

ExceleRate Subcommittee, Minutes of May 2020 meeting

Thursday, May 21, 2020, 10:30 – 12:30

By conference phone

Present

Amanda Heinz, Anita Ramage, Ashley Nazarak, Barb Volpe, Beata Skorusa, Beth Girardier, Beth Knight, Carie Bires, Carisa Hurley, Cindy Wall, Deborah Chalmers, Debra Clark, Denise Monnier, Donna Emmons, Felicia Crawford, Gail Nelson, Jennifer Alexander, Jenny Metcalf, Lilliam Perez, Marie Masterson, Mary Ottinot, Pat Chamberlain, Pat Twymon, Tamara Sanders-Carter, Teri Talan, Tom Layman, Toni Porter

1. **Welcome and introductions**

The Subcommittee welcomed Dr. Anita Ramage, new ExceleRate Pilot Project Coordinator in the Governor's Office of Early Childhood Development

2. **Minutes of previous meeting**

Donna Emmons moved to approve the minutes of the March 19 meeting. Jenny Metcalf seconded the motion and it passed unanimously.

3. **COVID-19**

The Governor's Office of Early Childhood Development asked the Subcommittee to discuss two COVID-19 related questions and provide feedback. The questions and responses follow:

- (1) If programs are able to open with smaller class sizes and other social distancing restrictions, what do you anticipate would be the **greatest concerns of program management and staff members**? How could the State help mitigate those concerns?

Greatest concerns of program staff and management:

Health

- PPE: Availability and appropriate training
- Guidance on recommended changes for classroom management and teaching practice related to smaller group size, keeping groups separate, and prohibition of regrouping at beginning and end of the day.
- Issues around children or teachers wearing masks
- Pickup & drop off procedures – parents stay outside? Take temperatures?
- What to do if there is a case (immediate and longer-term responses)
- Guidance on busing requirements and covering the extra costs
- Guidance on specialists such as Early Intervention staff coming into classroom-based programs.
- Considerations and procedures for special needs children medically at risk
- How to get in person required trainings such as CPR certification. (American Heart Association has extended CPR certification card dates for 90 days. DHS is working to address this question.)
- Playground usage, specifically around keeping social distancing and use of play structures and cleaning

Workforce

- With more, smaller classrooms, will there be enough teachers?
- If fewer teachers are needed, how to decide which ones to call back to work

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- How to plan for and pay for sufficient staffing if regrouping is not permitted and classrooms must stay open for the full workday. (Some centers are bringing teachers back for part time early morning or late afternoon coverage. Others are retaining full staffing even with fewer children.)
- Protecting staff health, especially high risk.

Funding

- PPE cost
- Staffing costs with fewer children and smaller classes
- Busing costs

Families

- What if more children are enrolled than the program can accommodate under COVID-19 rules?
- Difficulty communicating state mandates to families. They might feel the program is not responding to their needs, without understanding state mandates.
- Supporting parents as their children's teachers, especially if the program no longer has room for a family

Family Child Care

- Funding adequate to remain open
- Added costs such as PPE including new dividers, barriers, etc.
- Loss of staff because part-time is not sufficient
- Staffing to receive children and do health and temperature checks, when staff should be with children already present

How can the State help address those concerns?

- ✓ Funding
- ✓ Guidance on the questions listed above, preferably the same guidance across sectors
- ✓ Information for programs on day care licensing special procedures and monitoring protocols
- ✓ Clear, consistent communication including to parents. Don't leave it to the providers to communicate state mandates and rules.

- (2) Given that program disruptions are likely to continue in some form (children in settings new to them, program's extra attention to social distancing, handwashing and disinfecting, etc.), what changes in our **quality support systems** would be helpful to programs in this environment?

The Subcommittee consensus was that support systems need to adjust their focus and procedures to address the felt and demonstrated needs of children, staff members and parents during this crisis. At least 3 state agencies, ISBES, DHS and DCFS, provide or fund support services for programs. While service providers (training, technical assistance, consultation and coaching) may already be prepared to address current issues, they need to receive a common, cross-sector directive to adjust their services as needed by children, staff members and families in this environment. More specifically:

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Mental health and trauma

- Most children and adults are suffering some trauma. Support service providers could be directed to ask about and watch for social and emotional support needs.
- Programs might want to know how to pursue learning goals in light of health and emotional support needs. Support service providers could be prepared to help them make the necessary adjustments.
- We should give increased focus to the mental health needs of program staff members. It is important to take a strengths-based approach and build confidence of teachers and home providers. They already know a great deal about how to handle health & safety as well as social emotional issues.
- CCR&R agencies, family child care associations and others should be encouraged to address COVID-19 issues and provide mutual support through provider Communities of Practice, director groups and other discussion opportunities. (e.g., Caregiver Connections is hosting weekly Zoom support meetings for providers, led by MH consultants.)

Program assessments and monitoring

- Program assessments (ERS and CLASS) in the ExceleRate Pilot and perhaps more generally could be modified in response to this crisis. (“Assessments should serve the programs, rather than vice versa.”)
 - Is it appropriate to go forward with balanced assessments in this environment? How could we change assessments to be more responsive to current issues?
 - Some ERS items probably conflict with CDC recommendations.
 - ISBE is examining its program monitoring protocols.
 - The YMCA of Metropolitan Chicago has suspended CLASS assessments and is considering these questions. They will share their conclusions.
 - The McCormick Center (ExceleRate assessment team) is compiling info on which assessment items are more or less important based on Covid 19.

Funding

- State agencies should consider increased funding for social and emotional supports and mental health consultation.
- Support services are not effective if programs lack sufficient, stable staffing. Adequate funding for staffing is essential.

4. Update on ExceleRate Child Care Pilot – PDG B5

Tom Layman reported that GOECD has been working closely with DHS to establish how contracts with centers will be structured. Dr. Anita Ramage is on board at GOECD to coordinate activities. Next steps will include working with INCCRRA to establish the Indicators associated with each of the standards being piloted. The McCormick Center will provide orientation, assessments and some consultation with program leaders. The project is roughly on schedule, although there is some chance that the start date of July 1 might have to be adjusted, given uncertainties around COVID-19.

5. Next steps and next meeting

The next meeting will be by conference call on Thursday, July 23 from 10:30 to 12:30. We will consider a workplan focused on family child care quality. Four more people volunteered to participate on a small workgroup on that subject: Pat Twymon, Barb Volpe, Robyn Kelton and Lillian Perez.