

# Rhode Island Early Learning Council

SEPTEMBER 30, 2020

9:00 - 11:00 A.M.

*VIRTUAL MEETING*



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- If you are an appointed Council Member or speaker on the agenda you should have a panelist link. Contact [jcapaldo@rikidscount.org](mailto:jcapaldo@rikidscount.org) if you need help.
  - We have simultaneous 2-way interpretation for this meeting in English and Spanish. Click on the globe in zoom and turn on interpretation. Select English or Spanish.

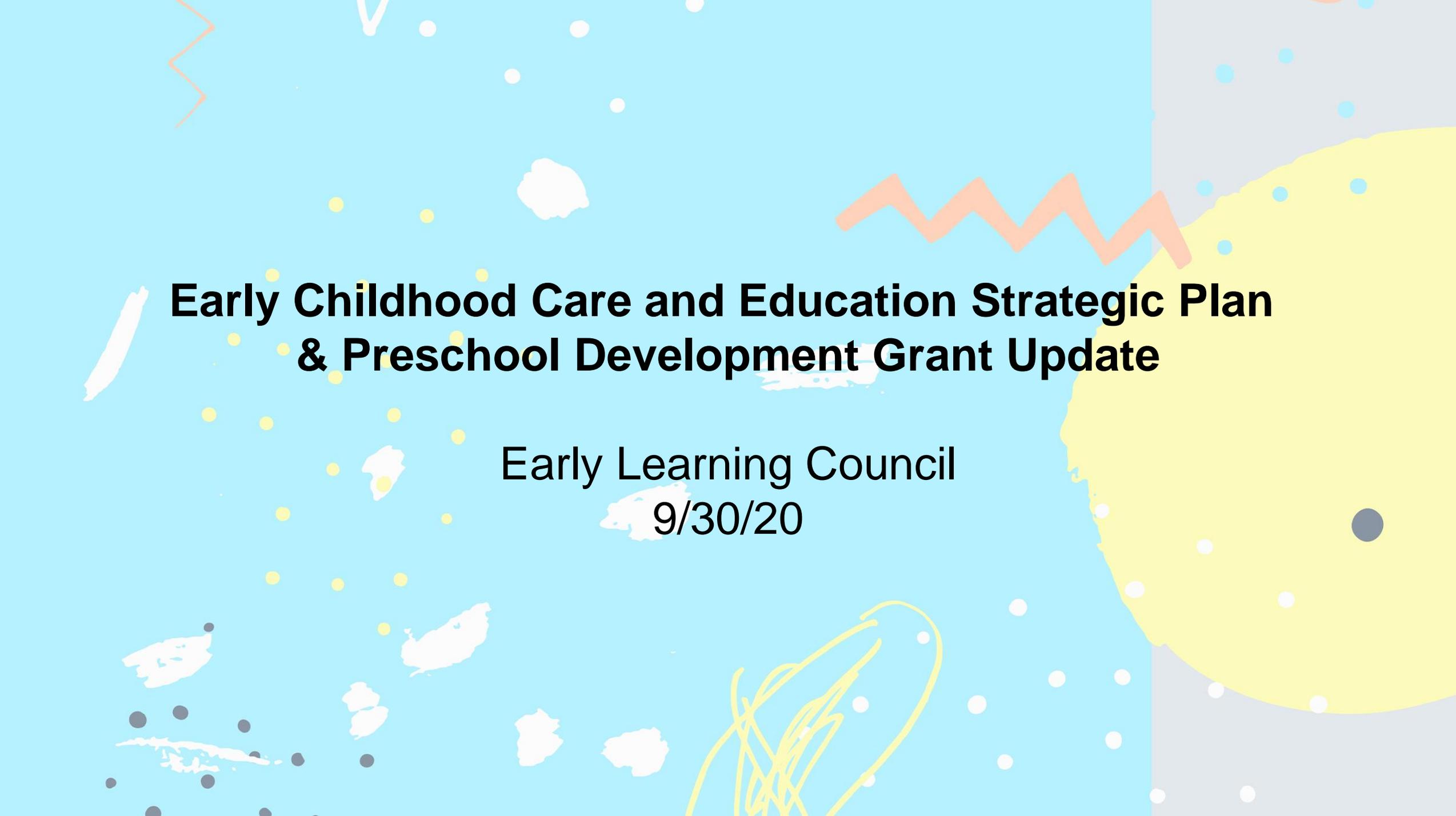
**EARLY LEARNING RI**

# Meeting Agenda

9:00	<b>Welcome, Opening Remarks, and Meeting Overview</b> <ul style="list-style-type: none"><li>Recognizing Leslie Gell &amp; Ready to Learn Providence</li></ul>	<b>Courtney Hawkins, DHS</b> <b>Angélica Infante-Green, RIDE</b> <b>Elizabeth Burke Bryant,</b> Rhode Island KIDS COUNT
9:15	<b>Strategic Plan and PDG Birth to 5 Grant</b> <ul style="list-style-type: none"><li><b>Grant Overview</b></li><li><b>Public Awareness Activities</b></li></ul>	<b>Kayla Rosen, Governor's Office</b> <b>Ashley O'Shea, EOHHS</b>
9:30	<b>Early Years/Early Grades Alignment Work Group</b> <ul style="list-style-type: none"><li>Update on activities to date</li><li>Discussion: prioritizing policy recommendations</li></ul>	<b>Phyllis Lynch, RIDE</b> <b>Mary Varr, RI Head Start Association</b> <b>Celeste Bowler, East Providence Schools</b>
10:00	<b>Family Child Care Policy Priorities Update</b>	<b>Emma Villa, Provider in SEIU 1199</b> <b>Donna Chartier, Family Child Care Homes of RI</b>
10:15	<b>COVID-19 &amp; Child Care</b> <ul style="list-style-type: none"><li>Reopening</li><li>CDC Study from June-July 2020</li><li>RI Child Care Relief Fund/Facilities Fund</li><li>Discussion: What have we learned?</li></ul>	<b>Caitlin Molina, DHS</b> <b>Erin Cox, LISC</b>
10:45	<b>Announcements, Public Comments, &amp; Next Steps</b>	<b>Elizabeth Burke Bryant</b> <b>Courtney Hawkins</b> <b>Angélica Infante-Green</b>

# **Strategic Plan and PDG Birth to 5 Grant Update**

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# **Early Childhood Care and Education Strategic Plan & Preschool Development Grant Update**

Early Learning Council  
9/30/20

# ECCE Strategic Plan Adopted in 2020

**Mission:** Rhode Island's comprehensive focus on Early Childhood Care and Education brings together providers, programs, advocates and families to ensure that our children prenatal through age five have equitable access to high-quality education, health and developmental care, and services and supports needed in order to enter school healthy and ready to succeed.

**Vision:** All Rhode Island children enter kindergarten educationally, social-emotionally, and developmentally ready to succeed, putting them on a path to read proficiently by 3rd grade.

## Guiding Principles:

- **Focus on Vulnerable Populations:** We believe in focusing our work. In doing so, we prioritize actions that will deliver outcomes for our highest-risk children to ensure kindergarten readiness, putting them on a path to reading proficiently by third grade.
- **Inclusive and Diverse Engagement:** We believe our work is best supported through strong, sustained partnerships with families, caregivers, community members, educational institutions and providers. Collectively, we can positively impact outcomes for children.
- **Commitment to a Mixed Delivery Model:** We believe in providing child care and education through a diverse set of programs, services and providers so that young children and families can access the resources they need to thrive, in a setting that works best for them.
