IT’S ABOUT TIME!
Parents Who Work Nonstandard Hours Face Child Care Challenges

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Many companies expect workers — especially workers earning low-income— to be available on demand. That means parents need more than “day” care for their children. Parents need child care that aligns with the realities they face, including child care that is available when they have to work long hours or irregular schedules.

Working families face a huge challenge: finding quality, affordable child care for their children. That struggle is not new, but we’re seeing a societal shift that’s adding to the challenge. Fewer Americans are working standard schedules, the traditional Monday through Friday, 8-hour workday. More people are working nonstandard hours (NSH) —nights, weekends, and irregular hours— and the current child care system fails to accommodate them.¹

Occupations requiring NSH are increasing in today’s economy— the so-called 24/7 economy. Many retailers are open 24 hours a day and 7 days a week. News organizations operate around the clock and technology allows people to work outside of normal office hours. The availability of child care during NSH must be addressed or the economy will feel the effects. If parents cannot find child care during these hours, they may leave or decide not to join the workforce and employers may be left short-staffed. The lack of quality child care during NSH threatens to affect our future workforce.

This paper spotlights the need for child care during NSH. It begins with an overview and definition of NSH child care. We explain the supply and demand problem with NSH child care: There simply isn’t enough of it to meet worker needs. We highlight the populations most affected by the problem and share solutions, including how states can leverage Child Care Resource and Referral (CCR&R) agencies to address this issue. Finally, we outline our policy recommendations to support families in need of NSH child care.
Nonstandard Hours: A Working Definition

Nonstandard hours (NSH) refers to hours worked outside the traditional Monday through Friday workweek, including schedules that vary from week to week. Working parents face limited options for center-based child care open during NSH, and often cobble together multiple child care options, including center-based child care; home-based child care, also known as family child care (FCC); and child care provided by family, friends, and neighbors (FFN). This approach strains both parents and children who lack a consistent caregiver.

In 2014, the federal government reauthorized the Child Care Development Block Grant (CCDBG), the federal program that funds child care subsidies and quality initiatives at the state level. The law highlights the importance of addressing the employment circumstances of families who receive child care assistance. CCDBG stresses that the standards for child care apply, no matter when it occurs. According to the CCDBG Plain Language Summary of Statutory Changes, some key points in the law are related to work schedules and aimed at increasing the quality and continuity of children’s care arrangements include the establishment of family-friendly eligibility policies like:

- Ensuring 12-month eligibility redetermination period for CCDF families, regardless of changes in income or temporary changes in participation in work, training, or education activities.
- Allowing the option to terminate assistance prior to redetermination if a parent loses employment. However, assistance must be continued for at least 3 months to allow for job searching.
- Developing eligibility redetermination procedures that does not require parents to unduly disrupt their employment.
- Providing for a graduated phase-out of assistance for families whose income has increased at the time of redetermination, but remains below the federal threshold.

A Note on Terminology

There is a variety of terms used in literature and the early childhood education field to refer to nonstandard hours schedules. For example, nontraditional hours also refers to hours worked outside the traditional workweek. The terms are used interchangeably. They include irregular schedules, or schedules that change from day to day or week to week. Child care during NSH may be called “weekend child care,” “overnight child care,” “extended hours child care,” “drop-in child care”, or “emergency child care.”

Did you know?

CCR&RS in 28 states reported around 65,000 requests from families in need of NSH child care.

Data from 2017 State Fact Sheets, Child Care Aware® of America
The Supply of NSH Child Care is Inadequate

The National Survey of Early Care and Education interviewed several types of child care providers on a variety of topics, including whether they offered child care outside of standard hours.

Below are some of the findings from the survey related to NSH.

Center-Based Child Care During NSH

Only 8 percent of the center-based providers surveyed reported that they offer child care during NSH. As seen in Figure 1, only 2 percent of center-based providers offered child care during evening hours, 6 percent offered overnight care and 3 percent offered weekend care. Parents looking for center-based child care during NSH find their options are either extremely limited or simply nonexistent.

- For financial reasons, providers want to maximize the number of children in their child care program each day. The best way to accomplish that is for each child to have a set schedule (e.g., Mondays and Wednesdays between 8 a.m. and 4 p.m.). When parent schedules fluctuate, enrollment is inconsistent and so is the provider’s income.

For these reasons and others, many child care centers cannot stay in operation providing care during NSH unless they have financial support outside of parent payments.

Family Child Care During NSH

In addition to center-based providers, The National Survey of Early Care and Education reported three types of FCC providers:

- Listed, paid providers who appear on official state and national records of early childhood education (ECE) services and receive payment for their services. A licensed family child care provider is an example of a listed, paid provider. License-exempt and/or registered providers who accept CCDF subsidies are also considered listed, paid providers.

