

**DRAFT ECE Provider Conference Call #13**  
**November 9, 2020**  
**2:00 PM**

Caitlin Gleason of the Department of Education (DOE) began the call at 2:00 p.m. and noted any questions should be placed in the chat. Next, Dr. Kim Krzanowski welcomed everyone to the November early childhood provider call. She explained the call logistics, that the call was being recorded, and that there would be agency updates. Additionally, there would be an opportunity for questions and answers with Dr. Karyl Rattay, Director of Public Health. The following individuals provided brief agency updates:

**Kim Klein, Associate Secretary of Operations Support, DOE**  
**Betty Gail Timm, Director, Office of Child Care Licensing (OCCL), DOE**  
**Thomas Hall, Deputy Director, Div. of Social Services, Purchase of Care (POC) Office**  
**Jamie Mack, HSP Section Chief, Division of Public Health (DPH)**  
**Dr. Karyl Rattay, Director, Division of Public Health (DPH)**

Jon Sheehan of the Governor's Office thanked all providers for their work during the COVID-19 pandemic. He reminded everyone that cases are ticking up, so please remember to wear a mask, social distance and wash your hands. Last week we shared some exciting early childhood education news. DOE has hired a new Associate Secretary of Early Childhood Support, Yvette Sanchez Fuentes. We also announced the availability of a school-age grant program to help providers who are assisting school-age students with remote learning. These funds will reimburse providers for expenses used for remote learning. Additionally, there was a school funding settlement, which now allows us to commit to doubling funding for ECAP from \$6.1 to \$12.2 million over the next few years. He again thanked all agency representatives for their work as we assist early care providers in the state.

Dr. Krzanowski put the [link in the chat for the application for the grant](#), which includes instructions for applying. It only takes about 10 minutes to complete. Please check to see if you are eligible. She added that these grants are between \$500-\$7,500 and are for licensed Delaware providers serving students with virtual learning. The grant is being administered by the University of Delaware.

**Kimberly Klein, Associate Secretary, Office of Operations Support, DOE:** Kim provided the following update on Enhanced Reimbursement (ER):

- Communication was sent out to providers last week that ER will be open for all OPEN eligible providers during the month of November, even if they were not open as of July 1, 2020.
- You are eligible for this funding if you are licensed and have vacant slots (Vacant slots = Licensed capacity – enrollment (POC authorized roster for the month+ private pays as of 15<sup>th</sup> of month)) and if you are open now, regardless if your site was open July 1. (Note: ER eligibility for July through October, sites had to be open as of July 1.)
- Applications for November will be processed more slowly because of an expected increase in number of applications and because of the Thanksgiving holiday.
- The online application will be available at 8 a.m. on November 15.
- We will pull down applications Monday, November 23, so with the abbreviated week you should expect not to receive a confirmation call until after the holiday.
- If you submit your application between November 15-22, you can email us (at [enhanced.reimbursement@dfoe.k12.de.us](mailto:enhanced.reimbursement@dfoe.k12.de.us)) if you have not received a confirmation call by December 4.
- For those providers who have not yet submitted for any month July – October 2020, who want to catch up and now submit for ER. First you had to be open as of July 1. If you were receiving unemployment during this time, you are not considered opened. If you did apply as open and were collecting unemployment, reach out to us immediately at [enhanced.reimbursement@doe.k12.de.us](mailto:enhanced.reimbursement@doe.k12.de.us). If we find out later, you will be responsible for repaying the state for those funds.
- There has been no final decision on ER for December. We should know this week, and will let everyone know by email.

**Betty Gail Timm, Director, Office of Child Care Licensing, DOE:** Betty Gail introduced herself and thanked providers for the amazing work they are doing throughout this unexpected, stressful time. She said, “You have kept your door open, dealing with things that none of us have ever even thought about before. You have worked to enforce the required provisions of health screenings for children and adults before being admitted to your facility in an effort to keep everyone safe. Regulations have been modified and modified again as we learn more about the virus from our partners at public health—and you have continued to adapt to those changes. So thank you again for all that you are doing.”

