child care slots

Though the “Washington Child Care Industry Assessment” provides the total number of slots needed by county, it does not specify the proportion of slots needed by age group (e.g., infant versus toddler slots needed). Therefore, to account for demand by age, we use Child Care Aware of Washington’s referral rate data to develop our center-based care models age group ratios. Their most recent report includes referral rates by age and percentage of children using state subsidies in 2019. Referral ratio data for Columbia County were unavailable; therefore, we used the Walla Walla County ratios to estimate need in Columbia County.

Table 20 shows the percent of referrals that Child Care Aware of Washington made to families disaggregated by the age of the child needing care. We then used these percentages to calculate the estimated number of center-based slots by age group (Table 20).

**Table 20.** Percent of referrals by age group and resulting number of additional center-based slots needed by age to meet goal, 2019

Age	% of referrals made	# slots in Walla Walla County	# slots in Columbia County
Infants	28%	39	8
Toddler	36%	50	11
Preschool	17%	24	5
School age	19%	27	6
<b>Total</b>	<b>100%</b>	<b>140</b>	<b>30</b>



## Classrooms

In center-based care, the costs vary greatly by age group based on the age of children and the teacher-to-child ratio. We used the slots-needed estimates presented in Table 20 to determine how many children will be served by age and how many classrooms that number of children would require. It is assumed that one lead teacher and one assistant teacher is in each classroom. The teacher-to-child ratios and resulting classroom sizes are in Table 21. These ratios and classrooms sizes also vary by the Early Achievers licensing quality level (Basic, Level 3, or Aspirational).

For example, licensed care facilities operating at an Early Achievers Level 3 licensing level must have a 1:4 teacher-to-infant ratio in infant classrooms, whereas preschool-age children can have a 1:7 ratio. This means that to serve similar numbers of children (16 infants and 14 preschoolers), the center would require twice as many staff to care for the infants (2 infant classrooms and 1 preschool classroom).

**Table 21.** Classroom setup by Early Achievers (EA) licensing level, includes teacher to student ratios and maximum classroom slots

Age	EA Licensing		EA Level 3		EA Aspirational	
	Ratio	Classroom size	Ratio	Classroom size	Ratio	Classroom size
Infant	1:4	8	1:4	8	1:4	8
Toddler	1:7	14	1:7	14	1:5	10
Preschool	1:10	20	1:10	20	1:8	16
School age	1:15	30	1:15	30	1:12	24

## Scenario 1: Child care for CCHS employees

### Goal

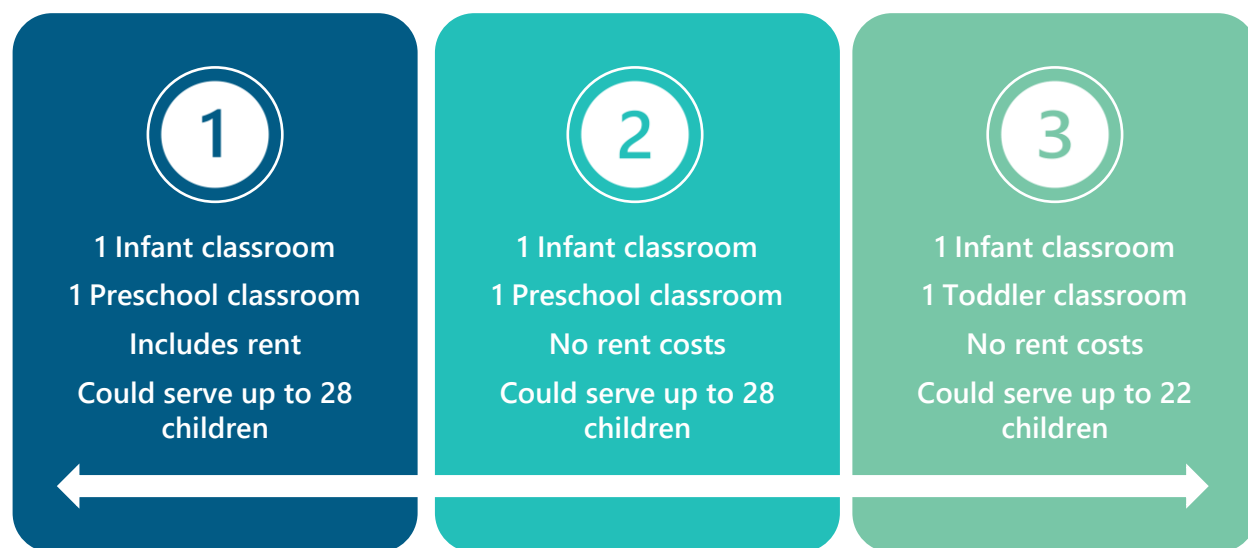
Creation of a child care center offering 24/7 care to children of CCHS employees that operates every day of the year, including holidays. Priorities for this goal include:

1. Infant classroom
2. 15 slots minimum

## Overview

CCHS employees and the YWCA are currently working on setting up a child care operation by Fall 2021. One certainty is the operation must have an infant classroom. Currently, the intention is to begin with two classrooms and build from there over time. Thus, the models in this scenario account for two full classrooms (Figure 57).

**Figure 57.** Scenario 1 cost models



Models 1 and 2 have the same classroom set up (i.e., one infant and one preschool classroom) but differ in that Model 1 includes rental costs and Model 2 does not. Comparing these two models specifically enables a better understanding of how rental costs affect operational costs. With full classrooms, Models 1 & 2 could serve up to 28 children and Model 3 could serve up to 22 children.

Models 2 and 3 do not account for rental costs, as current plans are to develop a space that operations could use at very low or no cost. Both models 2 and 3 have an infant classroom, but Model 2 has a preschool classroom whereas Model 3 has a toddler classroom. Comparing these two models enables evaluation of costs by age group served.

## Results

**Table 22.** Scenario 1 cost model results

	Model 1	Model 2	Model 3
Licensing Level	Level 3	Level 3	Level 3
Number of children served	28	28	22
Percent of children on subsidies	50%	50%	50%
<b>Annual costs per child (CPC)</b>			
Infants	\$14,757	\$14,204	\$14,794
Toddlers	-	-	\$10,134
Preschool	\$8,234	\$7,681	-
<b>Gap for children on subsidies (per child)</b>			
Infants	-\$4,108	-\$3,555	-\$4,145
Toddlers	-	-	-\$1,583
Preschool	\$17	\$570	-
<b>Gap for children on tuition (per child)</b>			
Infants	-\$2,877	-\$2,324	-\$2,914
Toddlers	-	-	-\$894
Preschool	\$1,066	\$1,619	-
<b>Total revenue</b>			
Infants	\$90,115	\$90,115	\$90,115
Toddlers	-	-	\$124,536
Preschool	\$175,512	\$175,512	-
<b>Total costs</b>			
Infants	\$118,055	\$113,632	\$118,349
Toddlers	-	-	\$141,881
Preschool	\$164,679	\$153,619	-
<b>Total gap</b>			
Infants	-\$27,940	-\$23,516	-\$28,234
Toddlers	-	-	-\$17,345
Preschool	\$10,833	\$21,893	-
<b>Annual Net</b>	<b>-\$17,107</b>	<b>-\$1,623</b>	<b>-\$45,579</b>

## Constraints and opportunities

Comparing Scenario 1 models 1 and 2 highlights the impact of providers having to pay monthly rental costs, while comparing models 2 and 3 highlights the costs associated with classrooms at different age levels. Key takeaways from these models include

- Infants and toddlers are expensive and unprofitable to care for and care will need to be subsidized.
- Including more older children significantly improves the cost-effectiveness of the overall operation.
- Not having rental costs decreases costs for providers but is still not enough for providers to be profitable.



## Scenario 2: A center in Dayton

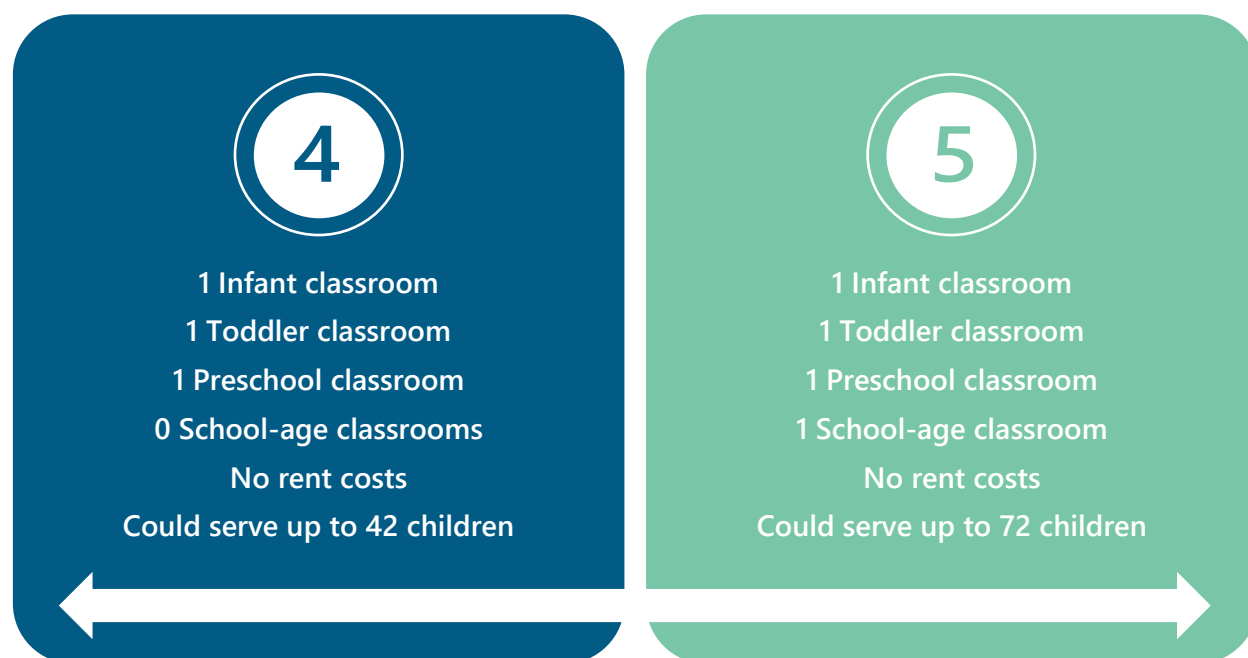
### Goal

The goal of Scenario 2 is to meet the county-wide child care capacity goals for Columbia County, which includes increasing capacity of total slots available by at least 30 center-based slots. As Scenario 1 models 1-3 show, meeting the goals of the CCHS almost reaches the 30-child goal. However, the current conversation regarding Scenario 1 is that priority would be for children of CCHS employees, so additional models are needed to look at meeting general community need.

### Overview

Scenario 2 models 4 and 5 dive into the expenses and revenues for expanding the slots to meet the general community need. Figure 58 outlines these two models. The primary difference between them is that Model 5 adds a school-age classroom. Comparing these two models enables analysis of caring for different age groups of children and the pros and cons of adding more classroom capacity. No costs for rent are included in these calculations.

**Figure 58.** Scenario 2 cost models



## Results

**Table 23.** Scenario 2 model results

	Model 4	Model 5
Licensing	Level 3	Level 3
Percent on subsidies	50%	50%
Number of children	42	72
<b>Annual costs per child (CPC)</b>		
Infants	\$13,535	\$15,872
Toddlers	\$8,931	\$10,042
Preschool	\$7,089	\$7,710
School age	-	\$2,778
<b>Gap for children on subsidies (per child)</b>		
Infants	-\$2,887	-\$5,224
Toddlers	-\$380	-\$1,491
Preschool	\$1,163	\$541
School age	-	\$1,085
<b>Gap for children on tuition (per child)</b>		
Infants	-\$1,655	-\$3,992
Toddlers	\$309	-\$802
Preschool	\$2,211	\$1,590
School age	-	\$4,446
<b>Total revenue</b>		
Infants	\$90,115	\$90,115
Toddlers	\$124,536	\$124,536
Preschool	\$175,512	\$175,512
School age	-	\$166,291
Total	\$390,164	\$556,455
<b>Total costs</b>		
Infants	\$108,283	\$126,979
Toddlers	\$125,027	\$140,587
Preschool	\$141,772	\$154,195
School age	-	\$83,327
Total	\$375,082	\$505,089
<b>Total gap</b>		
Infants	-\$18,167	-\$36,864
Toddlers	-\$491	-\$16,051
Preschool	\$33,740	\$21,317
School age	-	\$82,965
<b>Annual net</b>	<b>\$15,082</b>	<b>\$51,366</b>



## Constraints and opportunities

Comparing Scenario 2 models 4 and 5 highlights the impact of adding more older children to the program. Key takeaways from this comparison include

- Caring for infants and toddlers is still not cost effective, but the financial loss of caring for these youngest age groups is increasingly offset the more preschool and school-age children served.
- Approximately \$18,658 for Scenario 4 and \$52,915 for Scenario 5 are needed to supplement the operation annually for infants and toddler care so that those classrooms do not reduce the viability of the operation.
- Providing child care to the community, especially by adding a classroom of older children, would improve the financial performance of the child care center.

## Scenario 3: Center-based child care in the city of Walla Walla

### Goal

Expanding existing programs to develop 140 new center-based slots in the city of Walla Walla.

### Overview

Scenario 3 encapsulates two cost model sets: models 6 and 7 include costs for meeting the entire goal of slots needed and models 8-9 includes setting up two infant classrooms using state and federal funding. Figure 59 outlines these four models.

