



DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIVISION OF CHILDREN'S WELLNESS
BUREAU OF CHILD CARE SERVICES (BCCS)



Provider Workgroup Session

Continuing Discussions of Building a High-Quality Childcare System in Guam

Provider Workgroup Description

The Bureau of Child Care Services (BCCS) is the lead agency that is responsible for the administration and implementation of the Child Care Development Funds (CCDF) and programs in Guam. BCCS's mission is in support of fulfilling the requirements set forth in Title 45 CFR Part 98 SS 98.53, relevant to the development of a tiered quality rating and improvement system for child care providers and services to meet consumer education requirements. BCCS continued to host the discussions of building a high-quality childcare system in Guam by conducting a second round of Provider Workgroup Sessions held at the University of Guam on September 28, 2023.

BCCS identifies local child care providers as the key stakeholders that have expert opinions towards building a quality systems framework that will potentially be implemented into Guam's child care industry. This workgroup session consisted of a small group of licensed child care providers, to include some returnees from the first workgroup session and new providers that also showed interest in participating. The group was diverse in experience and area of service, including teachers, directors, and assistant directors. A total of seven (7) licensed providers were in attendance for the workgroup meeting, having one representative from the following licensed child care centers: *Sagan Fina'na'guen Fino Chamoru; Tiny Blessings Christian Childcare & Educational Center; Lots of Learning Child Care; Precious One's Childcare & Learning Center; Adventures in Learning Child Development Center & Adventures Youth Center; Kids & Co.; and Little Children's School of Guam.*

Participating providers in this workgroup was initially introduced to the project plan and timeline in developing a quality improvement system in Guam. Through the progression of solidifying Guam's quality systems framework, a small group of providers can expect to meet on a monthly or bi-monthly basis, while including the considerations of all stakeholders within Guam's child care community. All licensed child care providers can expect to be surveyed through an online poll to analyze and respond to the results determined by the workgroup. A parent focus group will also be conducted to assist BCCS and child care providers in justifying the areas of consideration from a consumer's perspective. The review of an advisory team will be implemented throughout the process to ensure that recommendations and findings are in alignment with Guam's educational initiatives for children birth to thirteen (13) years of age. BCCS will then reconvene with the workgroup and repeat the review and feedback loop along with parents and the advisory team prior to the projected implementation date of June 2024.



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Considering Priorities of Quality

The first workgroup session opened up discussions that lead to discover each participating child care center's expertise and modern practices which contributes to improving the quality of child care services. This allowed providers to identify what a culturally responsive and high-quality child care may potentially look like in Guam. Providers that participated in the first workgroup defined their perception of a quality system and was later narrowed down into five (5) areas of quality. They were also allowed time to identify their highest and least priorities based on everyone's responses. The results from the first workgroup meeting are shown in yellow-colored cells in the tables attached.

The second group of providers were reintroduced to the outcomes and results from the previous workgroup session. This current workgroup was afforded an opportunity to revisit the results from the prior session and vote on all items that they agree and disagree with. The results are shown in green (agree) and red (disagree) colored cells in the tables attached. Providers were also allowed to add any additional topics or ideas in each respective area of quality that was not previously identified from the previous workgroup results. Providers were given an opportunity to discuss each new idea added in order for all providers to understand their perception and to engage discussions. Newly added topics or ideas are shown in blue text in the tables attached. Provided are the results from the discussions:

| Staff Support | | | | |
|--|---------------|---------------|-------|----------|
| | High Priority | Less Priority | Agree | Disagree |
| Bootcamps to help support quality | 4 | | 4 | |
| Education of staff to improve | 2 | | 4 | |
| A way to pay for teacher to have training & education | 2 | | 5 | |
| Continuing training & education of staff | 2 | | 5 | |
| Pay / Salary | 1 | | 5 | |
| Safety for staff | 1 | | 4 | |
| Pathway for teacher to become management | 1 | | | 1 |
| Motivated Staff | 1 | | 5 | |
| Teamwork | 1 | | 5 | |
| Fast completion of background checks | 1 | | 3 | |
| Passion of staff | 1 | | 4 | |
| Staff professional development | 1 | | 3 | |
| Teacher experience | | 3 | 2 | |
| High quality staff who can implement curriculum | | 1 | 4 | |
| Education teaching children fundamentals | | | 3 | |
| Staff Support (breaks, birthday, etc.) | | | 3 | 1 |
| Bonus based on experience | | | 3 | |
| Financial incentive for staff | | | 4 | |
| Teachers love the work | | | 2 | 1 |
| Degrees do not always mean best teachers | | | 3 | 2 |
| <i>Train Leaders</i> | | | | |
| <i>Physical support</i> | | | | |
| <i>Awareness</i> | | | | |
| <i>Safety Training / Behavior Trainings / Mental Wellbeing</i> | | | | |
| <i>Social Emotional Training</i> | | | | |
| <i>SPED Training</i> | | | | |
| <i>Early Intervention</i> | | | | |

| Teacher / Child Interactions & Support | | | | |
|---|---------------|---------------|-------|----------|
| | High Priority | Less Priority | Agree | Disagree |
| Talking to & relating to children | 1 | | 5 | |
| Teacher <u>know</u> the children and have relationships – parents know it | 5 | | 5 | |
| Curriculum | 3 | | 5 | |
| Playing outside | 2 | | 5 | |
| Individual routines for children & preferences of children are known | 2 | | 4 | |
| Quality responds to the individual child & child's home life | 1 | | 3 | |
| Children <u>get</u> educated | 1 | | 5 | |
| Teacher who <u>know</u> how to work with children | 1 | | 5 | |
| Meeting individual needs of children | 1 | 1 | 4 | |
| Whole child support- food & nutrition | | 3 | 3 | 2 |
| Fun! For children, teachers, all | | | 3 | |
| Constant teaching of the children | | | 2 | 1 |
| Teacher who can interact on their own | | | 2 | |
| Children are happy/ have fun | | | 3 | |
| <i>Sense of Inequality</i> | | | | |
| <i>Consent to administer medications</i> | | | | |
| <i>Encourage Healthy Food</i> | | | | |
| <i>Teacher treats everyone same, equality</i> | | | | |
| <i>Consent form</i> | | | | |
| <i>Meeting individual needs of children with disabilities</i> | | | | |



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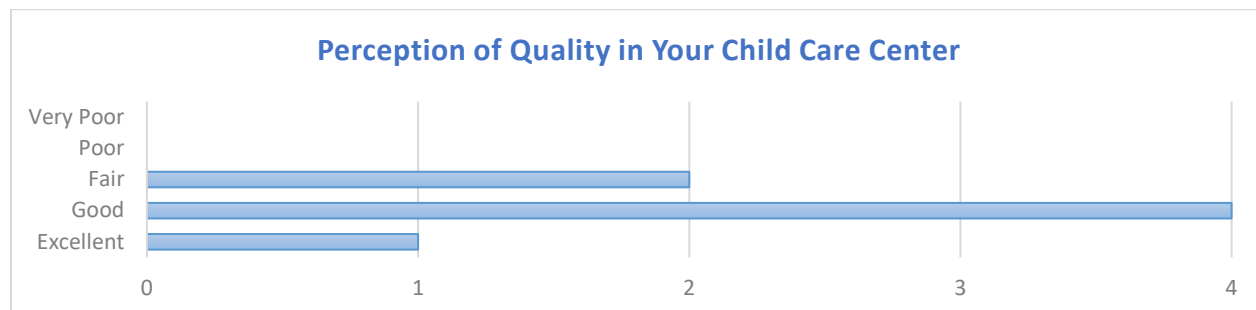
| Family Engagement & Support | | | | |
|---|---------------|---------------|---|---|
| | High Priority | Less Priority | | |
| Communication of teacher with family – photos, documentation | 4 | | 5 | |
| Daily communications such as progress report, playing habits | 4 | | 4 | |
| Understanding child & family; build relationships | 2 | | 5 | |
| Parental needs are met - hours of services - flexibility | 2 | | 4 | 1 |
| Meeting family needs | 1 | | 2 | 1 |
| Communication with families | 1 | | 5 | |
| Hours work for the families | 1 | | 2 | 3 |
| Educate family & support family | 1 | | 5 | |
| Prompt communication with director | 1 | | 5 | |
| Operational hours meet family needs | | 4 | 3 | 2 |
| Accommodate & take extra time to show families you are there to meet child & family needs | | 1 | 2 | 2 |
| Child is unique & communicated each day & seen by families | | | 4 | |
| Parents make decisions & bring food of their choice | | | 2 | 1 |
| Attention to families daily | | | 2 | 1 |
| Director shows she accepts family & provides support | | | 2 | 1 |
| Family news have changed | | | 1 | |
| Giving back to parents | | | 2 | |
| Family fun day | | | | |
| Use of Apps (brightwheel) | | | | |
| Parent appreciation | | | | |
| Family Fun day | | | 2 | |
| Program tools for communication | | | | |
| Communication with early intervention | | | | |
| Tech program | | | | |