**Tom Hall, Deputy Director, Division of Social Services (DSS):** Tom introduced himself and thanked everyone for this time. He made the following brief comments and indicated there would be several documents attached to the minutes related to his presentation. DSS continues to provide updates to providers through the Provider Portal, Listserv, and the MyChildDE.org website, and provides direct assistance to providers through the POCResource mailbox, and POC helpline.

For the month of November:

- All open sites will be paid based on enrollment. Enrollment is defined as all POC authorized children at 100% attendance.
- DSS will be paying the parent co-pay
- Please do not collect copays and please reimburse any families that may have paid in advance for the month of November

POC has not received authorization to continue paying for enrollment and co-pays through December yet. We will notify providers as soon as that approval is finalized.

DSS is currently conducting the Market Rate Survey. The study collects the fees charged to the public by childcare providers. Providers will be contacted by Research America and asked to provide their current rates. Please participate if you get a call. We are trying to get rates from all providers this year. A worksheet was previously provided, the worksheet can be used to help prepare for the interview in advance of the call. I will include the worksheets with today's minutes.

In the coming weeks we will also be conducting a cost of care study, William Horace the economist leading the Market Rate Survey will also be leading this effort. We plan to interview 200 providers to get an in-depth analysis of how much it cost providers to provide the care they do. This is a very different approach than looking at the fees charged. The data we collect will be combined with the data from a similar study recently completed by the Department of Education. The combined data will give us a sample of 28% of the provider community. We plan to have both the Market Rate Study and Cost of Care Study completed by February. Finally, using the data gathered from these studies, we are building a Cost of Quality Care Estimator Tool. This tool will allow the childcare community and policy makers to estimate the costs to providers of existing and new quality initiatives. Anyone who would like to participate in the development of the cost of care estimator tool or the cost of care study please contact me, and I will include you in planning sessions.

I have received some inquiries about how the POC team can support providers with encouraging specific families to comply with covid-19 requirements. Providers can reach out to their POC monitor or send an email to [POCResource@delaware.gov](mailto:POCResource@delaware.gov). We will work with you to determine how we can support you maintaining their COVID-19 requirements. Based on our discussion, we will reach out to families as needed to support COVID-19 expectations. I will include a list of the POC monitor contacts with the today's minutes today.

At DSS the POC staff are on duty and ready to accept calls and POC questions via the POC Helpline which is 302-255-9670 or via email at [POCResource@delaware.gov](mailto:POCResource@delaware.gov). As always you may reach out to me directly at 255-9605 or [Thomas.Hall@delaware.gov](mailto:Thomas.Hall@delaware.gov). Thank you for your hard work and dedication to Delaware's families.

POC Monitor Contact Information:

<b>POC Monitor</b>	<b>Email Address</b>	<b>Work Number</b>
Eboni Anderson (NCC)	<a href="mailto:eboni.anderson@delaware.gov">eboni.anderson@delaware.gov</a>	(302) 255-9560
Iesha Congo-Watson (NCC)	<a href="mailto:iesha.Congo@delaware.gov">iesha.Congo@delaware.gov</a>	(302) 255-9515
Jamie Curry (Sussex County)	<a href="mailto:Jamie.Curry@delaware.gov">Jamie.Curry@delaware.gov</a>	(302) 515-3129
Carol Davis (Kent County)	<a href="mailto:Carol.Davis@delaware.gov">Carol.Davis@delaware.gov</a>	(302) 857-5032
Gayle Green (Kent County)	<a href="mailto:Gayle.Green@delaware.gov">Gayle.Green@delaware.gov</a>	(302) 857-5037
Nidia Gomez (NCC)	<a href="mailto:Nidia.Gomez@delaware.gov">Nidia.Gomez@delaware.gov</a>	(302) 255-9528
Pauline Mayfield (NCC)	<a href="mailto:Pauline.Mayfield@delaware.gov">Pauline.Mayfield@delaware.gov</a>	(302) 255-9613
Catina McCray (Sussex County)	<a href="mailto:Catina.McCray@delaware.gov">Catina.McCray@delaware.gov</a>	(302) 515-3116

