Date: May 22, 2020
To: Chair Lyons and the Senate Health and Welfare Committee
From: Dr. Morgan Crossman, Executive Director, Building Bright Futures
Re: Childcare Services during the COVID-19 emergency

My name is Dr. Morgan Crossman, the Executive Director of Building Bright Futures (BBF). Thank you for another opportunity to provide testimony to your committee with regard to our role in supporting the early childhood service system. Today’s testimony will largely focus on our work to support children, families, and public and private partners as we collectively navigate the reopening of child care. As a reminder, BBF is Vermont’s foundational early childhood public-private partnership and neutral convener, charged under Act 104 to serve as the State Advisory Council on Early Childhood, the mechanism used to advise the Governor and legislature on the status of children birth-age eight and their families. BBF’s mission is to improve the well-being of children and families in Vermont by using evidence to inform policy and bringing voices together across sectors and within regions to discuss critical challenges and problem-solve. During the COVID-19 pandemic, we’ve continued to serve in this role and provide the most up-to-date, high quality information we can to decision-makers and to communities.

I recognize you’re hearing valid concerns from child care providers and I’m happy to reiterate what we’ve heard in this arena as well but planning to focus largely for today’s testimony on what we’re hearing from families. At each level of BBF’s infrastructure we serve as a neutral convener; we monitor the early childhood service system and we advise to decision-makers as well as elevate what we’re hearing from families and communities. **Today’s testimony is informed by parents and providers engaged at several layers of BBF’s infrastructure:**

1. **Regional Councils and Coordinators** - identify issues and challenges faced by families on the ground within regions as well as strategies to fill gaps
2. **Parent Ambassadors**: BBF has continued to engage parents and provide opportunities for parents to lead and provide direct input into the policies and programs impacting their lives.
3. **Families and Communities ECAP Committee** - The Early Childhood Action Plan (ECAP) Committees host content-specific discussions based on their expertise and interest, monitor the EC system through Vermont’s ECAP (strategic plan) and aligned indicators and develop priorities and recommendations that are submitted to the SAC.
4. **Head Start partners** - BBF serves as the State Advisory Council in service to the early childhood system and is specifically called out in the Federal Head Start Act. We work closely with the State Head Start Coalition. (Renee sent my email to her network)
5. BBF “ask a question” portal (26 responses with questions for the reopening child care webinar, 150 from the form)

This information was requested, compiled, reviewed, coded and analyzed for themes between Tuesday night, May 19 and Thursday night, May 21 by the BBF team.

Before I launch into the themes reflected by families and programs, it’s important to note that responses reflect a large range of viewpoints but may not reflect all Vermont families as we did not conduct a systematic survey. We received over 26 pages of written feedback in addition to our “ask a question” portal within this limited time period. There is little agreement across the field with regard to the reopening of child care. As the neutral convener, what I can say up front is that I absolutely hear and understand the valid concerns and fears of some families and some providers. I also see the incredible collaboration and work of our agency partners. Everyone is passionate and, in this moment, each perspective is ultimately is trying to do what’s best to support children, families, their teams, communities, the early childhood service system and all Vermonters.

**Key Themes Overview by Respondent**

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Families’ Perspectives on the Reopening of Child Care

Introductory Family Quotes

“There are parents who are grateful we are opening so their children can play and develop relationships and interact with other children. In some cases families are so concerned that the child isn’t gaining the same social emotional skills and support at home that they’re excited their children will re-enter child care to see their friends, redefine relationships and be supported in their development that is so critical during the birth-5 period. Some families are relieved to be able to go to work. Then there are families withdrawing because they are not ready to take the risk, or their job situation has changed which has enabled them to be home now. There are some who are coming back but they are super nervous and wonder about everyone getting tested, or mandating that all children wear masks.”

“We are concerned about the impact it [COVID-19 and transition for young children] has had on our children emotionally and physically. The unrealistic expectations of children and child cares are unacceptable. The cost and lack of essential items is stressful and draining financially. The compounded stress for families is really just more than families can handle.”