- Unlisted, paid providers who do not appear on official lists but receive payment for their child care services. An unlicensed family child care provider or nanny are examples of unlisted, paid providers.

- Unlisted, unpaid providers who do not appear on official lists and do not receive payment for their services. A grandmother or neighbor who provides child care free of charge are examples of unlisted, unpaid providers.

The survey found that FCC providers deliver the bulk of NSH child care, but not equally across the three types. While 82 percent of unpaid, unlisted providers offered NSH, only 34 percent of listed, paid providers offered NSH child care. Unpaid providers offer much-needed help to parents who work NSH; however, in most states they are not required to follow the same health and safety standards that licensed providers do. Increasing the supply of licensed family child care providers who offer care during NSH would give parents more choices in their search for high-quality child care.
Family Access to Paths to QUALITY™ Providers in Indiana

Indiana administers a voluntary child care Quality Rating and Improvement System (QRIS), Paths to QUALITY™ to help families identify high-quality programs. Licensed child care centers, licensed family child care homes, and voluntarily certified registered ministries are eligible to participate. Recent reporting from Early Learning Indiana, Indiana’s State CCR&R Network, found that only 22 percent of the licensed child care programs participating in Paths to QUALITY™ offer child care during nonstandard hours. Even more striking is that of those programs participating—86 percent are family child care programs.

Family Child Care Providers are Closing at an Alarming Rate

Unfortunately, burnout is a major consequence for FCC providers who offer NSH care. Parents’ work schedules may create a challenge for the provider in balancing work and family. iv

In many communities, though, simply maintaining the current supply of providers is a challenge. Over the past few years, states have noticed an alarming trend—a significant decline in the number of child care providers, particularly family child care providers. Here are a few examples:

- In Minnesota, the number of family child care providers dropped by 25 percent between 2006 and 2015.v
- Researchers at the Federal Reserve Bank of Minneapolis estimate that in the last five years, total child care capacity—that is, the number of child care slots - for all licensed child care providers in Minnesota and Wisconsin declined by 5 percent. vi
- Between 2014 and 2017, the number of FCC slots in California declined by 9 percent. vii
- CCAoA’s recent Mapping the Gap™ project in the state of Arizona found an overall decline in child care providers who accept Child Care and Development Fund (CCDF) vouchers (one type of federal child care subsidy).

Given these trends, more research is needed to understand the reasons why the loss of child care providers is occurring. With a greater understanding of this trend, states and communities can tailor policy changes and investments in the early childhood education workforce to ensure all families have access to quality, affordable NSH child care.

The Need for NSH Child Care Is High

Just how many children need this kind of child care? Data from the 2014 Survey of Income and Program Participation reveals that 43 percent of all children under 18 in the United States have at least one parent who works NSH.viii This translates into roughly 31 million children who may need child care during NSH.

Profile of Nonstandard Hours Workers

- 60 percent earn less than median wage
- More likely to be people of color
- Have lower levels of education
- More likely to work between 3 p.m. and 7 p.m.
- Receive no employment benefits or paid time off
- Are given little notice of work hours on a daily or weekly basis

(Enchautegui, 2013; Presser, 2005)
Currently, there are no estimates on the number of children under age six with a parent who works NSH. One study of young workers with NSH schedules reported that 34 percent had a child under the age of six in the household.\(^x\) More research is needed on the need for NSH child care in this age group.

**Who Needs NSH Child Care?**

Workers requiring NSH schedules may be in retail, janitorial, health and food service sectors where compensation is/wages are low. An Urban Institute paper highlighting NSH workers found that 40 percent earn less than 75 percent of all workers in the United States; they also are less likely to receive benefits or paid time off compared to people who work standard schedules.

The lack of NSH child care affects certain populations more than others. Below, we highlight three populations (not mutually exclusive) that are most impacted.

**Workers Earning Low Incomes.** Families with low incomes are disproportionately affected by NSH schedules. While 20 percent of Americans work NSH, almost 30 percent of families who earn low incomes do. Researchers have studied the demographic makeup of those working low-wage jobs and have identified several factors that can complicate parents’ efforts to find child care during NSH.

- **Poverty.** Researchers estimate that a full-time worker must earn around $12 an hour in order to keep a family of four out of poverty. Approximately one-third of all workers who earn less than that are parents. Parents earning low wages could not afford the high cost of licensed child care in their communities, even if there were more options for NSH child care.

