

**QUESTIONS & ANSWERS  
TO INFORM FUNDING RECOMMENDATIONS**

June 2024

*The following is a list of questions posed by the ACCEE Fund contractor to a number of individuals, including multiple IT members and sector experts. Any answers obtained are also included. This document should hopefully assist the IT with its budget development and also expose areas where more information/data would be helpful for future funding decisions.*

**BASIC FACTS RE: PROVIDERS**

<b>QUESTION</b>	<b>ANSWER</b>
How many licensed centers are in Anchorage?	93 (Dawn Skeete)
How many licensed in-home providers are in Anchorage?	94 (Dawn Skeete)
How many unlicensed providers are in Anchorage?	Unknown
How many individual caregivers are working in Anchorage? How many work for licensed versus unlicensed employers? How many of these providers are parents to young children?	Unknown
How many providers in Anchorage are unlicensed specifically because they are exempt from licensing requirements? (i.e. school-aged programs or other exempt categories).	Unknown, except that school-age providers are expected to be around 250 in number (Mel Hooper)

**WAGES AND BENEFITS FOR PROVIDERS**

<b>QUESTION</b>	<b>ANSWER</b>
What is the median entry level wage for a caregiver? How does pay rise over time and in different settings?	\$16.75/hour for center; \$15/hour for in-home (thread). thread also has data broken down by: program type, role/title, ethnicity,

	education, region. Do not have data on pay based on length of time in the sector. Data comes from SEED, which is voluntary and only reflects about 25% of workforce.
How many providers currently get benefits at their place of work? What types of benefits? (sick days, PTO, paid holidays, retirement, etc.)	-Of the 868 MOA ROOTS applicants, 95 (10.9%) have no benefits (thread). The rest report varying benefits. About half (441, or 50.8%) have health benefits of some sort (health/dental/vision, or some combination). 240 (27.6%) have health/dental/vision PLUS other benefits, such as paid leave, discounted child care, retirement, or disability insurance. -Branwen Collier says only 10 of her 86 employees access the available health care plan.
How many providers in Anchorage who have the option for a free child care benefit take advantage of it?	-Unknown Anchorage-wide, but we do have figures for JBER (Heather Weafer): 45% of employees take advantage of the benefit for one child, and 43% for 2 or more. -One member says that anecdotally about 5% of centers in Anchorage offer some version of this benefit and that when it is offered, almost all staff who have children take advantage of it.
What professional development training is currently available, and what else is needed?	-thread offers several dozen trainings quarterly, some in English and some in Spanish (thread). -Branwen Collier believes there is sufficient training available -A challenge could be that currently, training is free, but in 2025, due to an adjustment in funds post-COVID, thread will begin charging for training again.
What training is paid for by employers?	-In the last quarter, 11 programs paid for training for 1 or more of their staff (thread) -One member says almost all, maybe 90%, paid for by employers
How many providers use the Calm mental health app?	550 caregivers currently have free access to the app. That free access is ending as post-COVID dollars are disappearing. A two-year subscription is \$45.42 (thread).

What other mental health supports do providers need and what would it cost to fund those?	-thread is piloting a free tele-health and tele-therapy program. Has not been highly utilized -Branwen Collier says this would not probably be that successful
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## COST TO FAMILIES

QUESTION	ANSWER
What is the average cost of care for different age groups?	Unknown. Anecdotally, we know it can range from as low as \$800/month to as high as over \$2,000/month. Cost is generally higher for infants and toddlers.

## CENTER OR IN-HOME OPERATIONS

QUESTION	ANSWER
What is the need for substitutes at in-home programs and in centers?	-No data available, but anecdotally the need is high (thread) -Branwen Collier also says need is high
How often do centers and in-home providers have to close their programs or classrooms because of sick staff?	In-home providers are significantly impacted. Centers can sometimes make it work with a bit more staffing buffer, but still a problem. (Branwen Collier).