There are a range of considerations families are navigating as they make decisions around returning to child care.

1. Financial & Capacity Concerns:
   a. Affordability of child care
      i. Some families had to relinquish their child care slot due to financial pressures caused by unemployment,
      ii. Families experiencing financial hardship and in some cases double payment (payment to hold their child care slot in addition to in-home child care for essential workers)
      iii. Some families have been paying for slots that they may or may not be able to return to when needed
      iv. CCFAP
      v. Clarity in guidance from CDD sent out on May 18th, 2020
      vi. Increased tuition
   b. Program capacity
      i. Changing hours based on capacity that don’t align with family needs
      ii. Essential workers who had child care over the last two months are now displaced as children return to their ‘home’ programs
iii. There remains considerable gaps and uncertainty around summer care for school age children. Many schools are still unclear if they will hold summer enrichment activities or allow municipal recreation or private programs to host camps in school facilities. Some camps are delaying opening until July which leaves weeks parents are scrambling to find care for their children while they are expected back at work, or the difficult decision to not return at all.

iv. Summer camps are frequently run by town recreation departments, arts, culture and environmental organizations who are not otherwise connected to the regulated child care systems. Vermont Afterschool, a partner in this work, has worked tirelessly to help many of these summer programs get up to speed on health guidance and discern if and how to serve children this summer.

Family Financial and Capacity Quote
“A very real obstacle for our program is the lack of school-aged care in Washington County. I have three teachers, myself included, who have school-aged children. Without the opening of camps, I simply don’t have the staffing to return our program to full capacity. Additionally, school aged children will require support for home-schooling until the end of the school year in mid-June. This is also an obstacle for many of my families who are choosing to withdraw their child or not send them for the summer months - they have siblings whose camps have been cancelled and it simply doesn't make sense to send their child to childcare if their sibling is home. “

2. Child social-emotional needs & developmental needs during the transition
   a. Families want to support their child’s optimal development and to meet their social emotional needs. This can be challenging for all sorts of reasons and pressures.
   b. Concerns in this domain include determining how best to support children experiencing anxiety through transitions that may include entering a new process for drop-off and pick-up, temperature checks, families not being allowed to walk children into the building or classrooms, teachers with face masks, in some cases new spaces and new teachers
      i. Teachers have already been developing some incredibly creative ways to address this. Pictures of themselves on necklaces saying “It’s me, Sarah”
   c. Families acknowledge how much their children miss their friends and benefit from the socialization they get at child care, preschool and school.
   d. Families and providers acknowledge just how hard it is for young children to physically distance as is recommended in the health guidance. Physical touch is important and being able to support children’s social emotional development while observing the health guidance will be challenging.
Family quotes on child social-emotional and development needs

We heard from a grandparent who has custody of her 3-year-old grandson, “I am concerned that my grandson has been so dysregulated from this, it has added an extra level of stress to our family, on top of the already hard stresses this virus has caused. He needs a structured routine and change is hard for him. The preschool/daycare he was attending was amazing and he was doing very well. He has regressed and no matter how hard we try to get him back on a schedule, it is difficult, as I am working from home, my main job is answering phones, very difficult to manage his dysregulation and work has also added extra stress. It has been exhausting.”

“I am concerned about the transition, this age is very impressionable, and going back to providers who are masked is scary, and this age group learns a lot from facial expressions.”

3. Parent Decision-making & pressure
   a. Families trying to work from home are weighing the demands of work, trying to attend to children, divide their attention in what feels there is no win-win for them, their children or employers.
   b. Families are juggling unemployment, changing schedules as employers bring back workers slowly, new waves of layoffs, or if they have family who can help with childcare. All of this makes it difficult for families to both afford childcare and know what they need to commit to paying for a slot for the summer or the next year.
   c. Some families experience overwhelming pressures (financial, food insecurity, homeless, substance use) that impact their ability to create as nurturing a space at home as what young children get at child care.

