

# Vermont Regulated Child Care and Early Learning Program Report on Program Closures, Capacity and Enrollment

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DEPARTMENT FOR CHILDREN AND FAMILIES CHILD DEVELOPMENT DIVISION

# Report on Regulated Child Care and Early Learning Program Closures, Capacity and Enrollment

One of the goals of the Vermont Department for Children and Families, Child Development Division (CDD) is that families have access to regulated child care, early learning, and afterschool services that meet their family's needs. CDD monitors the opening and closing of regulated child care programs to assess how much child care is available to families in Vermont. The Division has added information about capacity of child care programs and the early childhood enrollment of programs.

Programs required to be regulated in Vermont include individuals who provide care in their home for more than two families, businesses providing child care to children on a regular basis, private and public school preschool programs, and organizations offering afterschool options for children, including some public schools.

Data for this report is from the state's child care information system, Bright Futures Information System (BFIS) and from the Child Care Immunization Survey. The number of programs and licensed capacity is verified data from the child care licensing unit. Data on reported capacity and enrollment is self reported by child care programs.

# What This Report Can and Cannot Answer

#### Regulated child care in Vermont is child care that is safe, healthy, and supports children's development.

An adequate supply of regulated child care is important for a variety of reasons, including:

- Families experience less stress when their children are in safe, loving and stimulating child care programs. They do not need to worry while they are at work or need to be away from their children.
- Everyone benefits from good child care because it fosters a healthy, successful, future workforce.
- Over 90% of brain development occurs in the early years. Nurturing relationships in regulated child care can support the brain development in young children.

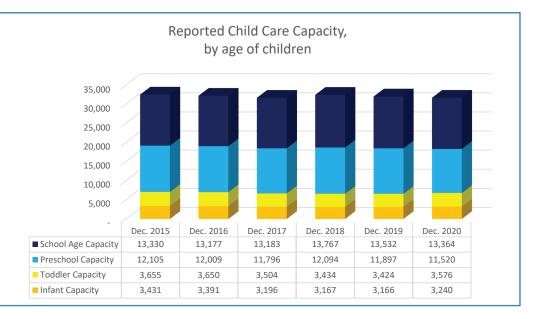
This report looks at the number of spaces in regulated child care, based on the reported capacity reported by programs each December. It also looks at the enrollment of infants through preschool age children in regulated programs. This report shows the trends of capacity, enrollment, and closing of regulated programs. This is a global look at all child care spaces assuming all spaces are equal and meet every family's needs. We know that needs vary and not all spaces are available for the age of the child, hours needed for care, or the location that meets the needs of every family. Additionally, during the COVID-19 pandemic programs opened to serve school age children that were not necessarily regulated, these programs were called "School Age Hubs". Any temporary increase in capacity in regulated programs, or capacity in unregulated programs is not represented in this report.

# **Capacity of Child Care Programs**

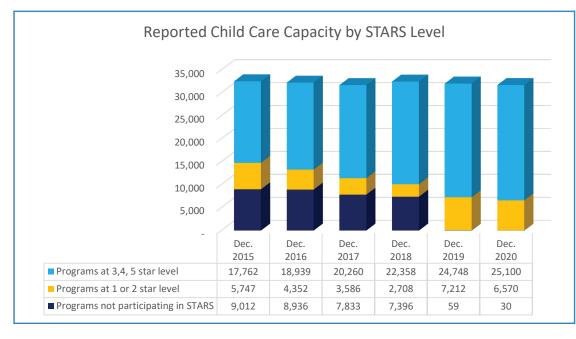
The capacity of child care programs is an indication of the availability of child care for families. The capacity of programs is often reported in two different ways. One data point is the "licensed capacity". This data point represents the number of children that a child care program is licensed to care for at any given time. Many programs do not provide care for the maximum number children for which they are licensed. Another data point that is often used is the "reported capacity". The reported capacity data represents the number of spaces a program self reports offering for each age group, this is sometimes called desired capacity. This is often a more accurate data point on the availability of child care. The licensed capacity is data that is available over a long period of time, from 2010 forward, while the reported capacity is available from December 2015.