- **Workforce Advocacy and Support:** We believe in, and support, the individuals caring for our youngest constituents and support the expansion of programs that help recruit, prepare and retain a high- quality early childhood care and education workforce.
- **Collaborative Leadership:** We believe in the mutual alignment and advocacy of the Governor, her Cabinet, and those agencies representing the health, well-being and education of young children and families, from prenatal and maternal health through to school- aged services, education and support.
- **Alignment of Funding with Impact:** We believe in rigorously pursuing diverse and sustainable funding, while also assessing the impact of our investments against desired outcomes for children. RI commits to refining our strategies and actions based on those finding

# The ECCE Strategic plan has five core objectives to achieve the vision.

## Objectives:

1. Rhode Island's early childhood programs meet high-quality standards for care and education as defined by our Quality Rating and Improvement System. (Lead: **Caitlin Molina**)
2. Children and families can equitably access and participate in the early childhood care, services, and supports that will help them reach their potential and enter school healthy and ready to succeed. (Lead: **Blythe Berger**)
3. All four-year olds in Rhode Island have access to high-quality Pre-K, inclusive of parental choice and student needs. (Lead: **Lisa Foehr**)
4. Secure the quality and delivery of ECCE through increased and sustainable funding and operational improvements (Lead: **Kayla Rosen**)
5. Expand the depth and quality of family and child-level data accessible to and used by agencies, programs, and partners to drive decisions. (Lead: **Kayla Rosen**)

# Our 3-year, \$27M PDG Renewal Grant is helping us achieve our objectives.

Objective	Selection of PDG Activities Advanced in 2020
1: Quality Programs	<ul style="list-style-type: none"><li>• Facilities planning grants (LISC)</li><li>• Pre-service training</li></ul>
2: Equitable Access to Services & Supports	<ul style="list-style-type: none"><li>• Expanded Parents as Teachers by 300 slots</li><li>• Expansion of HEZ Family Support Programs in 7 HEZ's</li><li>• Pilot of Family Navigators program in 6 HEZ's</li></ul>
3: Universal Pre-K	<ul style="list-style-type: none"><li>• Expanded RI Pre-K by more than 300 seats</li></ul>
4: Operations and Sustainability	<ul style="list-style-type: none"><li>• Public awareness campaign</li><li>• Implementing the ECCE Governance structure</li></ul>
5: Data-Driven System	<ul style="list-style-type: none"><li>• Population-level survey about access and barriers to ECCE programs</li></ul>

## Campaign Objective:

Encourage parents of young children to continue to take all necessary steps to ensure their child is on the path toward kindergarten readiness.

Specifically:

- Continue to go to well-visit appointments and get vaccinations
- Continue to use programs that will offer support for, and benefit, children 0-5.

## Audience:

English & Spanish-speaking families with children under 5 who are worried about the pandemic's impact on their children's development, health and happiness.

## Phase 1: Welcoming Providers

Messaging Strategy: Use lighthearted humor to let parents know that they shouldn't wait to bring their child for a well visit.

## Phase 2: How to Go to the Doctor These Days

Messaging Strategy: Remind those who showed interest in the other content what it actually looks like going to the Dr. for well visits during the pandemic.

