



Program Policy & Strategy Committee Meeting  
June 28, 2011; 3:30 p.m. – 5:30 p.m.  
Early Learning Coalition of Miami-Dade/Monroe  
Board Room  
2555 Ponce De Leon Blvd Suite 500  
Coral Gables, FL 33134

**Committee Attendees:** The Hon. Cindy Lederman; David Williams, Jr. (via conference call); Shaleen Fagundo; Modesto Abety; Jacqui Colyer; Ramiro Moreno (via conference call); Ann Karen Weller (via conference call)

**Staff Attendees:** Evelio Torres (CEO); Jackye Russell; Mary Williams (via conference call); Kristina Alonso; Milton Silvera; Sandra Gonzalez; Bethany Sands

**General Attendees:** Linda Carmona (AECE); Ardene Estrada (Miami-Dade County); Susan Tucker (YMCA of Greater Miami); Brian Sheaffer (YMCA); Maria Escobar (Miami-Dade County); Angela Davis (Miami-Dade County); Angela Messina (Miami-Dade County); Alfred Sanchez (YMCA); Jackie Romillo (Citrus Health Network); Evelyn Jordan (Miami-Dade County); Joan Farr (Miami-Dade County); Carlos Garcia (GSK)

### I. Welcome and Introductions

- C. Lederman welcomed the committee, staff and attendees.
- A quorum was established with six (6) voting members.

### II. Approval of March 29<sup>th</sup> Minutes

- S. Fagundo moved to approve the March 29, 2011 minutes.
- J. Colyer seconded the motion.
- Motion was unanimously passed.

### III. CEO Update

- E. Torres shared the CEO Update.
  - Facing several budget reductions, we are working very closely with CDS on how to manage the reduction of the number of children enrolled in the School Readiness program. The Board agreed that this would not affect summer care. The disenrollment policy requires that we start with the oldest children, beginning September 1<sup>st</sup>. We have been working with our partners to see how we can help these children in other ways. The Children's Trust is looking at reprioritizing in order to potentially reallocate some of the funds to help serve some of the school-age children. Our Kids has also allocated about \$300,000 for summer camps. We are also working very closely with AWI who may be able to distribute approximately \$11 million statewide, with approximately \$2 million being allocated to Miami-Dade County. There is no time frame for this yet.



- There are approximately 11,000 children ages 0-5 on the waitlist at the present time. Should slots become available, Miami-Dade County has been asked to have a ready pool of children available to place into care. We have also asked the state for \$5 million but may be able to get only \$2 million this fiscal year. If coalitions cannot use up all of their dollars they can be reallocated to other coalitions and can be used to fund slots. We are also going to pursue corporate sponsors for scholarships for some of the hardship cases. We will continue to serve all the children in the Temporary Assistance for Needy Families (TANF), Transitional Child Care (TCC) and At-risk categories.
- J. Colyer asked if we are considering some type of an impact statement that shows what happens when Miami-Dade County loses \$12 million in funding for childcare, detailing what it means in terms of jobs and in terms of children who are no longer able to be served. \$30 million was taken away from early learning in the state and we should show how many people lost jobs and how many children were affected as a result. There is abstract conversation about it but there is nothing that shows the true impact of this action.
- E. Torres replied that we are going to be tracking the number of children that enter the program through the workforce side to show all the families that will find they now have to apply for public assistance. Those children will in turn automatically qualify for childcare services. What will happen is that this will cause us to have to decrease the number of children in the BG-8 category. We have a number of impact statements that have been put out statewide. The amount is actually about \$90 million; \$60 million in School Readiness and \$30 million in VPK funds.

#### **IV. Monroe Performance Report**

- M. Williams shared details from the Monroe performance report.

#### **V. Miami-Dade Performance Report**

- J. Russell gave highlights from the Miami-Dade performance report.
  - C. Lederman asked how we can engage parents of the nearly 200 children who have declined an Individual Improvement Plan (IIP) for those who have demonstrated concerns.
  - B. Sands explained that children who were red-flagged received classroom intervention anyway. They were not targeted because of the lack of parental consent. There are a lot of parents who are in denial or do not want their child labeled. Approximately 40% of the children identified are receiving services.
  - J. Romillo of Citrus Health Network (CHN) stated that they have several strategies to engage parents. Staff from CHN send welcome letters to parents, speak with teachers and directors, leave letters for parents explaining that their child is eligible for services, call parents and leave flyers. CHN has met with parents that have said that they are not interested or declining consent for screening. They provide the parent with information that shows that these screenings are meant to help the child become ready for school and address any issues that may become a challenge for them in the future. They reassure parents that this is not a label or diagnosis, but rather a way to provide strategies both in the



classroom and at home to help these children reach their maximum potential.

- C. Lederman requested that examples of the letters that are sent to parents be included in the packet for the next Program and Strategy Committee meeting.
- J. Colyer asked about the rate of growth of the VPK department.
- E. Torres responded that as more parents are familiar with the VPK program there are more participants. There was some discussion this year in the legislature about making the VPK program income eligible.

## **VI. Programs Monitoring**

- C. Garcia of GSK presented the first and second quarter Monitoring Report.
  - J. Colyer asked for clarification on the findings related to incomplete DCF referrals.
  - C. Garcia responded that 57% of the referrals of the sample selection of monitored files were incomplete for the third quarter. However, there was a significant improvement in the first and second quarter.
  - J. Colyer asked to be notified when there are a large number of incomplete referrals.
  - J. Russell added that after the 57% finding rate, a training was done for DCF staff.
  - J. Colyer requested another training due to staff turnover and the large amount of newly hired staff.
- C. Garcia stated that there were no findings in regard to provider files. There were findings for pre-filled sign-in sheets.

## **VII. New Business**

- C. Lederman requested that the following items be added to the agenda for the next meeting:
  - Results letters and parental involvement for children who have displayed concerns.
  - Potential sanctions for providers who have pre-filled sign-in sheets.

## **VIII. Public Comment**

- L. Carmona asked the committee to think about who will be sanctioned when determining sanctions for pre-filled sign in sheets. Provider payments are based on the attendance submitted electronically by the provider, not the sign-in sheets.
- L. Carmona stated that when talking about inclusion and special needs, it is a challenge that has existed for years. Typically the childcare practitioner who may not necessarily have the best skills at approaching the parent is the person that may have the first contact. There are also financial disincentives. If a childcare provider tells a parent that their child may have special needs and then MDCPS tells the parent that if they remove their child from the center and take them to a public school they will receive therapy, the parent then is likely to remove their child and take them to a public school resulting in a financial disincentive for the childcare provider. There is in statute, a way for people who provide services to children with special needs to get a 20% premium. However, it also comes with many additional requirements such as the issuance of an IEP for the child that typically doesn't happen unless a



child is in a public school program. Policies do not always coincide with the best interest of the child.

- R. Moreno added that the issue is not always losing the child to the public schools. The issue is losing the child before he/she can be assessed, by being moved to another center by a parent who is unwilling to accept the information. If the new center is not vigilant, the child is then losing out.

<b>IX. Adjourn.</b>
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- C. Lederman adjourned the meeting.