- **Lack of paid leave.** Just over 80 percent of workers earning low wages do not have access to paid sick leave, making it difficult for parents to take time off if someone in the family becomes ill or child care arrangements fall apart.\(^xii\)

- **Irregular work schedules.** Research shows that those who earn the least are more likely to work irregular schedules that often change with little advance notice.\(^xiii\) For instance, in a sample of early-career workers ages 26 to 32, 69 percent of mothers and 79 percent of fathers reported weekly fluctuations in their work schedule—the days or hours worked—over the past month.\(^xiv\)

**Spotlight: Restaurant Industry and the NSH Workforce**

The restaurant industry has grown every year for the past eight years and is the fifth largest employer in the United States (Bureau of Labor Statistics NAICS 722). Nationally, there are nearly 3.5 million parents working in this industry, with over a million of these workers being single mothers. Parents who are tipped workers (waiters/waitresses) can earn a base salary as low as $2.13 per hour. Many opt to work nights, when diners tend to spend more and tips are higher. Unfortunately, few licensed providers offer evening or overnight child care, leading many tipped workers to rely on informal or unlicensed child care. A report by the National Women’s Law Center and Restaurant Opportunities Centers United found that nearly half of mothers working in the restaurant industry were reprimanded at work due to difficulties arranging child care.
Spotlight: NSH Schedules Negatively Impact Family Life

NSH schedules often create “unsociable time,” or time that the parent is working when the children are home; this means less time spent with the family. Decreased family time is linked to poorer outcomes. For example, teens who have fewer than three family dinners per week are almost 4 times more likely to have used tobacco, twice as likely to have used alcohol, and 2.5 times more likely to have used marijuana.xv

Several studies link poor developmental outcomes for children with parents who work NSH. A 2015 study revealed that children who were cared for in NSH child care showed a decrease in behavioral and emotional well-being. Children under 5 are less likely to receive frequent cognitive stimulations at home than their peers. Children between the ages of 6 and 11 showed poorer behavioral-emotional competency, were less engaged in school, experienced poorer health conditions, and were more likely to receive special education services compared to children of mothers who work standard hours.

Other studies showed similar negative correlations between mothers who work NSH schedules and later developmental outcomes for their children. Using data from the National Institute of Child Health and Human Development, researchers examined children's cognitive outcomes in relationship to a mother’s NSH work schedule. The data determined there were negative effects on the child's cognitive development during the first 3 years of life due to the mother's NSH work schedule. The cognitive effect is worse if the mother starts working a NSH schedule during the first year of the infant's life.xvii

Another study found that one in two children from low-income, single parent Hispanic families has a parent with short advance notice of their work hours.xviii (See Figure 2). If parents do not know their schedule in advance, or if it changes on a weekly basis, they can have an especially difficult time arranging child care.

Figure 2. Percentage of Children in a Low-Income, Single-Parent Household whose Parent has Little Advance Notice of their Work Hours by Race/Ethnicity

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Percentage</th>
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<tr>
<td>White</td>
<td>36%</td>
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<tr>
<td>Black</td>
<td>34%</td>
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*Crosby and Mendez, 2017*
Single Parents. Single-parent households face more challenges when seeking child care during NSH. While nearly 5 percent of married-couple families live in poverty, 26 percent of families headed by a single parent do. The U.S. Census Bureau 2014 Survey of Income and Program Participation (SIPP) estimates that there are 6.7 million children who live with an employed single parent who works NSH (5.5 million living with single mothers and 1.2 million living with single fathers). In dual-parent households, parents may coordinate their schedules to allow for one parent to be home with the child; however, in single-parent households, finding child care during an NSH work schedule is even more challenging. In addition, single-parent households, on average, have lower incomes than two-parent households.

Minority Families. Overall, minorities are overrepresented in the population of American workers who are employed during NSH. African-American parents are more likely than their white and Asian peers to work NSH. For instance, at age 29, African-American mothers are 60 percent more likely to work outside of daytime hours than white or Asian mothers. More than 75 percent of Hispanic children with a working parent(s) have at least one parent who works during NSH.

Student Parents. Approximately 25 percent of post-secondary students are also parents. And one in four of these parents lives below the federal poverty line. As they struggle to balance work, school and family in the pursuit of a degree and higher income in the future, they face extremely limited child care options. On average, child care centers on university campuses have wait lists that are nearly double their total capacity. Often the only jobs that these student-parents can find have NSH hours. The Child Care Access Means Parents in School (CCAMPIS) program was created to provide funding that subsidizes child care for low-income, student-parents. While this program has demonstrated success at student retention, funding was cut by $10 million from 2004 to 2014. This has resulted in decreased availability and a shortfall of over 1 million child care slots on college campuses.
Concerns with Current Supply of NSH Child Care

Quality, affordable child care is linked to many benefits, including a stronger economy, support for parents and developmental advantages for children. Unfortunately, the inadequate supply of NSH child care is problematic and raises concerns about access to safe, affordable, quality child care for many families in our country.

