

Department of Defense

**Report to the Congressional Defense
Committees**

On

**Department of Defense
Child Development Programs**



2020

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INTRODUCTION

The National Defense Authorization Act for Fiscal Year 2020, its associated reports, and the Appropriations Committees' reports, required multiple reports and briefings from the Department of Defense regarding the Department's Child Development Programs. Due to the overlap in information requested, as well as the significant interest among the congressional defense committees, this consolidated report serves to satisfy all required and requested reports, as delineated in the table below. In addition, the matrix at Appendix A identifies each reporting requirement and request for information and where the response can be found in the report. The requirement identified by an asterisk will be provided separately as it addresses not only child care, but also spouse employment.

Title	Reference
Childcare Parity	Senate Report 116-48, page 180, accompanying S. 1790, the National Defense Authorization Act for Fiscal Year 2020
Family Child Care Home Expansion	Senate Report 116-48, page 188, accompanying S. 1790, the National Defense Authorization Act for Fiscal Year 2020
Adequacy of Childcare Workforce and Capacity	Senate Report 116-48, page 177, accompanying S. 1790, the National Defense Authorization Act for Fiscal Year 2020
Feasibility of Loan/Grant Program to Offset Cost of Child Care Center Accreditation	House Report 116-120, page 152, accompanying H.R. 2500, the National Defense Authorization Act for Fiscal Year 2020
Improvements to Child Care for Members of the Armed Forces	Section 580(b)(2) of the National Defense Authorization Act for Fiscal Year 2020 (Public Law 116-92)
Improvements to Child Care for Members of the Armed Forces	Section 580(c)(2) of the National Defense Authorization Act for Fiscal Year 2020 (Public Law 116-92)
*Improvements to Child Care for Members of the Armed Forces	Section 580(e)(2) of the National Defense Authorization Act for Fiscal Year 2020 (Public Law 116-92)
Adequate Childcare for Military Families	House Report 116-63, page 11, accompanying H.R. 2745, the Military Construction, Veterans Affairs, and Related Agencies Appropriations Bill, 2020
Military Childcare	Senate Report 116-103, page 61, accompanying S. 2474, the Department of Defense Appropriations Bill, 2020
Childcare	House Report 116-84, page 62, accompanying H.R. 2968, the Department of Defense Appropriations Bill, 2020

*This requirement requests a briefing on accessibility of Department of Defense websites related to child care and spouse employment and will be provided separately.

CHILD DEVELOPMENT PROGRAM SYSTEM OF CARE

The Department of Defense views child care as a workforce enabler that directly impacts the readiness, efficiency, and retention of the Total Force. The Department also recognizes the importance of providing military families with access to quality, affordable Child Development Programs. The Department operates the country's largest employer-sponsored child care program providing care to more than 210,000 children from birth through 12 years of age in Fiscal Year 2019 (Figure 1). This integrated system of care operates around the world and includes 510 Child Development Centers, 251 School Age Care programs, and nearly 900 Family Child Care homes (source: Congressional Report Data Call, December 2019).

Figure 1

Child Development Program Children Served – Source: Fiscal Year 2019 Annual Summary of Operations						
Program	Air Force	Army	Defense Logistics Agency	Marine Corps	Navy	Department of Defense Total
Child Development Center	28,939	40,640	1,224	10,480	35,255	116,538
School Age Care	14,625	19,041	84	2,647	14,897	51,294
Family Child Care	2,481	2,098	0	302	3,500	8,381
*External Care	4,956	19,537	0	962	10,619	36,074
Total	51,001	81,316	1,308	14,391	64,271	212,287

* External care refers to children in community-based fee assistance programs.

Oversight

Sections 1791-1800 of title 10, United States Code, and Department of Defense Instruction 6060.02, "Child Development Programs," prescribe rigorous standards and oversight requirements in areas such as funding, staffing, parent fees, child abuse prevention, inspections, and national accreditation. These standards, along with the Military Departments' and the Defense Logistics Agency's own policies, ensure comprehensive health and safety needs are met and quality programming is provided to participating children. Despite the sheer size and scope of the Department's system of care, 97 percent of Child Development Centers and School Age Care programs are nationally-accredited and maintain the highest standards of quality, as compared to less than 15 percent of child care programs in the civilian sector. Additionally, 100 percent of Department of Defense Child Development Programs meet the requirements for Department of Defense certification, which include four annual comprehensive and unannounced inspections, to include a higher headquarters inspection, an installation-based multi-disciplinary team inspection, and comprehensive fire/safety and health inspections.

Funding

The Military Departments and Defense Logistics Agency each support Child Development Programs with a combination of Appropriated Funds and Nonappropriated Funds. All

Departments use variations of a “cost-per-space” model to determine funding allocations to each installation. These models take into account some or all of the following factors: existing capacity, projected capacity, type of care provided, and age groupings. In all cases, programs must take into account and budget for higher costs associated with caring for children under the age of three years. In addition, the Military Departments may centrally manage a portion of their funding to minimize costs and standardize quality. Examples of this include community-based child care fee assistance, Family Child Care subsidies and incentives, expanded child care programs, respite child care, national accreditation support, playground repairs, and closed circuit television repair and replacement. Finally, the Office of Military Family Readiness Policy in the Office of the Deputy Assistant Secretary of Defense for Military Community and Family Policy supports the overall program by funding statutory requirements and enterprise solutions such as the development and maintenance of web-based standardized training programs, inspection management and certification systems, child development curricula, and MilitaryChildCare.com, the DoD-wide, enterprise-level request for care system.

CAPACITY

Physical Capacity

Determining a facility’s capacity to provide child care is contingent upon multiple factors to include the facility design, usable square feet required for each child in the classroom and on the playground, and health and fire safety standards. Department of Defense Instruction 6060.02 prescribes the required square footage of activity space per child, citing the requirements of the current Unified Facilities Criteria and the Army standard for Child Development Centers. The Military Departments construct facilities to allow for maximum flexibility of room usage. For example, infant rooms require separate water sources to accommodate diaper changing and food service, while rooms for preschool age children require child-sized toilets. Today’s child care facilities are built to ensure those requirements are available in all care rooms so that the use of the room can flex based on the child care demand. This directly impacts facility operational capacity. Unfortunately, many older military Child Development Centers were not designed to accommodate the differing requirements of multiple age groups and cannot meet the changing demands of child care need. These older facilities may require replacement or renovation to meet today’s requirements.

Operational Capacity

Department of Defense Instruction 6060.02 directs minimum staff-to-child ratios and maximum group sizes per age group, which directly impact capacity. Figure 2 (next page) illustrates the difference between design versus operational capacity in a hypothetical Child Development Center. A Child Development Center designed with 12 rooms sized to accommodate preschool age children (the group that requires the most space) would have a building design capacity of 288 children based on a 1:12 staff-to-child ratio. The needs of the installation, however, may require the facility to operate with four infant rooms, three pre-toddler rooms, three toddler rooms, and two preschool rooms. This reduces the operational capacity to 152 children because of the lower staff-to-child ratios for younger children and results in a capacity decrease of 136 spaces from the original design capacity of the facility of 288 spaces.

Figure 2

Child Development Center Building Design Capacity				
Age Group	Staff:Child Ratio	Max Group Size	# Classrooms	Capacity
Preschool	1:12	24	12	288
Child Development Center Building Design Capacity Total			12	288

Child Development Center Operational Capacity				
Age Group	Staff:Child Ratio	Max Group Size	# Classrooms	Capacity
Preschool	1:12	24	2	48
Toddler	1:7	14	3	42
Pre-toddler	1:5	10	3	30
Infant	1:4	8	4	32
Child Development Center Operational Capacity Total			12	152

The Military Departments consider many factors when determining the required child care capacity in a given location. Because child care need, numbers of eligible patrons, mission requirements, and local community considerations are constantly changing, it can be difficult to determine the future child care capacity needs of an installation. The Military Departments take into account both current and historical child care enrollment data, child care wait lists, and variations in wait times for each age group to determine if current capacity meets current and future demand, or if additional capacity is needed.

Figure 3 provides the Operational Capacity of on-installation Child Development Centers and School Age Care programs, totaling nearly 104,000 facility based spaces (source: Fiscal Year 2019 Annual Summary of Operations).

Figure 3

Operational Capacity – Fiscal Year 2019 Annual Summary of Operations						
Age Group	Air Force	*Army	Defense Logistics Agency	Marine Corps	Navy	Department of Defense
Infant	3,013	2,495	108	920	3,232	9,768
Pre-Toddlers	4,055	4,860	161	1,141	3,470	13,687
Toddlers	4,737	4,276	164	1,382	4,410	14,969
Preschool	8,637	10,484	442	2,680	6,528	28,771
School Age	10,762	8,956	96	2,013	11,954	32,283
Totals	31,204	34,071	971	8,136	29,594	103,976

*Army data includes 800 spaces that are no longer used due to reductions in installation population.

Infant and toddler care is undoubtedly the most expensive and in-demand category across the nation, and 57 percent of installation Child Development Center spaces are dedicated to children under the age of 3.

Child care wait lists are addressed in the following section. In order to provide context, it is helpful to understand operational capacity in the four regions that represent the Department's largest concentration of child care need (Figure 4) (next page). Those regions are Hawaii,

Norfolk, San Diego, and the National Capital Region (source: Congressional Report Data Call, December 2019).

Figure 4

Hawaii Region Installation Child Development Center School Age Care Data – Congressional Report Data Call, Date of Record 12.6.19					
Service	Region	Installation	Child Development Center Capacity	School Age Care Capacity	Total Capacity
*Army	Hawaii	United States Army Garrison Hawaii	1,028	450	1,478
Marine Corps	Hawaii	Marine Corps Base Hawaii	338	60	398
Navy	Hawaii	Joint Base Pearl Harbor - Hickam	1,782	604	2,386
Hawaii Region Total			3,148	1,114	4,262

*Army data for Hawaii provided by region, not individual installations, and includes Aliamanu Military Reservation, Fort Shafter, Helemano Military Reservation, Schofield Barracks, Tripler Army Medical Center, and Wheeler Army Airfield.