The campaign has been vetted by local pediatricians and families.

## Next Steps:

Filming next month at PCHC with RIDOH's own Dr. McDonald.



# **Discussion:** **Early Years/Early Grades Alignment**

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# Early Years/ Early Grades Work Group

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Rhode Island Early Learning Council  
September 30, 2020

# Update on Activities

- 1) Subcommittee formed, Co-Chairs Identified; planning with ECS staff
- 2) First meeting 7/30/2020; small group discussions on priority issues
- 3) Second meeting 9/16/2020; further discussing priority issues, developing draft recommendations, initial polling on draft recommendations

# Draft Recommendations and Discussion on Priorities

1. State-level family engagement guidance tied to the state ESSA plan and requirements
2. Provide guidance and technical assistance to utilize developmentally appropriate and culturally responsive instruction
3. Explore ways to increase recruitment, retention, and incentives for the ECE workforce
4. Ensure educator preparation program coursework meets legislative requirements
5. Create creative pathways to obtain early childhood certification and build a more diverse workforce
6. Incentivize or require joint professional development for pre-K and K in RIELDS
7. Create a legislative study committee on data sharing
8. Study family engagement best practices during the pandemic
9. Adopt K-2 formative assessments that are consistent across districts
10. Adopt a statewide K entry profile to be implemented in the first six weeks of school

# Discussion and Input

Think about one recommendation that you believe the state is making progress on and may not be a priority and one recommendation that is addressing a current challenge and should be a priority.

# Draft Recommendations and Discussion on Priorities

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8. Study family engagement best practices during the pandemic
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# What's Next

- ECS staff compiling feedback on recommendations, beginning draft recommendation document
- Sharing draft document with subcommittee ahead of November meeting (date TBD), reviewing and finalizing at meeting
- Presenting final recommendation report to full RI ELC on 12/9

# **Family Child Care Policy Priorities Work Group Update**

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# Work Group

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- Work Group convened by Rhode Island KIDS COUNT with support from Zero to Three and All Our Kin, a nationally recognized nonprofit organization that trains, supports, and sustains family child care educators.
- Goal: Identify next steps policy priorities to build and sustain a high-quality child care system in Rhode Island.
- About 20 participants, including 7 providers, DHS, SEIU Education Support Fund, LISC, Center for Early Learning Professionals, RIAEYC, Ready to Learn Providence, Rhode Island College, and Rhode Island KIDS COUNT.
- 4 monthly zoom meetings (July – October) with simultaneous Spanish-English translation and stipends for providers.
- Product: New Early Learning Fact Sheet with policy recommendations for family child care produced and disseminate in English and Spanish to child care providers, policymakers, and other stakeholders.

# Family Child Care in Rhode Island

- Approximately 450 licensed family child care providers in Rhode Island serving children from 6 weeks through age 12+. A popular choice for families with infants/toddlers and school-age children.
- In line with a national trend, the number of licensed providers in Rhode Island declined 62% since 2005.
- Most are licensed to serve 6 to 8 children. A few are licensed to serve up to 12 children. Many employ staff/family members as assistants.
- Approximately 60-70% of providers in RI speak Spanish as their primary language.
- Only a few have succeeded in achieving a 4 or 5 star rating in BrightStars. None have become Head Start or Early Head Start partners or RI Pre-K providers.
- In 1978, providers formed a non-profit Family Child Care Homes of Rhode Island to support networking and professional development.
- In 2013, legislation passed allowing child care workers who receive state assistance the ability to unionize and to negotiate payment rates with the state and support for professional development. In Rhode Island, SEIU 1199 represents family child care providers who serve children in the Child Care Assistance Program.

# Draft Policy Recommendation 1

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## **Stabilize the family child care system/ Estabilizar el sistema de cuidado infantil familiar.**

**Goal:** Ensure family child care providers have the resources and support they need to survive the pandemic and continue to operate so they can support children, families, and the economy.

- Maintain the temporary rate increase and policies to pay CCAP subsidies based on enrollment and not attendance.
- Help all providers (those serving and not serving CCAP) access adequate health insurance for themselves and their employees.
- Help all providers (those serving and not serving CCAP) survive temporary closures for quarantine with operating stipends and funding to cover paid staff sick time.
- Help all providers (those serving and not serving CCAP) access rapid COVID-19 testing for children, staff, and family members.

# Draft Policy Recommendation 2

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## **Invest in staffed family child care networks. / Invertir en redes de cuidado infantil familiar dotadas de personal.**

**Goal:** Dedicate funds to create a system of networks that connect family child care providers to their peers and to dedicated staff who work to support their growth and development.

- Create staffed family child care networks statewide to help all providers.
- Provide adequate funding for networks to employ qualified staff to provide individualized, relationship-based coaching to providers on business practices, family engagement, quality improvement, curriculum and child assessment, and health and safety.
- Use these networks to enhance communication and support for family child care providers.

# Draft Policy Recommendation 3

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**Create a comprehensive, mixed-delivery early care and education system. / Crear un sistema de cuidado y educación tempranos integral y diversificado.**

**Goal:** Ensure family child care providers are seen as a critical, valuable part of Rhode Island's early childhood education system, and are included and supported equitably in policy and in practice.