| Center Leadership & Administration | | | | |
|---|---------------|---------------|---|---|
| | High Priority | Less Priority | | |
| Alignment of licensing & CCDF operational licensing | 5 | | 4 | |
| Getting CCDF dollars on time such as two weeks from invoice | 4 | | 2 | |
| Reliability of staff – staff continuity | 4 | | 5 | |
| Owner and director support & leadership | 1 | | 5 | |
| Staff retention | | | 3 | |
| Great boss | | | 3 | 2 |
| Knowledge in daycare settings | | | | |
| Site Visits DEH Inspections (what to expect) | | | | |
| Admin Credentials | | | | |
| Training for director & assistant | | | | |
| Physical Support | | | | |
| Knowledgeable Director | | | | |
| Prepare for site visits | | | | |
| HR Practices | | | | |
| Know needs of children | | | | |
| Physical support to staff | | | | |

| Health & Safety | | | | |
|---|---------------|---------------|---|---|
| | High Priority | Less Priority | | |
| Health for children & staff | 5 | | 3 | |
| Child safety | 3 | | 4 | |
| Child care clean outside & inside | 3 | | 3 | |
| Safety for children in environment | 1 | | 3 | |
| Limited screen | 1 | | 1 | 1 |
| Environmentally sensitive cleaning products & sunscreen | | 1 | 2 | 1 |
| Screen free | | 1 | 1 | |
| Physical health | | | 2 | |
| Policy Guidelines | | | | |
| Screen time used for education | | | 2 | |
| Playground checklist | | | 3 | |
| Healthy meal policy | | | | |
| Healthy eating habits | | | 2 | |
| SOP for safety in place | | | | |
| Checklist for safety for teachers | | | | |
| Nutritious food priority | | | | |
| Sick procedure | | | | |

Evidence of Quality

The second part of the workgroup session focused on discussions that lead to discover actual evidence of quality that are in place within each center. The workgroup utilized an interactive online application called “*SlidesWithFriends*”, which allowed providers to rate, provide short answers, and be polled on specific subjects. Before diving into the discussions to prove evidence of quality, we opened up with an ice breaker and asked providers to anonymously rate the overall quality of child care services in their respective child care centers. See the chart below for reference to the results submitted by providers:





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Establishing and Rating Evidence of Quality

The five (5) areas of quality determined by the first workgroup required qualitative evidence that identify actual practices/opportunities which can be perceived to be implemented in a high-quality child care setting. Through the online application *SlidesWithFriends*, providers were prompted with the question: “How do you show that you are providing quality in the area of...”, and providers were able to submit their responses to be seen by all participants in real time through the app. The providers were then tasked to explain each subject they listed through a roundtable discussion. All providers were tasked to vote on ideas that they agree to be prioritized in a high-quality child-care setting. The providers’ votes are shown in the chart below, ranked with the number of votes from 1 through 5; 1 being the lowest and 5 as the highest number of votes. Providers were allowed to vote on as many ideas that they agree with.