National Capital Region Installation Child Development Center School Age Care Data – Congressional Report Data Call, Date of Record 12.6.19					
Service	Region	Installation	Child Development Center Capacity	School Age Care Capacity	Total Capacity
Air Force	NCR	Joint Base Andrews	496	204	700
Army	NCR	Belvoir	1,145	293	1,438
Army	NCR	Detrick	193	148	341
Army	NCR	Joint Base Myer-Henderson Hall	372	108	480
Army	NCR	Meade	670	340	1,010
Defense Logistics Agency	NCR	Headquarters Complex	288	0	288
Marine Corps	NCR	Quantico	562	100	662
Navy	NCR	Annapolis	281	100	381
Navy	NCR	Bethesda	672	0	672
Navy	NCR	Indian Head	199	60	259
Navy	NCR	Joint Base Anacostia-Bolling	723	200	923
Navy	NCR	Patuxent	465	250	715
NCR Region Total			6,066	1,803	7,869

Norfolk Region Installation Child Development Center School Age Care Data – Congressional Report Data Call, Date of Record 12.6.19					
Service	Region	Installation	Child Development Center Capacity	School Age Care Capacity	Total Capacity
Air Force	Norfolk	*Joint Base Eustis	381	170	551
Air Force	Norfolk	*Joint Base Langley	288	168	456
Navy	Norfolk	Hampton Roads	530	60	590
Navy	Norfolk	Little Creek - Fort Story	670	500	1,170
Navy	Norfolk	Norfolk	383	350	733
Navy	Norfolk	Norfolk Shipyard	362	350	712
Navy	Norfolk	Oceana	432	900	1,332
Navy	Norfolk	Portsmouth	129	0	129
Navy	Norfolk	Yorktown	112	150	262
Norfolk Region Total			3,287	2,648	5,935

*Air Force reports Joint Base Langley-Eustis separately as annotated in chart.

San Diego Region Installation Child Development Center School Age Care Data – Congressional Report Data Call, Date of Record 12.6.19					
Service	Region	Installation	Child Development Center Capacity	School Age Care Capacity	Total Capacity
Marine Corps	San Diego	Miramar	23	120	143
Marine Corps	San Diego	Pendleton	864	396	1,260
Navy	San Diego	Coronado	475	150	625
Navy	San Diego	Marine Corps Recruiting Base	70	0	70
Navy	San Diego	Miramar	342	0	342
Navy	San Diego	Point Loma	469	300	769
Navy	San Diego	San Diego	906	250	1,156
San Diego Region Total			3,149	1,216	4,365

Four Region Summary Department of Defense Child Development Center School Age Care Data – Congressional Report Data Call, Date of Record 12.6.19			
Four Region Totals	Child Development Center Capacity	School Age Care Capacity	Total Capacity
	15,650	6,781	22,431

WAIT LISTS

MilitaryChildCare.com

Beginning in 2017, the Department of Defense fully implemented an enterprise-wide, online child care request management system called MilitaryChildCare.com. MilitaryChildCare.com provides a 508 compliant¹, centralized, online gateway to military-operated child care options for U.S. military families worldwide. Prior to MilitaryChildCare.com, the process for requesting child care in Department of Defense programs varied between Services and installations. For many, it required military families to request care independently at multiple installations (and in some cases, at each facility), as they transferred to their new duty station. This resulted in delayed placement times, duplicate counting on waitlists, and a lack of transparency in the request for care process. MilitaryChildCare.com allows families to view all available child care options in a geographic area and request care for the options that best meet their needs. Not only does MilitaryChildCare.com allow families to request child care anywhere in the world, but it also helps child care programs better manage, analyze, report on, and plan for present and future child care needs. It allows for a greater level of insight into wait lists from an enterprise perspective, and it provides military leadership with a clear overview of child care needs and availability during surges, deployments, and permanent change of station season.

Child Care Immediate Need

The process of overseeing a large, enterprise-wide child care system necessitates a child care wait list management system. A child care wait list, in of itself, is not problematic. On the contrary, child care programs must maintain manageable wait lists where children are placed into care in a timely manner, defined by the Department as within 90 days of the date care is needed. This ensures child care facilities remain full and utilized to their maximum capacity, providing a systemic approach to managing enrollment in the Child Development Program. In some locations, the Military Departments experience lengthy wait lists and excessive wait times for on-installation child care. Figure 5 (next page) illustrates the Department of Defense enterprise on-installation child care immediate need wait list for both military and Department of Defense civilian sponsors as of December 6, 2019. The Office of Military Family Readiness Policy defines “immediate need” as a child care need that was not met and is within 30 days of the date care is needed or past the date care was needed.

¹ Section 508 of the Rehabilitation Act of 1973, “...to require Federal agencies to make their electronic and information technology (EIT) accessible to people with disabilities.”

Figure 5

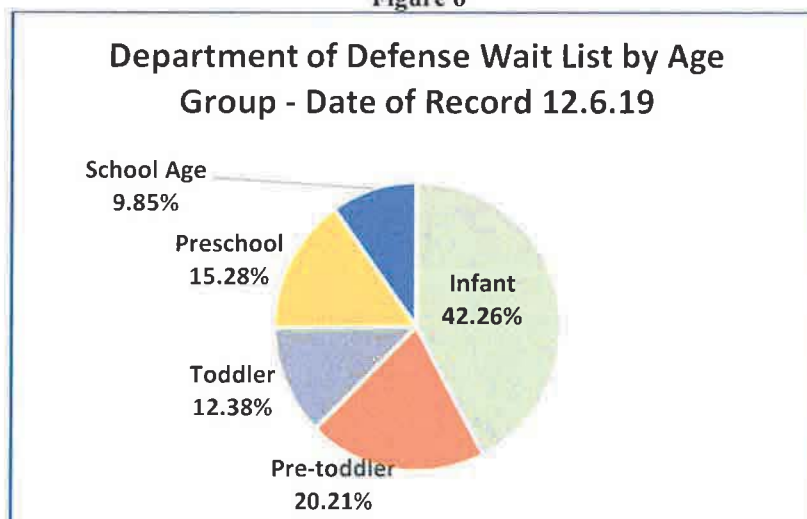
Department of Defense Enterprise Wide Wait List (Immediate Need) – Congressional Report Data Call, Date of Record 12.6.19			
	0 – 5 Year Old	6 to 12 Year Old	Total
*Military	7,871	981	8,852
**Department of Defense Civilian	3,267	236	3,503
Total	11,138	1,217	12,355

*Active Duty Combat-Related Wounded Warrior; Single or Dual Active Duty; Single or Dual Guard/ Reserve on Orders; Single or Dual Active Duty Coast Guard Personnel; Active Duty, Guard/Reserve on Orders, and Active Duty Coast Guard with Working Spouse

**Single or Dual DoD Civilian and DoD Civilian with Working Spouse

Figure 6 illustrates a further breakdown of the child care immediate need by age group. Consistent with the rest of the nation, the largest concentration of children on the wait list, nearly two thirds, are under two years of age.

Figure 6



As depicted in Figure 7, nearly half, or 46 percent, of the Department's child care wait list for both military and Department of Defense civilian sponsors, is located in four geographic regions: Hawaii, San Diego, Norfolk and the National Capital Area.

Figure 7

Four Regions Military and Department of Defense Civilian Wait List (Immediate Need) – Congressional Report Data Call, Date of Record 12.6.19					
Region	0 - 5 Year Olds Military	6 - 12 Year Olds Military	0 - 5 Year Olds Civilian	6 - 12 Year Olds Civilian	Region Total
National Capital	514	42	889	46	1,491
Hawaii	360	68	174	2	604
San Diego	1,444	127	310	7	1,888
Norfolk	1,506	100	147	8	1,761
Total	3,824	337	1,520	63	5,744

An additional 13 percent of the enterprise wait list is centered around six additional locations: Colorado Springs, Fort Bragg, Joint Base Lewis-McChord, Joint Base San Antonio, Naval Base Kitsap, and Ramstein Air Base, as seen in Figure 8.

Figure 8

Six Locations Military and Department of Defense Civilian Wait List (Immediate Need) – Congressional Report Data Call, Date of Record 12.6.19					
Locations	0 - 5 Year Olds Military	6 - 12 Year Olds Military	0 - 5 Year Olds Civilian	6 - 12 Year Olds Civilian	Six Locations Total
*Colorado Springs	190	14	47	4	255
Fort Bragg	187	1	27	1	216
Joint Base Lewis-McChord	232	66	52	5	355
*Joint Base San Antonio	293	6	96	3	398
Naval Base Kitsap	113	22	115	6	256
Ramstein Air Base	73	16	15	7	111
Total	1,088	125	352	26	1,591

*Colorado Springs includes the USAF Academy, Peterson AFB, Schriever AFB, and Fort Carson. Joint Base San Antonio includes Fort Sam Houston, Lackland Air Force Base, and Randolph Air Force Base.

The Department has designated these four regions and six locations as priority and tracks their associated wait lists and enrollment on a quarterly basis.

Wait Times

Many factors affect child care wait times for families. Wait times depend upon location, installation, and even facility, since the wait times for different facilities on the same installation may vary. Wait times are also highly dependent on the age of the child. Typically, wait times for preschool age children are shorter than wait times for infants. As discussed earlier in the report, the preschool staff-to-child ratio is 1:12, with no more than 24 children in the classroom, versus the infant (up to 12 months of age) staff-to-child ratio of 1:4, with no more than 8 children in the classroom. This directly impacts classroom capacity resulting in more spaces available for preschool age children. Drilling down even further, the enrollment priority of a family affects wait times. For example, Department of Defense policy requires children of single military members to be placed above children of military members with a non-working spouse. As a result, the wait time for lower priority families will be longer than the wait time for those in the highest priorities.

When a family requests care, they are provided an estimated wait time. This estimated wait time is based on the family's unique situation: location and facility, care-type, age of the child, and enrollment priority. The uniqueness of an individual estimated wait time is poorly represented by an overall average wait time or placement time, as an average projection does little to inform the true picture of what our military families may experience. In the end, wait times are best viewed in the context of each individual situation and is the reason MilitaryChildCare.com provides each family an individualized estimated wait time.

Wait lists are reflective of immediate need, defined as a child care need that has not been met and is within 30 days of the date care is needed or past the date care was needed. While a family may indicate they have been on a waitlist for a number of months, for tracking purposes, the time on a wait list actually starts from the date care is needed. For example, a family requests care prior to a permanent change of station move on January 1st, indicating a date care is needed of August 1st. The family is not “waiting for care” until August 1st, even though they requested care in January. Some military families may be offered placement on or before their date care needed, while others may experience wait times beyond the Department of Defense goal of placement not longer than 90 days after the date care is needed.

ELIGIBILITY, PRIORITY, AND ENROLLMENT

Eligibility vs. Priority

Sections 1799 and 1800 of title 10, United States Code, define who is eligible for care in military child care programs, whereas Department of Defense Instruction 6060.02 determines the priority for child care. Eligibility for military child care is contingent on the status of the child’s sponsor, while priority considers the working status of both the sponsor and the spouse, when applicable. Current Department of Defense policy gives priority to Child Development Program direct care staff, single and dual military sponsors, military sponsors with a working spouse, single and dual Department of Defense civilian sponsors, and Department of Defense civilian sponsors with a working spouse.

Revised Priority Policy

On February 21, 2020, the Secretary of Defense signed a policy change memorandum, at Appendix B, designed to ensure that, after child care staff, military families are afforded the highest priority for care, to include those with spouses who are seeking employment or who are students. This policy further directs Department of Defense Civilian and Space Available patrons to be supplanted from care when a military family requires care and the wait time exceeds 45 days past the date care is needed. A notice of discontinued child care will be provided to any affected patrons a minimum of 45 days prior to termination. Installation commanders are granted exception to policy authority for mission related requirements. On April 23, 2020, the Secretary of Defense issued an update to the policy change affording Coast Guard families the same priority as their Department of Defense counterparts. This update also delayed the implementation date for changes reflected in both memos to September 1, 2020.