- Expand efforts to recruit new family child care providers in areas of high need.
- Recruit educators with child development and early education knowledge and experience to become family child care providers. Business coaching and adequate funding is needed to make family child care a viable and dependable source of income for educators.
- Maintain support for TEACH scholarships, the RI College bilingual cohort, and other strategies to provide access to higher education credentials in Spanish and English.
- Develop strategies to include family child care as RI Pre-K providers and as Head Start and Early Head Start Partners (maybe through staffed networks).

# **Discussion: COVID-19 and Child Care**

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# COVID-19 Child Care Reopening

October 2020 RI Department of Human Services Update

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Caitlin Molina, Assistant Director Child Care  
Rhode Island Department of Human Services

RHODE  
ISLAND

# Child Care Reopening Update

**“I’m inspired by how we’ve come together during this crisis. We’ve come so far and worked so hard. In fact, I’ve never been more proud to be a Rhode Islander.” - Governor Gina M. Raimondo**

**01**

## **Actions Taken**

For Families & Child Care Providers

**02**

## **By the Numbers**

Reopening, Closures & News Sites

**03**

## **COVID-19 Impact**

CDC Study & DHS Survey

**04**

## **Enforcement**

Unannounced Monitoring, Corrective Action Trends & COVID-19 Reviews

# Actions: Child Care



Child Care is one of the basic needs. DHS' Office of Child Care is committed to helping families and providers before, during and after the COVID-19 pandemic.

For families during COVID-19, RI:

01

Waived all family copays for Child Care Assistance Program (CCAP) families

02

Is waiving allowable absence policy for CCAP families (currently defined as 5 days/month)

03

Is navigating a federal policy adjustment to reinstate families.

04

Regulated summer camps to ensure safe environments. More than 150 summer camp programs were approved to serve 19,000 youth.

DHS recognized the need to thoughtfully reopen safe and developmentally appropriate child care to both support working families and ensure the economic viability of our valued providers, and did so on June 1<sup>st</sup> with help for providers, including:

- **New regulations** and plan submission process
- A **temporary rate enhancement** to support reopening costs
- Payments to **reimburse** providers who care for CCAP children **based on enrollment rather than by attendance**
- **Free PPE** resources and a one-stop shopping website for additional PPE, cleaning supplies and other needs
- The **Child Care Provider Relief Fund, \$5M CARES Act** funding, to provide **critical resources necessary to help sustain the State's essential child care infrastructure**



# By the Numbers: Reopening

## **Pre-COVID DHS-Licensed Child Care Provider Capacity as of March 1<sup>st</sup> 2020: 100%**

Provider Type	Number of DHS-Licensed Providers	Number of Slots
Family Child Care	465	3,084
Center-Based Child Care	446	32,435
Total	911	35,519

## **COVID DHS-Licensed Child Care Provider Capacity as of June 30<sup>th</sup> 2020: 70%**

Provider Type	Number of DHS-Licensed Providers	Number of Slots
Family Child Care	374	2,433
Center-Based Child Care	257	15,752
Total	631	18,185

## **COVID DHS-Licensed Child Care Provider Capacity as of September 9<sup>th</sup> 2020: 87%**

Provider Type	Number of DHS-Licensed Providers	Number of Slots
Family Child Care	402	2,531
Center-Based Child Care	371	18,685
Total	773	22,963

# By the Numbers: Reopening (Cont.)

**Anticipated COVID DHS-Licensed Child Care Provider Capacity as of October 1, 2020: 97%** *(due to programs in LEA's with unclear opening plans)*

Provider Type	Number of DHS-Licensed Providers	Number of Slots
Family Child Care	430	2,755 <i>(approximately)</i>
Center-Based Child Care	411	22,085 <i>(approximately)</i>
<b>Total</b>	<b>841</b>	<b>24,840</b>

## Providers Who have Not Submitted Reopening Plans Yet:

Provider Type	Number of DHS-Licensed Providers	Reported Reason for Not Submitting a COVID-19 Reopening Plan
Family Child Care	32	All have not yet communicated plans for reopening.
Center-Based Child Care	78	45 reside in LEAs. Those LEAs have not yet authorized their reopening. 33 have not yet communicated plans for reopening.
<b>Total</b>	<b>110</b>	

# By the Numbers: Closures/New Sites During COVID-19

## Closures

Provider Type	Number of Closures
Family Child Care	22
Center-Based Child Care	6*
Total	28

Family child care providers who have permanently closed permanently since March 1<sup>st</sup> 2020 report doing so for the following reasons:

- 1) Retirement
- 2) Pre-existing, underlying health conditions potentially impacted by a COVID-19 diagnosis

\*50% of the child care center closures are slated to reopen under new leadership and will remain DHS-licensed child care facilities. Centers who have permanently closed reporting doing so due to financial concerns which predate COVID-19.

## New Sites

Provider Type	Number of New Sites	Number of Pending Applications
Family Child Care	3	5
Center-Based Child Care	6	6
Total	9	11

# COVID-19 Impact: CDC Study

## Limited Secondary Transmission of COVID-19 in Child Care in RI, from June 1-July 31<sup>st</sup> 2020

DHS and RIDOH partnered with the CDC to better understand, and report on, incidents of COVID-19 in DHS-licensed child care programs.