### Cost of meeting entire goal

Cost models 6 and 7 reflect the revenues and expenses in Walla Walla County based on localized inputs. Models 6 and 7 are identical except that Model 6 is run with tiered salaries starting at minimum wage and Model 7 is run with higher salaries that match statewide averages (with salaries approximate to the estimate of living wage salaries in Walla Walla County as determined by Massachusetts Institute of Technology).

The wages input for Model 6 are as follows:

- \$19.23/hr for the program director
- \$14.42/hr for lead teachers
- \$13.50/hr for assistant teachers

The wages input for Model 7 are as follows:

- \$26.84/hr for the program director
- \$23.02/hr for lead teachers
- \$20.36/hr for assistant teachers

**Figure 59.** Scenario 3 cost models



#### **Cost of meeting goal with commitment of publicly funded infant slots**

Models 8 and 9 are the same as models 6 and 7, except that they reflect the situation where two classrooms for infants are provided by ECAEP and Head Start (16 infant slots total). Thus, to reach the identified goal of 39 infant slots for Walla Walla County, 23 additional spots are needed for infants in center-based environments. Calculations for models 8 and 9 use full classrooms and so will provide one extra infant slot (8 infants per classroom x 3 classrooms). Having full classrooms in these models allows for an extra 10 slots to be created in both models 6 and 7 to serve a total of 166 children.

Models 8 and 9 include 3 infant classrooms as opposed to the 5 infant classrooms in models 6 and 7. This is the only difference in the models. Model 8 uses the same salary rates as Model 6 (minimum wage) and Model 9 uses the same salary rates as Model 7 (living wage).

Full classrooms in each of these models exceed the child care slot goals for Walla Walla County to no longer be considered a child care desert.



## Results

**Table 24.** Models 6 and 7 cost model results

	Model 6	Model 7
Licensing	EA Level 3	EA Level 3
Percent on subsidies	50%	50%
Number of children	166	166
<b>Annual Costs per Child (CPC)</b>		
Infants	\$13,942	\$18,969
Toddlers	\$9,052	\$12,029
Preschool	\$7,096	\$9,252
School age	\$2,883	\$3,762
<b>Gap for Children on subsidies (per child)</b>		
Infants	-\$3,294	-\$8,320
Toddlers	-\$501	-\$3,478
Preschool	\$1,155	-\$1,001
School age	\$979	\$100
<b>Gap for Children on Tuition (per child)</b>		
Infants	-\$2,062	-\$7,089
Toddlers	\$188	-\$2,789
Preschool	\$2,204	\$48
School age	\$4,341	\$3,462
<b>Total Revenue</b>		
Infants	\$450,576	\$450,576
Toddlers	\$498,145	\$498,145
Preschool	\$351,024	\$351,024
School age	\$166,291	\$166,291
<b>Total Costs</b>		
Infants	\$557,694	\$758,765
Toddlers	\$506,918	\$673,597
Preschool	\$283,841	\$370,091
School age	\$86,501	\$112,872
<b>Total Gap</b>		
Infants	-\$107,118	-\$308,189
Toddlers	-\$8,773	-\$175,451
Preschool	\$67,183	-\$19,067
School age	\$79,791	\$53,419
<b>Annual Net</b>	<b>\$31,082</b>	<b>-\$449,288</b>

**Table 25.** Models 8 and 9 cost model results

	Model 8	Model 9
Licensing	EA Level 3	EA Level 3
Percent on subsidies	50%	50%
Number of children	150	150
<b>Annual Costs per Child (CPC)</b>		
Infants	\$14,146	\$19,220
Toddlers	\$9,170	\$12,174
Preschool	\$7,179	\$9,356
School age	\$2,896	\$3,776
<b>Gap for Children on subsidies (per child)</b>		
Infants	-\$3,497	-\$8,572
Toddlers	-\$619	-\$3,623
Preschool	\$1,072	-\$1,104
School age	\$966	\$86
<b>Gap for Children on Tuition (per child)</b>		
Infants	-\$1,474	-\$6,548
Toddlers	\$1,390	-\$1,614
Preschool	\$3,081	\$904
School age	\$4,328	\$3,448
<b>Total Revenue</b>		
Infants	\$270,346	\$270,346
Toddlers	\$498,145	\$498,145
Preschool	\$351,024	\$351,024
School age	\$166,291	\$166,291
<b>Total Costs</b>		
Infants	\$339,508	\$461,290
Toddlers	\$513,518	\$681,750
Preschool	\$287,179	\$374,224
School age	\$86,879	\$113,284
<b>Total Gap</b>		
Infants	-\$69,162	-\$190,944
Toddlers	-\$15,373	-\$183,605
Preschool	\$63,845	-\$23,200
School age	\$79,412	\$53,008
<b>Annual Net</b>	<b>\$58,722</b>	<b>-\$344,741</b>

## Constraints and opportunities

Key takeaways from this scenario include that

- Under the living wage model, only school-age children remain profitable, dramatically reducing the financial viability of the operation.
- Like scenarios 1 and 2 for Columbia County, the higher the number of older children served, the better the financial performance of the operation.
- Even with low wages, infant and toddler care needs to be supplemented to make them a viable business opportunity.



## Scenario 4: Home-based child care

---

### Goal

Expand family in-home based child care options.

### Overview

Family home-based child care costs vary greatly by operation, as the number of children one house can serve varies on the amount of space available and age of children. Family home-based care can have a maximum of 12 children. The general rule is

“If there are any children who are not yet walking, the number of children per adult should be 6 or fewer. If all children are walking and age 2 or older, 2 staff can care for up to 12 children. The group size will be smaller if there are up to 4 children not walking.”<sup>38</sup>

### Home-based model set-up

Since the costs per infants, toddlers, and preschoolers are equal, but subsidy and tuition levels differ for family home based operations, calculating expenses relies on the total

---

<sup>38</sup> Child Care Resources, Washington Child Care Licensing Regulations, accessed via [https://www.childcare.org/ckfinder/userfiles/files/Washington\\_State\\_Child\\_Care\\_Licensing\\_Regulations.pdf](https://www.childcare.org/ckfinder/userfiles/files/Washington_State_Child_Care_Licensing_Regulations.pdf)

number of children, and revenues relies on the number of children by age. Therefore, to estimate costs of providing home-based care, we ran models for situations that would yield the greatest revenues, which was serving the maximum number of infants possible and then filling capacity with toddlers. This set up does not reflect typical home-based care operations, which often have children of all ages. Even though this presents the best-case scenario for revenues, a gap still exists between subsidy and tuition rates for meeting the costs of care.

Set up for these models included the following:

- Staff salaries accounted for in models include a provider/owner, assistant teachers, and floaters to help hourly for transition and break times.
- Benefits for all staff vary by licensing level and are presented in Table 26.
- Subsidy and tuition rates for home-based providers with basic and Early Achievers Level 3 licensing is presented in Table 27. Rates presented in Table 27 were used for calculations in this report, though since calculations were made, subsidy rates have increased. The new rates that will be effective starting July 1, 2021 are presented in Table 28.

**Table 26.** Provider salaries & benefits by licensing level

	Salaries	Health insurance	Retirement benefits	Annual sick days	Annual paid leave
<b>EA Basic Licensing</b>					
Provider/owner	\$34,860.62	\$3,000	0%	5	10
Assistant teacher	\$31,168.80	\$3,000	0%	5	10
Floaters	\$28,080.00	\$3,000	0%	5	10
<b>EA Level 3 Licensing</b>					
Provider/owner	\$49,096.43	\$6,000	4%	10	15
Assistant teacher	\$42,349.00	\$6,000	4%	10	15
Floaters	\$37,461.00	\$6,000	4%	10	15

**Table 27.** Family home-based child care subsidies & tuition rates, 2019

	Subsidy	Tuition
<b>EA Basic Licensing</b>		
Infants	\$8,035	\$9,240
Toddlers	\$7,365	\$8,448
Preschool	\$6,698	\$7,920
School age	\$3,750	\$7,392
<b>EA Level 3 Licensing</b>		
Infants	\$8,999	\$10,560
Toddlers	\$8,249	\$9,240
Preschool	\$7,501	\$8,712
School age	\$4,200	\$7,920

**Table 28.** Licensed family-home base subsidy rates for Region 2, effective July 1, 2021

Age	Full-Day	Half-Day
Infants	\$45.00	\$22.50
Toddlers	\$37.50	\$18.75
Preschool	\$35.00	\$17.50
School-age	\$32.00	\$16.00

## Results

**Table 29.** Home-based care best case costs

	Model 10	Model 11
Licensing level	EA Basic	EA Level 3
% subsidy	50%	50%
<b>Total enrollment</b>		
Infants	4	4
Toddlers	8	8
Preschool	0	0
School	0	0
<b>Annual Cost per Child</b>		
Infants	\$10,753	\$15,918
Toddlers	\$10,753	\$15,918
Preschool	\$0	\$0
School age	\$0	\$0
<b>Gap Subsidy</b>		
Infants	-\$2,718	-\$6,919
Toddlers	-\$3,388	-\$7,669
Preschool	\$0	\$0
School age	\$0	\$0
<b>Tuition Gap</b>		
Infants	-\$1,513	-\$5,358
Toddlers	-\$2,305	-\$6,678
Preschool	\$0	\$0
School age	\$0	\$0
<b>Total costs</b>		
Infants	\$43,012	\$63,672
Toddlers	\$86,024	\$127,344
Preschool	\$0	\$0
School age	\$0	\$0
<b>Total Revenues</b>		
Infants	\$34,550	\$39,118
Toddlers	\$63,252	\$69,955
Preschool	\$0	\$0
School age	\$0	\$0
<b>Total Gap</b>		
Infants	-\$8,462	-\$24,554
Toddlers	-\$22,772	-\$57,389
Preschool	\$0	\$0
School age	\$0	\$0
<b>Net</b>	<b>-\$31,234</b>	<b>-\$81,942</b>

These models, along with other home-based care models reflecting different ages in Appendix II, can be used to estimate the costs associated with increasing the number of family home-based child care slots in both Columbia and Walla Walla counties.

For Walla Walla County, Washington Department of Commerce estimated needing 40 family home based slots for the county to no longer be considered a “child care desert.” Using estimations from Model 10 (the best scenario cost-wise), increasing those slots would require four new family home care providers with the expectation that these providers are either not making a profit or losing upwards of \$25,000 every year.

For Columbia County, WA Department of Commerce estimated needing 10 new family home slots (before others in the area closed), which would thus require at least one new family home provider at costs similar to Model 10. Since three providers have closed in Columbia County, the current goal is really 40 in-home slots similar to in Walla Walla County.

### Constraints and opportunities

Key takeaways from the home-based cost models include

- The annual cost per child does not vary by age between infants and toddlers and preschool age children, however, subsidy and tuition rates do vary by age.
- The specific licensing requirements do vary for capacity limits
- You can only have a maximum of 4 infants
- Infants have the highest subsidy and tuition rates and thus have the lowest gap in costs in licensed home-based care.

# Recommendations

The following 12 recommendations are organized to address the four feasibility study priorities. Priority 1 is the most general, focusing on accessibility for all families with extra emphasis on immigrant and undocumented families.

The next three priorities build on and target the more general recommendations under Priority 1 to increase affordability for middle-income families (Priority 2), increase child care availability for families living and working in extremely rural areas (Priority 3), and increase child care provider capacity to serve infants and toddlers (Priority 4).

The first two recommendations under Priority 1 address immediate needs in Columbia and Walla Walla counties. The remaining recommendations will take longer. Washington State's expansion of child care subsidy eligibility to include middle-income families over the next six years indicates the pace and scale needed for developing licensed provider capacity.

Reducing cost and increasing access is not simple, and the constraints and obstacles to overcome are many. This is both a short-term and long-term crisis that will require immediate action and long-term planning and capacity building. This is a time for bold action that builds the foundation for a long-term sustainable system.

Recommendations vary by the level of resources and effort required to implement them (Table 30). Efforts are already underway to address many of them.

Many of the recommendations were suggested and discussed by participants during the feasibility study process. Many people are helping who have the experience and access to the resources to implement the recommendations in this report. Many more will help if given the opportunity. Everything is in place to build child care capacity across the Walla Walla Valley to not only not be a child care desert, but to become a child care oasis.



