

CHILDCARE Playbook Summary

Concerns/Issues | Connecting to Solutions

Issue – Loss of income leads to closures, layoffs

- Subsidy payment issues with only billing for attendance- providers hesitant to accept low income. (temporarily resolved)
- Lack of income due to no subsidy when child is absent (PH, Keith, Dakota, Buffalo, Adams, Lancaster) (temporarily resolved)

Solutions:

- **Related Community Playbook Solutions:**
 - Change to allow absent days to be paid for subsidized care.
- **Related Solutions from Partners:**
 - Introduce policies to base child care reimbursement payments on enrollment levels rather than current attendance to help stabilize funding and ensure child care programs remain financially viable
 - Foster parents have increased flexibility for child care regarding the child care subsidy program

Action:

- Nebraska Executive Order 20-18 temporarily changes these reimbursement protocols by allowing child care providers to receive subsidy reimbursements based on the enrollment of subsidy-eligible children in their programs, rather than actual attendance while that program is open for business. It also ensures that child care slots allocated to subsidy-eligible parents will still be waiting for them when they return to work. Longer-term: Draft policy has been through public hearing and is moving to finalization that would allow payments for up to 5 absences per month for children paid through the child care subsidy.
- Child care centers having to close due to economic impact (All)
- Child care staff laid off as programs close.
- Faith-based programs don't pay into unemployment insurance so employees are not eligible for unemployment benefits
- Funds are needed to stay open. Lack of income due to private family not attending/paying (mentioned in ALL playbooks reviewed)

Solutions:

- **Related Community Playbook Solutions**
 - Immediate Funding
 - Child care providers recognized as essential workers
 - Free training for a year due to the loss of income
 - Need a master list of online training that the workforce can access

- **Related Solutions from Partners**

- Provide Emergency Relief Funds to offset losses
- CARES Funding: \$6.3 billion overall to the Administration on Children and Families (ACF): including \$3.5 billion for the Child Care and Development Block Grant to provide immediate assistance to child care providers
- Make all members of the child care workforce - including self-employed professionals - eligible for unemployment compensation, sick leave and paid family leave
- Use emergency federal and/or state funds to support child care providers who remain open to provide services for the children of healthcare professionals, frontline responders and other essential personnel.
- Automatically qualify providers for mortgage forbearance, rent deferrals and assistance for utility and insurance payments for three to six months
- Ensure Stafford Act and Small Business Association disaster grants are made available to all types of licensed and license-exempt child care providers to meet operating expenses
- Extend and ensure the availability of temporary unemployment insurance to all child care business owners and employees who have suspended services due to the public health emergency, as well as working parents. In addition, please consider making paid sick and family leave supports available to the child care workforce and working parents.
- For those providers remaining open to support health care workers and emergency responders, adopt temporary flexibility in federal and state operations related to regulation of the childcare industry, while ensuring the safety, health and wellbeing of children in care.
- Offer supplemental financial supports to providers serving parents who work in frontline roles and other jobs that are critical to civic and economic infrastructure
- Utilize the TANF rainy day fund to pay for any unexpected child care costs.
- Action: Child Care Emergency Relief Funds-Distributed \$1,000 relief funds raised from private philanthropy distributed to 727 providers; 367 eligible providers remain on a wait list

■ Issue – Finding available child care for parents who had to work

- Essential workers not being able to find child care in their community.
- Help existing child care professionals stay open to serve children of essential personnel. So many have closed or limited numbers now with people being off work that they have space. (ALL)
- C Medical staff having a hard time finding childcare- Hospital considering opening site
- Lack of a streamlined way to identify child care programs with openings for families that need the care

Solutions:

- **Related Community Playbook Solutions**

- ChildCareLNK (developed in Lincoln),
- YCDC a link on a website-York
- Ongoing public facing information on child care programs who have openings

- **Solutions from Partners**

- Use emergency federal and/or state funds to support child care providers who remain open to provide services for the children of healthcare professionals, frontline responders and other essential personnel.

- Waiving licensing provisions of the Child Care Licensing Act for entities providing temporary non-residential child care in alternative settings, among other waivers. Guidance has been published.
- Develop a website that offers families access to up-to-date child care availability across the state, enhancing Child Care Resource and Referral.
- **Action:** Developed the Nebraska Child Care Referral Network www.nechildcarereferral.org
- **Action:** Nebraska Executive Order 20-18 allowed greater flexibility for families eligible to receive the child care subsidy the ability to access in-home child care.