### Key Findings:

- **High compliance with RI DHS requirements** was observed during **127 unannounced monitoring visits**.
- During June 1- July 31, RIDOH conducted investigations of any reported COVID-19 case in a child or adult, including staff members, parents, or guardians, present at a child care program.
- From June 1-July 31<sup>st</sup>, **33 persons had confirmed cases of COVID-19 in 29 child care programs** in Rhode Island
- **20 of the 29 child care programs had a single COVID-19 case reported with no apparent secondary transmission**. 5 programs had 2-5 cases; however, RIDOH excluded child care-related transmission because of the timing of symptom onset

<https://www.cdc.gov/mmwr/volumes/69/wr/mm6934e2.htm>

<https://www.washingtonpost.com/health/2020/08/21/coronavirus-child-care-protocols/>

# COVID-19 Impact: DHS Survey

DHS is partnering with Public Consulting Group (PCG) to deploy a series of **3 statistically valid surveys** (October, November, December) to assess the fiscal impact on child care programs during the pandemic.

The first survey will “go-live” on **October 5<sup>th</sup>**. Providers who participate are eligible to receive a \$100 gift card.

DHS will **evaluate the fiscal impact on child care programs** by soliciting data on the following **key metrics**:

- Child enrollment & attendance
- Staffing (return, retention & compensation)
- Procurement of PPE, materials and equipment

These surveys will provide DHS, community partners and state and federal leaders with **key insight into the overall health, and sustainability of RI’s child care system**. These surveys will also serve as a **foundation for RI’s federally required triennial Market Rate Survey in 2021**.

DHS assembled an Advisory Group to support development and implementation of this survey series. Members participated in a design session on Friday, September 18<sup>th</sup>.

# Enforcement: Unannounced Visits

**Pre-COVID 2019-2020:** DHS Child Care Licensing team conducted **160 unannounced monitoring visits** during this time frame, visiting **70 centers** and **90 family child care providers**.

Provider Type	Corrective Action Findings; Risk Levels			
	High-Risk	Moderate-Risk	Low-Risk	Total
Family Child Care	286	172	3	461
Center-Based Child Care	132	79	59	270

**Reopening 6.1.20-8.31.20:** The DHS Child Care Licensing team conducted **219 unannounced monitoring visits** during this time frame, visiting **90 centers** and **129 family child care providers**.

Provider Type	Corrective Action Findings; Risk Levels					
	High-Risk			Moderate-Risk	Low-Risk	Total
	Non-COVID	COVID	Total			
Family Child Care	149	23	172	71	0	243
Center-Based Child Care	63	4	67	46	8	121

# Enforcement: Corrective Action Trends (Pre-COVID)

## Five Most Common Corrective Action Findings

### Family Child Care

Regulation	Description	Risk Level
2.3.1.F.	Written Work Schedules Not Posted	High-Risk
2.3.3.N.1.	Electrical Outlets Not Covered	High-Risk
2.3.3.S.2.	Emergency Phone Numbers Not Posted (911, Fire, etc.)	High-Risk
2.3.4.A.1.	Annual Physical Form Missing Child Files	Moderate-Risk
2.3.4.B.1	Notarized Emergency Treatment Forms Not on File	High-Risk

### Center-Based Child Care

1.8.L.6.	Unable to Provide Documentation of Regular Safety Drills Being Conducted	High-Risk
1.8.C.3.	Daily Medication Log is Not Completed for Children Requiring Medication	High-Risk
1.8.G.7.	Cleaning & Sanitation Schedule is Not Posted	High-Risk
1.8.K.3.	Programs Serving Infants & Toddlers Did Not Have a Choke Prevention Gauge	High-Risk
1.12.F.7.C.	Annual Health Exam Record Missing from Child Files	Moderate-Risk

# Enforcement: Corrective Action Trends (Reopening)

## Five Most Common Corrective Action Findings

### Family Child Care

Regulation	Description	Risk Level
2.3.3.V.2.	Cleaning Materials are Within a Child's Reach & Not Locked In a Cabinet	High-Risk
2.3.3.S.3.	Names & Phone Numbers of Parents & Emergency Contacts are Not Kept Near the Phone	High-Risk
2.3.3.F.1.	Outdoor Play Area Has Hazards or is Missing a Fence	High-Risk
2.3.4.A.1.	Annual Physical Form Missing Child Files	Moderate-Risk
2.3.4.A.2.	Child's File Missing Immunization Records	Moderate-Risk

### Center-Based Child Care

1.7.H.1.	Overall Health & Safety of the Facility & Grounds (Ceiling tiles being cracked, holes in wall or door, items blocking an egress)	High-Risk
1.12.F.7.C	Child Files Missing Annual Health Examination	Moderate-Risk
1.8.G.3	Toxic Substances Being Left Out and Accessible to Children	High-Risk
1.12.F.7.D.	Immunization Record Not Found in Child's File	Moderate-Risk
1.12.F.10.G.	Written Authorization from Parent or Guardian for Emergency Medical Treatment Not Found in Child File	Moderate-Risk

# Enforcement: COVID-19 Reviews

## RIAEYC/BrightStars Scope of Work; September 1-December 31, 2020

Effective September 1, 2020, RIAEYC BrightStars' staff will be conducting COVID-19 Reviews of DHS-licensed child care facilities. RIAEYC will be conducting these reviews in close partnership with DHS Child Care Licensors and will offer these as a hybrid approach to delivering quality improvement strategies/tips and processing a provider's BrightStars' Renewal with reviewing a provider's compliance to the COVID-19 health and safety regulations.