Enrollment data

Figures 9 and 10 (next page) provide the total enrollment and child care priority of on-installation Child Development Centers, School Age Care, and Family Child Care as captured on a single date of record in September 2019 and reported in the Fiscal Year 2019 Annual Summary of Operations. The totals illustrated are based on program type as well as the Service that operates the program.

Figure 9

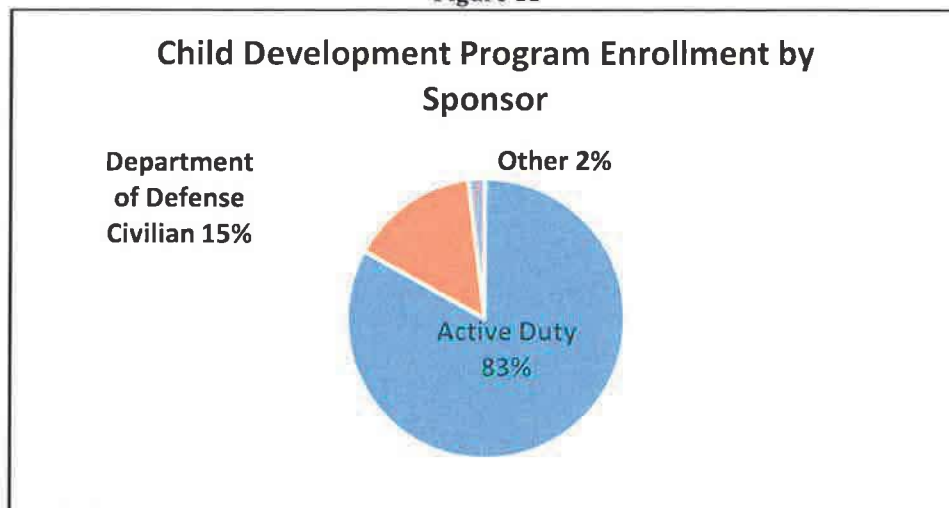
Child Development Program Enrollment – Fiscal Year 2019 Annual Summary of Operations						
Program type	Air Force Programs	Army Programs	Defense Logistics Agency Programs	Marine Corps Programs	Navy Programs	Department of Defense Total
Child Development Center	18,769	18,993	694	4,455	18,049	60,960
School Age Care	7,443	9,193	11	1,424	11,039	29,110
Family Child Care	1,715	796	NA	120	2,083	4,714
Total	27,927	28,982	705	5,999	31,171	94,784

Figure 10

CHILD DEVELOPMENT PROGRAM Enrollment by Sponsor – Fiscal Year 2019 Annual Summary of Operations						
Sponsor type	Air Force Programs	Army Programs	Defense Logistics Agency Programs	Marine Corps Programs	Navy Programs	Department of Defense Total
Active Duty	23,362	22,248	171	5,200	26,806	77,787
Reserve/Guard on Active Duty	320	289	23	6	213	851
Department of Defense Civilian	3,811	5,688	504	706	3,510	14,219
Coast Guard	115	112	1	23	336	587
Military Retirees	59	134	0	19	39	251
Contractors	140	363	1	35	219	758
Other	120	148	5	10	48	331
Total	27,927	28,982	705	5,999	31,171	94,784

As of the September 2019 date of record, military sponsors accounted for 83 percent of Child Development Program enrollment, and Department of Defense civilians accounted for 15 percent of Child Development Program enrollment. Figure 11 (next page) illustrates the enterprise-wide enrollment percentage by sponsor type. The Department tracks the changes of enrollment by sponsor and age group each quarter.

Figure 11



FACILITY CONDITION AND CONSTRUCTION

Facility Conditions

Child Development Program facility conditions contribute to the Services' ability to maximize child care spaces and vary across the Department of Defense. The Military Departments provided current facility conditions according to the Department of Defense's Real Property Assets Database which uses the following rating categories: Good, Fair, Poor, and Failing. Figure 12 below provides an enterprise-wide look by Service of Child Development Program facility condition.

Figure 12

Department of Defense Child Development Program Facility Conditions – Congressional Report Data Call Date of Record 12.6.19					
Service/Agency	Good	Fair	Poor	Failing	Total
Air Force	30	113	72	4	219
Army	208	38	17	2	265
Defense Logistics Agency	5	0	0	0	5
Marine Corps	34	17	7	1	59
Navy	101	80	21	11	213
Department of Defense Totals	378	248	117	18	761

Overall, nearly 50 percent of Department of Defense Child Development Program facilities are in good condition, with ~ 33 percent in fair condition, and ~ 18 percent in poor or failing condition. Air Force reports the highest percentage of facilities in the poor and failing categories at ~ 35 percent. Air Force also reports the lowest percentage of facilities in the good category at ~ 14 percent. This is in stark contrast to facility conditions in the good category reported by the

other Services: Army at 78 percent, Defense Logistics Agency at 100 percent, Marine Corps at 57 percent, and Navy at 47 percent.

Interruptions to Facility Operations

In addition to facility condition ratings, the Military Departments and the Defense Logistics Agency also provided information on when facility conditions caused interruptions to normal operations. Interruptions ranged from total facility closure to reduced capacity and individual room closures. The Military Departments reported heating, ventilation, and air conditioning issues as the most common reason for operational interruptions with water, power, rodents, and roofing issues also identified. Figure 13 identifies the reported closures by the Military Departments.

Figure 13

CHILD DEVELOPMENT PROGRAM Facility Operational Interruptions by Service (Since October 1, 2017)				
	Child Development Center	Child Development Center/School Age Care Combo	School Age Care	Total
Air Force	12	2	3	17
Army	10	0	1	11
Defense Logistics Agency	0	0	0	0
Marine Corps	4	3	2	9
Navy	2	0	0	2
Department of Defense Totals	28	5	6	39

Procedures for Requesting Child Development Program Construction

The Military Departments follow similar procedures for identifying and requesting Child Development Program construction projects. Projects originate with the completion of a DD Form 1391 at the installation level, where they are prioritized for presentation to the Major Command or Region level. Major Command and Region staff then consolidate and prioritize all construction project requests for forwarding to senior leaders.

At each level, Child Development Program projects compete against other mission support construction requirements. From 2011 through 2020, only four military Child Development Program projects received Military Construction funding due, in part, to the challenges of competing with other Military Construction projects at each level. In concert with the data call for this report, the Office of the Deputy Assistant Secretary of Defense for Military Community and Family Policy tasked the Military Departments to provide a prioritized list of their top 50 Child Development Program facility construction requirements. The prioritized lists, at Appendix C, identify 124 child care projects that detail the type of construction, reason for construction, and information clarifying if the construction will replace a facility or increase child care capacity.

STAFFING

Composition

The Department of Defense Child Development Program workforce consists of slightly less than 20,000 direct care staff, of which 93 percent (approximately 18,500) are paid from Nonappropriated Funds and seven percent (approximately 1,500) are paid with Appropriated Funds. Three (Army, Navy, and Marine Corps) of the four Services have moved to a predominately Nonappropriated Fund workforce (utilizing the Uniform Funding and Management Process) in order to maximize flexibilities offered for staff onboarding and compensation. Because the Nonappropriated Fund and Appropriated Fund personnel systems offer comparable benefits packages (paid sick and annual leave, health, and retirement benefits), the historically-perceived disparity between the two systems has been effectively eliminated.

Training Requirements and Compensation

The Department's system of care relies on the practice of hiring paraprofessionals as classroom staff. In addition to completing a robust orientation program, Department policy requires these staff to complete a comprehensive professional development training program as a condition of employment. Along the continuum of training and demonstrated competency, staff earn regular pay increases until they reach a target level (CY-II) depicted in Figure 14.

Figure 14

Structure of Non-Appropriated Fund Pay System for Direct Care Staff			
Pay Band	Standard Positions	Pay Rate	Basic Hourly Rate (locality not included)
CY-I	Direct Care Staff, Entry Level (Comparable to GS-02)	GS-02, Step 1 to GS-03, Step 10	\$10.53 to \$14.93
	Direct Care Staff, Intermediate Level (Comparable to GS-03)		
CY-II	Direct Care Staff, Target Level , (Comparable to GS-04)	GS-04, Step 1 to GS-05, Step 10	\$12.90 to \$18.76
	Direct Care Staff, Leader Level (Comparable to GS-05)		
	Direct Care Staff, Program Technician (Comparable to GS-05)		

An entry level Nonappropriated Fund direct care staff professional earns an average of \$13.24 per hour (\$27,539 average annual income) with a minimum hourly rate of \$10.53 (GS-02, Step 1). Wages increase as staff complete Department of Defense training requirements and demonstrate competency. A full-time direct care staff professional who has completed the 18-month required training program and who is at the target level or higher earns an average of \$16.38 per hour (\$34,070 average annual income). Appropriated Fund direct care staff professionals at the GS-04 and GS-05 level, positions typically held by a lead teacher, earn an annual base salary which ranges from \$26,832 - \$39,021 in addition to the locality pay for their

specific location. In order to ensure the majority of staff receives pay with benefits, Department of Defense policy requires that 75 percent of the labor hours be paid to direct care staff who are receiving benefits such as sick leave, annual leave, and health insurance.

Child care is one of the lowest-paying professional fields in the United States, and more importantly, one of the lowest-paying occupations in early care and education. The 2018 Bureau of Labor and Statistics Occupational Outlook Handbook² notes that a child care worker earns a median pay of \$23,240 per year (or \$11.17 per hour), while a preschool teacher with an Associate Degree earns approximately \$14.32 per hour (\$29,780 average median pay). While salaries of staff in Department of Defense child care programs compare favorably with their civilian child care worker counterparts, they do not reach parity with other early childhood professionals such as kindergarten and elementary teachers.

The Bureau of Labor and Statistics 2018 median pay for a kindergarten/elementary teacher was approximately \$57,980 per year. Similar to a kindergarten or elementary teacher, direct-care staff in military child care programs are responsible for developing curriculum, assessing and evaluating children, planning for the needs of children with special needs, conducting parent conferences, etc., in accordance with section 1797 of title 10, United States Code. Despite this, the wages of a Department of Defense direct-care staff member are significantly lower than the wages of a kindergarten or elementary teacher in a comparable non-Department of Defense position.

Staffing shortfalls

Staffing shortfalls impact the capability of Child Development Programs to operate at maximum capacity and may contribute to increased wait times. During the Congressional Report data call, the Military Departments reported 3,879 direct care staff vacancies. Figure 15 depicts the enterprise-wide staff vacancies across the Department of Defense Child Development Program on the December 6, 2019 date of record.