### **Reported Capacity of Child Care Programs**

The reported capacity of child care programs has slowly decreased over



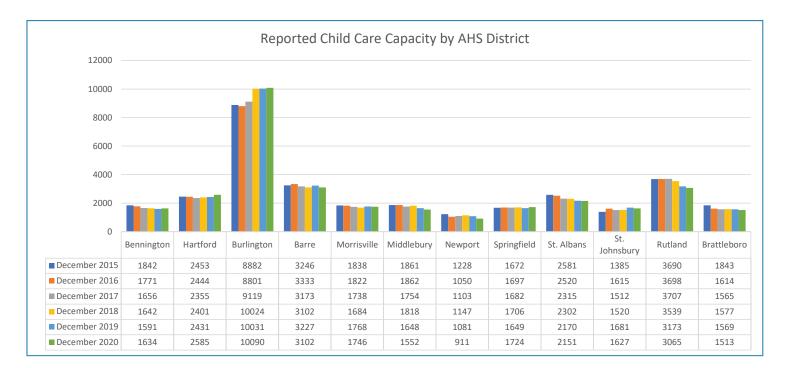
time, from a total of 32,521 spaces in December of 2015 to 31,700 spaces in December of 2020. The decrease in capacity has been concentrated in the infant, toddler, and preschool age spaces, while school age care has increased slightly.



Step Ahead Recognition System (STARS) is Vermont's system for recognizing and improving quality in regulated child care programs. As of September 1, 2019, all child care programs in good regulatory standing are at least one star. This change moved most regulated

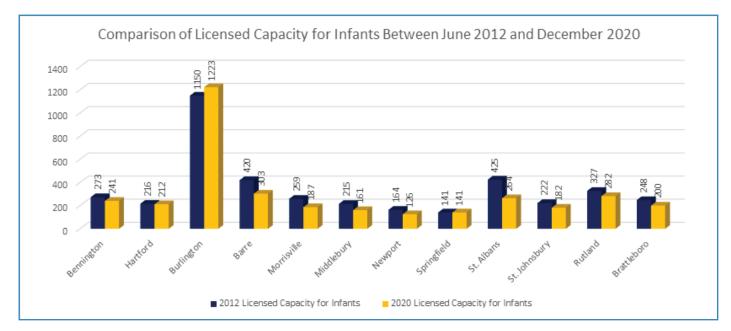
programs into STARS, and that is evidenced in the data on reported capacity. The Child Development Division in this report looks at programs that have achieved 3, 4, or 5 stars as high quality. The reported capacity of this level of quality has increased as more programs move up in quality.

Analysis by AHS district shows that changes in reported capacity over the last six years has not been consistent. The reported capacity has gone up and down in each of the AHS districts across the years. When comparing the reported capacity from 2015 to 2020 most districts have decreased in capacity, while two districts (Hartford and Burlington) have increased in capacity.



# Licensed Capacity

The licensed capacity is a different way to look at capacity. The licensed capacity is the number of children a program is licensed to care for at any moment in time. This is not the number of children the program would like to serve (reported capacity).



The two data points of licensed capacity and reported capacity are not comparable. Reported capacity is often lower than the maximum allowable children at a program (licensed capacity), and the data for licensed capacity is for a longer period of time.

When looking at capacity trends in child care, it is important to consider statewide and regional data. When looking at the data by age group the impact on capacity for categories of children is clear. The overall statewide licensed capacity for all ages has gone down. The capacity for infants and toddlers

Impact of Change by Age Category in Licensed Capacity of Child								
Care Programs between April 2012 and December 2020								
	Change in Licensed Capacity by Age Category				Percentage Change by Age Category			
AHS District	Infant	Toddler	Preschool	School Age	Infant	Toddler	Preschool	School Age
Bennington	-32	-88	-95	-184	-12%	-30%	-12%	-26%
Hartford	-4	-26	64	504	-2%	-11%	8%	61%
Burlington	73	-77	2	641	6%	-6%	0%	15%
Barre	-117	-155	-73	-379	-28%	-34%	-6%	-23%
Morrisville	-72	-35	40	-83	-28%	-13%	5%	-13%
Middlebury	-54	-80	-21	-136	-25%	-34%	-3%	-11%
Newport	-38	-37	-44	-134	-23%	-22%	-7%	-31%
Springfield	0	-31	-4	185	0%	-17%	-1%	26%
St. Albans	-161	-163	-55	-331	-38%	-40%	-6%	-31%
St. Johnsbury	-40	-41	-93	175	-18%	-18%	-13%	38%
Rutland	-45	-146	74	-262	-14%	-36%	7%	-14%
Brattleboro	-48	-32	-77	-163	-19%	-13%	-10%	-26%
Statewide	-538	-911	-282	-167	-13%	-21%	-2%	-1%

has gone down significantly (loss of 13% of spaces for infants, and 21% for toddlers); preschool and school capacity has gone down slightly (2% decrease for preschoolers and 1% for school agers).