It Can Be Unaffordable

Families who work NSH struggle with not only the uncertain quality of available child care, but also with the cost of child care. Child care is already unaffordable. In many states, the average annual cost of licensed child care for one child is as much as a year’s tuition and fees at a four-year public college. According to the Department of Health and Human Services (HHS), the cost of unlisted child care is similar to, and sometimes higher than, the cost of listed child care. However, the lack of regulated child care available during NSH leaves many parents with no choice but to leave their children in unlicensed child care – despite the sometimes higher cost of unlisted child care.

An increasing number of child care providers are extending their hours and creating flexible options for parents. Federal and state-based child care subsidies are based on a child’s daily attendance; consequently providers who offering flexible scheduling can lose revenue when children do not attend the program regularly. Parents earning low incomes face a similar dilemma: to be eligible for a subsidy, they may be required to place their child in child care for a minimum and consistent number of hours per week. Because parents who work irregular schedules may be unable to do that, they may not even apply for a child care subsidy.

It is Often Unregulated

States have varying standards specific to the delivery of quality child care services outside of standard hours. Yet, quality child care for children during the very early years is critical to all aspects of a child’s development. Child care during NSH is extremely limited, and oftentimes it is not a matter of parents being unable to afford licensed child care; rather, no licensed child care exists during NSH. If they opt for unlicensed care, parents cannot be sure the care their child is receiving meets the bare minimum safety requirements, let alone other rigorous markers of quality.
Solutions to Overcome Challenges of Nonstandard Hours Child Care

While the challenges to NSH child care are large, states and communities have designed solutions to overcome these difficulties. These steps translate into big gains for children. Employers are encouraged to give workers advance notice of schedule changes, allow employees to give input on their schedules and provide additional compensation when schedules are unpredictable.

Encourage Secure and Predictable Scheduling

Several states and communities have passed laws to promote predictable schedules for employees.

Spotlight: Policy Changes to Mandate “Secure Scheduling” for Employees

Many NSH workers receive little notice of their upcoming shifts, making it very difficult to find child care, particularly during nights and weekends. However, Oregon and several large cities have implemented policy changes that are helping families with irregular work schedules.

Oregon. This 2017 law states when hiring, employers must give employees:
- An estimate of work schedule and median number of hours to be worked in a month,
- Seven days’ notice of their work schedule,
- Some input into their schedule, and
- Compensation for schedule changes.

Seattle, Washington. In 2016, the city of Seattle passed laws regulating scheduling practices for large retailers and both quick-serve food establishments and full-service restaurants with 500 or more workers. Employers are now required to:
- Give good-faith estimates of hours an employee can expect to work upon hiring,
- Post work schedules two weeks in advance,
- Provide at least 10 hours of rest between opening and closing shifts,
- Give available hours to existing part-time employees before hiring new workers, and
- Pay additional “predictability pay” when changes are made to the posted schedule.

New York City, New York. New York City’s Fair Work Week law requires employers to provide employees their work schedules at least 14 days in advance. If changes are made to those schedules inside of that two-week window, employers will pay employees between $10 and $75 per change.

Philadelphia, Pennsylvania. In December 2018, the Philadelphia City Council passed the “Fair Workweek” bill, designed to give the city’s 130,000 service industry workers regular and consistent hours. Beginning January 2020, employers will be required to:
- Set schedules at least two weeks in advance,
- Offer hours to existing employees rather than hiring new employees at lower rates,
- Pay employees when shifts are canceled, and
- Guarantee employees at least 11 hours of rest between shifts.
Employers may be reluctant to change their scheduling processes for fear of losing profits. However, research suggests that this may not be the case. An experiment in Gap stores in Chicago and San Francisco showed that when workers had predictable schedules, Gap's financial performance improved. And when compared to similar stores in the area, predictable scheduling increased median sales by 7 percent and labor productivity by 5 percent. This experiment highlights the fact that increased schedule stability is beneficial for parents who need child care and can have positive effects on retail sales and worker productivity.

**Coordinate Programs**

Parents who work NSH often must patch together multiple child care situations and transport their child to and from various child care settings. Community Connections Program, run by the Illinois Action for Children, a CCR&R in the Chicago-area, had a program that combined subsidized FCC with center-based public preschool. On Fridays, teachers from the preschools visited the FCC providers to support them and to create a connection between the programs. The FCC providers also received funds during the time the children were in the preschool programs.

Coordinating these programs showed positive outcomes for children. According to the report, Additional Evidence to Help Inform Illinois's Child Care System, children had higher math and reading scores when they attended a combination of center-based child care and FCC compared to just FCC. Programs modeled after this one could help to alleviate problems with finding child care that meets parent needs.