Aside from voting on the ideas of evidence presented, providers were also tasked to identify their top two or three priorities from all the ideas identified within each area of quality. Providers listed their highest and least priorities on sticky notes, separate from the app. The highest priorities identified are shown as the plus (+) icon and least of their priority as the (-) icon in the table below. This process allowed providers to first identify their evidence of quality, discuss recommendations/solutions, vote on all ideas that they agree to, and finally highlight their highest and least priorities anonymously. The ideas of evidence identified in the different areas of quality will be beneficial in support of determining indicators for our quality system. See the results by each respective area of quality below:

STAFF SUPPORT

| 1 | | 2 | 3 | 4 | 5 |
|--------------------------------|-------------------------------|--------------------------------------|--|------------------------------------|----------------------------|
| Quarterly Evals / Goals (+) | Incentives (+) | Delivering on Promises (-)(-) | Communication listening (+)(+) | Provide Incentives (-) | Being Present (+)(+)(+) |
| Assisting | Providing Training | Provides Training (+)(+) | Staff Daily Check In/Out (+)(+)(-)(-) | Lending a Hand (+) | |
| Bonuses (+) | Open door/messaging (+)(-) | Monthly Performance Rating (-)(-) | Yearly Evaluation / Increments (+) | Staff Appreciation (+)(+)(+)(+) | |
| | Meet Staff Needs | Doing the Work (-) | Recognition for all hard work | Flexibility | |
| | Respect | | I help my other staff | Encouraging (+) | |
| | Listening | | | | |



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FAMILY ENGAGEMENT & SUPPORT

| 1 | 2 | 3 | 4 | 5 |
|---------------------------------|--------------------------------------|------------------------------------|----------------------------|------------------------------------|
| Communication Binders (-)(-) | Quarterly PTC (+)(-) | Communicate and Engage (+) | Taking Time to Talk (+) | Open Communication (+)(+)(+)(+) |
| Assist with Homework | Invite for Special Event | Face to Face Interaction (+)(+) | Listen and Understand | |
| Communicating | Parent Meetings (+)(-) | Building Trust | Whatsapp Messaging | |
| Family Parent Involvement | Partners with parents for engagement | | Daily Updates (+) | |
| Acknowledging with needs (+) | Communication using app (hiMomma) | | | |

CENTER LEADERSHIP & ADMINISTRATION

| 1 | 2 | 3 | 4 | 5 |
|---------------------------|--------------------------------|-------------------------------------|---|-----------------------|
| Setting Examples | Lead by Example | Setting the Example (+)(+)(+)(+) | Including them in Planning (+)(+)(+) | Present at the Center |
| Reminders (+)(-)(-) | Being Present (+) | | Providing them Feedback | |
| Need More Support (+) | Getting Docs on Time (-) | | Open Communication (+)(+) | |
| GATHER STAFF INPUT (+) | Listens to Their Needs (+) | | | |
| | Being a Role Model (+)(+) | | | |
| | Open Door Policy (+) | | | |
| | Opportunity to Grow (+) | | | |
| | Modify Policy for Needs (-) | | | |



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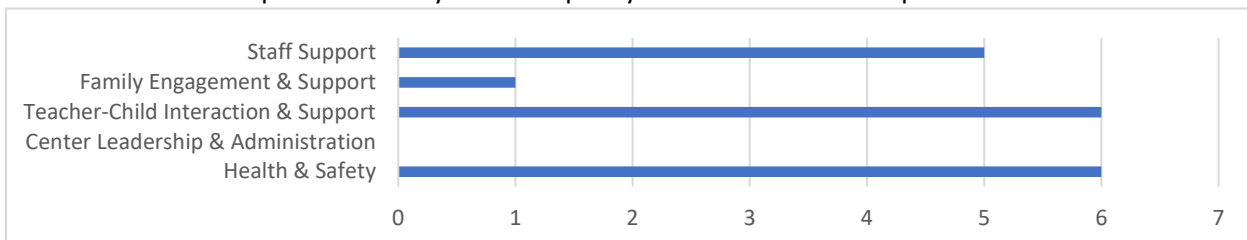
HEALTH & SAFETY

