



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



Provider Workgroup 5 – Summary Report

Discussions on Cultural Humility and Evidence of Quality

Provider Workgroup Description

The Bureau of Child Care Services' (BCCS) has been working in partnership with licensed child care providers in the development of a Quality Improvement System (QIS) to fulfill the requirements set forth in Title 45 CFR §98.53. The QIS is being developed for child care providers and programs to assist with continuous quality improvement and to achieve high-quality child care services. Local child care representatives from the following child care centers discussed cultural humility and evidence to support the quality indicators in the QIS: *Adventures in Learning*, *Lots of Learning*, *Precious Ones*, *Little Ones*, *Doc's Day Care*, and *Sky Learning*. The fifth Provider Workgroup Session was held at the Sinajana Mayor's Office on February 27, 2024.

BCCS conducted a brief presentation on the subject of "Cultural Humility" to emphasize culture in the design of Guam's QIS and how recognition and acceptance of other cultures is important to incorporate in high-quality child care settings. Increasing the awareness of culture influenced providers to identify evidence that they perform in their own centers to support each area of quality in the QIS. The guiding factors that were presented are:

1. A lifelong commitment for self-evaluation & self-critique;
2. The desire to fix power imbalances that have and should not existed; and
3. Developing partnerships with people or groups and advocating for others.

Keeping these guiding factors in mind, the providers were split into three (3) groups, with two (2) child care providers in each group, and given the opportunity to provide evidence of quality that support the quality indicators in each area of quality that is implemented in their child care center. The child care provider representatives collaborated with BCCS to create a system designed to improve the quality of child care services on Guam by dedicating their time and experience in discussing, creating, and gathering evidence for each of the six (6) areas of quality and their indicators. Each group was assigned to a BCCS staff who facilitated discussions for a set of two (2) areas of quality. Each group was given twenty (20) minutes to provide evidence in the designated area of quality. The groups would rotate to another area of quality facilitated by another BCCS staff with a different set of two (2) areas of quality.

For example, there are three (3) Provider Groups: Provider Group A, Provider Group B, and Provider Group C. There are also three (3) BCCS Staff: BCCS Staff A, BCCS Staff B, and BCCS Staff C. BCCS Staff A is assigned to facilitate Safety, Health, and Nutrition and Center Leadership and Administration; BCCS Staff B is assigned Teacher-Child Interactions and Learning Environment; BCCS Staff C is assigned Professional Development and Staff Support and Family Engagement and Support. Provider Group A is assigned to BCCS Staff A to discuss for 20minutes and the same goes for each Provider Group to each BCCS Staff. After 20 minutes, Provider Group A will move to BCCS Staff B, Provider Group B will move to BCCS Staff C, and Group C will move to BCCS Staff A. This will go on for three (3) rounds until each Provider Group has completed rotation and provided input for each area of quality.



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DIVISION OF CHILDREN’S WELLNESS
BUREAU OF CHILD CARE SERVICES (BCCS)**



Following the given example, gives each participating child care provider an opportunity to openly discuss and provide evidence that contribute to a high-quality child care setting. The evidence identified by the providers must support the definitions of quality; therefore, BCCS will evaluate the results and make adjustments as necessary to ensure the integrity of the QIS design. This activity allowed BCCS to receive direct feedback from each child care provider and accurately report evidence-based quality.

Provider Workgroup Results

The small group breakout sessions allowed providers to have an open dialogue on practices that influence quality of services that should be incorporated into the QIS. BCCS compiled the results and organized it into tables that describes the definition within each area of quality and the evidence that support each indicator, which is broken down below:

Top Row = Area of Quality;
Left Column = Quality Indicator;
Right Column= Evidence

SAFETY, HEALTH, & NUTRITION	
Quality Indicator	Evidence
<p>Prioritizing the health & Safety of children and employees in a child care setting</p>	<ul style="list-style-type: none"> • Staff should sanitize & clean facilities after hours of operations • Air purifiers should be available to assist in avoiding respiratory illnesses • Child care physical environment checklist to assist centers in assessing the quality of their physical environment • Management of center safety and cleanliness standards • Cleanliness inspection & rating should be displayed publicly • Floor should be clear of any items or obstacles to avoid causing accidents <ul style="list-style-type: none"> • Injury reports are sent to BCCS within 24 hours if any such event occurs • Center provides an isolation room for children showing symptoms of illnesses • Standard policies and procedures for sanitization & contracted illness • If child or provider shows symptoms of illness, have a procedure in place to send home • Send injury report to BCCS within 24 hours if any such event occurs
<p>Improving Early Childhood Nutrition</p>	<ul style="list-style-type: none"> • Established nutritional policies for parents to be aware of • Provide information such as newsletters to parents to encourage healthy eating & inquire suggestions for menu if celebrations in the centers are held. <ul style="list-style-type: none"> • Create routine or scheduled eating times • Avoid “unhealthy” foods items; provide more health-conscious alternatives (i.e. water > sugary drinks) • consciously accommodate any child with special nutritional preferences or health issues • attend meeting with providers to contribute nutritional concerns of children