# Summary

---

## Priority 1: Making the child care system accessible for all families, especially immigrant and undocumented families

- 1 | Develop a new center in Dayton
- 2 | Expand capacity at existing private licensed centers in Walla Walla County
  - 2.1 | Develop consistent funding for small upgrades or other projects
  - 2.2 | Hire someone to help providers overcome expansion constraints
- 3 | Increase licensed provider capacity across both counties over the next 6 years
  - 3.1 | Expand and develop new centers
  - 3.2 | Expand ECEAP and Head Start
  - 3.3 | Recruit new in-home licensed providers in all areas of the Walla Walla Valley
  - 3.4 | Increase support for Spanish-speaking providers
  - 3.5 | Develop a pathway to licensing for undocumented child care providers
  - 3.6 | Develop a purchasing cooperative to reduce costs
  - 3.7 | Develop a facility cooperative to reduce costs and expand services
- 4 | Increase employer engagement
  - 4.1 | Connect employees to child care resources
  - 4.2 | Provide flexibility and support for employees with children
  - 4.3 | Provide economic support
  - 4.4 | Provide child care onsite or nearby
  - 4.5 | Support employee transportation needs
  - 4.6 | Subsidize and incentivize care, including sick, drop-in, backup, and overnight care
  - 4.7 | Participate in child care coalitions

- 5 | Build navigation and in-person support across the system
  - 5.1 Coordinate online resources to help everyone find what they need
  - 5.2 Develop a single online platform to connect families to child care
  - 5.3 Improve the referral system
  - 5.4 Create and support child care navigator positions
  - 5.5 Provide training, support, or resources to build organizational capacity
- 6 | Improve communications and engagement with Spanish-speaking families
  - 6.1 Use multiple communication modes and outlets
  - 6.2 Prioritize hiring bilingual staff
  - 6.3 Expand the Garrison Night School program
- 7 | Develop WWVELC as an independent nonprofit organization
  - 7.1 Hire a development director
  - 7.2 Hire navigators and support staff
  - 7.3 Expand WWVELC communication and coordination roles
- 8 | Increase resources
  - 8.1 Increase federal and state funding
  - 8.2 Increase funding and support from private foundations
  - 8.3 Develop a dedicated child care fund for the Walla Walla Valley
  - 8.4 Increase use of impact investing and micro lending
  - 8.5 Build capacity at existing groups to advance their mission related to child care
- 9 | Create enabling local policies

## Priority 2: Increasing child care affordability for middle-income families

- 10 | Bridge the 6-year subsidy eligibility gap for middle-income families
  - 10.1 Increase subsidies for middle-income families
  - 10.2 Increase use of tax credits and dependent care flexible spending accounts
  - 10.3 Encourage and support parent cooperatives

### **Priority 3: Increasing licensed child care availability in the extremely rural areas of our region**

- 11** | Implement multi-sectoral capacity building targeting rural areas
  - 11.1 Incentivize and support child care in rural areas
  - 11.2 Target rural areas with information specific to their needs
  - 11.3 Hire a navigator to work with rural families, employers, and providers
  - 11.4 Engage employers who have employees who live and work in rural areas
  - 11.5 Build capacity at existing organizations working in rural areas
  - 11.6 Access funding to support child care efforts in rural areas

### **Priority 4: Increasing new and existing child care providers' capacity to serve infants and toddlers**

- 12** | Implement multi-sectoral capacity building for infant and toddler care
  - 12.1 Incentivize in-home providers to serve infants and toddlers
  - 12.2 Employers provide a subsidy to employees with infants and toddlers
  - 12.3 Offer free space to existing providers if they serve more infants and toddlers
  - 12.4 Expand Early ECEAP and Early Head Start
  - 12.5 Build navigation and referral capacity for infant and toddler care
  - 12.6 Develop employer consortiums and expand community coalitions
  - 12.7 Employers provide access to dependent care flexible spending accounts and other programs

## Recommendation rankings

To provide an idea of the effort, costs, and benefits for each of the recommendations that this feasibility study addressed, a high, medium, low ranking system was developed.

**Table 30.** Recommendation rankings ● = High ◆ = Medium ■ = Low

R	Priority	Difficulty	Cost	Implementation time	Continuous effort needed?	Benefit
1	●	●	●	2-3 years	No	Long-term
2	●	◆	◆	<1-2 years	No	Long-term
3	●	●	●	<1-6 years	Yes	Long-term
4	●	■	■	Immediate	Yes	Long-term
5	◆	◆	◆	Immediate	Yes	Long-term
6	●	■	■	Immediate	Yes	Long-term
7	◆	■	■	< 1 year	Yes	Long-term
8	●	◆	◆	< 1 year	Yes	Long-term
9	◆	■	■	1-2 years	Yes	Long-term
10	●	●	●	Immediate	No	6 years
11	●	●	●	Immediate	Yes	Long-term
12	●	●	●	Immediate	Yes	Long-term

**Priority** - Level of importance.

**Difficulty** - Effort required for success.

**Cost** - Total costs required for success.

**Implementation time** - Estimated time between when work begins on the recommendation and when improvements should be seen.

**Continuous effort needed?** - Presents whether the efforts for each recommendation have a continuous or limited time frame.

**Benefit** - How long the Walla Walla Valley will experience the benefits of success.

## Priority 1 recommendations

---

### R1: Develop a new center in Dayton

The lack of licensed child care in Columbia County is a crisis that requires rapid response. The current effort will likely launch at least a small center by fall 2021 in a temporary space, but a longer-term effort is needed to plan and build a center that meets the needs of more families over the long-term.

The new center should serve as many children as possible given space and funding constraints so that it substantially addresses the need for licensed child care in Dayton. Ideally, the center needs to operate 24 hours per day, seven days per week, including holidays, to meet the needs of Columbia County Health System (CCHS) employees. Including preschool and school-age care would help the center be more cost effective and better meet the needs in the county.

#### Columbia County Child Care Goals

**30** new center-based slots

**40** new in-home provider slots

Although no identified space currently available in Dayton is suitable over the long term, resources are available to build a new facility. The Port of Columbia County has offered land with utilities at Blue Mountain Station. The Port has the resources and experience to help facilitate the process of building and managing a facility. Additionally, numerous local, state, and federal funding programs are available that can help leverage a more comprehensive effort.

- COVID-19 relief funding
- Blue Mountain Community Foundation
- Sherwood Trust
- Employers in Columbia County
- USDA Rural Development
- Craft3
- Innovia Foundation
- Local bond
- Local fundraising
- Local government match
- WA DOC Community Capital Facilities–Early Learning Facilities Program
- Murdock Charitable Trust
- Other one-time federal or state opportunities

Representatives from Sherwood Trust and Blue Mountain Community Foundation (BMCF) are in the WWVELC working group and both organizations fund capital projects. They can also help connect the project to other local and regional funders. Local

government can issue bonds (as they did for Blue Mountain Station in Dayton) and levy taxes and fees. CCHS has its own tax system to raise revenues as does the Port.

At the state level, the Washington Department of Commerce (DOC) Community Capital Facilities—Early Learning Facilities Program (due in September) stands out as a strong possibility for funding for a new facility in Dayton, while at the federal level, USDA Rural Development programs seem promising.

Almost all facility projects with similar scope use multiple funding sources that leverage each other to complete the project. The specific mix of funding is often unique to a project depending on what is available. Often, state or federal funding pays a large portion with local sources and loans paying the rest. Federal COVID-19 relief funding and the new Washington State budget provide an opportunity to fund a facility if the effort is ready.

Rapid coordination is needed to facilitate development of a shared vision and commitment to the facility by more stakeholders and then develop accurate designs and cost estimates to be competitive in applying for funding. This is an opportunity to develop an optimal center in Dayton that will substantially address the needs of Columbia County. This may take a year-long planning grant from Washington Department of Commerce or another source, but it could also happen more quickly. Funders have different standards for what is needed to secure funding. A private foundation or other local entity paying for initial designs and cost estimates may position the effort to apply for funding from multiple sources this fall, enabling a useable facility by next summer.

## **R2: Expand capacity at existing private licensed centers in Walla Walla County**

Enough existing providers in Walla Walla are interested in caring for more children that adding 140 slots is feasible. However, most providers indicated they need to overcome one or more constraints—including space; labor; advertising; and managing or navigating licensing requirements, regulations, or city codes—before they can expand. For example, for one provider, the only constraint to adding a classroom was being able to find a qualified teacher. Another had staff but needed a minor remodel. Others had

## Walla Walla County Child Care Goals

**140** new center-  
based slots

**40** new in-home  
provider slots

more difficult problems, such as needing new fire sprinkler systems, which can be very expensive depending on the building.

### **R2.1: Develop consistent funding for small upgrades or other projects**

Grants and loans are available for public and nonprofit centers to address these constraints. Financing is available for smaller projects through Mercy Corps for

projects under \$20,000, and through Craft3 for larger projects if they will be cost effective enough to support loan payments (See Appendix III). Financing projects for in-home providers is more difficult.

Another idea was to develop a fund at Blue Mountain Community Foundation focused on providing the small amounts of capital needed for both licensed center and in-home providers to complete projects that directly lead to increased numbers of children served. This fund could serve the entire Walla Walla Valley. This idea is discussed in more depth in R8.3.

### **R2.2: Hire someone to help providers overcome expansion constraints**

Because of the variety of constraints to expansion providers identified, someone is needed to assist them in overcoming their specific constraints. This may mean connecting them to a small grant or loan for facilities improvements, helping them recruit staff, address licensing or payroll process issues, get a waiver from a local code, and so on. This recommendation is included in the discussion of R5.

## **R3: Increase licensed provider capacity across both counties over the next 6 years**

Licensed slots are already in short supply. In six years, when increased eligibility for state subsidies has been fully phased in, potentially thousands of additional licensed slots will be needed (about 5,000 families that were not eligible in 2020 will be state-subsidy eligible by 2027). Expanding the number of middle-income families with subsidies will only be meaningful if families can find a licensed provider. While the short-term goal is to increase capacity to not be a child care desert, the six-year goal needs to be to have

the capacity in place to serve families receiving subsidies as expansion of eligibility occurs.

### **R3.1 Expand and develop new centers**

Existing providers and facilities will not be sufficient to address the expected increased need for licensed care which takes subsidies. At the same time, the largest increases in eligibility are still 4 years away, which is enough time to recruit new providers and plan and build additional buildings. A new center in Dayton and adding capacity at existing providers in Walla Walla is only the start.

### **R3.2: Expand ECEAP and Head Start**

State and federally funded programs that provide direct care include the Early Childhood Education and Assistance program (ECEAP), Early ECEAP, Infant ECEAP, Head Start, Migrant and Seasonal Head Start, Early Head Start, and Transitional Kindergarten (Tables 37 and 38 in Appendix III).

Educational Service District 123 (ESD123) is the lead entity for funding, administering, and expanding ECEAP in southeast Washington. ESD 123 works across the two counties and the broader

## **ECEAP ELIGIBILITY**

To be eligible for ECEAP, children must be from families at or below 110 percent of the federal poverty level, be in foster care, or receive Temporary Assistance for Needy Families (TANF) cash grants. Those with Individualized Education Programs (IEPs) are also eligible for special education through ECEAP programs designated specifically for children with disabilities. To be eligible for Head Start, children must be from families at or below 130% of the federal poverty level (with priority to those at or below 100%), homeless, in foster care, or from families with TANF benefits. Both programs can have up to 10% of children from families above the income limit if those children have special circumstances, such as a disability or experience homelessness. These programs include additional services for children with disabilities, home visits, parent education, and professional development for care givers. All these programs have current operations in Walla Walla County, and there is one ECEAP classroom in Dayton in Columbia County.



region.<sup>39</sup> ESD123 is an important partner for expanding care not only in general, but also for Spanish-speaking and rural families and those with infants. Involving them in the conversation about program development in Dayton is one next step in Columbia County.

Efforts are underway to expand the number of children these programs serve. Expansion funding for Head Start programs opens every few years, and funding to expand ECEAP programs is available regularly.

School districts also have unique access to resources to support child care efforts (Table 38 in Appendix III). Walla Walla Public Schools is an important partner in Walla Walla. They house and administer six Head Start classrooms, five ECEAP classrooms, and three Transitional Kindergarten classrooms at the Center for Children and Families (formerly Blue Ridge Elementary School). Dayton School District has a successful ECEAP classroom. Conversations have started about an infant ECEAP rooms in Dayton and Walla Walla.

Securing every ECEAP and Head Start slot possible is an immediate solution to making child care more accessible to a portion of those who need child care.

### **R3.3: Recruit new in-home licensed providers in all areas of the Walla Walla Valley**

Helping prospective and unlicensed providers become licensed will increase their capacity to care for more children, increase quality of care, and enable them to access important financial resources, such as subsidies, grants, and support services. Licensed care is a requirement for parent cost savings through subsidies and dependent care flexible spending accounts, therefore supporting providers path to licensing is important for increasing capacity and affordability.

Increasing the number of licensed in-home providers is critical throughout Columbia and Walla Walla counties, not just in the larger towns. To not be a child care desert, Walla Walla County needs 40 and Columbia County needs 10 new slots at in-home

---

<sup>39</sup> "Educational Service Districts (ESDs) were established at the state level as a vehicle to link local public schools with state and national educational resources.... ESD programs allow districts to eliminate duplication of services, realize significant savings and receive special programs that might otherwise be unavailable to them."  
[http://www.esd123.org/about/what\\_is\\_an\\_esd](http://www.esd123.org/about/what_is_an_esd)

providers, not counting making up for the loss of capacity that occurred during the COVID-19 pandemic. In-home providers, as opposed to centers, are most likely to increase child care capacity in smaller towns and more remote areas. Therefore, new in-home operations in College Place, Touchet, Starbuck, Prescott, and Waitsburg will also be important.

**Even with a new center, Columbia County needs at least three new in-home providers to make up for lost capacity over the last year, while the initial goal for Walla Walla County is an additional four to five in-home providers.**

In-home providers could also help address needs for services that are less cost effective to deliver through a center, such as infant and overnight care or working with one or more employers to tailor care to their specific employee needs.

This feasibility study was unable to identify anyone planning to start licensed in-home child care in Columbia County.

### **R3.4: Increase support for Spanish-speaking providers**

Spanish-speaking providers wanted access to Spanish-speaking staff, support, and resources everywhere in the system. All Spanish-speaking providers who participated in the study experienced difficulties navigating state websites for licensing-related activities as well as communicating with their licensing point of contact. They also had difficulties navigating state payroll systems in English. Priority support needed in Spanish includes navigating the licensing and subsidy processes, accessing information and curriculum, and completing applications to financial assistance programs.

### **R3.5: Develop a pathway to licensing for undocumented child care providers**

One way to better serve Spanish-speaking and immigrant populations is by supporting Spanish-speaking and immigrant child care providers from local communities. A portion of the unlicensed providers are undocumented and would become licensed if they had the opportunity. Currently, it is required for licensed providers be legal US residents. State-level advocacy will be needed to formalize changes to the licensing process. Additional recommendations are as follows:

- Connect undocumented providers with services, such as legal support, advocates, and citizenship and language courses, to help them gain legal residency.