**Engage Businesses**

Some businesses fill the supply gap for NSH child care as a way of meeting the needs of employees with young children by making high quality child care available at the workplace. Toyota partners with Bright Horizons to provide on-site child care at manufacturing facilities in the Midwest and some locations around the world.

The benefits of providing child care at the workplace are, in fact, not a new revelation for Toyota whose Kentucky Child Development Center opened in 1993 and remains open today. For the past 25 years, employees benefit from access to high-quality child care 24-hours a day to accommodate multiple work shifts and unpredictable overtime schedules.

Toyota's child care programs may even be more innovative than practical. Since the early 90s, they have recognized that employees who work overnight shifts also need to sleep during the day. For this reason, they developed what is sometimes called “night care.” While parents are working their overnight shifts, children are also awake and engaged in the same types of activities children would experience if attending during the day. This approach is designed to help parents and children maintain similar daytime and nighttime routines, matching sleeping time and awake time as much as possible. Toyota's Kentucky Child Care Development Center Director Angie Looney, an employee of the center for more than 20 years, says the longevity of the night care approach is an indicator of the popularity and success of the program.

The Minneapolis Air Route Traffic Control Center is another example of a business partnership. The center partnered with Small World Day Care Learning Center to offer child care in a facility adjacent to the air traffic control center. The learning center is open seven days a week from 5:30 a.m. to 11:30 p.m. and serves children ages 6 weeks to 5 years. The extended hours makes it possible for parents working early morning or night shifts to find child care.

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**Spotlight: Business-Community Partnership to Support Child Care Access for Employees**

Employees of Casella Waste Management, located in Rutland County, VT, were struggling to find quality child care during their work hours. Data from a report by Let's Grow Kids: Stalled at the Start, validated these struggles. Most of the child care programs in Rutland County open at 7 a.m. and close at 6 p.m. Casella realized they couldn't afford to have employees missing work because the child care options were not open when employees were working. Casella, in partnership with the early childhood community, is piloting a child care scholarship program and the surrounding community is receiving funding to increase the amount of quality child care. For more information on these initiatives, see their spotlight in CCAoA's 2018 report, The U.S. and the High Cost of Child Care.
Support Military Families

National Guard members and reservists train on weekends, when child care may not be available in their communities. Because the guard responds to disasters and emergencies, which strike without warning, members/reservists need a safe place to leave their children when they’re called to duty.

Guard and Reserve families live across the United States, and they generally do not live on military installations. Many families have irregular schedules: They may work early mornings, late evenings or overnight, and they need to attend weekend drills and annual trainings. Access to quality child care during hours outside of regular child care hours is both necessary and challenging.

The Air Force Home Community Care Program (AF HCC), administered by CCAoA, provides child care for U.S. Air Force Guard and Reserve families during drill weekends. Care is provided in quality family child care homes throughout the United States to assist Air Force families in meeting their child care needs beyond their normal work schedule. CCAoA implements additional recruitment and screening procedures due to the unique requirements of this program. Eligible child care providers must have liability insurance, a state license or registration, current infant/child CPR and First Aid certifications, a high school diploma, favorable federal background checks and child abuse and neglect checks, and an annual child care licensing inspection free of disqualifying incidents. Based on current screening procedures, guidelines, and recruitment requests, it takes an average of 33 days to recruit an AF HCC provider. There are currently 186 approved HCC providers and we are recruiting in 102 locations.

Since 2014, Little Heroes Drill Weekend Child Care, housed at Tender Loving Kare Child Care and Learning Center in Newark, Delaware, provides community-based child care at a reduced cost to military families in the state. A public-private partnership committee oversees the project. The Delaware Department of Education provides public funding (DE legislative statute, HB 225). The United Way is the designated fiscal agent and receives private donations to support the program. It is projected the Little Heroes Drill Weekend Child Care Project will expand to Kent County in 2019.

Another program, Tiny Boots Child Care Program, reflects a partnership between the YWCA and the Illinois Department of Veterans Affairs (IDVA) to support Illinois veterans in need of child care during scheduled medical or counseling appointments and job interviews. Launched in 2017, the program is free for veterans and receives funding through a grant from the IDVA Vet Cash Grant Program, which receives money from the proceeds of the Illinois Lottery. This program is a triple win; it helps veterans find quality affordable child care, helps child care providers fill empty slots and supports the work of the YWCA Metropolitan Chicago. Currently there are 77 providers approved to provide child care and the program has covered 87 appointment dates for veterans.