Figure 15

Child Development Program Direct Care Staffing Vacancies – Congressional Report			
Data Call Date of Record 12.6.19			
	Non-Appropriated Fund Vacancies	Appropriated Fund Vacancies	Total
Air Force	1,114	196	1,310
Army	1,422	0	1,422
Defense Logistics Agency	70	0	70
Marine Corps	645	4	649
Navy	428	0	428
Department of Defense Totals	3,679	200	3,879

² Bureau of Labor and Statistics, [Occupational Outlook Handbook](https://www.bls.gov/ooh/), retrieved on March 30, 2020 from <https://www.bls.gov/ooh/>.

While the Air Force did not provide staffing vacancies by category of employment, the 2,569 staff vacancies reported by the Army, Navy, Marine Corps and Defense Logistics Agency were identified as 59 percent flexible or part-time employees and 41 percent regular employees. Flexible or part-time employees generally do not work a full-time schedule and may not be eligible for benefits. One common use for flexible or part-time employees is to assist with School Age Care programs during the summer months when enrollment surges. The Military Departments may also appoint newly-hired, inexperienced staff as flexible or part-time while they grow in experience and complete training. While these employment categories provide a valuable contribution to our programs, hours worked by two to three flexible or part-time employees may equal the hours worked by one full-time employee, and as such, vacancies in the different employment categories cannot be compared equally.

As mentioned throughout this report, the Department experiences the most challenges meeting the child care need specifically in four large military regions and six additional locations. The total number of direct care vacancies for these regions and locations is shown in Figure 16. These vacancies include flexible, part-time, and full-time vacancies and account for over 29 percent of the enterprise-wide vacancies reported.

Figure 16

CHILD DEVELOPMENT PROGRAM Direct Care Staffing Vacancies – Congressional Report Data Call Date of Record 12.6.19	
Region	Total Number of Direct Care Vacancies Reported
National Capital Region	226
Hawaii	146
San Diego	193
Norfolk	127
Four Region Total	692
Location	Total Number of Direct Care Vacancies Reported
Joint Base San Antonio	43
Ramstein Air Base	73
Colorado Springs Metro	184
Joint Base Lewis-McChord	83
Fort Bragg	26
Naval Base Kitsap	26
Six Locations Total	435
Total of Regions and Locations	1,127

Staffing Initiatives

The Services have launched human capital strategy initiatives and developed concrete actions to improve hiring, retention, and career progression. Some of the initiatives include hiring toolkits, provisional hiring, standardized onboarding processes, standardized position descriptions, and standardized performance metrics. Additional incentives include converting more employees to regular status with benefits, increasing entry level pay, offering special achievement and length of service awards, implementing relocation bonuses, and providing a career advancement plan.

The Department is leading a Joint Service Working Group that is examining the compensation of Department of Defense child care staff to include hourly wages, tuition assistance, standard benefits, and the incentives mentioned above to determine what strategies are most effective and where gaps still exist. As part of the Working Group, the Department expanded its “Come Grow With Us” effort, a multi-media campaign to forge stronger partnerships between community colleges and vocational school programs. As this campaign progresses, the Department will track the impact of these partnerships on recruitment and retention.

As of November 2019, each of the Military Departments offer a Nonappropriated Fund employee transfer program for direct care staff, designed to promote career portability. This initiative allows child care professionals to transfer to a new duty station and maintain their base pay and benefit status from one location to the next. The ability to transfer to a new job location is especially important for military spouses who make up 35 percent of the enterprise-wide Child Development Program workforce. In addition, educational qualifications, certifications, background checks, medical screenings, and other employment requirements transfer with the employee and expedite the on-boarding process at the new location. The temporary Direct-Hire Authority for child care service providers, authorized under section 559 of the National Defense Authorization Act for Fiscal Year 2018 and expanded in the National Defense Authorization Act for Fiscal Year 2020, improved the efficiency of hiring Appropriated Fund staff, particularly in Air Force programs which employ the highest number of these staff.

Another retention strategy assists staff in obtaining additional education and furthering their professional development, an action that supports accreditation requirements for a credentialed or a degreed teacher. The Virtual Lab School, <https://www.virtuallabschool.org/>, is the Department’s digital training platform developed by The Ohio State University and utilizes research-based practices and standards to provide an avenue for achieving credit hours toward a Child Development Associate Credential or an Associate of Arts degree in Early Childhood Development and Education. The Military Departments also provide Child Development Program staff tuition assistance and financial support for early childhood credentialing and advanced degrees, which can lead to career advancement.

Finally, the Department and the Services recognize that the child care needs of direct care staff must be met to ensure sufficient staff are available to operate the program and meet military mission requirements. As a result, children of child development program direct care staff are given the highest priority for care and, depending on the Military Department, may be eligible for reduced child care fees.

FAMILY CHILD CARE PROGRAM

Family Child Care is an important component of the Department of Defense’s system of care. Providers ensure military children receive personalized care in a home-like setting, the ideal solution to assist with unique full-time child care needs such as shift care or 24/7 care. Family Child Care providers, the majority of whom are military spouses, operate as independent contractors and are held to similar background check, training, and oversight requirements as on-

installation center-based child care programs. Family Child Care homes are inspected on a regular basis during all hours of operation through a combination of scheduled and unannounced home visits by installation and Service Headquarters personnel.

Oversight

Oversight is a key component to ensure Family Child Care homes comply with the safety and quality standards of operation required by Department of Defense Instruction 6060.02. Policy clearly states that home-based care is not permitted without a home inspection; training in topics such as child development, health and safety, child abuse prevention, and parent and family relations; and approval by the installation commander. Any individual living in on-installation or off-installation housing (both government and Public Private Partnership-operated), providing care to children for more than ten hours per week, must meet the requirements outlined in Department of Defense Instruction 6060.02 for operating a Family Child Care home.

Unauthorized care

Installations must have procedures in place to investigate and respond to any reports of unauthorized care. The September 6, 2019 Under Secretary of Defense for Personnel and Readiness memorandum to the Secretaries of all Military Departments reiterated these requirements and asked for their commitment to ensuring children on our military installations are cared for in a safe, healthy, and quality environment. This memorandum is included at Appendix D. In Fiscal Year 2020, the Department started gathering information on reports of unauthorized care through the Child Development Program Annual Summary of Operations data collection.

Challenges to Becoming a Family Child Care Provider

Family Child Care homes provide a vital resource in expanding the Department of Defense's system of care and meeting the unique needs of Service members and their families. Akin to the civilian sector, home-based child care in the Department of Defense has experienced a significant decrease of ~4,600 certified homes from 2010 to 2018. The Military Departments report a myriad of barriers to recruiting and retaining Family Child Care providers. Family Child Care Program certification standards require providers to apply Family Child Care Program requirements to their own children just as they do for child care patrons. For example, their own infant must remain within their direct sight just as any other infant in child care. They cannot place their infants to sleep in their own bedroom or in another room of the house that is out of sight of the provider. These requirements present a challenge to potential providers as they may feel that they must give up control of their homes to meet certification standards. In addition, the nature of a Family Child Care business requiring operating hours in excess of a typical 8-hour workday can be a challenge. In some cases, operating hours exceed 12 hours daily, which can be difficult for providers to sustain long term. Family Child Care program managers also cite the non-transferability of state licensure as a significant barrier for our military spouses who opt for a career as a Family Child Care provider. With more families living off-installation or in military-leased housing areas where there is dual jurisdiction between the respective State and the Department of Defense, Family Child Care providers must become both State licensed and Department of Defense certified. While the Department of Defense certification does transfer world-wide, State certification does not. Ideally, to streamline the process, ensure consistent

standards for our military families, and reduce the level of effort on Family Child Care providers, all States would accept Department of Defense certification in lieu of State licensure, as Department of Defense certification either meets or exceeds State licensure requirements in most cases. This, however, does not negate the necessity of a home inspection at the new location. Although the individual provider license is potentially transferable, the license will not be issued until the home is approved.

Family Child Care Initiatives

Despite these challenges, the Military Departments have focused on growing the program. In Fiscal Year 2019, the Department saw an enterprise-wide increase of ~100 homes, resulting in an increase of ~400 child care spaces, the first increase in certified homes since 2009. This may be attributed to initiatives targeted to improving the program for providers and increasing the number of homes, such as robust marketing and outreach efforts focusing on key aspects of the Family Child Care Program from both a provider and family perspective. The Military Departments provide a host of incentives for Family Child Care providers to include professional development opportunities (financial support for Child Development Associate Credential and National Accreditation), lending libraries to provide start up equipment and materials at no cost to the provider, access to the Virtual Lab School training platform, and coaching and mentoring from seasoned child care managers. The Army centrally funded a creative package of financial incentives such as awards for achieving and maintaining professional credentials, providing specialty care or care during extended hours, serving children with special needs, serving children under three years old, and recruiting other providers. The Air Force also provides similar financial incentives in addition to paid state licensing fees in targeted locations. The Air Force established the installation-based Community Child Care Coordinator position to lead their Family Child Care expansion efforts and partner with State licensing organizations to articulate Air Force Family Child Care certification requirements and program support that can assist off-installation providers in meeting State requirements. Navy provides financial incentives for Family Child Care providers who obtain national accreditation as well as providers who care for children under age three, children with special needs, and children during extended hours including overnight and weekends. Navy also is collaborating with local and national child care organizations to explore partnership opportunities for increasing the Family Child Care inventory.

FEE ASSISTANCE

Fee Assistance Procedures

The Military Departments provide community-based fee assistance to military families when they cannot access on-installation child care due to geographic distance from an installation or because there is an extensive wait list for on-installation care. The Military Departments contract with a third-party administrator to implement and manage this program. Currently the Navy, Marine Corps, and Air Force utilize a joint contract managed by the Navy, while the Army maintains its own contract. The third-party administrator (in both cases, Child Care Aware of America) assists families with finding qualified child care providers. Participating child care providers must meet the Department of Defense requirements for child care, which

include, but are not limited to: State licensure, annual licensing agency inspections, employee background checks, and national accreditation. The third-party administrator issues payments directly to the child care provider to buy down the cost of care for military families.

Fee Assistance Calculations

Although the Military Departments fund and operate their community-based child care fee assistance programs independently, they have made efforts to standardize their programs. They all use the same method to calculate the amount of fee assistance for which military families are eligible. The amount of fee assistance calculated per child is the difference between the family's military child care fee based on Total Family Income and the provider's rates, up to an established provider rate cap. The provider rate cap ranges from \$1,100 to \$1,500 per month and varies by location and Military Department. The provider rate cap continues to be the most notable difference in the Services' fee assistance programs as Army families are eligible to receive higher fee assistance amounts, particularly where community-based child care rates are high.