- Advocate at the state level for a pathway for undocumented providers to become licensed providers without being legal residents.
- Include educational opportunities for child care providers through the Garrison Night School program to reach unlicensed and undocumented providers.
- Use existing professional resources, such as the Imagine Institute and Mercy Corps Microbusiness Assistance Program, to provide peer support, business development, and child care education requirements.

### **R3.6: Develop a purchasing cooperative to reduce costs**

Cooperatives allow participants to pool resources to save time and money. Shared purchasing cuts costs through bulk rates and sharing shipping costs. Several groups have offered to spearhead this effort, including the YMCA. The following are related recommendations:

- Encourage local businesses to provide free or reduced-cost supplies.
- Build a collection of resources (e.g., books, toys, art materials, funding applications) for providers to access, especially for infant and toddler care, such as cribs, highchairs, and play mats.

As many supplies are available locally, partnering with local businesses could reduce provider costs. Businesses also sometimes have surplus furniture, supplies, or other resources that providers need. Developing a supplies and resources cooperative that focused on collection, storage, and distribution of resources to child care providers would be an important step.

A resource cooperative could be led by anyone in the community. Parents, employers, or providers could all set up this sort of cooperative and run occasional resource drives allowing for local community members and businesses to donate resources. Since it would not be tied to public funding, the cooperative could support unlicensed providers.

### **R3.7: Develop a facility cooperative to reduce costs and expand services**

Continuing to build on long-term efforts to concentrate programs close together or in one building, such as at the Center for Children and Families, will ease transportation and coordination burden on parents and share costs among providers. Several people

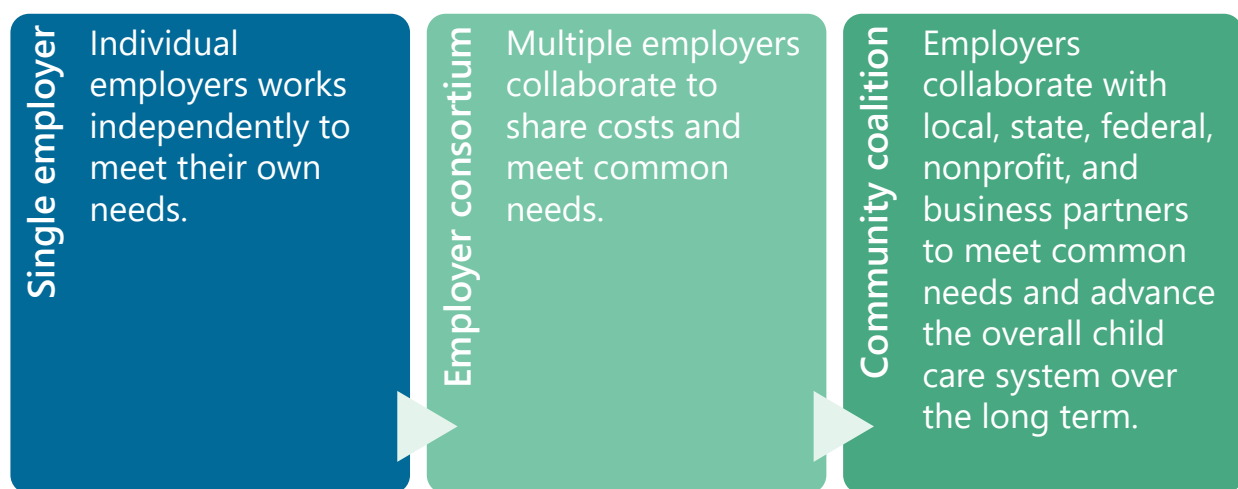
recommended locating multiple providers with complementary schedules in a single facility to increase continuity of care for a child.

Facility cooperatives would allow providers operating with different business hours to use the same facilities. This would be beneficial when developing care programs for extended hours of care, as many facilities are only used during standard business hours. Facilities costs would be shared according to use.

## R4: Increase employer engagement

Our family and employer surveys and employer interviews showed that lack of accessible child care is impacting both families and employers. A next step is to more fully engage a broader group of employers into buying into solutions that benefit them. A number of businesses who are modeling best practices are already engaged and supportive of efforts. The next step is to make these efforts common. A fully engaged business community can directly address a number of problems and help leverage resources for broader community solutions.

### Three models of employer engagement



#### **R4.1: Connect employees to child care resources**

Several employers requested that someone provide frequent notices of child care availability, resources, and services to employers, including in-person support and invitations to join coalition activities. This recommendation is included in R5.

**Child Care Aware of Washington offers free child care referrals in English and Spanish. Call 1-800-446-1114 or visit [childCareAwareWA.org](https://childCareAwareWA.org) for more information.**

#### **R4.2: Provide flexibility and support for employees with children**

Flexibility to meet child care needs was both the most offered child care benefit by employers who participated in the employer survey and the most desired one by surveyed families. For many employers, the most cost-effective approach is to offer more flexibility in work schedules, increased opportunities for telecommuting, and allow employees to bring a child to work when necessary. Since child care is limited in most areas of the Walla Walla Valley, being able to synchronize work schedules with available child care can be instrumental to access.

#### **R4.3: Provide economic support**

Dependent care flexible spending accounts (DCFSAs) and other options to reduce taxes (Table 15 on page 48) are a low-cost way to make child care more affordable for employees. Setting these up can be done relatively quickly and can impact a lot of families. Many more surveyed parents and employers were interested than currently are using these measures. With DCFSAs, households save proportionally to their tax bracket. For example, someone in a 15% federal tax bracket would save \$150 in federal taxes for every \$1,000 they spend on child care. This is one benefit that increases with income, making it important for those in middle- and upper-income ranges who do not qualify for subsidies. One limitation is that to take advantage of a DCFSA the expenses must be with a licensed provider, highlighting the importance of increasing availability of licensed care in the Walla Walla Valley.

#### **R4.4: Provide child care onsite or nearby**

A few employers have expressed interest in providing child care themselves onsite or contracting with a provider to do so. Some employer survey respondents thought they had space suitable for a child care facility.

#### **R4.5: Support employee transportation needs**

- Provide a car that parents can use from work to respond to child needs
- Offer gas cards or public transportation vouchers
- Set up business specific transportation service as a single employer or as part of an employer consortium.

Not everyone has access to a personal vehicle as their primary form of transportation. Having access to a vehicle if they need it during work to respond to emergencies or difficulties is an important resource for some families. Gas cars and public transportation vouchers can also offset transportation costs. Another option is to set up a shared service that addresses gaps in transportation, for example transporting children from one provider to another.

#### **R4.6: Subsidize and incentivize care, including sick, drop-in, backup, and overnight care**

Some employers offer monthly stipends per family or per child of several hundred dollars or more per month. Employer subsidies can be paid to the employee or to the child care provider. An employer can offer multiple subsidies to the same provider to reduce costs or leverage additional services if they have multiple employees needing care.

Some solutions will take more resources than one employer can support. Employers, families, and child care providers ultimately need to work together to develop a portfolio of feasible incentives for child care providers to increase services, especially those not otherwise cost effective to provide. Overnight care is an example of a need specific to the employees of a small number of employers on a regular basis, and so it is important that these employers are involved in subsidizing and supporting these services. These types of services may be best centrally coordinated as a shared service, which has worked well in a variety of locations around the nation (see Appendix I for examples).

#### **R4.7: Participate in child care coalitions**

- Join the Walla Walla Valley Early Learning Coalition (WWVELC).
- Participate in the WWVELC working group focused on expanding employer engagement.

- Model best practices for other employers.
- Advocate for policy changes and additional resources at local and state levels.

Many surveyed employers were interested in coordinating with other employers or as part of a coalition. More will likely want to participate in both employer consortiums and community collaborations as they learn what other employers are doing.

Employers can be very impactful when they tell their elected representatives how child care impacts their business and advocate for changes or resources. Employers need to continuously voice both their needs and shared solutions that benefit their organization and employees. Additional employer activities include highlighting activities and resources through newsletters and social media. The chambers of commerce and ports can help provide access to public officials at local and state levels.

## **R5: Build navigation and in-person support across the system**

### **R5.1: Coordinate online resources to help everyone find what they need**

Better navigation is needed across the system so parents, employers, and providers can find resources or information quickly. It is unlikely any one organization will truly be the crossroads for everyone. Better coordination and navigation among websites would be a big step forward. Since numerous groups are ready to develop new online resources, it would be best if everyone coordinated according to their role, audience, and purpose.

### **R5.2: Develop a single online platform to connect families to child care**

Ideally, online resources would be compiled on one platform so that child care providers, employers, and families are all connected in one place. This could be achieved through enhancing existing efforts, such as those by Child Care Aware, or by paying for a service or software that provides a single platform. Since Child Care Aware wants to increase services, it makes sense to support growing their role in the Walla Walla Valley. However, several working group members agreed this is not enough, and additional support will be needed to keep availability up to date. Initial investigation into national platform services found them to be very expensive. This is potentially a role for WWVLC to fill. This recommendation is further discussed in R7.3.

### **R5.3: Improve the referral system**

Another goal is to improve the referral system so that everyone knows what resources are available. A goal is to build strength where it exists and increase coordination so that

activities are complementary. One strategy is to provide resources and training to existing services, such as 211, or existing navigators at partner groups. Strengthening needs to occur in every sector to create cumulative improvements to the overall system. Formalizing strategies, such as an annual survey of partners and an annual meeting of community partners to share information and discuss collaboration, is an important next step.

#### **R5.4: Create and support child care navigator positions**

Helping parents, employers, and providers navigate the system successfully will make the overall system more efficient, reducing costs and increasing access for everyone over time.

Improving navigation of the child care system requires creating positions and hiring more staff (hereafter “navigators”), who would provide group and one-on-one support for families, employers, and providers. A portion of these should be members of the Hispanic community (Inspire is a good example of an employer hiring from the community they serve). Additionally, some of the positions could focus on moving specific efforts and recommendations from this feasibility study forward. For example, they could be responsible for writing a grant to focus on a particular need or population, such as infant care or undocumented providers.

A next step is to add staff or staff time for the in-person child care navigators to be housed at multiple groups. Several groups showed interest in supporting one or more new child care navigators, including the Children’s Home Society of Washington (CHSW), YMCA, Walla Walla Public Schools (WWPS), WWVELC, United Way (UW), Child Care Aware, and ESD 123. A strength of this approach is that interested groups have many goals in common, but differ in regard to their mission, scope, and audience, thereby collectively offering a more holistic effort if they coordinate. Table 31 shows the various groups who have indicated interest or been identified by the project team as likely to be interested in adding new child care navigators with their geographic range and focus.



**Table 31.** Providers interested in or identified as likely to expand navigation services

Group	Focus	Range
WWVELC	Rural Employer	WWV to Asotin WWV to Asotin
ESD123	Infant to pre-K	ESD service area
YWCA/CCHS	Generalist	Columbia County
United Way	Generalist	WWVELC service area
Imagine	In home	ESD service area
CHSW	Infant to age 3	Service area
Child Care Aware	Generalist	Statewide

### **R5.5: Provide training, support, or resources to build organizational capacity**

The cost of these services could be supported by a variety of funding sources and over time it should have buy-in from multiple sectors. For example, employers could cover a significant portion of the cost according to their size and need. The Home Depot case study shows that hiring a service to connect parents to child care as an employee benefit can be successful. Under a similar model, local employers would pay a fee to a service provider, in this case a child care navigator, according to the number of employees they have likely to use the respective service.

This service is needed more broadly, though, and other sectors should also support it. Helping launch and expand these efforts could be a focus for the local foundations, the chambers of commerce, local employers, Walla Walla Community College (WWCC), and others. Costs for target populations, such as low and middle-income families, extremely rural, and migrant and undocumented families, could be covered or supplemented wherever possible. This type of coordination requires dedicated attention. Funding for additional staff time to coordinate and build these systems and provide direct services to families and providers is necessary. The WWVELC should coordinate and support the overall effort to build the referral and navigation system.

## **R6: Improve communications and engagement with Spanish-speaking families**

Everyone should be able to navigate the child care system regardless of what languages they speak or do not speak. Additionally, it is important to recognize that even when someone is conversationally fluent in English, they may be better able to access information in their native language.

### **R6.1: Use multiple communication modes and outlets**

Spanish-speaking parent focus group participants offered these recommendations for how to better communicate with Spanish-speaking families:

- Use text messages accessible even for those who do not have a Smartphone and automated phone calls to disseminate information.
- Manage a Facebook group with regular posts, including event information, tips, and dates and deadlines.
- Develop all materials in English and Spanish.
- Distribute physical materials out in the community (e.g., grocery stores, library, restaurants,).
- Mail flyers, applications, invitations to community events, and other resources to families.
- Provide information on Spanish-speaking radio stations.
- Physically go to communities to provide information. Hold outdoor events that engage and connect families, providers, and community partners.
- Connect parents to other knowledgeable parents through peer networks.
- Hire people from local Spanish-speaking communities to provide outreach.

Among these resources, Spanish-speaking parents emphasized the importance of in-person community activities as critical to engage more families. Identified resources of interest to Spanish-speaking families included informational materials, applications to programs, and applications for financial assistance.

It is also important to provide and expand resources for families speaking languages other than English and Spanish. In other areas of Washington, cities have developed materials for languages other than Spanish that may be useful, and cost-effective phone translation services for many languages are available.

In general, those who participated in the study thought the problem was almost entirely in Walla Walla County because that is where Spanish-speaking families are concentrated. Although less visible, nearly 10% of households in Columbia County speak Spanish as their primary language at home and attention needs to be paid to expanding services and resources there in Spanish as well.