Next, Dr. Karyl Rattay, Director of Public Health, provided updates and answers to providers' questions. She noted generally that regarding cases in Delaware:

- Most states seeing increases in COVID-19 cases, DE has stayed stable in October.
- Numbers have gone up now with other states. 22% increase in cases this week compared to last week. Key indicators show higher percent positive and increases in number of people hospitalized.
- The information we get about these cases allows us to understand how this infection is being spread. We find that it is being spread by gatherings, both large and small, with lack of face coverings and social distancing being practices. Additionally, people dining together or even being in a home setting.
- We believe some people are letting their guard down, but everyone should assume that anyone around us has the infection and therefore you should act accordingly.
- We are not seeing spread in schools except a few examples of staff eating together. There has only been a little spread in child care as younger kids are not wearing face coverings, but the lower age group (birth to five) is the least effected individuals in the state.
- As for where COVID-19 is..... – it's everywhere, but we are seeing spike in western Sussex County which has the highest case rate. New Castle County has seen a significant increase in cases in the last week, specifically, Bear, Stanton, Odessa, Middletown area.
- The UD/Newark area has quieted down or a while, but some cases are popping up. It is important to note that no geographical area in state is immune.
- As for testing, child care providers exposed to individuals should be tested monthly.
- High risk populations, such as those in health care, first responders – including child care providers, teachers – are encouraged to get monthly testing.
- Testing is available to you. Home testing for staff is the best option. It's easy. Go to [coronavirus.delaware.gov](https://coronavirus.delaware.gov) website. Results are received in about 4 days.
- There are other testing options, including 29 pop up sites throughout the site. Register before you go and get through testing quickly. Results are received in about 24 hours.
- There are also 20 stationery testing sites available, including eight Walgreens across the state, State Service centers and public health clinics. These are business hours so they may not work for providers, but Walgreens have longer hours.

- For kids in child care and their families, they should get tested on a regular basis using any of the testing options above.
- Testing is recommended until a vaccine is available.

Dr. Ratty continued to answer some questions that were put in the chat regarding:

- Regarding sick kids being transported from school to childcare, and parents/families are supposed to be screening their kids before going to school. Taking the children's temperature is one option, but many people don't have symptoms. It is most important to check for COVID-19 symptoms. Schools have guidance on what to do if a child develops symptoms during the day. They are to send that child home. Children should not go to childcare.
- Regarding air purifiers being required or how to access them. Jamie Mack noted that air purifiers are not required. Documentation can be found attached to these minutes or at <https://tinyurl.com/DECC2020> on how to select the proper system for your home or business. A simple air filter is not the answer.

Additionally asked:

Q: If we all get tested monthly, how will we staff classrooms?

A: Home testing option is the best for childcare businesses because no one has to leave. Staff could test during the evenings or weekends. It is free but you can't do it more than every two weeks. Must use different email address for each person, otherwise they try to bill you. Staff, with no symptoms, can return to work before they get their results. However, if you were in close contact with someone, you should quarantine until you get your results.

Q. Testing is only as good as that point in time, correct?

A. Yes, that is true. If you have reason to think that you are at higher risk, get tested immediately. If you know your status, you can help prevent it.

Q. If my family travels to areas with different restrictions and mandates, should they be required to quarantine when they return?

A. No. There is no quarantine in place for those entering our state.

Q. Are we finding that people wearing masks are not the ones getting the virus? Does this make our chances of getting it low?