Issue – Lack of access to updated information and needed supplies needed due to COVID-19

- Need access to supplies, food, formula, diapers, thermometers
- Priority-paper products for providers, wipes, Clorox, TP/supplies needed (ALL)
- We need accurate, timely, and easy to understand information about what is happening and what is available to assist us (multiple phone calls to staff from community coalitions, early childhood)

Solutions:

- **Related Community Playbook Solutions**
 - Numerous strategies were successfully implemented in local communities
 - Local Health Departments proved to be advocates for accessing hand sanitizers and other supplies
- **Related Solutions from Partners**
- Nebraska Grocery Industry Association was contacted for advice that was widely shared for local community use
- **Action:** Ongoing outreach and sharing successful strategies continue and will be further shared on weekly phone calls of the COVID-19 Child Care Emergency Team, (62 members and growing)
- Website to provide information and resources specifically to child care providers was established www.nebraskachildren.org/childcare-providers-covid-19-information-and-resources.html
- Nebraska Children offers online questions that are answered within one business day and updates a FAQ to share information timely www.nebraskachildren.org/childcare-providers-frequently-asked-questions.html

Issue – Children in unsafe or unknown care arrangements

- Concern about non licensed providers (this was mentioned almost everywhere, stated as closet providers, worries about informal care solutions that may not be optimal)
- Concern about young children being left unsupervised (York)

Solutions:

- **Related Community Playbook Solutions**
 - Nothing suggested
- Related Solutions from Partners
 - Nothing Suggested

Issue – Loss of child care capacity available in the community

- Concern from several communities that child care providers have closed and do not intend to reopen.
- Lack of child care capacity overall; and losing what capacity the community had before this crisis.
- Lack of licensed child care availability prior to COVID-19 (Santee has one center, Winnebago has one but it is closed, would like a couple small centers to care for essential workers, Omaha Tribe has nothing open, solutions: families must assist, people have to quit their jobs, or older children are caring for younger sibs, Western Nebraska tribal response "child care is closed or not accepting new children,
- Losing staff who will not return to the field
- Many licensed family childcare providers are in later life and will retire, so will see a loss of those
- Child care connected to clinic/hosp. only taking kids now of health care workers. (PH/Adam)
- Omaha Metro there is an ongoing lack of child care availability for our Native Relatives,
- Programs closing and not planning to reopen (PH, Adams, Dakota, Buffalo, Dodge, Madison, Lancaster, Lincoln County)
- Transportation for child care-distance (Santee)

Solutions:

- **Related Community Playbook Solutions**
 - Bonus funds to attract staff to return to the field
 - Offer a native childcare center or community center (Omaha metro)
 - When this situation rebounds we may need some modifications on regulations or procedures that will allow for bringing the workforce back to work quickly (i.e. background checks)
- **Related Solutions from Partners**
 - Increase access to and flexibility of loan, grant and financial incentive/support programs to help child care businesses resume services when the public health environment has stabilized.
 - To the extent practical, explore opportunities to temporarily use teachers and educational professionals who meet background check requirements to supplement the early childhood system

Issue – Miscellaneous Family Needs

- Child care providers will need to increase services (panhandle partnership)
- Influx of families in need, lack of resources to assist everyone

Solutions:

- **Related Community Playbook Solutions**
 - Nothing suggested
- Related Solutions from Partners
 - Allow providers to waive co-pays for families dealing with income interruptions and fluctuations
 - Designate funding for community access to trauma-based services
 - Ensure health and mental health resources are available to childcare and early learning providers, as well as to children and their families, and are paid by federal funds to the greatest extent possible.
 - Increase the flexibility of federal programs and funding that support the nutrition needs of young children and families during the public health emergency
 - Increased federal funding to better enable the Nebraska Department of Health and Human Services to offer more flexibility in income eligibility for subsidized care
 - Maximize federal flexibility in the Child and Adult Care Food Program (CACFP) to provide critical resources (food, formula etc.) through delivery rather than community site distribution.
 - Reduce threshold/requirements for prevention \$ to adjust to virtual strategies and recognize the reduction of hotline calls
 - Temporarily suspend redetermination of family eligibility for support services such as WIC, SNAP, Medicaid, TANF and child care subsidy to ensure continuity of benefits during the public health emergency.