### Example of a RIAEYC COVID Review

Child Care Center and School Age Program Regulations Child Care Center, Family Child Care Home and Group Family Child Care Home Licensing Changes Due to COVID-19 218-RICR-70-00-8			
Section	Requirement Description	Compliant Status	
10.4.4.B <i>(High Risk)</i>	During COVID-19, the provider must post their COVID-19 planning a visible area directly next to the license at all times.	<input type="checkbox"/> Compliant <input type="checkbox"/> Non-Compliant	<input type="checkbox"/> Corrected Onsite
10.1.3.A <i>(High Risk)</i>	Visitors and/or observers should be discouraged from visiting the child care facility during the COVID-19 crisis to limit the possible exposure to the children in care and to the child care staff. <ol style="list-style-type: none"> <li>Any individual who must visit shall document their arrival and departure time on a visitor log that must be kept onsite and available.</li> </ol>	<input type="checkbox"/> Compliant <input type="checkbox"/> Non-Compliant  Non-Compliance Detail <input type="text"/>	<input type="checkbox"/> Corrected Onsite

# Questions/Concerns

**Please Contact the DHS Child Care Licensing team**

**[DHS.ChildCareLicensing@dhs.ri.gov](mailto:DHS.ChildCareLicensing@dhs.ri.gov)**

*Rhode Island*

# Child Care Provider Relief Fund



LSC

# Grant Overview

The State of Rhode Island has approved **\$5,000,000** to help sustain the State's essential child care infrastructure through emergency relief grants.

Funds must be used for actions taken to respond to the public health emergency by addressing a public health need and business interruptions **due to COVID-19 related closures**.



# Grant Uses



Grants are available in amounts up to **\$150,000** in total per location\* for the following two uses:

1. Small **capital improvements** necessary to facilitate compliance with COVID-19-related health and safety measures
2. Offset **occupancy costs** incurred during time of reduced revenue due to COVID-19 related closure or reduced enrollment; includes expenses such as rent/mortgage, utilities, and costs for disinfection of facilities in response to the COVID-19 public health emergency.

***\*Providers who operate multiple locations needed to complete separate applications for each site.***

# Eligibility Criteria

**Non-profit and for-profit licensed child care or early learning providers, including family child care providers, are eligible as long as they meet the following criteria:**



Approved by DHS to reopen on or before August 17th, 2020 under the new COVID-19 Child Care Licensing Regulations and commits to remaining open beyond December 2020.

Provides information on all pursuits of federal aid/funding.\*

Participates in the Child Care Assistance Program (CCAP), or demonstrates commitment to accepting CCAP in the future (submits an application at the time of request).

Participates in the state's Quality Rating and Improvement System, BrightStars (or commits to participating in the future and submits an application at time of request).

Is a registered business with the Secretary of State OR if you are a sole proprietor, registered with your City/Town.

Can provide most recent 2 years of approved business financials (independent audits, account reviews, or tax returns) and a current, year-to-date financial statement if/when requested.

Can comply with any relevant project and financial reporting requirements, including necessary backup required to document expenses incurred.

Can provide a Data Universal Numbering System, or "DUNS," number for the entity applying.

*\* Child Care Provider Relief Fund grants may NOT be used if proposed use has already been or will be reimbursed under any other federal program. There can be no double-dipping of federal funds.*

# Priority Areas

**Priorities considered in this competitive application process include:**

- Provides services for **infants and toddlers**
- Reports and is able to document **less than 65% utilization** for reopening slots
- Located in one of Rhode Island's **four urban cities**: Central Falls, Pawtucket, Providence, or Woonsocket
- Can demonstrate the **capacity to manage the activities** proposed during the eligible time frame



# Overview of Applications

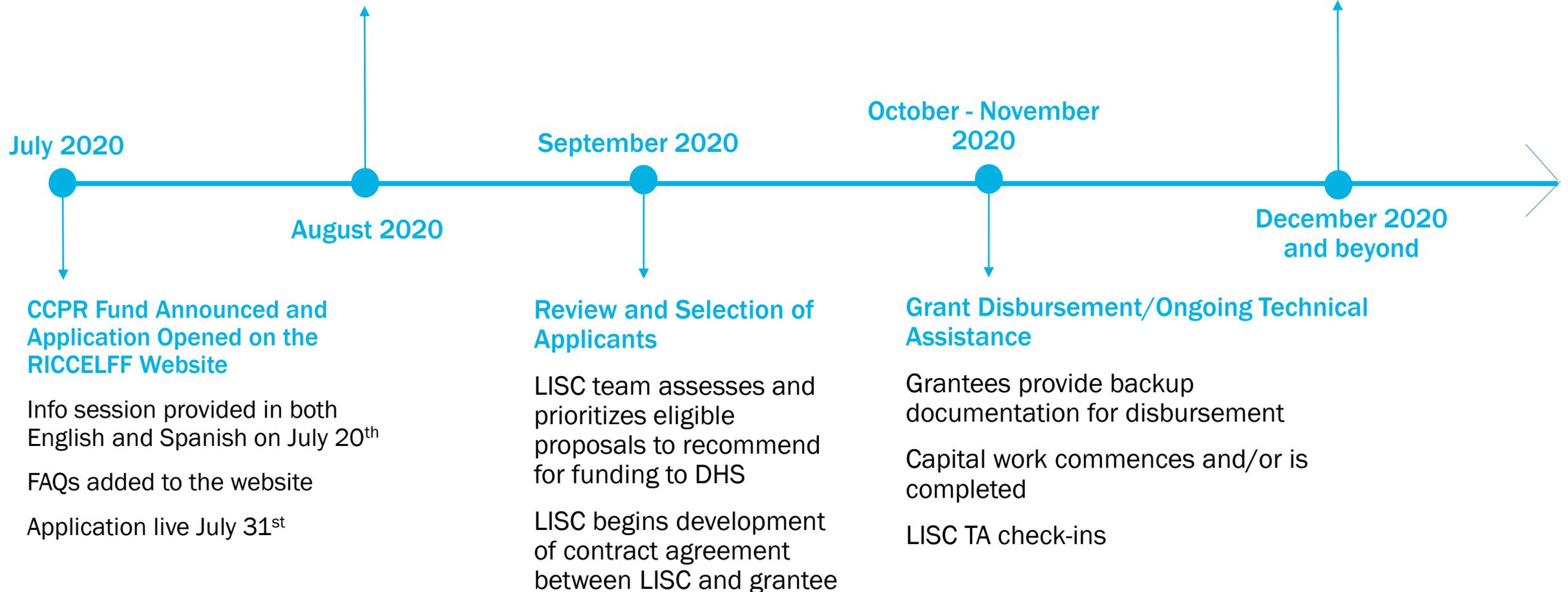
## Application Close and Technical Assistance