Finally, parents and community partners emphasized the importance of certain programs waiving the requirement for a social security number to access resources. This will significantly improve undocumented families' ability to participate in needed services.

### **R6.2: Prioritize hiring bilingual staff**

Families that participated in this feasibility study wanted access to Spanish-speaking staff, support, and resources everywhere in the system.

### **R6.3 Expand the Garrison Night School program**

The Garrison Night School is an important, trusted, educational and cultural center in the Spanish-speaking community. They can offer courses on early learning and child development that are accessible for immigrant and undocumented families.

## **R7: Develop WWVELC as an independent nonprofit organization**

The WWVELC supports development of a community devoted to the wellbeing of children and families. The WWVELC already acts an umbrella group, coordinating and supporting early learning efforts across sectors and organizations. Growing it into an independent nonprofit organization is a natural next step.

### **R7.1: Hire a development director**

A main focus in the short term should be to build WWVELC's funding base through grants to leverage the organization to a new level of activity and effectiveness. A next big step will be to hire a development director focused on securing the funding needed for staff, programs, and organizational priorities. This position is important to set the WWVELC up for success and move the recommendations in this study forward. This would be another great option for the position that BMCF has offered to hire with an existing donation. This position's initial responsibility could help develop the WWVELC into an independent nonprofit organization and then transition to become the

development director for WWVELC. The position could continue to fundraise for a fund at BMCF (R8.3), while fundraising for WWVELC and collaborative projects. If funding this role is not of interest to BMCF, then another potential funding source is the Murdock Charitable Trust, which funds organizational capacity building projects, including hiring staff to scale up fundraising activities. Sherwood Trust is also a potential funder to help develop WWVELC capacity to expand and support itself and spearhead collaborative fundraising across the network. Care should be given so that new fundraising activities build upon rather than disrupt established efforts.

### **R7.2: Hire navigators and support staff**

The navigator positions are described in R5.4. WWVELC navigators should fill gaps, including working with employers and providers in rural areas of the two counties. To grow into a fully independent nonprofit, WWVELC will also need to develop administrative support.

### **R7.3: Expand WWVELC communication and coordination roles**

- Print WWVELC materials in Spanish and English and distribute to partners' offices.
- Develop a regularly updated provider directory on the WWVELC website that includes openings and enrollment process for each provider.

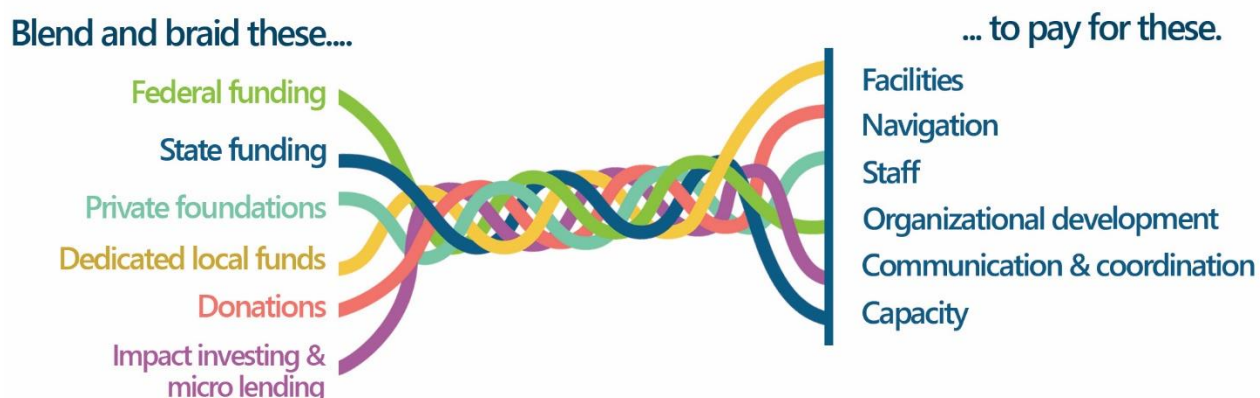
Providing a cohesive online platform is potentially a good role for the WWVELC, where a new person could manage the online platform and communicate with providers, parents, and employers to connect and refer them to other people, groups, or services while keeping the platform up to date.

- Coordinate with groups and resources across the region

Walla Walla and Columbia counties are adjacent to Umatilla, Benton, Garfield, and Asotin counties. Some families work or live in these neighboring counties and are affected by the situation in the entire region. Additionally, a number of organizations and state agencies involved in these ongoing child care efforts are working not only locally, but regionally, statewide, and nationwide as well. Efforts to coordinate and collaborate across these geographic scales are ongoing and need to be further developed.

## R8: Increase resources

Addressing large-scale, complex issues such as the child care in the Walla Walla Valley requires combining funding from multiple sources, which is known as “braided” funding. Most types of funding available are currently touching down somewhere in Walla Walla Valley programs, but not necessarily to their full potential. Since none of the approaches to fundraising, including grants, will be sufficient by itself, continuing to develop diversified funding will help overcome gaps and inconsistencies in funding streams, giving organizations resilience and stability while providing the blend of resources needed for sustainability. Successfully raising enough funding to support full-scale implementation to meet all needs in the Walla Walla Valley will take capacity building.



### R8.1: Increase federal and state funding

The State of Washington has programs that directly target early learning or child care and several fund construction and repairs (Table 38 in Appendix III). Collectively, the programs support most types of organizations engaged in child care—nonprofits, agencies, and schools, for example. These programs are based on state appropriations, which occur biennially.

Much federal funding for child care is in the form of block grants administered and distributed by the state. This includes funding to public schools, which they can use on Pre-K if it is their priority. Many of these, including Title I, Title 3, and Title 5 funding, are administered through the Office of the Superintendent of Public Instruction (Tables 36

and 38 in Appendix III). These funds are useful if a school district or school is taking the lead or is a major partner in organizing an effort.

Providers can also access additional funding to develop services for children with disabilities through the Disabilities Education Act and be reimbursed for food expenses through the Child Nutrition Program. Both help providers cut costs and increase their quality of care (Tables 36 and 38 in Appendix III).



---

**Save the date**

Department of  
Commerce program  
proposals are due in  
September 2021.

---

Not a lot of information exists about how the last wave of COVID-19 pandemic-related recovery and other new federal funding will hit the ground over the next several months. Increased funding for construction and repairs is expected, with applications due in September.

### **R8.2: Increase funding and support from private foundations**

According to interviewees, the role of private foundations is to help start programs and projects while other entities work to institutionalize and make them sustainable. The Walla Walla Valley has two very active foundations with long histories of engagement with child care: BMCF and Sherwood Trust.

BMCF administers major gifts to be used for investment in communities of the Blue Mountain area. BMCF representatives see their primary role in the current effort as helping provide the network that brings people from non-profits, donors, and other supporters together to coordinate and implement the recommendations identified in this feasibility study.

Sherwood Trust is a place-based, generalist funder that covers most of the Walla Walla Valley, including from Dayton to Milton-Freewater. They prefer to fund initiatives or organizations using multi-sector collaborative approaches, which is perfect for child care. Sherwood Trust has several grant programs that fund project and capacity building activities. They have a depth of connections, experience, and energy relevant to child care and are a good partner in the WWVELC. They also can facilitate the approach to additional foundations. For example, they offered to present an idea to a group of small local foundations to see if they are interested.

There are also several regional foundations that could be approached, including the Murdock Charitable Trust, which funds organizational capacity building and facilities. They could be a good partner in developing fundraising capacity, establishing navigators, or for construction of a facility. They also might be interested in helping with a larger center in Dayton. Table 39 in Appendix III describes these local and regional foundations and relevant programs.

### **R8.3: Develop a dedicated child care fund for the Walla Walla Valley**

BMCF has some money to support child care efforts already, and they can help secure more. They can set up and administer a fund or funds to help implement some recommendations. BMCF can handle the paperwork and distribute the money and make other potential funders aware of an opportunity to contribute, but they do not generally solicit funds.

Innovia Foundation funds nonprofits in a 20-county area of eastern Washington that includes Columbia, Garfield, and Asotin counties. Innovia also can create and administer a fund that includes Columbia, Garfield, and Asotin counties in a similar way, giving Columbia County additional resources and supporting development in adjacent counties. They provide a similar function as BMCF but have not been involved in the WWVELC planning process to date.

To start the fund, BMCF suggested that they could hire a fundraiser for one year. For example, they could set

up a fund for Columbia County, a project-specific fund, or a Walla Walla Valley-wide fund. The fund could help pay for facilities improvements or projects that increase provider capacity, for example. This is an opportunity to improve both short-term and long-term resources for child care in the Walla Walla Valley and should be implemented.

#### **Strategies to increase available facilities: Example from San Mateo County**

- 1.** Reuse existing space.
- 2.** Work with the city and county to develop new policies and incentives.
- 3.** Engage employers.
- 4.** Increase general revenue for facility development.

#### **R8.4: Increase use of impact investing and micro lending**

Impact investing is another type of funding discussed by the working group. Impact investors provide loans which must be paid back. This approach can provide businesses access to capital they otherwise would not be able to access. Mercy Corps has been the most active in the area, providing small loans and grants to child care providers and could play an important role in supporting in-home providers with small amounts of capital. Craft3 invests in larger projects, usually as one of a group of funders. Table 40 in Appendix III provides information about Mercy Corp, Washington Community Reinvestment Association, and Craft3. Currently, both Craft3 and Mercy Corps are engaged in the conversation about child care in the Walla Walla Valley through the WWVELC and City of Walla Walla and want to participate in future activities that fit their mission and resources.

#### **R8.5: Build fundraising capacity at existing groups**

Many groups need additional resources to expand services. The foundations likely already have a good understanding of how to provide organizational development and fundraising training to the nonprofits and agencies across the Walla Walla Valley since they have been engaged in growing the nonprofit sector of the Walla Walla Valley since their inception. The effort needs to build capacity across all groups for fundraising to address shared needs.

### **R9: Create enabling local policies**

Local public officials and staff can play a critical role in developing child care infrastructure. For example, local zoning policies can greatly affect child care availability. One successful example from San Mateo County is a policy that incentivizes or requires new developments to include space for child care to build long-term inventory in an area. This is a strategy that addresses the problem over the long term rather than a quick fix. Two providers reported difficulties with local fire codes rather than state licensing requirements, indicating that some policy constraints are local.

A related need is for employers and local government to lobby for state-level policy changes and resources. Identified needs for state-level policy changes include providing a pathway for undocumented providers to become licensed and more support for middle-income families, rural families, and those with infants and toddlers.



## Priority 2 recommendations

---

Affordability is a challenge for middle-income families who do not qualify for public financial assistance but cannot afford out-of-pocket child care costs.<sup>40</sup> These families face many of the same problems as low-income families, and all the recommendations in this report are important for improving their access to affordable care.

### **R10: Bridge the 6-year subsidy eligibility gap for middle-income families**

Washington State plans to increase child care subsidy eligibility to encompass nearly the entire middle-income group by 2027, which will be a huge step towards addressing affordability for families in this income range. Increasing subsidies and reduced co-pay for families over the next few years also will improve the financial outlook for some licensed providers. However, the ongoing increases, though good over the long term, are not helping a significant number of families right now. The current crisis of affordability for middle-income families will continue unabated for most of the next six years. Therefore, a bridge is needed to help families in the middle-income range afford child care costs until then. After the eligibility expansion is fully phased in, middle-income families will still struggle to afford child care, but it will be a much smaller problem than before for many families if licensed care is available.

#### **R10.1: Increase subsidies for middle-income families**

Subsidies for middle-income families need to be funded by multiple sources and can take multiple forms, such grants and donations, scholarships, tax breaks, and transportation vouchers. R4.6 and R8.1-R8.3 can be targeted towards providing financial support for middle-income families.

#### **R10.2: Increase use of tax credits and dependent care flexible spending accounts**

Tax credits and DCFSAs are rapid financial help for some families (see Appendix III). This recommendation is similar to R5.3 but targeted for middle-income families. Child care providers must also be licensed for families to use DCFSAs.

---

<sup>40</sup> For more information on middle-income families and subsidies, see the section titled “The subsidies and middle-income dilemma” starting on page 31.

### **R10.3: Encourage and support parent cooperatives**

Parents in both counties expressed interest in child care and preschool parent cooperatives. Cooperatives can have a variety of roles and structures from cooperative centers with paid staff to parents taking turns caring for or transporting children. Cooperatives can provide an alternative to address the specific needs of middle-income families where there are not affordable alternatives.

## **Priority 3 recommendations**

---

### **R11: Implement multi-sectoral capacity building targeting rural areas**

#### **R11.1: Incentivize and support child care in rural areas**

A portfolio of incentives and supports will be needed until providing child care is sufficiently cost effective to attract more providers to serve the more rural areas of the two counties. Support and incentives can be tied to the requirement they serve more children in specific areas of the two counties, for example in Prescott or Waitsburg. The strategy is to target existing resources towards building rural child care capacity outside of Walla Walla and Dayton.

#### **R11.2: Target rural areas with information specific to their needs**

In general, strategies for communications and coordination with parents, employers, and providers are the same in the more rural areas as elsewhere. However, in person and online activities can be more difficult to participate in due to drive distances and poor internet access. This recommendation builds on strategies in R6 for improving communications with Spanish-speaking families but targets them to rural families.

#### **R11.3: Hire a navigator to work with rural families, employers, and providers**

Someone dedicated to this priority is needed to work across Walla Walla and Columbia counties to recruit new providers, support expanding capacity of existing providers, and connect providers to resources, training, and other available support in rural areas outside of the population centers of Walla Walla and Dayton. This recommendation is tiered to R5.4, R6.2, and R7.2.