Improve Data Collection

Many state agencies attempt to collect data on NSH child care; however, they are unlikely to have complete information on unregulated or unlisted FCC programs. The research suggests that unregulated care comprises the majority of child care during NSH, so it is difficult to determine the true need for NSH child care. States and localities need more accurate data on the number of unlisted FCC providers who offer child care and how many families seek out this child care, especially through informal processes.

During the summer of 2012, Illinois Action for Children conducted phone interviews with 50 Chicago mothers who worked NSH schedules. All of the mothers had children under the age of six and most were the sole adult in the household. The study found that even mothers who expressed satisfaction with their child care arrangement encountered difficulties. Many used FFN care. As a result of this study, the agency recommitted itself to training and mentoring, with the hope of supporting many of the providers who care for children during NSH. This study demonstrated the importance of both gathering accurate data and using data to solve problems.

Increase Quality

Michigan’s state government and partners created a pilot program to increase the quality of subsidized, unlicensed child care programs. Programs like this one have the potential to improve child care during NSH, especially given that many of the providers in the pilot offered child care during NSH. There were nine cohorts made up of 20 providers. Eligible providers were unlicensed and had to meet other qualifications, such as having completed the state’s Child Development and Care child care subsidy eligibility determination process. Consultants met with each recruited provider to determine their needs and to help identify training topics.

Providers took 10 hours of approved training, were able to move from a Level 1 to a Level 2 on the Quality and Development Continuum and became eligible to receive tiered reimbursement from the state’s Child Development and Care Program. While the pilot did not push providers towards licensure, that was one of the outcomes. So far, 20 child care providers across the state sought licensure.
Map the Supply Gap

The demand for child care during NSH can be especially great in areas with high concentrations of workers in particular industries. For example, a given community might have a large military installation or a casino, both of which may be open 24 hours a day and require staff to work during all hours of the day.

Mapping the supply of child care for NSH can be a good starting point for conversations about the need for care and possible solutions.

In our recent Mapping the Gap™ efforts with the Massachusetts Child Care Resource and Referral Network, we focused on NSH — specifically, the current supply of child care providers around the sites of two proposed casinos and one existing casino.

Casinos tend to operate 24 hours a day, so the likelihood that employees will need child care during NSH is high. Around one of the proposed casino sites, child care providers who operate on weekends had capacity for just 54 children, while those who were open after 8:00 p.m. had a combined capacity of 64 children. Yet the proposed casino plans to hire 3,000 employees. The current child care providers in this community could not accommodate even a fraction of the casino workers who likely would require child care during NSH.
Capitalize on the Nationwide System of Child Care Resource and Referral Agencies (CCR&Rs)

CCR&Rs are in a unique position to advance policies and practices to increase families’ access to high-quality child care during nonstandard and/or irregular work hours. Located in 47 states with touch points at the local, state and national levels, CCR&Rs are a vital resource for families, child care professionals, businesses and community stakeholders. They help families find child care that meets their needs; work with child care providers to build the supply and increase the quality of available child care; and lead initiatives to inform, engage, and support businesses and community stakeholders regarding the importance of accessible, quality child care in their communities. Unlike other state and local service providers, the extensive CCR&R system offers policymakers and administrators a national network of state and local CCR&Rs strengthened by the support of its national organization, (CCAoA). As a whole, the CCR&R infrastructure offers nearly every state in the country the necessary data, experience, and services to improve access to quality, affordable child care for all families.
To fully leverage the CCR&R infrastructure, CCAoA recommends:

Funding CCR&Rs for data collection activities. CCR&Rs are the primary source of data about child care supply, demand, cost and quality. They are at the forefront of data visualization projects, like Mapping the Gap™, that increase states’ ability to understand and address child care needs within their communities. They must receive adequate funding to continue current data collection, analysis and reporting efforts as well as to expand their capacity to conduct child care needs assessment studies.

Including CCR&Rs in state and federal policy development and planning. CCR&Rs offer a unique vantage point on all aspects of child care supply and demand because of their extensive data collection and their daily interactions with parents, child care providers, employers and community stakeholders. Currently, 91 percent of CCR&Rs are involved in local partnerships to identify and address gaps in child care systems and services. Ensuring CCR&Rs are engaged in state and federal level policy making and planning will position policy makers and government administrators to better understand the potential impact of policy decisions on local communities and avoid unintended consequences.

Using CCR&Rs as a catalyst and facilitator of new public/private partnerships. Three out of every four CCR&Rs engage in outreach efforts with employers and six out of ten are active participants in child care economic impact studies. CCR&Rs are uniquely positioned to support businesses and government by identifying areas of mutual interest and opportunities for blending and braiding of resources.

