



BASELINE QUESTIONS

for Alliance/
Network
Members

November, 2024

1. **What is your biggest challenge currently as a Director/ Owner?**
2. **What is your program's current monthly revenue?**
(include all revenue streams such as private pay tuition, subsidies, food program, etc)
3. **On average, what is your monthly collection rate: the percent of money you collect monthly vs. the amount of money you are owed monthly? Please include private pay and subsidized tuition.**
For example, if you were owed \$1,000 in the month of July for all children, but you only collected \$850, your collection rate is 85%.
4. **Approximately how many of your private tuition payments from parents are late from each payment cycle?**
5. **Which types of tuition payments do you currently accept?**

<input type="checkbox"/> Cash	<input type="checkbox"/> ACH
<input type="checkbox"/> Check	<input type="checkbox"/> Mobile Payments
<input type="checkbox"/> Credit Card	<input type="checkbox"/> Other (please specify)
<input type="checkbox"/> Debit Card	
6. **How do you currently invoice families?**

<input type="checkbox"/> Quickbooks	<input type="checkbox"/> I do not invoice
<input type="checkbox"/> Procure	<input type="checkbox"/> Other (please specify)
<input type="checkbox"/> Brightwheel	
7. **What is your program's licensed daily capacity?**
8. **What is your staffed capacity today?**
9. **How fully enrolled is your program today? How many vacant slots do you currently have at your program?**
(FCC providers, please answer under "total vacant slots")

<input type="checkbox"/> Infant	<input type="checkbox"/> Preschool
<input type="checkbox"/> Toddler	<input type="checkbox"/> Total Vacant Slots
10. **How do you track enrollment?**
11. **How many families are currently on your waitlist?**
12. **How often are you in contact with families on your waitlist?**



13. On average, how much time do you spend monthly maintaining your program's waitlist (answering inquiries, adding families, contacting families, determining if slots are available, and filling slots as they become available)?
- ☐ 0-2 hours ☐ 7-10 hours
☐ 3-6 hours ☐ More than 10 hours
14. Do you use any online systems, platforms, or apps to communicate with families, or anything else related to running your business? Please list those tools here.
15. Are you fully staffed right now?
- ☐ Yes ☐ No
16. Do you have a waiting list for children due to staffing shortages?
- ☐ Yes ☐ No
17. Do you pay staff for planning time when they are out of the classroom and not responsible for children (even when napping)?
- ☐ Yes ☐ No
18. Do you have/offer paid leave (vacation/sick) time?
- ☐ Yes ☐ No
19. Do you and all of your staff have a retirement savings account?
- ☐ Yes ☐ No ☐ I don't know
20. When did you last give a salary increase to staff?
- ☐ This year ☐ More than two years ago
☐ More than a year ago ☐ I don't know
21. Do you have a salary scale that lists salaries by position, qualification, and years of service?
- ☐ Yes ☐ No
22. Do staff sign in/out using an automated system?
23. What is the lowest hourly wage for teaching staff in your program?
-
24. What is the highest hourly wage for teaching staff in your program?
-
25. Including yourself, how many full-time employees do you have?
26. Do you track your employees' access to health insurance?
- ☐ Yes ☐ No
27. Do you currently offer employees benefits related to health insurance (such as dental insurance, employee assistance program, discounted gym membership, vision insurance, tele-health)?
- ☐ Yes ☐ No
28. Do you use a benefits broker to price benefits for your employees?
- ☐ Yes ☐ No



29. Have employees left your program due to the lack/limit of health insurance and/or health related benefits?
- ☐ Yes ☐ No ☐ Maybe
30. Have job candidates declined your employment offer due to the lack/limit of health insurance and/or health related benefits?
- ☐ Yes ☐ No ☐ Maybe
31. Do you carry necessary business insurance?
32. How do you currently track expenses for your program?
33. What is the approximate total of your monthly expenses? Please include all programmatic expenses such as payroll, food, cleaning supplies, materials, etc.
34. Is your business profitable?
35. How many months of cash on hand does the business have?
36. Do you have a current annual budget for your business?
37. Do you have monthly fiscal reports?
38. Please rate your agreement with the following—I feel like I understand the overall health of my child care business.
39. On average, how much time do you spend monthly on CACFP (tracking meal counts, ensuring family paperwork is up to date, submitting for reimbursement, logging meals, etc)?
- ☐ 0-2 hours ☐ More than 10 hours
☐ 3-6 hours ☐ I don't participate in CACFP
☐ 7-10 hours
40. On average, how much time do you spend monthly on subsidized tuition payment collection?
- ☐ 0-2 hours ☐ More than 10 hours
☐ 3-6 hours ☐ I don't accept subsidized families
☐ 7-10 hours
41. As a Director or Owner, how strong do you feel your support system is? Please think of any organizations or individuals who support you in your current role (licensor, health care consultant, peers, staff, outside relationships, organizations of which you are a member, etc.)
- ☐ I don't have a support system
☐ Sometimes I feel supported in my role, and sometimes I do not.
☐ I feel fully supported, at all times
42. How confident are you, that if your program was to be inspected by the licensing entity today, you would have a successful inspection with no violations?
- ☐ Not confident
☐ Unsure
☐ Very confident



43. Center Programs:

What is the percentage of your time that you spend on administrative tasks vs. supporting your teachers and classrooms?

- | | |
|--|---|
| <input type="checkbox"/> 10% admin, 90% supporting | <input type="checkbox"/> 60% admin, 40% supporting |
| <input type="checkbox"/> 20% admin, 80% supporting | <input type="checkbox"/> 70% admin, 30% supporting |
| <input type="checkbox"/> 30% admin, 70% supporting | <input type="checkbox"/> 80% admin, 20% supporting |
| <input type="checkbox"/> 40% admin, 60% supporting | <input type="checkbox"/> 90% admin, 20% supporting |
| <input type="checkbox"/> 50%/50% | <input type="checkbox"/> 100% of my time is spent on administrative tasks |

43. Family Child Care Programs:

On average, how much time do you spend weekly on administrative tasks outside your program's hours of operation?

- | | |
|------------------------------------|---|
| <input type="checkbox"/> 0-2 hours | <input type="checkbox"/> 7-10 hours |
| <input type="checkbox"/> 3-6 hours | <input type="checkbox"/> More than 10 hours |

44. Contact Information

Name

Title

How long you have been in current role

Company

City/Town

Email Address

Phone Number

45. Program Information

Years in operation

Business legal structure

Current quality rating

Website address

Other social media