Consistent across the Services, families are responsible for paying their military child care fees directly to the provider, while the Military Departments pay fee assistance directly to the provider via the third-party administrator. If a family chooses a provider who charges more than the established rate cap, the family is responsible for any amount in excess of the rate cap in addition to their military child care fee. Given the variation in provider rates, the maximum amount of monthly child care fee assistance for which a family may qualify ranges from \$1,197 per child for military families in the lowest Total Family Income category to \$450 per child for military families in the highest Total Family Income category. In practice, the average amount of monthly fee assistance is much lower. Looking first at Army families, the average monthly amount ranges from \$113 per child in Mississippi to \$805 per child in Washington D.C. The average monthly fee assistance per child for Air Force families ranges from \$139 in South Dakota to \$657 in Massachusetts. For Marine Corps families, the range is from \$160 in Idaho and South Dakota to \$632 in Connecticut. For Navy families, the range is from \$197 in Alaska to \$558 in Washington D.C.

As mentioned previously, the Military Departments use the same formula to calculate fee assistance; however, they do not use the same provider rate caps. Army calculates fee assistance against a provider rate cap of \$1,500 per month, which partially accounts for the higher monthly per child fee assistance average. The Air Force, Marine Corps, and Navy calculate fee assistance based on a provider rate cap of \$1,100 in standard locations and \$1,300 in high-cost locations. The Air Force, Marine Corps, and Navy review high-cost locations on an annual basis. The Military Departments recognize that individual family hardships occur and may increase individual subsidy amounts upon review and approval. In addition, the Military Departments may approve an increased provider rate cap by location for unique circumstances. For example, the Air Force provides increased provider rate caps for Hanscom Air Force Base near Boston due to local child care costs.

Fee Assistance Enrollment and Wait List Procedures

In Fiscal Year 2019, the Military Departments expended more than \$90 million on fee assistance, serving more than 36,000 children. The Navy and Army extend fee assistance to Department of Defense civilian employees, while the Air Force and Marine Corps provide fee assistance solely to military members. Currently, the Navy maintains a wait list for fee assistance because of funding shortfalls and limited availability of community-based child care. Army has indicated that they will move to a wait list procedure in 2020. Figure 17 depicts the number of children on the fee assistance wait list on the date of record.

Figure 17

Fee Assistance Wait List by Service – Congressional Report Data Call Date of Record 12.6.19			
Service	Military Fee Assistance Wait List	Department of Defense Civ Fee Assistance Wait List	Total Fee Assistance Wait List
Air Force	0	0	0
Army	0	0	0
Marine Corps	0	0	0
Navy	3,049	65	3,114
Totals	3,049	65	3,114

Civilian Child Care Availability and Quality

Section 1797 of title 10, United States Code, requires installation Child Development Programs to meet the standards of operation necessary for accreditation by an appropriate national early childhood programs accrediting body. To ensure a comparable level of quality for community-based programs, fee assistance programs first seek accredited care when determining a program's eligibility to participate in fee assistance. The lack of nationally-accredited care in the civilian sector (less than 15 percent of child care centers) contributes to difficulties in finding eligible community-based child care. When accredited care is not available, the Military Departments may waive this quality requirement and permit families to receive fee assistance in programs that are licensed only. In late 2019, the Office of Military Family Readiness Policy and the Military Departments began a pilot program in Virginia and Maryland utilizing the States' Quality Rating Improvement Systems to increase the number of providers eligible for fee assistance. The Quality Rating Improvement System requires a continual improvement process with the goal of achieving national accreditation. Utilization of the Quality Rating Improvement System ensures each provider's level of quality is higher than the minimum while acknowledging their progress towards national accreditation. This office is tracking the increase in both participating providers and military families accessing these providers, as well as exploring additional pilot sites such as Nevada to support the child care needs of Creech Air Force Base, which does not have an installation child care program.

Not only is there a lack of accredited care, but overall, States are experiencing a lack of licensed care, particularly with programs caring for infants and toddlers. According to a Center for American Progress report, [America's Child Care Deserts in 2018](#)³, 51 percent of people in the United States live in a child care desert, defined as any census tract with more than 50 children

³ Center for American Progress, [America's Child Care Deserts in 2018](#), retrieved on April 9, 2020 from www.americanprogress.org.

under age 5 that contains either no child care providers or so few options that there are more than three times as many children as licensed child care slots. The data in Child Care Aware of America's 2018 and 2019 State Fact Sheets⁴ confirms a deficit in licensed care options in California, Colorado, Washington D.C., Hawaii, Maryland, North Carolina, Texas, Virginia, and Washington. It should be noted that these States are often identified as some of the States with the highest population of military personnel. Figure 18 illustrates the child care deficits in States with the Department of Defense highest unmet need.

Figure 18

Child Care Deserts and Space Deficits				
	% Population Living in Child Care Desert²	Children Under 6 Potentially Needing Care³	Total Child Care Spaces Available³	Potential Child Care Space Deficit³
California	60%	1,768,526	1,072,575	695,951
Colorado	51%	245,764	237,012	8,752
District of Columbia	27%	35,874	29,477	6,397
Hawaii	68%	65,153	30,706	34,447
Maryland	51%	305,286	211,031	94,255
North Carolina	44%	461,547	378,375	83,172
Texas	48%	1,372,687	1,127,714	249,973
Virginia	47%	393,077	282,533	110,544
Washington	63%	309,460	176,819	132,641

Quality Improvement Incentives

Quality improvement incentives such as technical assistance and monetary awards are a tool used by the States to increase the level of child care quality. Community-based child care providers participating in the Quality Rating Improvement System pilot in Virginia and Maryland are eligible for these types of quality improvement incentives. Previously, the Military Departments included quality improvement initiatives in their fee assistance contracts in an effort to encourage community-based providers to increase the quality of their child care program. These initiatives were not successful in increasing the number of qualified providers and were subsequently removed from contract support. The Department continues to seek opportunities to grow both the supply and the quality of community-based child care. These efforts require collaboration between the Department and each State office responsible for child care licensure. As more State child care licensing systems seek to improve child care through a Quality Rating Improvement System, additional opportunities for quality improvement incentives may emerge.

⁴ Child Care Aware of America, 2019 State Fact Sheets, retrieved on April 10, 2020 from www.childcareaware.org/our-issues/research/

THE WAY AHEAD

Capacity

The Military Departments' first priority to address capacity issues is to maximize the use of current capacity by filling all child care spaces and ensuring when a space becomes vacant, it is filled in a timely manner. Maximizing capacity is a focus area during the annual higher headquarters unannounced inspections, and, if identified as a deficiency, must be corrected in order to earn Department of Defense certification. In addition, these inspections validate that available child care space is utilized to meet the needs of children on the wait list. To the extent possible, programs must be willing to flex child care classrooms to care for age groups that have the highest demand. When child care capacity is maximized and families are waiting beyond 90 days of their date care was needed, programs should seek alternate methods to increase capacity.

The Military Departments continue to explore the potential for increased child care capacity through Public Private Partnerships. Perhaps the most promising evidence of this is through the Navy's Request for Proposal released to communities in 2019. This model leverages excess community school capacity that the Navy proposes to lease for childcare in the San Diego region. The Office of Military Family Readiness Policy in the Office of the Deputy Assistant Secretary of Defense for Military Community and Family Policy will continue to monitor the progress of Public Private Partnership initiatives for potential implementation across the Services.

The Department is leading efforts to increase the quality of on- and off-installation child care through the development of resources to increase professional development, utilization of research-informed curricula, and evaluation of State efforts to increase quality through the use of Quality Rating Improvement Systems. Improving child care quality provides additional opportunities for military families to access off-installation child care, and thus expand the capacity of community-based fee assistance.

Finally, the Military Departments can utilize a combination of new construction, renovation, and expansion, in concert with a long-term recapitalization plan to increase capacity. The Department dramatically increased the capacity of its child care system through a robust construction program in Fiscal Years 2008-2009. These projects increased child care capacity by 13,000 spaces in 2008 and 8,200 spaces in 2009 and were supported through multiple funding streams. Funding included traditional Military Construction funds, American Recovery and Reinvestment Act of 2009 funds, and the now-expired temporary authority provided in section 2810(d) of the National Defense Authorization Act for Fiscal Year 2006 and renewed in section 2809 of the National Defense Authorization Act for Fiscal Year 2008 to build facilities using Operation and Maintenance funds. While construction is a long-term solution, it may be necessary in order to tackle projected capacity shortfalls in targeted locations.

Staffing

Addressing the child care need requires a discussion on staffing challenges. The Department leads a Joint Service Working Group on Compensation, Recruitment, and Retention focused on four lines of effort targeted at these challenges. The first line of effort addresses increases to the

hourly rate of pay for direct child care staff. As referenced earlier in this report, salaries of staff in Department of Defense child care programs generally compare favorably to the early care and education field at large; however, the profession is under paid and often unrecognized. The second line of effort focuses directly on recruitment through the “Come Grow With Us” initiative, which reaches out to colleges and vocational programs to recruit and grow the pool of potential child care providers. The third line of effort amplifies the efforts of the Military Departments as they offer tuition assistance programs with opportunities to enhance this level of support in order to attract and retain employees. Finally, the Office of Military Family Readiness Policy in partnership with the Military Departments is reviewing the current child care fee policy in order to right-size parent fees with the revenue needed to increase staff wages.

Wait Times

The Department tracks child care wait times on a monthly basis and tracks enrollment on a quarterly basis, focusing on those locations with the largest wait lists. Using this data, the Department evaluates the impact and success of actions taken to increase capacity and improve staffing. The analysis also explores the potential need for further actions. The Department also has the tools in place to study the impact of the child care priority policy change, with an implementation date of September 1, 2020, granting military members the highest priority for child care after our direct care staff.

Technology

In September of 2019, the Office of Military Family Readiness Policy completed an initial assessment of current Information Technology systems used by each Military Service. The assessment found current Information Technology infrastructure consists of multiple platforms and software solutions with no integration between Military Services. Opportunities exist for data integration, which could include management efficiencies such as staff scheduling, classroom management, and child care enrollment. A system such as this would allow for real-time data queries and reduce reporting requirements. Furthermore, integration with Militarychildcare.Com would ensure timely filling of child care vacancies, resulting in more efficient operations and a decrease in wait times for our military families. Two potential courses of action for an integrated web and cloud-based Child Development Program Management System are currently under review.

CONCLUSION

Military families remain the backbone of the Department of Defense, and the Department is committed to ensuring quality, affordable child care programs are available when our families need them most. This commitment will require significant investment and demands a multi-pronged approach to address capacity, wait times, and staffing challenges. The Department appreciates the ongoing support of Congress regarding child care and looks forward to working together to address these challenges.