Funding CCR&Rs to do real-time child care referrals by phone and in person. The advancement of technology has made accessing information online simpler and faster in many ways, however, online search tools fall short when families have irregular work schedules because they often lack search options for emergency child care or details about providers who offer flexible schedules. When families are in crisis, CCR&Rs are there to help. In fact, a recent survey of local CCR&Rs found that 34 percent of CCR&Rs offer referrals and vacancy checks for families who need child care during emergency closures, including but not limited to during disasters.

Using CCR&Rs to increase awareness of child care regulations associated with overnight child care. Regulations on the provision of overnight child care and safe sleeping arrangements vary from state to state. CCR&Rs can help ensure families know what to look for to ensure they are placing their child in regulated and safe care.

Leveraging CCR&Rs to improve the quality of child care offered during NSH. Data suggests licensed child care is limited during NSH, and quality care, including programs participating in voluntary QRIS’s, is even more limited. Some states currently use CCR&Rs to recruit and enroll programs in their state’s QRIS, while 72 percent offer coaching or mentoring the help programs improve and increase their quality rating. Targeted initiatives that leverage CCR&Rs can ensure families who work NSH have access to comparable quality as families who work traditional workweeks.

Partnering with CCR&Rs to address the needs of the child care workforce. Nearly nine out of 10 CCR&Rs deliver technical assistance to child care programs. This reach to the child care workforce is unlike that of any other nationwide system. CCR&Rs are poised to expand access to professional development opportunities, scholarships and grants to cover continuing education. They can identify the most innovative and effective models to reduce the high cost burden to providers. Further, CCR&Rs can offer shared service infrastructure and services, child care business forums and awards or grants for industry innovation.

Partnering with CCR&Rs to deliver targeted support to both FFN caregivers and licensed FCC programs. CCR&Rs throughout the nation already deliver basic health and safety training to help child care programs meet state regulations; however, CCR&Rs can do more. CCR&Rs are able to help FCC programs establish operating schedules that align with the needs of families in their communities. They also can help new FCC businesses understand their costs and set rates that will allow them to establish a sustainable business model. States who invest in CCR&Rs may be more likely to see FCC programs stay in business, allowing families to remain productive members of the workforce.
Policy Recommendations

Policy change is necessary in order to address gaps in NSH child care. Since children from families with low income are disproportionately affected, and decades of research has shown the benefits of high-quality care for children from these same families, it stands to reason that the benefits from high-quality child care during NSH would have a large return on investment. Congress has started to take notice of NSH child care, first with the reauthorization of CCDBG in 2014 that specifically mentioned building increased capacity for NSH child care. In the FY 2018 appropriations bill that funds CCDBG, Congress justified the more than $2.3 billion increase, saying, “...the Department should work with States to ensure they are meeting the needs of families with non-traditional work hours.” There are two bills that directly ask for grants for NSH and unconventional child care hours: The Children First Act of 2017 and The Child Care for Working Families Act of 2017. These bills require Congressional support. Educating state and federal legislators on NSH child care is an important first step.

In order to increase the availability of and access to safe, quality NSH care, CCAoA recommends the following:

Federal Policy

Incentivize NSH child care. Because of the overall high demand for child care, child care providers often lack an incentive to spend the resources to adapt to an NSH schedule because they can fill their slots regardless. Offering subsidy bonuses for NSH child care, as the Child Care for Working Families Act of 2017 does, incentivizes providers to meet NSH child care needs, and grow the supply of NSH child care.

Provide technical support for NSH child care providers, in addition to funding, The Children First Act of 2017 requests not just funding for NSH child care, but specifically sets aside funds for technical assistance and other vital supports for NSH child care providers as well. This assistance is helpful not only in operating an NSH child care business, but in helping providers meet important health, safety and licensing standards as well.

Make federal safety and quality standards for NSH child care more adaptable, as an alternative to deregulation. Standards are important for improving the overall supply of high-quality child care; however, standards that are too rigid may lead nonstandard forms of child care, such as NSH child care, to go underground and be unregulated. Instead of lowering the standards for nonstandard settings, it is preferable to make existing standards adaptable to the unique settings of NSH child care.

Require more from states on NSH child care. While CCDBG requires each state to explain its plan to address NSH child care, it remains vague as to what plans need to look like. Require states to do more to improve NSH child care in order to receive federal funding.

State & Local Policy

Connect parent needs and provider capacity. Child care businesses need to know that there is a market for NSH child care before changing their practices. Knowing what the demand is within an area is crucial to determining the needed child care supply. Supporting parents who need NSH child is a vital first step in adjusting the market for NSH child care.