Parent decision-making & pressure quotes

“This time has been scary and we have been doing our best to adapt to these changes but there are definitely many concerns and struggles as we move forward!”

“Parents need employer flexibility upon returning to work with regards to the child care capacity needs and hours of operation that most will re-open with. To ensure programs adhere to the Health and Safety guidelines with respect to limiting adults in each classrooms, programs will most likely need to alter their hours of operation to eight hours or fewer per day; rather than the typical ten hours of open operation. This means that parents work hours may need to shift as well.”

4. Fear/Uncertainty
   a. Concerns about physical health and education being prioritized over mental health
   b. Parents feel pressure to return to work
Family fear and uncertainty quote

“Many employers may cut jobs, or at the least reduce employee benefits including Health Insurance, parental and family medical leave. Such uncertainties make planning for the future very difficult.”

5. **Health and safety of their child**
   a. Many of the families have expressed very real health concerns because childcare is a high contact profession. Children will need lots of hugs and comfort as they weather this transition.
   b. Families are hearing an overwhelming amount of information about health and safety from the media. Concerns have been raised around COVID-19 but also the rare Kawasaki disease seen in other states and are not surprisingly scared about the health and safety of their children.

Family health and safety quotes

“Parents seem to feel like they are left on their own to navigate safety decisions that they may not be qualified to evaluate.”

“There is this internal hesitation for safety as we move forward. kids are kids and germs are just a fact of life with them, my fear is of exposure/cross contamination which makes me hesitant towards moving forward allowing my kids back into school/child care buildings.”

6. **Vulnerable children**: Due to capacity changes, programs not opening, and health recommendations some of Vermont’s most vulnerable children cannot re-enter child care. These are children from Family Services/DCF whose safety plans included child care. It also includes children with disabilities and special health care needs and low-income families among others. This is impacting children across the age spectrum; infants through school age. Access to necessary special education services and the transition for early intervention (IDEA Part C) to special education (IDEA Part B) is challenging and families are reporting disruption of services and are anticipating short and long-term impacts on gaps in service receipt.

Family quotes on vulnerable children

“I want to keep my job, I need to financially support my son and I. He is on an extensive IEP and cannot function in a "regular" school age child care program. He requires a BCBA 1:1 to support him all day outside of home.”

Housing- “Sure, no one can be evicted for non-payment but are these families afforded any security when the virus is up and they are immediately required to have a large lump some of money they didn't have the opportunity to earn or save.”
“I am seeing so many generous programs offering food pickup but the families with the highest need cannot access a lot of these programs because they cannot drive and don't have transportation.”

7. Clear communication from program and state around process, logistics and health and safety guidelines

Child Care Program Perspectives on the Reopening of Child Care

**Introductory Quotes**

“I am so incredibly grateful for the strong support demonstrated for early education programs during the COVID-19 Pandemic. Because of this, I have been able to keep my teachers employed and stabilize our program up until this point. This has allowed teachers to sustain much-needed connections with children and families that are so important to helping them weather this challenging time. This transition back to opening our program represents our greatest challenge so far, and my business, employees and families need support from our leadership to come to the other side in a way that will allow our program to survive and continue to provide this crucial service.”

“Childcare providers are inventive, adaptable and flexible people - but we need support more than ever. We need to be able to provide the best care possible without the fear of not being able to pay our bills or make payroll; parents need to be able to navigate the needs of their families and reality of care situations without fear of losing a much-needed childcare spot.”