Almost every region of the state has lost infant and toddler capacity to some extent (Burlington District experienced a small increase in infant capacity), while the preschool and school age capacity change varies by region. Bennington, Barre, Middlebury, Newport, St. Albans, and Brattleboro lost capacity in all age categories. Hartford gained in preschool and school age capacity. Burlington, Springfield, and St. Johnsbury districts gained

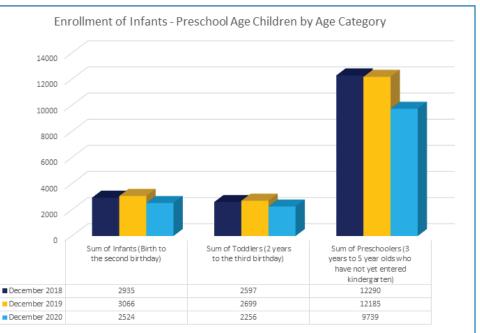
in school age capacity. Morrisville and Rutland districts gained in preschool capacity only.

# **Enrollment Data**

The enrollment of regulated child care programs is collected each year between November and December through the child care immunization survey. This data is self-reported on the number of children enrolled at the time of the survey. All regulated child care and preschool programs that

serve infants, toddlers, or preschool age children on a recurring basis are required to complete this survey. The enrollment of infants through preschool age children increased slightly between 2018 and 2019 and has significantly decreased in 2020. This enrollment decrease may be a result of the COVID-19 pandemic.

Enrollment has decreased in all categories; they decreased the most with preschool age children with



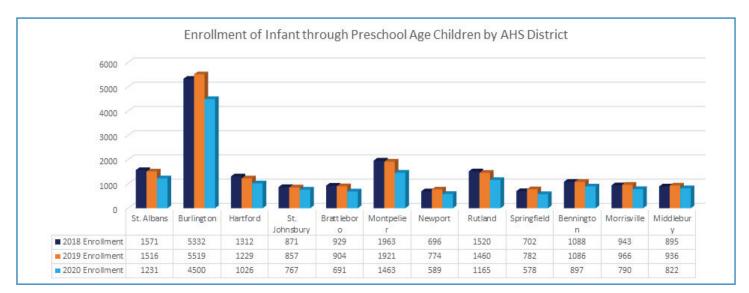
a decrease of 21%. No information is available on why there are differences in the number of children enrolled by age.

Enrollment has decreased by all program types. The enrollment has decreased the most in Center Based Child Care Preschool Programs – Non-Recurring. These are programs that frequently provide drop in care, such as ski resorts serving skier children. The impact of COVID-19 on this industry may be the reason for this decrease. The program type that has had the least impact on enrollment is licensed Family Child Care Homes. There have been more programs of this type open in the past couple of years, which may account for more children enrolled.

Type of Program	2018 Infant- Preschool Enrollment	2019 Infant - Preschool Enrollment	2020 Infant - Preschool Enrollment	Percentage Change in Enrollment from 2018 and 2020	
Center Based Child Care and Preschool Programs (CBCCPP)	14,615	14,938	12,028	-18%	
CBCCPP - Non- Recurring	221	154	144	-35%	
Licensed Family Child Care Homes (FCCH)	244	264	230	-6%	
Registered Family Child Care Homes (FCCH)	2,742	2,594	2,117	-23%	

Enrollment has decreased in all AHS Districts. St. Albans, Hartford, Brattleboro, Montpelier, and Rutland districts' enrollment decreased by more than 20%. The Middlebury district had the least change in enrollment with 8% decrease in enrollment.

Enrollment can be impacted by many factors, and this survey does not ask the reasons for any changes in enrollment. Some factors might include family choice/need, program capacity, COVID-19 response, and more.