Ongoing TA to any groups who had questions relative to the grant

Application closed on August 31<sup>st</sup> (any ineligible or incomplete groups had until September 11<sup>th</sup> to resubmit)

## Grant Closeout

Grantees will provide LISC with final documentation to close out grant agreement



# Overview of Applications

Number of Inquiries to date by Child Care Providers on the Fund (9/18/20)

Approximately 740 (over 525 emails and 215 phone calls) and counting

Provider Type	Number of Applications Received	Eligibility Status (see key on next slide) as of 9/17/20	LISC TA Needed
Center-Based (Single Site)	51 Applications	45 Eligible/4 Ineligible/2 incomplete	25 Applicants
Center-Based (Multi-Site/Multi Social Service Agency)	92 Applications	90 Eligible/2 Ineligible	72 Applicants
School-Based	2 Applications	1 Eligible/1 Ineligible	2 Applicants
Family Child Care	120 Applications	75 Eligible/40 Not eligible/5 Incomplete	56 Applicants
<b>Total</b>	<b>265 Applications</b>	<b>211 Eligible Applications</b>	

Funding Purpose	Number of Applications	Proposed Use of Capital Funding	Number of Proposals*
Capital Funds	101 Applications	Small-scale renovations	183 Proposals
Occupancy Costs	36 Applications	Equipment purchases	150 Proposals
Combination*	128 Applications	Purchase of supplies/PPE	91 Proposals

\*Applicant has applied for both occupancy cost reimbursement and capital improvements

\*Please note that most applicants are proposing a combination of uses for capital funding

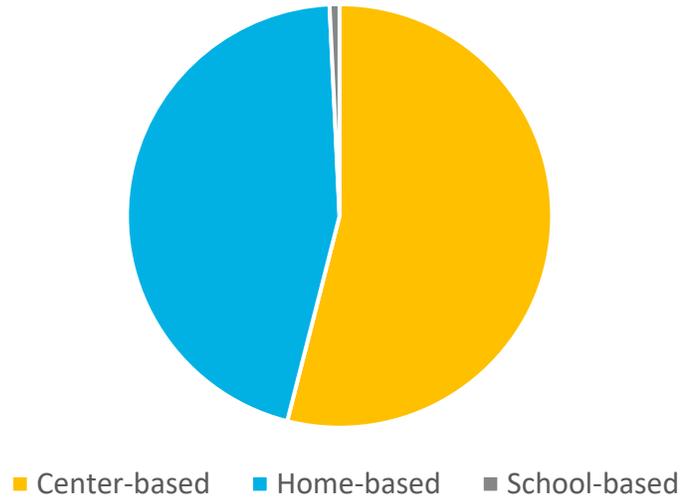
# Overview of Applications

Over \$17M in overall requests

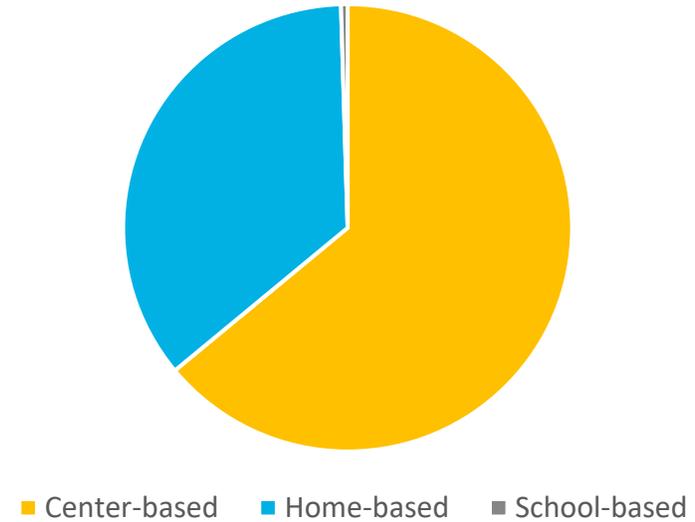
Applicants that met initial eligibility requested \$10M, prior to internal review and verification