1. **Financial Concerns**

   a. Concerns from child care programs about their ability to make payroll, continue paying rent and utilities, etc.
   b. Continued confusion on how to bill/submit invoices, getting paid
   c. Lack of clarity around how different funding streams may be applied to families (CCFAP, preK)
   d. Field has been very vocal with partners about the financial challenges and concerns

**Program financial concern quotes**

“For those programs re-opening at part capacity; fiscal sustainability is my concern. Some programs have PPP grants to help retain staff who are deemed high risk to remain on the payroll through June. However, with only partial enrollments, programs will not be able to sustain full load payrolls after that.”
“The Stabilization Program through CCFAP was a tremendous help to programs. Moving forward, to retain the option to increase capacity of children as can happen based on the Health and Safety guidance from the State, programs will also need to ensure their staffing is secure to meet the demand. With each increase in capacity; more staff will need to either return or new staff be hired.”

2. Reducing staffing capacity and therefore reduced slots
   a. Health and safety
   b. No child care for their own children
   c. Restrictions and guidelines (staff over 65)

3. Health and mental health concerns
   a. Programs have raised health, mental health and safety concerns for teachers and staff in centers and homes. The Child Development Division and the Vermont Department of Health have been responsive to this concern in creating joint guidance and webinars.

Program health concern quotes
One provider noted, “I only make $14.00 an hour and cannot afford to go to the doctor yet I have to subject myself to a process that we already tried only to have half the teaching team become positive with Covid-19”
“It should also be recognized that childcare is a low-paid profession, and many caregivers do not have health insurance. This makes the risk of infection also a risk of financial catastrophe should they become very ill.”

4. Everyday logistics
   a. Providers have raised concerns about managing the logistics of everyday operations and how to prioritize the safety, health, education and well-being of children while trying to meet the health and safety guidelines.

Program logistics quote
“Laundry every day, sanitizing toys, handling unknown circumstances like children who have no change of clothing, toileting, etc. Feeding 15 hungry students individually and washing hands each time. The recommendations are not reasonable when placed into our daily schedule.”

5. Supplies
   a. All programs are concerned with their ability to resource PPE supplies and to maintain these necessary supplies for their staff. The program management is equally concerned about the guidance to families around use of face masks. Programs feel responsible for providing children (and families) with face masks but this responsibility for the program is a daunting addition to the program operation.
6. **Clear and consistent communication and guidelines**
   a. Programs and providers have been hesitant to make decisions and disseminate information to families due to the weekly guideline updates.
   b. The field has strongly requested clarity on the guidance and FAQs, and for those documents to be written in an accessible way. In effort to respond to these needs, BBF and the Child Development Division have partnered to host a weekly Early Childhood Forum on Child Care to provide the field with direct access to agency partners to ask questions and receive up-to-date information.

7. **Being included in the discussion**
   a. Providers would like to be engaged in the process of decision-making and feel that their concerns and questions are not being heard or addressed.

**Program inclusion quote**

> “Please include child care businesses in the ongoing process to create new regulation.”

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**Vermont’s child care successes**

1. Vermont has mobilized quickly to respond to the needs of children and families, especially the emergency child care needs of essential persons, in addition to designing a plan to ensure child care programs are able to reopen their doors once this has ended.
2. Vermont has utilized existing partners and the existing child care referral system to develop a new child care system and process in a short period of time. We now need to close the gaps and focus on implementation.
3. There have been incredible cross-agency, cross-sector, public-private partnerships and communication emerging.
4. The state has truly recognized the importance of child care as an essential.

**BBF’s Child Care Response**

Within BBF’s role as a neutral convener, our team has supported the response to child care in the following ways:

- Supported the development of the webform to stand-up emergency child care for essential persons in partnership with Let’s Grow Kids and the Child Development Division
- Continued dissemination of information to early childhood stakeholders through BBF infrastructure (e.g. agency guidance and FAQs)
- Continued monitoring and documenting questions, comments, concerns, gaps, and strategies emerging in the field
• Weekly dissemination of information gathered to agency partners to inform guidance documents and FAQs
  o Not surprisingly, there have been a multitude of questions about child care from parents, providers, educators and others given the evolving guidance.
• Building Bright Futures continues to host a series of webinars and forums to answer questions about childcare and supporting the mental health of children and families in transition via Zoom.
• BBF participates in bi-weekly policy huddle with CDD, VDH, AOE, LGK, BBF & Vermont Afterschool specific to child care.