Appendix A

Report Title and Information Requested	Response in Report
<p>Childcare Parity, Senate Report 116-48, accompanying S. 1790, the National Defense Authorization Act for Fiscal Year 2020</p>	<p>Childcare Parity</p>
<p>(1) Standardize the childcare eligibility policies of the Services to ensure that single, unmarried, separated, or divorced service members receive the same opportunities as married service members for childcare, regardless of the individual service member's residency or geographic location; and (2) Ensure the Department prioritizes childcare for Active-Duty service members over the childcare needs of DOD civilians. The committee directs the Secretary of Defense to provide a briefing to the committee, no later than February 1, 2020, on changes the DOD will make to ensure equity in the delivery of its childcare benefits.</p>	<p>(1) Eligibility, Priority and Enrollment section, <i>Eligibility vs. Priority, Revised Priority Policy</i> sub-sections, (2) Appendix B- Policy Change Memorandum</p>
<p>FCC Home Expansion, Senate Report 116-48, accompanying S. 1790, the National Defense Authorization Act for Fiscal Year 2020</p>	<p>FCC Home Expansion</p>
<p>Produce data on the number of unlicensed childcare centers in military homes and to determine the barriers preventing childcare providers from entering the FCC program. then brief on data and barriers.</p>	<p>Family Child Care Program heading, Oversight, Unauthorized care, and Challenges to Becoming a Family Child Care Provider sub-sections, Appendix D- USD P&R Memorandum</p>
<p>Adequacy of Childcare Workforce and Capacity, Senate Report 116-48, accompanying S. 1790, the National Defense Authorization Act for Fiscal Year 2020</p>	<p>Adequacy of Childcare Workforce and Capacity</p>
<p>Report that includes the following (1) Data on CDC waitlists, workforce inadequacies, and facility capacities in each region (San Diego, the National Capital Region, Hawaii, and Norfolk); (2) Specific locations where either CDC construction or public-private partnerships with private sector childcare providers would increase capacity; and (3) Monetary and non-monetary incentives that could be utilized to recruit and retain childcare providers at those CDCs.</p>	<p>(1) Wait Lists section, <i>Child Care Immediate Need</i> sub-section, Figure 7; Staffing section, <i>Staffing shortfalls</i> sub-section, Figure 16; Capacity section, <i>Operational Capacity</i> sub-section, Figure 4; (2) Appendix C; (3) Staffing section, <i>Staffing Initiatives</i> sub-section; Way Ahead section, <i>Staffing</i> sub-section</p>

Report Title and Information Requested	Response in Report
<p>Feasibility of Loan/Grant Program to Offset Cost of Child Care Center Accreditation, House Report 116-120, accompanying H.R. 2500, the National Defense Authorization Act for Fiscal Year 2020</p> <p>Report detailing: (1) an assessment of areas with the longest waitlists for on-base CDCs; (2) an assessment of the availability of licensed, off base child care facilities in those areas; (3) the feasibility of creating a grant or loan program to defray up to half the cost of meeting state licensure requirements; (4) recommendations for legislative/administrative action in light of the report, including recommendations for a pilot grant or loan program.</p>	<p>Feasibility of Loan/Grant Program to Offset Cost of Child Care Center Accreditation</p> <p>(1) Wait Lists section, <i>Child Care Immediate Need</i> sub-section, Figures 7, 8 (2) Fee Assistance section, <i>Civilian Child Care Availability and Quality</i> sub-section and Figure 18, (3&4) Fee Assistance section, <i>Quality Improvement Incentives</i> sub-section</p>
<p>Improvements to Child Care for Members of the Armed Forces, Section 580(b)(2) of the National Defense Authorization Act for Fiscal Year 2020 (Public Law 116-92)</p> <p>Report on: (1) assessment of the financial assistance provided to eligible civilian providers of child care services for members of the armed services and civilian employees. Such assessment shall include (a) determination of whether the maximum allowable financial assistance should be standardized across the Armed Forces and (b) whether the maximum allowable amount adequately accounts for high-cost duty stations.</p>	<p>Improvements to Child Care for Members of the Armed Forces</p> <p>Fee Assistance section, <i>Fee Assistance Calculations</i> sub-section</p>
<p>Improvements to Child Care for Members of the Armed Forces Section 580(c)(2) of the National Defense Authorization Act for Fiscal Year 2020 (Public Law 116-92)</p>	<p>Improvements to Child Care for Members of the Armed Forces</p>
<p>Report on: (2) assessment of the child care capacity at all military installations to ensure child care access of service members, remedial actions to alleviate the waiting lists for child care, and any additional resources necessary to increase access including funding for child care facilities and workers</p>	<p>Capacity section, Wait List section, Way Ahead section</p>

Report Title and Information Requested	Response in Report
<p>Improvements to Child Care for Members of the Armed Forces Section 580(e)(2) of the National Defense Authorization Act for Fiscal Year 2020 (Public Law 116-92)</p>	<p>Improvements to Child Care for Members of the Armed Forces</p>
<p>Provide a briefing to HASC/SASC on (3) the accessibility of Department of Defense websites related to child care and spousal employment and actions taken to enhance accessibility (due 1-Mar-20).</p>	<p>This requirement requests a briefing on accessibility of DoD websites related not only to child care, but also spouse employment and will be provided separately. The DoD's online request for child care system mentioned in this report, MilitaryChildCare.com, is 508 compliant. Referenced in Wait Lists section, <i>MilitaryChildCare.com</i> sub-section.</p>
<p>Adequate Childcare for Military Families, House Report 116-63, accompanying H.R. 2745, the Military Construction, Veterans Affairs, and Related Agencies Appropriations Bill, 2020</p>	<p>Adequate Childcare for Military Families</p>
<p>Report detailing (1) all installations that have CDCs and SAC facilities, (2) the physical condition of these facilities, and (3) the length of time military families must wait before enrolling their children into CDCs and SAC programs.</p>	<p>(1) Child Development Program System of Care, section, first paragraph (2) Facility Condition and Construction section, <i>Facility Conditions</i> sub-section, Figure 12 (3) Wait Lists section, <i>Wait Times</i> sub-section</p>

Report Title and Information Requested	Response in Report
<p>Military Childcare, Senate Report 116-103, accompanying S. 2474, the Department of Defense Appropriations Bill, 2020</p> <p>The report should detail capacity, enrollment, staffing, and waitlist data for all child care facilities to include child development centers, before and after school programs, and family child care programs. The report shall include: overall and current facility capacity, current facility enrollment, the process for determining capacity, current waitlist and estimated time to placement, average salary for direct care staff and staffing shortfalls, and processes for determining funding allocations. The report should also consider the degree to which childcare is available in the community through the fee-assistance program, the number of families receiving fee assistance, the fee assistance wait list, and the amount subsidized per child. Finally, the report should include information on child care facilities where normal operations were interrupted by the deterioration of facility infrastructure or conditions that do not meet the relevant standards set by the Department or outside expert organizations. Based on this data, the report should conclude with a prioritized list of the top fifty CDC construction requirements for new, refurbishment, or expansion - ranked in order of need. The report should detail each Service's process for prioritization of child development program construction requirements in relation to the overall Service construction requirement.</p>	<p>Military Childcare</p> <p>Facility capacity in Capacity section, Operational Capacity sub-section, Figure 3; current enrollment in Eligibility, Priority, and Enrollment section, Enrollment Data sub-section, Figures 9, 10, 11; process for determining capacity, Capacity section, Physical Capacity and Operational Capacity sub-sections; current waitlist and time to placement, Wait Lists section, Child Care Immediate Need and Wait Times sub-sections; average salary and staffing shortfalls, Staffing section, Training Requirements and Compensation and Staffing Shortfalls; process for determining funding, Child Development System of Care section, Funding sub-section; number of families receiving fee assistance, Fee Assistance section, Fee Assistance Enrollment and Wait List Procedures sub-section; fee assistance wait list, Fee Assistance section, Fee Assistance Enrollment and Wait List Procedures sub-section, figure 17; amount subsidized per child, Fee Assistance section, Fee Assistance Calculations sub-section; child care facilities where operations were interrupted, Facility Condition and Construction section, Interruptions to Facility Operations sub-section, Figure 13 ; prioritized list of CDC construction requirements, Appendix C; Service process for CDP construction requirements, Facility Condition and Construction section, Procedures for Requesting Child Development Program Construction sub-section</p>
<p>Childcare, House Report 116-84, accompanying H.R. 2968, the Department of Defense Appropriations Bill, 2020</p> <p>Submit a report that details their plans to address the obstacles to childcare, whether it be additional childcare development centers, additional staff, or acceptable alternatives for fiscal year 2020 and the future year defense program to ensure that these challenges are expeditiously met, include associated funding requirements for each identified course of action; further, the Service Secretaries are to include the number of children on childcare waiting lists in their fiscal year 2021 budget justification materials.</p>	<p>Childcare</p> <p>Way Ahead section</p>

Appendix B



SECRETARY OF DEFENSE
1000 DEFENSE PENTAGON
WASHINGTON, DC 20301-1000

APR 23 2020

MEMORANDUM FOR CHIEF MANAGEMENT OFFICER OF THE DEPARTMENT OF
DEFENSE

SECRETARIES OF THE MILITARY DEPARTMENTS
CHAIRMAN OF THE JOINT CHIEFS OF STAFF
UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND
READINESS
CHIEFS OF THE MILITARY SERVICES
CHIEF OF THE NATIONAL GUARD BUREAU
GENERAL COUNSEL OF THE DEPARTMENT OF DEFENSE
INSPECTOR GENERAL OF THE DEPARTMENT OF DEFENSE
ASSISTANT SECRETARY OF DEFENSE FOR LEGISLATIVE
AFFAIRS
ASSISTANT TO THE SECRETARY OF DEFENSE FOR PUBLIC
AFFAIRS
DIRECTORS OF DEFENSE AGENCIES
DIRECTORS OF THE DOD FIELD ACTIVITIES

SUBJECT: Update to Child Care Policy Change Dated February 21, 2020

The purpose of this memorandum is to provide updates to the February 21, 2020 Policy Change Memorandum concerning child care priorities. My commitment to ensuring priority access to child care for military members remains unchanged.

I am directing that Coast Guard families be afforded the same priority as their DoD counterparts.

The attachment has been updated to reflect this change to Enclosure 3 of DoD Instruction (DoDI) 6060.02, "Child Development Programs;" changed text is bolded. The Washington Headquarters Services Directives Division will update the current version online.

Additionally, due to the challenges our families and child care programs are facing as a result of the COVID-19 pandemic, I am delaying the implementation date of the changes reflected in this memorandum, as well as the February 21, 2020 memorandum, to September 1, 2020.

The Under Secretary of Defense for Personnel and Readiness will ensure that any necessary conforming changes are made to DoDI 6060.02.

My point of contact is Carolyn Stevens, Director, Office of Family Readiness Policy, who may be reached at (571) 372-0867 or carolyn.s.stevens.civ@mail.mil.