A. Yes, masks and social distancing is incredibly effective, but it is not a guarantee.

Q. There has been an increase in COVID-19 in Delaware child care centers, why is this occurring?

A. Since there has been an overall increase in COVID-19 in Delaware, we can say there is an increase in areas where people are, like child care centers. Also, more kids are being tested than before so that may be the reason for more cases being reported. The good thing is that increased data enables us to better contain it.

Q. Why are bars able to open up at the beaches, per the recent updated state of emergency.

A. Bars can be open, but we lifted some additional restrictions at bars at the beach. Beaches were being treated somewhat different because they had more people coming to them. We will continue to keep a close eye on this and will adjust restrictions if necessary.

Q. Regarding testing, if a child needs to be tested before returning to school, is the provider required to quarantine before the child returns to school?

A. It depends on why the child was tested. Close contact would not be required to quarantine until a positive result was confirmed. Providers should be ready to quarantine if a positive result comes.

Q. Can an individual come back to work with no symptoms after being tested?

A. If you are just being tested with no symptoms, no quarantine is required.

Q. If you were exposed to someone, should you quarantine?

A. Yes. You cannot shorten the 14-day time for quarantine.

Q. Can head-scan thermometers be used during cold temperatures at child care entrances?

A. Jamie Mack will connect with Betty Gail to review the entrance procedures for where temps can be taken.

Q. Do public schools need to inform the public if there is a positive case in the school?

A. If a school has a contagious student in the school and the positive person was in the school during their contagious period (14 days), the school must let families know so they can monitor and test appropriately.

Q. Can a provider order COVID-19 tests for all their employees?

A. Logistically, the testing system is set up for individual ordering. Child care providers can't order it for all their staff. You could order it with a staff member using the individuals' personal email, with all test being sent to the center, but the tests would still need to be ordered per person.

Q. If a child care center closed due to COVID-19, can students return to school if all safety protocols were followed?

A. The return to school depends on whether the students involved were exposed. If they were to be required to quarantine, no they cannot return to school. However, child care centers were having issues with staff ratios and had to close. If they were not directly exposed, they can return to school.

Q. How is social distancing working on school buses?

A. In general, students have been complying really well. They have been social distancing, facing the right direction and wearing their masks.

Q. If a child tested positive and was cleared to return to school by DPH, would they have to be tested again, and how long until they should be tested?

A. You do not have to retest people who were positive. You would take the date from when the first symptoms appear or they had the test, and add ten days. They would go through DPH monitoring. At the end of isolation (10 days), they get a note from DPH to return to school. They do not need to be retested.

Q. Can you clarify why some are told to quarantine 10 days versus 14 days?

A. If *you test positive*, you must be in isolation (quarantine) for 10 days. If you have the virus, you will only be contagious for 10 days. If you are *exposed to a positive case*, you have to be in isolation for 14 days from time you were exposed. If you were exposed, you may not be positive until 14 days later.

Q. If you are living with someone who tested positive, when would the 14 day quarantine start for you?

A. In most households it is difficult to separate individuals. Ideally there should be no interaction and no physical human contact with the positive person. If you aren't able to separate, wait until the positive-tested person's 10 days are up, and then quarantine the family for 14 days.

Q. Can those who live out of state but work in Delaware get tested at the community testing sites?

A. Yes, they could get tested at any community testing sites. For home testing option, we do require individuals to live or work in Delaware.

Q. How likely is reinfection once you have tested positive for COVID?

A. There is a very low cases of reinfection. Honestly, we don't know how long and how strong immunity is once you have had the infection. We know with chicken pox it is very rare to be infected again. We don't think it's the same for COVID, but through vaccine, people will develop the immune response needed to not get it again.

Next, Dr. Kimberly Krzanowski wrapped up the call echoing thanks and appreciation for providers. She noted minutes of the meeting will be prepared. A December meeting will be sent out to everyone. The meeting concluded at 3:00 p.m.