**Broader Early Childhood Context: Emerging Themes & Priorities**
This is an initial list of concerns we are hearing most frequently related to the wellbeing of children and families (in no particular order). These themes are connected and important to consider when we think about the broader early childhood service system in relation to child care.

1. **Child care:** until now, the concern has been on access to emergency child care for essential workers, financial support for child care programs and families during the child care closure period and now the concerns are on the personal and financial feasibility, and preparation for re-opening
2. **Food security and basic needs:** access to food and basic needs such as diapers, wipes, and baby formula. Concern for the growing reliance on food shelves and their limited capacity continues to be a concern across the state, and need to help families access existing supports through WIC/3Squares and school food programs
3. **Relationships & Development:** child social emotional development, child and family isolation, community and connection, support groups
4. **Family safety and mental health:** the challenges for caregivers to take care of themselves and children in their care; how to get help, isolation and connection with other adults, mounting economic pressure on parents; risk for domestic violence and abuse as well as substance misuse; long term impacts of the trauma and transition anxiety on the re-opening of society
5. **Health care:** access to health insurance for all children and families, health care and health insurance for early educators serving children of essential employees, telehealth access for children and families, concerns for pregnant and postpartum women (access to lactation, home visiting and mental health supports), challenges for families with children with special health needs. Some groups have greater access to health care through telehealth. Need for strategies to continue telehealth support.
6. **Connectivity:** limited or no connectivity for families in rural areas, no access to a phone or computer, additional remote learning needs, Zoom fatigue, WIFI and training for providers now providing services via phone/computer, transportation, connections to the system of services (substance misuse needs, etc.)
6. **Distance learning:** support for educators, children and families in distance educating and remote learning, appropriate expectations
7. **Reopening/recovery:** clear guidance and expectations for the process of reopening Vermont and the safety measures that will remain
8. **Summer care:** intersection between schools and afterschool, municipalities, private programs that rely on each other for these collaborations (some schools are or are not allowing buildings to be used collaboratively)
9. **Children with disabilities and special health care needs:** access to services
10. **Economic pressures**

**Final Considerations**

1. Critical need for continued **cross agency and cross-sector collaboration** to strategize reopening that engages the public as much as possible
2. **Mindfulness of Health and Safety** - partnership with VDH and Director of Maternal and Child Health to ensure appropriate procedures
3. Supporting children and families with **access to child care and preK** being mindful of our most vulnerable children and families
4. Need for **additional resources** for early childhood and child care
5. Planning around **supply needs** during re-opening given health and safety guidelines
6. Strategizing about **Continuity of Learning** - What does this look like in the 0-5 arena and preK to support this critical period of development
   a. Children with disabilities and special health care needs
7. Supporting mental health needs of children, families, providers and educators
8. **Technology Needs**
9. **Continued Forums** to disseminate guidance and updates as well as providing a direct opportunity for folks on the ground to elevate needs and questions, creating opportunities for shared experience
10. Clear and persistent **communication/guidance** as we reopen Vermont

It takes a lot of partnership to have moved as quickly as we did as a state, but also the recognition that it’s not perfect and we can always do better. BBF’s statewide infrastructure supports our ability to consistently communicate with decision-makers and the field for streamlined feedback loops. The BBF team is honored to serve as a resource to the legislature, families and early childhood partners. BBF is committed to providing the most up-to-date, high-quality information and data to inform decision-making at all times.
In closing, I’d like to remind the committee and all of our partners that we are truly in an unprecedented time with uncharted waters. We’re all doing our best and there is no right answer. We’re learning more every day and adjusting based on those lessons and we need to do our best to move through this period with passion, integrity, humility, and grace. Finally, we need to keep children and families at the center of our decision-making.

Thank you very much for your consideration of these topics.

Sincerely,

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