Matt. Egan

Attachment:
As stated



OSD003761-20/CMD004558-20

ATTACHMENT

CHANGE TO ENCLOSURE 3 OF DODI 6060.02

1. CHILD CARE REQUEST AND WAITLIST MANAGEMENT

- a. Request for Care. Families will apply for and request child care through MilitaryChildCare.com (MCC) for all military-operated child care.
- b. Waitlist Management. Installation CDPs will utilize MCC as the method to manage child care spaces, active care options, and offerings.
- c. Declining Care. In the event that a family declines care at an installation where they have requested care through MCC, they will be removed from all current waitlists and must re-request care through MCC.

2. PRIORITY SYSTEM. Priority for care is administered by MCC based on the eligibility requirements defined in Paragraph 4d **of the front matter of this Instruction**. Individual priority is verified at the time of enrollment and annually thereafter.

a. Priority 1, CDP Direct Care Staff, Service Members. The children of CDP Direct Care Staff and Service members will be placed into care utilizing the following guidance:

(1) Priority 1A, CDP Direct Care Staff. The children of Direct Care CDP staff will be placed into care ahead of all other eligible patrons. At no time will the child of a Direct Care CDP staff member be removed from the program to accommodate another eligible patron.

(2) Priority 1B, Single or Dual Active Duty Members; Single or Dual Guard or Reserve Members on Active Duty or Inactive Duty Training Status; and Service Members With a Full-time Working Spouse. The children of patrons that fall under Priority 1B will be placed into care ahead of all other eligible patrons except Priority 1A. At no time will a Priority 1B patron be removed from the program to accommodate any other patron, including 1A patrons. The following order of precedence will be utilized:

- (a) Single or Dual Active Duty members.
- (b) Single or Dual Guard or Reserve Members on Active Duty or Inactive Duty training status.
- (c) Active Duty members with a full-time working spouse.
- (d) Guard or Reserve members on Active Duty or Inactive Duty training status with a full-time working spouse.

(3) Priority 1C, Active Duty Members or Guard or Reserve Members on Active Duty or Inactive Duty Training Status with Part-Time Working Spouse or a Spouse Seeking

Employment. The children of patrons that fall under Priority 1C will be placed into care ahead of all other eligible patrons except for Priority 1A and 1B patrons. Priority 1C patrons may only be supplanted by an eligible patron in Priority 1A or 1B when the Anticipated Placement Time of the Priority 1A and 1B patron exceeds 45 days beyond their Date Care Needed (as indicated in MCC). The following order of precedence will be utilized:

(a) Active Duty members with a part-time working spouse or a spouse seeking employment.

(b) Guard or Reserve members on Active Duty or Inactive Duty training status with a part-time working spouse or a spouse seeking employment.

(4) Priority 1D. Active Duty Members or Guard or Reserve Members on Active Duty or Inactive Duty Training Status with a Spouse Enrolled in a Post-Secondary Institution on a Full-Time Basis. The children of patrons that fall under Priority 1D will be placed into care ahead of all other eligible patrons except for Priority 1A, 1B, and 1C patrons. Priority 1D patrons will be supplanted by an eligible patron in Priority 1A, 1B, or 1C when the Anticipated Placement Time of the Priority 1A, 1B, and 1C patron exceeds 45 days beyond their Date Care Needed (as indicated in MCC). The following order of precedence will be utilized:

(a) Active Duty members with a spouse enrolled in a post-secondary institution on a full-time basis.

(b) Guard or Reserve members on Active Duty or Inactive Duty training status with a spouse enrolled in a post-secondary institution on a full-time basis.

b. Priority 2. DoD Civilians. The children of DoD civilians will be placed into care utilizing the following guidance:

(1) Patrons in Priority 2 will utilize the following order of precedence for placement:

(a) Single or dual DoD Civilian Employees.

(b) DoD Civilian Employees with a full-time working spouse.

(2) DoD civilian patrons may only be supplanted from care by an eligible Priority 1A or 1B patron when the Anticipated Placement Time of the Priority 1A or 1B patron exceeds 45 days beyond their Date Care Needed (as indicated in MCC).

c. Priority 3. Space Available. When all Priority 1 and 2 patrons have been placed into care, CDPs may place additional eligible patrons not identified in Priority 1 and 2 into Space Available care.

(1) Space Available patrons will be supplanted, **with 45 days' written notice**, by an eligible Priority 1 or a Priority 2 patron when the Anticipated Placement Time of the Priority 1 or a Priority 2 patron exceeds 45 days beyond their Date Care Needed (as indicated in MCC).

(2) The following order of precedence will be followed when placing eligible patrons into Space Available.

- (a) Active Duty with non-working spouse.
- (b) DoD Civilian Employees with spouse seeking employment.
- (c) DoD Civilian Employees with a spouse enrolled in a post-secondary educational program on a full time basis.
- (d) Gold Star spouses.
- ~~(e) Active Duty Coast Guard members.~~
- (e) DoD contractors.
- (f) Other eligible patrons.

3. **PRIORITY DETERMINATION.** The following factors will be applied when making priority determinations for eligible patrons.

a. Deactivated Guard or Reserve Members. When a currently enrolled Guard or Reserve member is no longer in an Active Duty status, they must inform the appropriate CDP. The CDP will make a new priority determination for possible continued enrollment. If the member falls to a lower priority category and the child care space is needed for a higher priority patron, the Guard or Reserve member will be given 45 days' written notice regarding their removal from the program.

~~b. Activated Coast Guard. When a Coast Guard member is activated under the Department of Navy, they will be treated as an Active Duty Service member and placed into their respective Priority as outlined in this enclosure.~~

b. U.S. Coast Guard. For the purpose of this Instruction, Coast Guard Service members (Active Duty and Reserve Component) and civilian employees will hold the same priority as equivalent DoD Service members and civilian employees, as detailed above, regardless of the Department in which the Coast Guard is operating.

c. Combat-Related Wounded Warriors in an Active Duty Status. When Service members designated as combat-related wounded warrior in an Active Duty status requires hospitalization, extensive rehabilitation, or significant care from a spouse or care provider and requires full-time child care, they may be placed into Priority 1B. This designation requires installation commander approval (this authority cannot be delegated).

d. Exceptions. Exceptions to the priority system described in this enclosure will only be authorized, in writing, for unique mission-related requirements. Authority for these exceptions lies with the installation commander responsible for the management of the CDP at the installation level.

4. VERIFICATION REQUIREMENTS. The following methods will be utilized to determine eligibility.

a. A working spouse must provide verification of employment such as a Pay/Leave and Earning Statement, Form 1099-MISC, Schedule C (Form 1040 or 1040 SR), or a self-certification statement with an estimated number of hours worked on a weekly or monthly basis. In the event that specific employment situations are not sufficiently documented by these forms, an exception to policy may be granted at the installation commander level.

b. Spouses actively seeking employment must submit verification every 30 days once the child is enrolled in care. The child may be removed from care if the spouse has not gained employment after 90 days. The installation commander may authorize an extension of care beyond 90 days as long as higher priority patrons are not impacted.

c. Spouses enrolled in a post-secondary educational program on a full time basis must verify educational admission or enrollment as a full time student every 90 days once the patron is enrolled in care. If, at the time of verification, the spouse is not currently enrolled, they must show proof of resumption of full time student status within 30 days or the child may be removed from care.

5. NOTIFICATION TO PATRONS. At the time of enrollment, CDPs must notify patrons in Priority 1C and lower, in writing, that they may be supplanted if a patron in a higher priority requires child care. The CDP must also provide notice of discontinued child care to patrons affected a minimum of 45 days before child care termination.

Appendix C

Priority	Service	Installation Name	Facility Type - Primary Purpose	Construction Type	Construction Reason	Does Construction Increase Capacity
#1	USAF	Sheppard AFB	CDC	New Construction	Replacement	Yes
#2	USAF	JBSA - Lackland	CDC	New Construction	Replacement	Yes
#3	USAF	Wright-Patterson	CDC	New Construction	Replacement	Yes
#4	USAF	JBSA - Lackland	CDC	Expansion	Add/Alter	Yes
#5	USAF	Vandenberg AFB	CDC	Expansion	Add/Alter	Yes
#6	USAF	Luke AFB	CDC	New Construction	Replacement	Yes
#7	USAF	Minot AFB	CDC	Expansion	Add/Alter	Yes
#8	USAF	JBSA - Ft. Sam Houston	CDC	New Construction	Replacement	Yes
#9	USAF	JB Charleston	CDC	Expansion	Add/Alter	Yes
#10	USAF	Whiteman AFB	CDC	Expansion	Add/Alter	Yes
#11	USAF	Scott AFB	CDC	New Construction	Additional Facility	Yes
#12	USAF	Peterson AFB	CDC	Expansion	Add/Alter	Yes
#13	USAF	Nellis AFB	CDC	Expansion	Add/Alter	Yes
#14	USAF	Travis AFB	CDC	New Construction	Replacement	Yes
#15	USAF	Hanscom AFB	CDC	New Construction	Additional Facility	Yes
#16	USAF	JBSA - Randolph	CDC	New Construction	Replacement	Yes
#17	USAF	Wright-Patterson AFB	CDC	New Construction	Additional Facility	Yes
#18	USAF	Laughlin AFB	CDC	Refurbishment	Add/Alter	Yes
#19	USAF	MacDill AFB	CDC/SAC Combo	New Construction	Replacement	Yes
#20	USAF	Mt Home AFB	CDC	New Construction	Replacement	Yes
#21	USAF	Seymour-Johnson AFB	CDC	New Construction	Replacement	Yes
#22	USAF	Vance AFB	CDC/SAC Combo	New Construction	Replacement	Yes
#23	USAF	Barksdale AFB	CDC	Expansion	Add/Alter	Yes
#24	USAF	JBSA - Lackland	SAC	Expansion	Add/Alter	Yes
#25	USAF	JBSA - Randolph	SAC	New Construction	Additional Facility	Yes
#26	USAF	Robins AFB	CDC	New Construction	Replacement	Yes
#27	USAF	Mt Home AFB	SAC	Expansion	Add/Alter	Yes
#28	USAF	RAF Lakenheath	CDC	New Construction	Additional Facility	Yes
#29	USAF	Kirtland AFB	CDC	New Construction	Replacement	Yes
#30	USAF	McConnell AFB	CDC	Refurbishment	Add/Alter	Yes
#31	USAF	Feltn AFB	CDC	Refurbishment	Add/Alter	Yes
#32	USAF	Fairchild AFB	CDC	Refurbishment	Add/Alter	Yes
#33	USAF	Tinker AFB	CDC	New Construction	Replacement	Yes
#34	USAF	JBER	CDC	Refurbishment	Add/Alter	Yes
#35	USAF	JBER	CDC	Refurbishment	Add/Alter	No
#36	USAF	JBER	CDC	Refurbishment	Add/Alter	No
#37	USAF	Ramstein AB	SAC	Refurbishment	Add/Alter	No
#38	USAF	Dvess AFB	CDC	Refurbishment	Add/Alter	No
#39	USAF	Hill AFB	SAC	Refurbishment	Add/Alter	No
#40	USAF	Misawa AB	CDC	Refurbishment	Add/Alter	No
#41	USAF	Kadena AB	CDC	Refurbishment	Add/Alter	No
#42	USAF	JBLE - Lanelev	CDC	Refurbishment	Add/Alter	Yes
#43	USAF	Altus AFB	CDC/SAC Combo	Refurbishment	Add/Alter	No
#44	USAF	Vance AFB	CDC/SAC Combo	Refurbishment	Add/Alter	No
#45	USAF	Tinker AFB	CDC/SAC Combo	Refurbishment	Add/Alter	No
#46	USAF	McConnell AFB	CDC/SAC Combo	Refurbishment	Add/Alter	No
#47	USAF	JBAB	CDC	Refurbishment	Add/Alter	No
#48	USAF	JBAB	CDC	Refurbishment	Add/Alter	No
#49	USAF	JBAB	SAC	Refurbishment	Add/Alter	No
#50	USAF	Spangdahlem AB	CDC	Expansion	Add/Alter	Yes

*Tyndall AFB and Andrews AFB each have funded CDC new construction projects in the design/pre-award phase.