#### **R11.4: Engage employers with employees who live and work in rural areas**

Large employers, especially those with longer shifts outside of the standard 40-hour week, need to support their employees in accessing child care. In Columbia County, a much-identified need for child care is for employees of Columbia Pulp, which has operations in Dayton and Starbuck. This recommendation targets R4 to rural areas.

#### **R11.5: Build capacity at existing organizations working in rural areas**

The WWVELC would like to manage a position that focuses on developing child care capacity in rural areas in the Walla Walla Valley but will need to fund it first. Next steps include to identify additional existing organizations working in rural areas and recruit new partners from smaller communities to join WWVELC and to collaborate on projects and programs.

#### **R11.6: Access funding to support child care efforts in rural areas**

Washington State has several programs that directly support rural areas, such as the Small Rural Modernization Grant. Appendix III, Table 38 provides details about these programs. The Office of the Superintendent of Instruction (OSPI) administers two US Department of Education grants for rural areas for school districts or Local Education Associations (LEAs) for pre-K programs: the Rural Education Initiative (Title V, B) Small, Rural School Achievement Program for districts with 600 students or less and the Rural Low-Income Schools Program, for which Dayton, Waitsburg, Dixie, and Touchet are eligible.

For facilities, USDA Rural Development has programs that can help with a portion of facilities and site development (Table 37). Two of the programs are for towns with less than 20,000 people, making them suitable for every community in the Walla Walla Valley except the city of Walla Walla. Another program serves towns with less than 50,000 people, and all communities in the Walla Walla Valley are eligible. The first step is to contact staff at the USDA Rural Development office, so the investment required to see if they are an opportunity worth pursuing is low. These programs tend to fund a portion of a facility with grants and loans.

The private foundations also serve rural areas and should be partners in capacity building and facilities development projects. This recommendation targets R8 to rural areas of the counties.

## Priority 4 recommendations

---

### R12: Implement multi-sectorial capacity building targeting infant and toddler care

Increasing infant and toddler care capacity is complicated by the difficulty of providing care that parents can afford. For middle-income families without subsidies, the cost is forcing parents, mostly women, from the workforce. The increases in subsidies will help, but infant and toddler care will still be more costly to provide and will continue to be an issue.

To no longer be considered a child care desert Walla Walla County needs an additional 39 infant and 27 toddler slots and Columbia County needs an additional 8 infant and 11 toddler slots

#### R12.1: Incentivize in-home providers to serve infants and toddlers

Access to grants, loans, and additional local and employer subsidies can be tied to incentivizing providers to provide infant and toddler care. This targets strategies under R1, R2, R3, R4.6, and R8 to infant and toddler care.

#### R12.2 Employers provide a subsidy to employees with infants and toddlers

A two- or three-year subsidy from an employer or local government towards child care can help make it affordable to families and cost-effective for providers. Examples of employers in the Walla Walla Valley offering cash support to their employees for child care ranged from \$240 to \$450 per month. This recommendation targets R4.6 to employers of families with infants and toddlers.

#### R12.3: Offer free space to existing providers if they serve more infants and toddlers

Employers, communities, schools, churches, or others can provide space to providers if they provide infant and toddler care in their center. This recommendation tiers to R4.4.

#### R12.4: Expand Early ECEAP and Early Head Start

The ECEAP program has piloted infant care elsewhere in the state and is close to scaling up the program to broader implementation. There will soon be an opportunity to obtain funding for more infant care in the two counties. ESD 123 is interested in contracting

with a private provider for an Early ECEAP classroom in Walla Walla, and CHSW expressed interest in contracting to provide one. ECEAP infant funding can support and grow a program rather than create new stand-alone efforts. ECEAP funding could support development of new infant capacity at the Center for Children and Families where space, with some remodeling, could house up to 10 infants, which is more than a quarter of the slots needed for infants for Walla Walla County to no longer be a child care desert. This program also includes support for infants and older children with disabilities, which is a critical need for many families.

Funding for new or expanding Early Head Start opens every few years. The limitation of these programs is they focus on low-income families. This recommendation tiers to R3.2.

#### **R12.5: Build navigation and referral capacity for infant and toddler care**

The provider survey found 24 open infant spaces at participating providers, including in towns other than Walla Walla, showing that help connecting parents to available slots is needed. CHSW or WWVELC need to hire a navigator that helps providers overcome obstacles to providing infant and toddler care. WWVELC or other groups should facilitate multi-organization collaboration on grants and fundraising to support navigation services and resources for families with infants and their employers. This recommendation tiers to R5 and R7.2.

#### **R12.6: Develop employer consortiums and expand community coalitions**

Over the long term, more employers need to be recruited to engage in broader community coalition efforts to address the need for care of infants and toddlers. This recommendation tiers to 4.7.

#### **R12.7: Employers provide access to dependent care flexible spending accounts and other programs**

Employers, providers, and support organizations can provide families with infants and toddlers with this information, whether as a separate effort or integrated into other communications. This recommendation targets R4.3 towards families and employers of families with infants and toddlers.



# Appendix I: Case Study Highlights

## 1. San Mateo County Childcare and Preschool Facilities Taskforce

**Problem:** Number one constraint was affordable space--child care was priced out of the real estate market. They were short 10,800 spaces.

**Overview:** Multi-sector approach to reuse existing real estate as early learning space, advocated for policies and incentives to prioritize childcare in future real estate developments, engage large employers to establish child care facilities for their employees, and increase general revenue for facility development in the region. Through their efforts Build Up SMC has helped get 1,300 new early childhood education spaces developed and has saved more than 600 spaces from closure. They have a communications campaign tailored to specific audiences including employers and the faith-based community to identify existing space for repurposing for child care. They also developed a policy so new developments integrate space for child care. Strategy: 1. reuse existing space; 1. work with city and county on new policies and incentives; 3. engage employers; 4. Increase general revenue for facility development.

**Driving entities:** City officials, developers, employers, school districts, Chamber of Commerce, and others.

**Lessons learned:** Solicit feedback from key stakeholders early; speak the language of the audience; start with a coalition of the willing; build allies outside of early education, since they are critical to change. They make targeted recommendations for each type of partner: county/city government/chambers of commerce, school districts, faith-based organizations, philanthropists

**Website:** <https://www.forwardontalent.org/stories/buildup-smc/>

## 2. Home Depot

**Problem:** Limited child care options and high costs resulting in increased absenteeism and turnover.

**Overview:** Home Depot created a suite of services, including on-site child care, backup child care, and discounts for dependent care through a partnership with Bright Horizons (a search engine that helps find qualified care). They offer a Flexible Spending Account. Backup care is available 24/7 for up to 10 days per year when their regular care is unavailable.

**Driving entities:** A leadership team

**Lessons learned:**

1. Child care is an investment in workforce, not a cost.
2. Employee parent groups generate ideas and make employees feel valued.
3. Need leadership from top as well as a "cross functional team;"
4. Be patient and stay committed;
5. Consider the needs of all employees;
6. Employees like options.

**Website:** <https://www.forwardontalent.org/stories/homedepot/>

## 3. Shared Services Alliances

**Problem:** Reduce expenses and increase efficiency of child care providers

**Overview:** Created Shared Services Alliances, in which providers work together to share costs and deliver services. Providers pool resources to hire centralized staff for operations and business support, accounting, and maintenance across multiple sites. These are often funded through philanthropic and corporate grants and partnerships. Functions include IT, billing, program coordination, HR, Training, Accounting, Enrollment services, quality assessment. Back office services. Role of business is to front the cost of shared services; offer space; champion better policy; provide donations (time, supplies, furniture, or services); get involved with the collective.

**Driving entities:** Private foundations working with child care coalitions in San Francisco and Richmond, two large providers (Chambliss Center and United Way) in Chattanooga.

**Lessons learned:** Developing shared services alliance reduces costs and increases efficiency. Increased survival rates of nonprofit and small business child care providers.

**Website:** <https://www.uschamberfoundation.org/case-study-shared-services-alliances>



## 4. Missoula Area Chamber of Commerce

**Problem:** Lack of local child care was hurting businesses. They had over 1,000 children on waiting lists.

**Overview:** Explored on-site child care; expanding existing child care programs; multiple business cooperatives, remodeling and occupying existing spaces; including child care in new development plans; and increasing availability of family in-home care.

**Driving entities:** Missoula Chamber of Commerce led the effort; broad coalition of local and state agencies and groups including the public schools.

**Lessons learned:** Provided an architect to organizations with potential expansion locations to inform which model feasible in particular situations; Connecting with local and state agencies to address licensing and regulation barriers;

**Website:** <https://www.missoulachamber.com/childcare.html>

## 5. Sonoma County, California

**Problem:** Loss of 295 providers, over 1,300 children on child care wait lists, 60% of families living in a child care desert.

**Overview:** "1. Changed policy to eliminate or lower fees for the development of child care and reduced levels of review for child care facility permits.  
2. Information campaign to elected officials and community leaders to make the case for collaborative solutions. Also focused on providing employers with the tools to understand the benefits of supporting child care."

**Driving entities:** Sonoma County and many local partners

**Lessons learned:** Early education partners need to understand the unique needs of employers and which resources to connect them to. Understanding each employer's unique needs and motivations is critical. Speak with one voice about return on investment for a community and employer.

**Website:** <https://www.forwardontalent.org/stories/santa-rosa/>

## Appendix II: Detailed Cost Models

**Table 32.** Model summaries

Scenario #	1			2		3				4	
Model #	1	2	3	4	5	6	7	8	9	10	11
County	CC <sup>41</sup>	CC	CC	CC	CC	WW <sup>42</sup>	WW	WW	WW	Both	Both
Care type	Center	Center	Center	Center	Center	Center	Center	Center	Center	Home	Home
EA licensing level	EA 3	EA 3	EA 3	EA 3	EA 3	EA 3	EA 3	EA 3	EA 3	EA 1	EA 3
# of children	28	28	22	42	72	166	166	150	150	12	12
Infant	8	8	8	8	8	40	40	24	24	4	4
Toddler	0	0	14	14	14	56	56	56	56	8	8
Preschool	20	20	0	20	20	40	40	40	40	0	0
School-age	0	0	0	0	30	30	30	30	30	0	0
# of classrooms	2	2	2	3	4	12	12	10	10	-	-
Infant	1	1	1	1	1	5	5	3	3	-	-
Toddler	0	0	1	1	1	4	4	4	4	-	-
Preschool	1	1	0	1	1	2	2	2	2	-	-
School-age	0	0	0	0	1	1	1	1	1	-	-
Pays rent?	Yes	No	No	No	No	Yes	Yes	Yes	Yes	Yes	Yes
Salaries	MW <sup>43</sup>	MW	MW	MW	MW	MW	LW <sup>44</sup>	MW	LW	MW	LW

**Table 33.** Scenario 1 cost model results

Model 1	Model 2	Model 3
---------	---------	---------

<sup>41</sup> CC = Columbia County

<sup>42</sup> WW = Walla Walla County

<sup>43</sup> MW = Salaries tiered starting at minimum wage

<sup>44</sup> LW = Salaries tiered starting at living wage

	1.1	1.2	1.3	2.1	2.2	2.3	3.1	3.2	3.3
Percent on subsidies	0%	50%	100%	0%	50%	100%	0%	50%	100%
Number of children	28	28	28	28	28	28	22	22	22
<b>Annual Costs per Child (CPC)</b>									
Infants	\$14,838	\$14,757	\$14,676	\$14,285	\$14,204	\$14,123	\$14,883	\$14,794	\$14,705
Toddlers	-	-	-	-	-	-	\$10,223	\$10,134	\$10,045
Preschool	\$8,315	\$8,234	\$8,153	\$7,762	\$7,681	\$7,600	-	-	-
School age	-	-	-	-	-	-	-	-	-
<b>Gap per child on subsidies</b>									
Infants	-	-\$4,108	-\$4,027	-	-\$3,555	-\$3,475	-	-\$4,145	-\$4,056
Toddlers	-	-	-	-	-	-	-	-\$1,583	-\$1,494
Preschool	-	\$17	\$98	-	\$570	\$651	-	-	-
School age	-	-	-	-	-	-	-	-	-
<b>Gap per child on tuition</b>									
Infants	-\$2,958	-\$2,877	-	-\$2,405	-\$2,324	-	-\$3,003	-\$2,914	-
Toddlers	-	-	-	-	-	-	-\$983	-\$894	-
Preschool	\$985	\$1,066	-	\$1,538	\$1,619	-	-	-	-
School age	-	-	-	-	-	-	-	-	-
<b>Total Revenue (all children)</b>									
Infants	\$95,040	\$90,115	\$85,190	\$95,040	\$90,115	\$85,190	\$95,040	\$90,115	\$85,190
Toddlers	-	-	-	-	-	-	\$129,360	\$124,536	\$119,713
Preschool	\$186,000	\$175,512	\$165,024	\$186,000	\$175,512	\$165,024	-	-	-
School age	-	-	-	-	-	-	-	-	-
Total	\$281,040	\$265,627		\$281,040	\$265,627	\$250,214	\$224,400	\$214,652	\$204,903
<b>Total Costs (all children &amp; operations)</b>									
Infants	\$118,700	\$118,055	\$117,410	\$114,277	\$113,632	\$112,987	\$119,062	\$118,349	\$117,637
Toddlers	-	-	-	-	-	-	\$143,128	\$141,881	\$140,635
Preschool	\$166,291	\$164,679	\$163,066	\$155,232	\$153,619	\$152,007	-	-	-
School age	-	-	-	-	-	-	-	-	-
Total	\$284,991	\$282,734	\$280,476	\$269,508	\$267,251	\$264,993	\$262,190	\$260,230	\$258,271
<b>Total Gap</b>									
Infants	-\$23,660	-\$27,940	-\$32,220	-\$19,237	-\$23,516	-\$27,796	-\$24,022	-\$28,234	-\$32,446
Toddlers	-	-	-	-	-	-	-\$13,768	-\$17,345	-\$20,922
Preschool	\$19,709	\$10,833	\$1,958	\$30,768	\$21,893	\$13,017	-	-	-
School age	-	-	-	-	-	-	-	-	-
<b>Annual Net</b>	<b>-\$3,951</b>	<b>-\$17,107</b>	<b>-\$30,262</b>	<b>\$11,532</b>	<b>-\$1,623</b>	<b>-\$14,779</b>	<b>-\$37,790</b>	<b>-\$45,579</b>	<b>-\$53,368</b>