| 1 | | 2 | 3 | 4 | 5 |
|---------------------------------|--|-------------------------------|--|---|-------------------------------|
| Follow-up Phone Calls (+)(-) | Update Shot Records | Monthly Safety Drills (+) | Policy Against Candy, etc. | Spot Hazards / Prevention (+) | Health Checks (+)(+)(+)(+) |
| Post Around Center (-) | Update Health Clearances (+)(+) | Do Not Accept Sick Child | Closed Toe Shoes | Monthly Drills / Practice (+)(+)(+)(-) | |
| Health Assessment Upon Drop | Providing Healthy Snacks/Foods (+)(+) | Provide Safety Environment | Safety Rules on Daily Routines (+)(+) | | |
| Health Screener (+) | Safety Rules Signs (+) | Provide Safe Equipment (-) | | | |
| Center Rules | Sanitation (+) | | | | |
| Rules Around Facility (+) | Behavior Policy | | | | |
| | Mask-Up | | | | |

The strategy of collecting/gathering evidence of quality from local child care providers and setting priorities will later be translated into the design of Guam's quality improvement framework. In the next workgroup session, providers will have to review and rearrange results that best fit their desired framework. The results from the previous sessions will first have to be narrowed down by eliminating duplicate responses and/or by compiling similar responses. All ideas listed within each area of quality will also need to be defined further, and be translated into becoming an indicator of quality. Providers will have an opportunity to design how each indicator will be measured and its rating processes as we continue designing the systems framework.

Area of Quality Priority

Following the discussions of evidence, the Bureau of Child Care Services was interested to know which area of quality various child care centers in Guam prioritizes over others. The providers were allowed to choose 2 to 3 areas of quality that they believe their center prioritizes. The results from this survey will be used to evaluate the phases of entry into the quality framework based on providers' recommendations.





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Support From BCCS

Aside from exploring ideas and discussing opportunities to consider including into the systems framework, it is also important to understand how providers can anticipate BCCS's evaluation of potential quality systems. By implementing a quality improvement system, child care centers will need to be able to prove to the public and BCCS, as the governing authority, how their center is providing the highest quality child care services. Providers were prompted the question: "how can you show DPHSS, BCCS that you are providing the highest quality child care services?" Here are the results from the poll by number of votes:

| 1 | 2 | 3 | 4 | 5 |
|--------------------------------|---------------------------|----------------------|----------------------------|-------------------|
| Posted Lesson Plans | We Follow the Guidelines | Following Guidelines | Follow and Update Policies | Clean Environment |
| Parent App | Staff are Happy | Complying with R&R | Positive Environment | |
| Making Room to Learn | Positive Teacher to Child | | | |
| Ensure Safety Under Our Center | | | | |
| Improving the Center | | | | |
| Room for Improvement | | | | |

It is also important to understand how BCCS can support providers as we determine what high quality child care may look like in Guam. Providers were prompted the question: "What type of support do you need from the Bureau to improve the quality of your programs?" Here are the results by number of votes:

| 1 | 2 | 3 | 4 | 5 |
|-----------------|------------------------------|----------------------------|-----------------|------------------|
| Offer Trainings | More People Allowed Training | Financial Support | More Funding | Teacher Training |
| Trainings | More Training | Faster Clearances | Processing Time | Block Grant |
| | Operational Support | Fast Approval of Documents | | |
| | Updates | CPR Training | | |
| | Phones That Work | | | |
| | Guide Health Concerns | | | |

The discussions which centered on the supports needed from BCCS allowed providers to have an open dialogue on the issues that exist within each child care center and explore other factors that may affect their quality of services. Some of the strategies that child care providers recommended to use to strengthen trust and engagement with BCCS is to offer more trainings, allow more participants into the training, and to have a regular communication loop with providers. Providers on the other hand offered positive feedback from the overall workgroup session and recommended to meet on a monthly basis.