Priority	Service	Installation Name	Facility Type - Primary Purpose	Construction Type	Construction Reason	Does Construction Increase Capacity
1	Army	USAG-HI (Alamau)	CDC	New Construction	Additional Facility	Yes
2	Army	Wainwright	CDC	New Construction	Additional Facility	Yes
3	Army	USAG-HI (Scholfield)	CDC	New Construction	Additional Facility	Yes
4	Army	Joint Base Myer-Henderson Hall	CDC	New Construction	Additional Facility	Yes
5	Army	Rock Island Arsenal	CDC	New Construction	Replacement	Yes
6	Army	Fort Leavenworth	CDC	New Construction	Additional Facility	Yes
7	Army	Fort Jackson	CDC	New Construction	Replacement	No
8	Army	JBLM	CDC	New Construction	Replacement	Yes
9	Army	USAG Stuttgart - Panzer Barracks	SAC	Refurbishment	Replacement	Yes
10	Army	JBLM	CDC	New Construction	Additional Facility	Yes
11	Army	Fort Campbell	CDC	Refurbishment	Additional Facility	Yes
12	Army	USAG Stuttgart - Panzer Barracks	CDC	New Construction	Replacement	Yes
13	Army	Fort Benning	CDC	Refurbishment	Add/Alter	No
14	Army	Fort Benning	CDC	Refurbishment	Add/Alter	No
15	Army	Fort Campbell	CDC	Refurbishment	Add/Alter	Yes
16	Army	Fort Stewart	CDC	Refurbishment	Add/Alter	Yes
17	Army	JBLM	SAC	New Construction	Additional Facility	Yes
18	Army	USAG-HI	CDC	Refurbishment	Add/Alter	Yes
19	Army	USAG Wiesbaden-Hainenberg	CDC	New Construction	Replacement	Yes
20	Army	Fort Carson	CDC	New Construction	Additional Facility	Yes
21	Army	USAG Rheinland-Pfalz	CDC	New Construction	Additional Facility	Yes
22	Army	USAG Bavaria-Grafenwoehr	CDC	Expansion	Add/Alter	Yes
23	Army	USAG Bavaria-Hohenfels	CDC	Expansion	Add/Alter	Yes
24	Army	Tuma Proving Ground	CDC	Refurbishment	Add/Alter	Yes
25	Army	JBLM	CDC	Refurbishment	Add/Alter	No
26	Army	JBLM	CDC	Refurbishment	Add/Alter	No
27	Army	Fort Gordon	CDC	Expansion	Add/Alter	Yes
28	Army	USAG Rheinland-Pfalz Baumholder	SAC	Expansion	Add/Alter	Yes
29	Army	Fort Gordon	CDC	New Construction	Additional Facility	Yes
30	Army	Fort Campbell	CDC	New Construction	Additional Facility	Yes
31	Army	USAG Stuttgart - Patch Barracks	CDC	New Construction	Additional Facility	Yes
32	Army	Fort Polk	CDC	New Construction	Additional Facility	Yes
33	Army	USAG Rheinland-Pfalz Baumholder	CDC	Refurbishment	Add/Alter	No
34	Army	Fort Gordon	SAC	New Construction	Replacement	No
35	Army	Fort Stewart	CDC	Refurbishment	Add/Alter	No
36	Army	KNOX	CDC	Refurbishment	Replacement	No
37	Army	Fort Irwin	SAC	New Construction	Add/Alter	No
38	Army	Fort Lee	CDC	Refurbishment	Replacement	No
39	Army	Fort Lee	SAC	New Construction	Add/Alter	No
40	Army	Fort Leavenworth	CDC	Refurbishment	Add/Alter	No
41	Army	USAG Humphreys	SAC	Refurbishment	Add/Alter	No
42	Army	Fort Stewart	CDC	Refurbishment	Replacement	No
43	Army	Fort Stewart	CDC	Refurbishment	Add/Alter	No
44	Army	Fort Lee	CDC	Refurbishment	Replacement	No
45	Army	Belvoir	CDC	Refurbishment	Add/Alter	No
46	Army	Belvoir	SAC	Refurbishment	Add/Alter	No
47	Army	Bragg	CDC	Refurbishment	Add/Alter	No
48	Army	Bragg	CDC	Refurbishment	Add/Alter	No
49	Army	Gordon	SAC	New Construction	Additional Facility	Yes
50	Army	Belvoir	CDC	Refurbishment	Add/Alter	No

Priority	Service	Installation Name	Facility Type - Primary Purpose	Construction Type	Construction Reason	Does Construction Increase Capacity
#1	USN	Kitsap, NB	CDC	New Construction	Replacement	Yes
#2	USN	Pearl Harbor-Hickam, JB	CDC	Expansion	Add/Alter	Yes
#3	USN	Little Creek-Fort Stov. JEB	CDC	New Construction	Additional Facility	Yes
#4	USN	San Diego, NB	CDC	New Construction	Additional Facility	Yes
#5	USN	Norfolk, NS	CDC	New Construction	Additional Facility	Yes
#6	USN	Washington, NSA	CDC	New Construction	Additional Facility	Yes
#7	USN	Oceana, NAS	CDC	New Construction	Additional Facility	Yes
#8	USN	Pearl Harbor-Hickam, JB	CDC	New Construction	Additional Facility	Yes
#9	USN	San Diego, NB	CDC	New Construction	Replacement	Yes
#10	USN	Jacksonville, NAS	CDC	New Construction	Additional Facility	Yes
#11	USN	Whidbey Island, NAS	CDC	New Construction	Replacement	Yes
#12	USN	Norfolk, NSY	CDC	New Construction	Replacement	Yes
#13	USN	Annapolis, NSA	CDC	New Construction	Replacement	Yes
#14	USN	Little Creek/Ft Stov. - Wallops	CDC	New Construction	Additional Facility	Yes
#15	USN	Panama City, NSA	CDC	New Construction	Replacement	Yes
#16	USN	Great Lakes, NS	CDC	New Construction	Replacement	Yes
#17	USN	China Lake, WPS	CDC	New Construction	Replacement	Yes
#18	USN	Pearl Harbor-Hickam, JB	CDC	New Construction	Replacement	Yes
#19	USN	Whiting Field, NSA	CDC	New Construction	Replacement	Yes
#20	USN	Ventura, NB	CDC	Expansion	Additional Facility	Yes
#21	USN	Portsmouth, NSY	CDC	Expansion	Replacement	Yes
Priority	Service	Installation Name	Facility Type - Primary Purpose	Construction Type	Construction Reason	Does Construction Increase Capacity
#1	USMC	MCB Camp Pendleton	CDC	New Construction	Additional Facility	Yes
#2	USMC	MCB Quantico	CDC	New Construction	Replacement	Yes
#3	USMC	MCRD San Diego	CDC	Refurbishment	Add/Alter	Yes

Appendix D



PERSONNEL AND
READINESS

OFFICE OF THE UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-4000

SEP - 6 2019

MEMORANDUM FOR UNDER SECRETARY OF DEFENSE FOR ACQUISITION AND
SUSTAINMENT
ASSISTANT SECRETARY OF THE ARMY FOR MANPOWER
AND RESERVE AFFAIRS
ASSISTANT SECRETARY OF THE NAVY FOR MANPOWER
AND RESERVE AFFAIRS
ASSISTANT SECRETARY OF THE AIR FORCE FOR MANPOWER
AND RESERVE AFFAIRS

SUBJECT: Unauthorized Child Care Homes on Military Installations

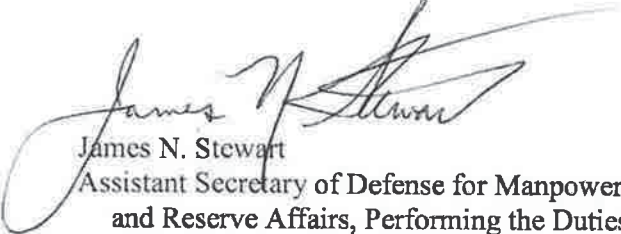
In light of the recent tragic death of an infant cared for in an unauthorized child care home at Aliamanu Military Reservation in Hawaii, I feel compelled to address unauthorized child care.

The Department's position on unauthorized child care in either Government-owned or Public-Private Venture housing areas is clear: We do not condone child care that is unauthorized and/or unregulated. DoD Family Child Care (FCC) Standards of Operation are found in Department of Defense Instruction (DoDI) 6060.02, "Child Development Programs." This instruction assigns the responsibility for regulating the FCC program to the installation, and clearly states that such care is not permitted without a home inspection, care provider training, and approval by the installation commander. In addition, installations must have processes in place to follow-up and investigate any reports of unauthorized child care. These processes include visiting the child care home, disseminating information about the DoD FCC program, and providing a written demand to cease the child care operation until the care provider becomes certified. In the event an unauthorized home-based child care provider refuses to cease providing child care, once notified, it is within the installation leadership's authority to revoke access to installation housing to that provider.

I am fully aware that child care shortfalls, specifically in infant and toddler care, continue to be a national problem, and therefore, a concern for our military families. My staff continues to work with each of the Military Services to address the child care needs of our families. Despite the lack of child care in certain locations, we cannot permit unauthorized child care on our military installations. We must be diligent in ensuring all reports of unauthorized child care are investigated, and that appropriate measures are taken to ensure these operations cease.

Making certain the children on our military installations are cared for in a safe, healthy, and quality environment must be our highest priority. I ask for your support and commitment to ensure my concerns regarding this incident and reports of unauthorized care across our military installations are communicated to installation leadership at all levels.

My point of contact for this matter is Mr. C. Eddy Mentzer, who can be reached at charles.e.mentzer2.civ@mail.mil or (571) 372-0857.



James N. Stewart
Assistant Secretary of Defense for Manpower
and Reserve Affairs, Performing the Duties
of the Under Secretary of Defense for
Personnel and Readiness