**Table 34.** Scenario 2 cost model results

Model 4			Model 5		
4.1	4.2	4.3	5.1	5.2	5.3

Percent on subsidies	0%	50%	100%	0%	50%	100%
Number of children	42	42	42	72	72	72
<b>Annual Costs per Child (CPC)</b>						
Infants	\$13,621	\$13,535	\$13,449	\$15,919	\$15,872	\$15,826
Toddlers	\$9,017	\$8,931	\$8,845	\$10,089	\$10,042	\$9,995
Preschool	\$7,175	\$7,089	\$7,003	\$7,757	\$7,710	\$7,663
School age	-	-	-	\$2,824	\$2,778	\$2,731
<b>Gap per child on subsidies</b>						
Infants	-	-\$2,887	-\$2,801	-	-\$5,224	-\$5,177
Toddlers	-	-\$380	-\$294	-	-\$1,491	-\$1,444
Preschool	-	\$1,163	\$1,249	-	\$541	\$588
School age	-	-	-	-	\$1,085	\$1,131
<b>Gap per child on tuition</b>						
Infants	-\$1,741	-\$1,655	-	-\$4,039	-\$3,992	-
Toddlers	\$223	\$309	-	-\$849	-\$802	-
Preschool	\$2,125	\$2,211	-	\$1,543	\$1,590	-
School age	-	-	-	\$4,400	\$4,446	-
<b>Total Revenue</b>						
Infants	\$95,040	\$90,115	\$85,190	\$95,040	\$90,115	\$85,190
Toddlers	\$129,360	\$124,536	\$119,713	\$129,360	\$124,536	\$119,713
Preschool	\$186,000	\$175,512	\$165,024	\$186,000	\$175,512	\$165,024
School age	-	-	-	\$216,720	\$166,291	\$115,862
<i>Total</i>	<i>\$410,400</i>	<i>\$390,164</i>	<i>\$369,927</i>	<i>\$627,120</i>	<i>\$556,455</i>	<i>\$485,789</i>
<b>Total Costs</b>						
Infants	\$108,971	\$108,283	\$107,595	\$127,354	\$126,979	\$126,605
Toddlers	\$126,231	\$125,027	\$123,823	\$141,242	\$140,587	\$139,932
Preschool	\$143,492	\$141,772	\$140,052	\$155,131	\$154,195	\$153,260
School age	-	-	-	\$84,730	\$83,327	\$81,923
<i>Total</i>	<i>\$378,694</i>	<i>\$375,082</i>	<i>\$371,469</i>	<i>\$508,457</i>	<i>\$505,089</i>	<i>\$501,720</i>
<b>Total Gap</b>						
Infants	-\$13,931	-\$18,167	-\$22,404	-\$32,314	-\$36,864	-\$41,415
Toddlers	\$3,129	-\$491	-\$4,110	-\$11,882	-\$16,051	-\$20,220
Preschool	\$42,508	\$33,740	\$24,972	\$30,869	\$21,317	\$11,764
School age	-	-	-	\$131,990	\$82,965	\$33,939
<b>Annual Net</b>	<b>\$31,706</b>	<b>\$15,082</b>	<b>-\$1,542</b>	<b>\$118,663</b>	<b>\$51,366</b>	<b>-\$15,930</b>

**Table 35.** Scenario 3 cost model results

	Model 6			Model 7			Model 8			Model 9		
	6.1	6.2	6.3	7.1	7.2	7.3	8.1	8.2	8.3	9.1	9.2	9.3
% on subsidies	0%	50%	100%	0%	50%	100%	0%	50%	100%	0%	50%	100%

# of children	166	166	166	166	166	166	150	150	150	150	150	150
<b>Annual Costs per Child (CPC)</b>												
Infants	\$14,012	\$13,942	\$13,873	\$19,038	\$18,969	\$18,900	\$14,215	\$14,146	\$14,078	\$19,289	\$19,220	\$19,152
Toddlers	\$9,121	\$9,052	\$8,983	\$12,098	\$12,029	\$11,959	\$9,239	\$9,170	\$9,101	\$12,243	\$12,174	\$12,105
Preschool	\$7,165	\$7,096	\$7,027	\$9,322	\$9,252	\$9,183	\$7,248	\$7,179	\$7,111	\$9,424	\$9,356	\$9,287
School age	\$2,953	\$2,883	\$2,814	\$3,832	\$3,762	\$3,693	\$2,965	\$2,896	\$2,827	\$3,845	\$3,776	\$3,707
<b>Gap for Children on subsidies (per child)</b>												
Infants	-	-\$3,294	-\$3,224	-	-\$8,320	-\$8,251	-	-\$3,497	-\$3,429	-	-\$8,572	-\$8,503
Toddlers	-	-\$501	-\$432	-	-\$3,478	-\$3,408	-	-\$619	-\$550	-	-\$3,623	-\$3,555
Preschool	-	\$1,155	\$1,224	-	-\$1,001	-\$932	-	\$1,072	\$1,140	-	-\$1,104	-\$1,036
School age	-	\$979	\$1,048	-	\$100	\$169	-	\$966	\$1,035	-	\$86	\$155
<b>Gap for Children on Tuition (per child)</b>												
Infants	-\$2,132	-\$2,062	-	-\$7,158	-\$7,089	-	-\$1,543	-\$1,474	-	-\$6,617	-\$6,548	-\$6,480
Toddlers	\$119	\$188	-	-\$2,858	-\$2,789	-	\$1,321	\$1,390	-	-\$1,683	-\$1,614	-\$1,545
Preschool	\$2,135	\$2,204	-	-\$22	\$48	-	\$3,012	\$3,081	-	\$836	\$904	\$973
School age	\$4,271	\$4,341	-	\$3,392	\$3,462	-	\$4,259	\$4,328	-	\$3,379	\$3,448	\$3,517
<b>Total Revenue</b>												
Infants	\$475,200	\$450,576	\$425,952	\$475,200	\$450,576	\$425,952	\$285,120	\$270,346	\$255,571	\$285,120	\$270,346	\$255,571
Toddlers	\$517,440	\$498,145	\$478,850	\$517,440	\$498,145	\$478,850	\$517,440	\$498,145	\$478,850	\$517,440	\$498,145	\$478,850
Preschool	\$372,000	\$351,024	\$330,048	\$372,000	\$351,024	\$330,048	\$372,000	\$351,024	\$330,048	\$372,000	\$351,024	\$330,048
School age	\$216,720	\$166,291	\$115,862	\$216,720	\$166,291	\$115,862	\$216,720	\$166,291	\$115,862	\$216,720	\$166,291	\$115,862
<b>Total Costs</b>												
Infants	\$560,466	\$557,694	\$554,923	\$761,536	\$758,765	\$755,993	\$341,155	\$339,508	\$337,861	\$462,937	\$461,290	\$766,071
Toddlers	\$510,799	\$506,918	\$503,038	\$677,477	\$673,597	\$669,716	\$517,361	\$513,518	\$509,674	\$685,594	\$681,750	\$677,907
Preschool	\$286,613	\$283,841	\$281,069	\$372,863	\$370,091	\$367,319	\$289,925	\$287,179	\$284,434	\$376,969	\$374,224	\$371,479
School age	\$88,580	\$86,501	\$84,422	\$114,951	\$112,872	\$110,793	\$88,938	\$86,879	\$84,820	\$115,343	\$113,284	\$111,225
<b>Total Gap</b>												
Infants	-\$85,266	-\$107,118	-\$128,971	-\$286,336	-\$308,189	-\$330,041	-\$56,035	-\$69,162	-\$82,290	-\$177,817	-\$190,944	-\$510,499
Toddlers	\$6,641	-\$8,773	-\$24,187	-\$160,037	-\$175,451	-\$190,866	\$79	-\$15,373	-\$30,824	-\$168,154	-\$183,605	-\$199,056
Preschool	\$85,387	\$67,183	\$48,979	-\$863	-\$19,067	-\$37,271	\$82,075	\$63,845	\$45,614	-\$4,969	-\$23,200	-\$41,431
School age	\$128,140	\$79,791	\$31,441	\$101,769	\$53,419	\$5,069	\$127,782	\$79,412	\$31,042	\$101,377	\$53,008	\$4,638
<b>Annual Net</b>	<b>\$134,902</b>	<b>\$31,082</b>	<b>-\$72,738</b>	<b>-\$345,468</b>	<b>-\$449,288</b>	<b>-\$553,108</b>	<b>\$153,900</b>	<b>\$58,722</b>	<b>-\$36,457</b>	<b>-\$249,563</b>	<b>-\$344,741</b>	<b>-\$746,348</b>

# Appendix III: Funding Options

## Federal funding

**Table 36.** Federal Funding Administered by the State for School Districts, ESDs, and LEAs

Funder	Program	Summary
<b>US Department of Education (DOE), administered by OSPI</b>	Closing Educational Achievement Grants (Title 1, Part A), Early Learning programs	Can be used to provide high quality preschool and other early learning programs and activities. Title 1, Part A funds can be used for minor repairs or remodeling of existing spaces, or for renting more appropriate space. Programs must meet Head Start education performance standards.
	Rural Education Initiative (Title V, B), Rural Low-income Schools Program (RLIS)	OSPI provides subgrants annually to rural LEAs that serve concentrations of children from low-income families. Funds can be used under expanded opportunities in Title 1, Part A, and Title 2,3,4 parts A. To be eligible, 20% of students need to be below poverty line. Dayton, Waitsburg, Dixie, Touchet are eligible.
	Rural Education Initiative (Title V, B), Small, Rural School Achievement Program (SRSA)	Apply directly to DOE. Eligible for districts with 600 students or less. Applies to any activity under Title I, Part A, Title II, Part A, Title III, Part A.
	Title 1 Part C-Migrant Education	Funds ages 3-5 not in kindergarten. Work with the ESD to access these funds.
	Title 1 Part A-Improving the Academic Achievement of the Disadvantaged	Funds to support students at risk of failing in kindergarten. Most need to identify students served. Building level, district level, or community level preschool. Pay for teachers, paraeducators, engagement activities, professional development.
	Title III-English Language Acquisition	Can include preschool educators and administrators in activities.
	Special Education Individuals with Disabilities Education Act, IDEA Part B	Services for students ages 3 to 5 with a disability and IEP. Other students can benefit.
<b>OSPI</b>	Learning Assistance Program	Funds activities and programs for academic readiness of students identified as needing extra support and reducing disruptive behaviors. <5% of LEA LAP funds for readiness activities.
<b>USDA–Food and Nutrition Service</b>	Child and Adult Care Food Program	Provides reimbursements for nutritious meals and snacks for children participating in child care centers and afterschool programs.

**Table 37.** Other federal funding

Funder	Program	Summary
<b>US Department of Human Services-- Office of Head Start</b>	Early Head Start	Funds for new classrooms available every few years.
	Early Migrant and Seasonal Head Start	Funds for new classrooms available every few years.
<b>USDA Rural Development</b>	Community Facilities Program	Funds education and child care facilities. Percentage of grant/loan determined by size of town and median income. Towns 20,000 or less eligible. Often a part of braided funding. Contact RD office.
	Economic Impact Initiative Grants	Child care facilities are eligible. Communities with less than 20,000 people with a net employed rate greater than 19.5% and median income below 90% of state average. Contact RD office.
	Rural Community Development Initiative grants	Any place with less than 50,000 people. Funds child care facilities. Also provides technical assistance. Contact RD office.

# Washington State funding

**Table 38.** State funding requiring appropriations

Funder	Program	Summary
<b>WA Department of Children, Youth, and Families (DCYF)</b>	Early Start Act	Federal funding to states. These three programs are block grants to DCYF.
	State Special Education Allocation	Special education staff, parent involvement, professional development for teachers, early learning providers and parents.
	Student transportation	Special transportation to district operated Head Start, ECEAP, or other early education program.
	Preschool Development Grant Birth Through Five	States are the applicants. Last grants listed for 2018. WA received \$33M in 2019 to carry out activities for next three years.
	ECEAP	Three to four-year-old preschool. Goal is to expand the system over until 2022-2023 when every eligible child in the state can enroll in the program. Early ECEAP program serves infants and toddlers. Funding for new classrooms available periodically. Start by contacting ESD123.
<b>Office of Superintendent of Public Instruction</b>	Emergency Repair Pool	To address imminent health risk. For repair of structural systems electrical, HVAC, fire and life safety code—including fire suppression systems.
	Healthy Kids-Healthy Schools Grants	Supports physical education/physical activity and nutrition. Procure equipment, repair, and renovation of existing equipment or facilities, design and construction of new space and infrastructure. Drinking water fixture replacement.
	Small Rural Modernization Grant	Grants for districts with less than 1,000 students. Only for permanent school district facilities. No match funds required.
	Health and Safety ADA Equal Access Grant	Funds facility repairs and alterations at K-12 schools. No matching funds required.
	Learning Assistance Program	Funds activities and programs for academic readiness of students identified as needing extra support and reducing disruptive behaviors. <5% of LEA LAP funds can be used for readiness activities.
	Energy Grants Program	Increase energy efficiency and create healthy environments.
	School Construction Assistance Program	Funding assistance to school districts for major new construction or modernization projects. Covers 68% (for CP) of eligible costs of construction as match to local funding.