Only \$5M in funding available to award

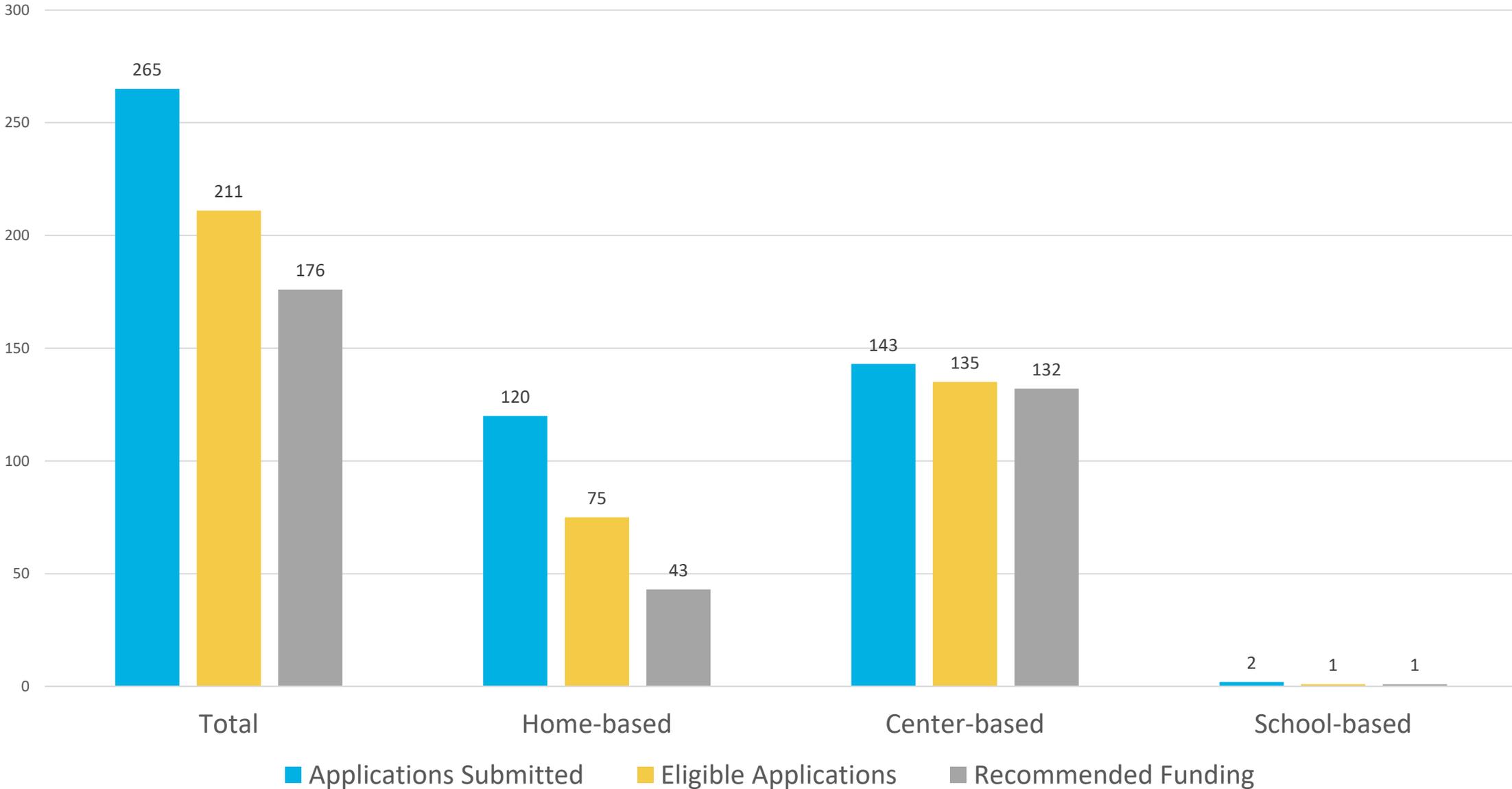
Total Applications Submitted



Eligible Applications



# Overview of Applications



# Preschool Development Grant – Facilities Planning

Preschool Development Grant (PDG) Facility Planning grants are available for predevelopment and feasibility activities such as professional architectural design services; site analysis; engineering studies; legal services (ex: hiring a land use attorney to pursue a change in zoning for allowable use); and environmental survey and review. The goal of this grant is to help centers develop or expand child care spaces.

Eligible applicants for the PDG facilities planning grants include:

- both non-profit or a for-profit organizations;
- child care providers with a commitment to provide early childhood care and education to low-income families with a public subsidy
- real estate developers with commitment to offering a favorable, long term lease or a lease to own scenario and is partnered with or is committed to partnering with an eligible childcare provider.

Other requirements include:

- organization must have a DUNS Number
- organization should have the ability to comply with requirements of a federally funded facility project (including written procurement policy, maintenance of financial reports to show and account for the uses of grant funds, provision of audited financials or acceptable alternative, etc.)

We have currently identified 5 child care providers and 1 community development corporation to engage in a planning project



Questions?  
Comments?



LSC

# Public Comment

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## 2020 Scheduled Meetings

Wednesday, December 9, 2020, 9:00 to 11:00 a.m.

[www.earlylearningri.org](http://www.earlylearningri.org)