

**BC Child Care Advocacy Forum
Child Care Services Survey
Fall, 2002**

1. What **kind of child care program(s)** do you offer? (Check all that apply)
 - (a) LNR Family Child Care _____ (b) School-aged Care (6-12) _____
 - (c) Licensed Family Child Care _____ (d) Kindercare _____
 - (e) Pre-School _____ (f) Lic Child Minding _____
 - Group Child Care – (g) For infants _____ (j) Young Parent Program _____
 - (h) For toddlers _____ (k) Other _____
 - (i) For 30mo – 6 yrs. _____

2. This fall, have you experienced any of the **following changes** in your enrollment patterns?
 - (l) Our **enrollment** has: Increased _____ Decreased _____ Stayed the same _____
 - (m) Our **wait list** has: Increased _____ Decreased _____ Stayed the same _____
 - (n) The **percentage of subsidized families** in our program has:
Increased _____ Decreased _____ Stayed the same _____

3. What are the **main reasons** for changes you are experiencing? (Check all that apply)
 - (o) Changes to the **subsidy** program _____
Parents aren't eligible _____ Parents are receiving less _____
 - (p) Reduced **grant** for school-aged care _____
 - (q) Reduced **employment levels** in your community _____
 - (r) **Changes in the policies** of the school district _____
or other public bodies (eg. college, hospital, etc.) _____
If so – please explain

 - (s) **Other** – Please explain

4. Have you made any changes in your program in response to funding changes?
(Include changes already made and those you are planning to make soon)
 - (t) **Fees:** Increased _____ Decreased _____ Stayed the same _____
 - (u) **Hours of service:** Increased _____ Decreased _____ Stayed the same _____
 - (v) **Number of Spaces** Increased _____ Decreased _____ Stayed the same _____

(w) **Staffing Levels:** Increased_____ Decreased_____ Stayed the same _____

(x) **Staff wages, working conditions and/or benefits:**
Improved_____ Reduced_____ Stayed the same _____

(y) **Change in license or type of program:** (ex. from pre-school to part time group care)
From _____ to _____

(z) **Other** – Please explain

5. Have you experienced a **change in your management/administrative structure?**
(eg. a merger or amalgamation, loss of administration time, etc.) If so - please explain.

6. Are there **positive developments** in your program or community that are making things better for children and families? If so - please explain.

7. In which **region** is your child care program(s) located?

Northern_____ Interior_____ Vancouver Island_____
Vancouver Coastal_____ Fraser_____

8. At this point – which statement best reflects **how you feel about the future viability** of your child care service. Feel free to add a brief comment explaining your answer.

_____ Great

_____ About the same as always

_____ I'm concerned, but think we will be able to work it out

_____ I think it's likely that our service could close in the near future

_____ Other - Please explain

Please feel free to add other comments.

Return this completed form by **Monday, November 4, 2002** by:

FAX: 604-709-5662

Mail: Child Care Advocacy Forum, c/o #300 – 210 W. Broadway, Van. BC V5Y 3W2

THANKS FOR YOUR HELP

(CCAF- CCServices Survey, Sept 2002)