# **Closure Data**

Overall, in the past seven years' child care programs have closed and opened on a regular basis, however the rate in which new Registered Family Child Care Home programs open has not kept up with the number that have closed. The rate in which programs have closed was similar from state fiscal year 2013 through state fiscal year 2017. The number closing was less in state fiscal year 2018 and 2019. More programs closed in state fiscal year 2017, however this was only slightly higher than previous years.

Individuals applying to become Registered Family Child Care Home programs has varied each year and in state fiscal year 2017 the number of applications submitted started dropping and has continued to be low. For instance, CDD processed 101 new registered Family Child Care Home applications in state fiscal year 2014 as compared to 28 in state fiscal year 2018 and again in 2019.

Analyzing data by regions in the state is important in determining what areas may be impacted to a greater degree than other areas. The Vermont Agency of Human Services (AHS) has twelve service areas or districts in the state, and the data was analyzed at that district level as well as

Figure 1. Number of Regulated Child Care Programs Who Closed or Opened between June 2012 and December 2020									
Closed	Or Opened betwee Closed Programs			Newly Licensed Programs			Net Gain or Loss of Programs		
	Licensed	Registered	Total	Licensed	Registered	Total	Licensed	Registered	Total
2013	56	143	199	58	99	157	2	-44	-42
2014	56	151	207	59	101	160	3	-50	-47
2015	57	132	189	65	81	146	8	-51	-43
2016	72	131	203	65	78	143	-7	-53	-60
2017	74	165	239	63	41	104	-11	-124	-135
2018	45	109	154	52	28	80	7	-81	-74
2019	33	68	101	41	28	69	8	-40	-32
2020	35	62	97	26	25	51	-9	-37	-46
Total	428	961	1389	429	481	910	1	-480	-479
Since June 2012 Vermont has had 1389 regulated child care programs close, while only 910 programs opened. This represents a net gain of one child care									

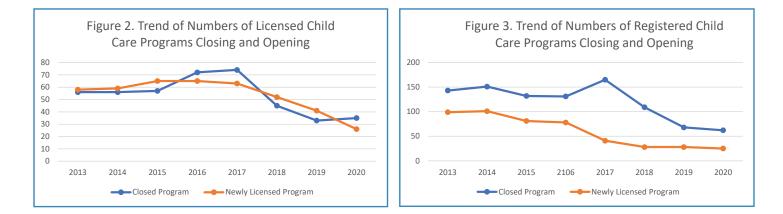
Since June 2012 Vermont has had 1389 regulated child care programs close, while only 910 programs opened. This represents a net gain of one child care center, and a net loss of 480 Registered Family Child Care Home programs. This net loss of Registered Family Child Care Homes has occurred over the last eight years, with the majority between June 2012 and December 2020.

statewide. It is important to note that overall, the number of programs in each district varies and an area that has more programs closing, such as Burlington district, had more programs overall in 2012.

The net gain or loss is important in determining the impact an area has experienced. Areas of the state that have more registered home programs than centers in general were impacted to a greater degree by shifting dynamics of fewer registered home programs. St. Albans district is a good example of this issue. A large portion of the St. Alban's district child care supply is registered homes. Districts that are mostly rural may experience a bigger impact as well, as registered home programs serve smaller towns that do not have the population of families with young children to support a child care center, or areas where zoning or other requirements may restrict child care centers from opening. These families may have no other options in their town if the one child care program in town closes.

In 2020 the Child Development Division asked programs that closed why they had closed. Programs indicated the following reasons for closure for that year:

- 16% low enrollment
- 12% due to COVID-19 challenges
- 10% provider retired
- 9% were changing careers
- 6% provider moved out-of-state
- 5% the school districts decided to close their regulated afterschool program
- 3% needed to meet family needs
- 2% Head Start restructuring
- 1% public school closure
- 34% no reason given (many of these closed prior to COVID response period)



The loss of child care programs in Vermont has been an issue since 2008, especially for Family Child Care Homes. In a rural state, Family Child Care Homes are important to ensure families have choices for child care. In 2020, Vermont child care programs experienced significant challenges due to the COVID-19 pandemic. While the loss to capacity is minimal in the one year, the overall impact is large, and any loss can impact family choices. In addition, some child care programs are currently under enrolled. Based on anecdotes from child care providers, this under enrollment may be due to COVID-19 and is not an indication of the ongoing needs for child care.