Incorporate NSH child care into a tiered reimbursement system. The market will not shift in favor of NSH child care unless providers see an incentive to adapt. The demand for child care is currently so high that most providers do not need to adapt to a NSH schedule (and in some cases, providers do not even need to accept subsidies at all). Increasing reimbursement rates may incentivize providers to accept child care subsidies, and offering a tiered reimbursement system where NSH child care providers receive a higher reimbursement may be an even greater incentive for providers to expand their hours.
Invest in CCR&Rs. All CCR&Rs receive a portion of their funding from CCDBG. However, many lack sufficient public funding to address all of the communities where there is a need for subsidies. CCR&Rs are uniquely positioned to collect and disburse vital information on NSH child care, offer technical assistance and support to child care providers, and connect parents with child care providers in the area. Understanding the market for NSH child care requires a coordinative body, which, in many ways CCR&Rs already are.

Encourage businesses to support parents who need NSH child care. The unusual work hours required by a variety of businesses necessitates NSH child care. These businesses will benefit from an improved NSH child care system. Given that, we should expect more from them to make NSH child care available for their employees. That might mean requiring businesses to be more transparent with their schedules, encouraging businesses to provide a list of NSH child care providers in the area, or any number of other things. Developing a partnership between these businesses and NSH child care providers could help in coordinating the demand and supply of NSH child care. This might begin with something as simple as a forum.

Conclusion

Workers with NSH schedules keep our businesses running. They provide the services that fuel our 24/7 economy. They keep us safe and care for us overnight, on the weekends, and when disaster strikes. Some are student-parents and many are just trying to pay the bills to care for their family and maintain their household. Although we advocate for all families to have access to quality, affordable child care, we know that this is an especially tall order for families working a NSH schedule. Regulated child care during NSH and irregular schedules is nearly nonexistent and, when it is available, can be less affordable than child care during the standard schedule. NSH families frequently must cobble together patchwork child care coverage, relying on a network of child care providers, friends and family to “make it work.” Likewise, child care providers who offer child care during NSH may face burnout, a lack of regulatory guidance, and higher facility insurance and maintenance costs, all of which make it difficult to provide ongoing NSH services.

Innovative solutions to this problem are occurring throughout the country, some of which were highlighted in this report. CCR&Rs at the state and local levels can be an integral and knowledgeable key stakeholder to data collection and interpretation, building the supply of quality child care and retaining qualified child care providers. CCR&Rs often engage area business leaders to share information and better understand current and upcoming staffing needs for the community—CCR&Rs truly understand the pulse of their communities. All families, particularly families working NSH schedules, need to know that their children are safe and engaged in quality, learning activities. We urge policymakers and business leaders to engage experts at CCR&Rs, and to consider the needs of NSH families when implementing policies and regulations that have a tremendous impact on our nation’s families.

Glossary

Child Care Center: An early care and education facility that is licensed or license-exempt by the state and operates under a proprietary or not-for-profit status, independently, as part of a large chain of facilities, or a faith-based organization.

Child Care Resource & Referral (CCR&R): An organization that delivers services to families, child care providers, employers, and community stakeholders based on the unique needs of its community. CCR&Rs help families find child care, build the supply and quality of care, and facilitate planning and policy-making in the public and private sectors.

Family Child Care (FCC) Homes: Child care offered in a caregiver’s own home and, depending on the state’s licensing regulations, may be licensed or exempt from licensing. FCC providers may be: listed, paid provider (e.g. a licensed family child care provider); unlisted, paid provider (e.g. an unlicensed family child care provider, a nanny); or unlisted, unpaid provider (e.g. a grandmother or neighbor who provides child care free of charge, also sometimes referred to as Family, Friend and Neighbor Child Care or FFN).

Licensed Child Care: Family child care homes and child care centers that are legally required to comply with state standards and to be inspected. Legislation by individual states defines which programs are required to be licensed.

License-exempt Child Care: Child care that can operate legally without a license. License-exempt child care programs are not required to comply with all state standards, and they have few or no inspections. Legislation by individual states defines which programs are exempt from licensure. Examples of providers that some states choose to exempt from licensure include providers caring
only for their relatives; family child care providers caring for fewer children than the number required for state licensing; centers operated by religious or faith-based organizations, state agencies, local governments, or military facilities; programs that operate less than four hours a day; and nannies that care for children in the children’s own home.

**Nonstandard hours (NSH) schedule:** A work schedule outside the “traditional” Monday through Friday eight-hour workday, including schedules that are irregular, or have limited stability. May also be referred to as “nontraditional hours schedule.” May include weekend child care, overnight child care, extended hours child care, and drop-in or emergency child care.

**Quality Rating and Improvement System (QRIS):** A system some states have in place to set and assess program quality standards. For example, one of the QRISs we highlighted was Kentucky’s voluntary QRIS, STARS for KIDS NOW.

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## References