<b>WA Department of Commerce</b>	Building Communities Fund	All school districts in Columbia and WW counties eligible; Grants for 25% of eligible capital costs. Reimburses expenses.
	Child Care Partnership Grants	Due in July and September last year. The last round focused on planning grants. This fund is important to building system capacity and the WWELC.
	LOCAL Program	Low-cost financing. School districts eligible.
	Energy Efficiency and Solar Grant Program	School districts and ESD are eligible. Projects that produce energy savings--priority is lighting projects and new applicants.
	Community Capital Facilities--Early Learning Facilities Program	Open to nonprofits, public entities, tribes, and for-profit businesses. Funds three sizes of grants: facilities grants over \$200,000, under \$200,000, and \$20,000 planning grants.

## Foundation funding

**Table 39.** Local, regional, and national foundations

Funder	Program	Summary
<b>Blue Mountain Community Foundation</b>	Discretionary Grants	Walla Walla, Columbia, Garfield, and Umatilla Counties.
<b>Bonne and Clifford Braden Foundation</b>	Based in Walla Walla	General support.
<b>Estate of Joseph L. Stubblefield</b>	Based in Walla Walla	Funded WWSD and WW Catholic and Alternative HS. Gave \$10,000 to WWELC in 2012.
<b>Mary Garner Esary Trust</b>	Based in Walla Walla	Giving limited to Walla Walla; almost all grants to Walla Walla schools; Disadvantage people, low income, children and youth. Gave \$2,000 the WWELC.
<b>Wildhorse Foundation</b>		Benefits communities; Walla Walla and most of Columbia included with Umatilla County in Oregon. Rapid response grants (\$1,000 or less). Nonprofits and government entities in Walla Walla, and Columbia, Umatilla, and Benton counties eligible. Grants up to \$20,000.

<b>Marguerite Casey Foundation</b>	Initiatives and targeted support rather than open grant competitions	A large national foundation with a long-history of supporting child care, early learning, children, and many other cross-cutting themes. No obvious way to apply to them, but they are active in the region.
	Matching grants and Impact grants	General operating and capacity building grants. Focus includes Walla Walla and Columbia counties.
	Core grants	Invests in an organization's most important priority, general within categories of capacity, community, and capital. Minimum request is \$20,000
<b>Sherwood Trust</b>	Impact Grants	Funds requests under \$20,000
	Community Initiatives	Sherwood Trust convenes communities to address regional issues.
	Community Leadership Program	This training program develops leadership and project management abilities of a cohort of community members.
<b>Murdock Charitable Trust</b>	Strategic Project Grants	Capital grants; education in classroom and informal community programs; Program and Staff grants fund a new position to support capacity building. Interests include youth services and afterschool programs and resources.
	Covid Response and Recovery for Eastern WA	Innovia funds nonprofits in a 20-county area of eastern Washington that includes Columbia, Garfield, and Asotin counties. They have had two COVID grant rounds up to \$40,000, with the last one closing in March 2021.
<b>Innovia Foundation</b>	Columbia County Children's Fund	Grants of \$4,000 or less for Columbia County. Educational enrichment and special needs programs, with preference given to elementary school-aged children. Guidance, counseling and therapy to children and their families. Medical and dental services and/or supplies (glasses, hearing aids, braces) for disadvantaged children.
	This Book Rural Grant Program	Provides grants of \$2,500 or less to rural libraries, municipalities, or non-profit organizations that create community-wide awareness and ownership for childhood reading success in Columbia, Garfield, and Asotin counties.

# Impact investing and micro lending

**Table 40.** Impact investors

Funder	Program	Summary
<b>Washington Community Reinvestment Association</b>	WELL Fund (Washington Early Learning Loan Fund)	Real estate loan fund to increase early learning slots to support low-income families. Need to be enrolled in Early Achievers.
<b>Mercy Corps</b>	Micro-Business Assistance Program	Matches 8:1 for Individual Development Accounts. 80% of area median income or less to qualify. \$84 per month savings amount to \$500 per month. Structured program with training and grant.
<b>Craft3</b>	Business Loans	Provides loans from \$25,000 to \$3,000,000 with fixed rates starting at 8% for 3-7 years. They loan for start ups and acquisitions, inventory, equipment, real estate, debt restructuring, construction, gap and bridge financing.
	Community Facilities Loans	Provides loans from \$25,000 to \$3,000,000 at 6% for 3 to 7 years. Can do smaller or larger loans with USDA Loan Guarantee.

## Appendix IV: Available licensed child care

The following tables contain information about licensed providers accessible from the Child Care Aware online database. This information provides context to the number of child care slots by age group that existed in the Walla Walla Valley as of May 2021. Visit [www.childcareawarewa.org](http://www.childcareawarewa.org) for more information.

**Table 41.** Licensed in-home providers by location, capacity, and ages served. Dots indicate providers serve the age group.

Name	City	Licensed Capacity	Infants	Toddlers	Preschool	School-age
Crawford Daycare	Burbank	12	•	•	•	•
Deanna Dickenson	Burbank	12	•	•	•	
Letty's Daycare	Burbank	6	•	•	•	
Fenton Child Care	College Place	6	•	•	•	
Happy House in Home Preschool/Day Care	College Place	12	•	•	•	
Lillie's Friends Childcare	College Place	12	•	•	•	
Robin's Nest Daycare	College Place	12	•	•	•	
Arizmendi's Childcare	Walla Walla	8	•	•	•	•
Estela Muro	Walla Walla	4	•	•	•	•
Friendly Bear Childcare	Walla Walla	12	•	•	•	•
Hernandez Maria Arreola	Walla Walla	9	•	•	•	•
Joyce's Daycare	Walla Walla	8	•	•	•	•
Junior's Home Daycare	Walla Walla	12	•	•	•	•
Karla's Daycare	Walla Walla	12	•	•	•	•
Little Sprouts Daycare	Walla Walla	8	•	•	•	•
Love Bugs Childcare	Walla Walla	6	•	•	•	•
Maria E Rodriguez	Walla Walla	12	•	•	•	•
Marie's Little Angels	Walla Walla	12	•	•	•	•
Rugg Ratts	Walla Walla	10	•	•	•	•
The Children's Center	Walla Walla	12	•	•	•	•
Val's House	Walla Walla	12	•	•	•	•
Family Home Daycare	Walla Walla	12	•	•	•	•
Lisa's Fun and Friendly Child Care	Walla Walla	12	•	•	•	•
Becky's Daycare	Walla Walla	8		•	•	•
Giant Steps Preschool/Childcare	Walla Walla	12			•	•

**Table 42.** Licensed center-based providers by location, capacity, and ages served

Name	City	Licensed Capacity	Infants	Toddlers	Preschool	School-age
Inspire Development Center	Walla Walla	210	●	●	●	●
The Ark	Walla Walla	120		●	●	●
Walla Walla YMCA Learning Center	Walla Walla	101			●	●
Bright Beginnings	Walla Walla	66	●	●	●	
YWCA My Friends House	Walla Walla	45		●	●	
The Kids Place	Walla Walla	35		●	●	●
Little Angels Bio-Dome Daycare and Preschool	Walla Walla	30		●	●	
Assumption Childcare Center	Walla Walla	30			●	●
The Care-A-Lot Center, LLC	Walla Walla	25		●	●	●
Walla Walla Early Learning Center	Walla Walla	20	●	●	●	
Camp Fire Walla Walla	Walla Walla	20			●	
New Horizon ECEC	Prescott	77	●	●	●	

# Appendix V: Resumen de las recomendaciones del estudio de viabilidad

Primera prioridad: Hacer que sea mas accesible las redes de cuidado de niños para todas las familias, especialmente para las familias emigrantes e indocumentadas

- 1 | Desarrollar un centro nuevo en Dayton
- 2 | Expandir la capacidad de los centros privados con licencia en el condado de Walla Walla
  - 2.1 | Desarrollar fondos consistentes para pequeñas actualizaciones u otros proyectos que permitirían que los proveedores puedan aumentar el numero de niños que atienden
  - 2.2 | Contratar a alguien para ayudar a los proveedores a superar las limitaciones de expansión
- 3 | Incrementar la capacidad de proveedores a través de los dos condados durante los próximos 6 años
  - 3.1 | Expandir y desarrollar nuevos centros
  - 3.2 | Expandir los programas de ECEAP y Head Start
  - 3.3 | Reclutar nuevos proveedores de casa con licencia en todas las áreas del Valle de Walla Walla
  - 3.4 | Incrementar el apoyo para proveedores de habla hispana
  - 3.5 | Desarrollar un camino hacia la concesión de licencias para proveedores de cuidado infantil indocumentados
  - 3.6 | Desarrollar una cooperativa de compras para reducir costos
  - 3.7 | Desarrollar una cooperativa de instalaciones para reducir costos y expandir los servicios

## 4 Incrementar la involucración de los empleadores

- 4.1 Brindar flexibilidad y apoyo a los empleados con hijos
- 4.2 Conectar a los empleados con recursos de cuidado infantil
- 4.3 Proporcionar cuentas de gastos flexibles para el cuidado de dependientes y otros apoyos fiscales
- 4.4 Proporcionar cuidado de niños en el lugar de trabajo
- 4.5 Proporcionar un carro que puedan usar los padres desde su trabajo para responder a las necesidades de sus hijos
- 4.6 Subsidiar e incentivar el cuidado de niños para niños enfermos, sin cita previa, de respaldo, y durante toda la noche
- 4.7 Participar en coaliciones de cuidado de niños

## 5 Desarrollar navegación y soporte en persona en todo el sistema

- 5.1 Coordinar los recursos en línea para que todos puedan encontrar lo que necesiten
- 5.2 Desarrollar una plataforma en línea para conectar a las familias a el cuidado de niños
- 5.3 Mejorar el sistema de referencias
- 5.4 Crear y apoyar posiciones de navegación del cuidado de niños
- 5.5 Proporcionar entrenamientos, apoyo, o recursos para aumentar la capacidad organizacional

## 6 Mejorar la comunicación e involucración de las familias de habla hispana

- 6.1 Utilizar varios métodos y medios de comunicación
- 6.2 Priorizar la contratación de personal bilingüe en todas las organizaciones comunitarias
- 6.3 Expandir el programa de Garrison Night School

## **7** | Desarrollar la WWVELC como una organización independiente sin fines de lucro

- 7.1 Contratar a un director de desarrollo
- 7.2 Contratar a navegadores y personal de apoyo a medida que haya fondos disponibles
- 7.3 Ampliar las funciones de comunicación y coordinación de la WWVELC

## **8** | Aumentar los recursos

- 8.1 Aumentar los fondos federales y estatales
- 8.2 Incrementar la financiación y el apoyo de fundaciones privadas
- 8.3 Desarrollar un fondo de cuidado infantil dedicado para el Valle de Walla Walla
- 8.4 Aumentar el uso de inversiones de impacto y micro préstamos
- 8.5 Aumentar los fondos federales y estatales

## **9** | Crear pólizas locales habilitantes

### **Segunda prioridad: Incrementar la asequibilidad de el cuidado de niños para familias de ingresos medios**

## **10** | Cerrar la brecha de elegibilidad de subsidio de 6 años para familias de ingresos medios

- 10.1 Aumentar los subsidios para familias de ingresos medios
- 10.2 Aumentar el uso de créditos fiscales y cuentas de gastos flexibles para el cuidado de dependientes
- 10.3 Alentar y apoyar a las cooperativas de padres

### **Tercera prioridad: Incrementar la disponibilidad de cuidado infantil con licencia en las áreas extremadamente rurales de nuestra región**

## **11** | Implementar el desarrollo de la capacidad multisectorial dirigida a las áreas rurales



- 11.1 Incentivar y apoyar el cuidado de niños en las áreas rurales
- 11.2 Dirigir a las áreas rurales con información específica para sus necesidades
- 11.3 Contratar a un navegador para apoyar a las familias, los empleadores y los proveedores rurales
- 11.4 Involucrar a los empleadores que tienen empleados que viven y trabajan en áreas rurales
- 11.5 Desarrollar capacidad en organizaciones existentes que trabajan en áreas rurales
- 11.6 Acceder a fondos para apoyar los esfuerzos de cuidado infantil en áreas rurales

**Cuarta prioridad: Aumentar la capacidad de los proveedores de cuidado infantil nuevos y existentes para atender a infantes y niños pequeños**

- 12** Implementar el desarrollo de la capacidad multisectorial dirigida al cuidado de infantes y niños pequeños
  - 12.1 Incentivar a los proveedores de casa para que atiendan a infantes y niños pequeños
  - 12.2 Los empleadores proporcionan un subsidio a los empleados con infantes y niños pequeños
  - 12.3 Ofrecer espacio gratuito a los proveedores existentes si atienden a más infantes y niños pequeños
  - 12.4 Expandir los programas de Early ECEAP y Early Head Start
  - 12.5 Desarrollar la capacidad de navegación y referencia para el cuidado de infantes y niños pequeños
  - 12.6 Desarrollar consorcios de empleadores y ampliar las coaliciones comunitarias
  - 12.7 Los empleadores brindan acceso a cuentas de gastos flexibles para el cuidado de dependientes y otros programas