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



<p align="center">Consider Individual Child's Health Care needs</p>	<ul style="list-style-type: none"> • Enrollment applications should include dietary restrictions with medical notice as needed <ol style="list-style-type: none"> 1. Food and medication allergies 2. authorization consent forms 3. provider name & information of medical insurance 4. Health History and records 5. Bodily conditions with needed medications such as asthma, epi-pens, etc. 6. Child's preferences 7. Agreement of acknowledgment of child(ren)'s health and procedures of center's responsibility & the parents/guardians. • Determine which and what hospital should the child(ren) be transported to in case of medical emergency • inspections of body as needed if injured or signs of illness • if showing signs of sickness, child(ren) should be sent home to avoid infection to other children • Providers/Center staff being observant of signs of any abuse or neglect and report such cases accordingly
<p align="center">Policies that promote Nutrition, Health, and Safety</p>	<ul style="list-style-type: none"> • established standard procedures & policies in center handbooks & parent handbooks that is accessible for all staff • send out newsletters, reminders, emails and other forms of communication to inform changes to any policies to staff and parents • Monthly meetings to discuss safety, health, & current events of the month & receive feedback or voice concerns • Physical examinations of child if signs of any illness or signs of abuse present • Written logs of those who (staff and children) were ill and sent home • Visible information such as fliers or notes of any children with allergies to be conscious of them for accountability and safety

CENTRAL LEADERSHIP & ADMINISTRATION		
Quality Indicator	Evidence	
<p>Knowledgeable, responsible, and prepared for local laws, rules, and regulations for center operations and inspections</p>	<ul style="list-style-type: none"> • Standardized rules & regulations that are readily available for staff to refer to; printed or digital • To be provided DEH & BCCS checklists in advance or guides to assist them with inspections • Reminders & refresher seminars for rules & regulations yearly; held at a venue that can accommodate all of the employees of the centers. • Inspectors will be shown certifications, licenses, have questions answered, necessary documentation • Reminders for staff and accountability established to prepare them for DEH and BCCS inspections • Internal checklist for inspection; should be visible for staff 	
<p>Owner and director gives continuous guidance and</p>	<ul style="list-style-type: none"> • Leadership Accountability & Development • Owner/Director be mindful of response time to emails, calls, etc. • Have parent involvement with centers such as volunteering • Communications for staff and parents 	



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



support to center communities	<ul style="list-style-type: none"> • Leadership listens, observes, & understands the well-being of center employees and improve employee morale • Professional development trainings made available for employees • Employee surveys and evaluations to be given to the staff of the center • Satisfaction surveys of the child care center services to be provided to parents 	<ol style="list-style-type: none"> 1. Timely and proper advance notifications for events and updates 2. Hold conferences and meeting for parents, teachers, & directors 3. Provide resources for parents such as child's activity binders, newsletters, etc. 4. Digital communications such as emails, WhatsApp, BrightWheel, Procare, etc.
Leadership listens, understands, and observes the wellbeing of center employees as needed to improve employee morale	<ul style="list-style-type: none"> • Owner/Directors communicate with staff on their needs and reports • Center has an employee engagement process such as mental health support and team bonding exercises • Competitive wages 	<ul style="list-style-type: none"> • Center provides medical insurance for employees • Quarterly or yearly staff appreciation events • Incentives such as gas and shopping coupons for work that is done based of the employee's evaluation
Leadership gathers staff input/feedback on management for further improvement on center operations.	<ul style="list-style-type: none"> • attendance sheets for employees to manage working staff • Center holds mandatory monthly meetings for staff to voice their concerns or improvements that can be made 	<ul style="list-style-type: none"> • center surveys staff for input on management • Prepare agendas during professional development days for staff.

TEACHER-CHILD INTERACTIONS		
Quality Indicator	Evidence	
Develop a positive teacher-child relationship through nurturing interactions to build a safe and trusting environment for all children	<ul style="list-style-type: none"> • Established effective forms of communication amongst all children such as a "talking stick" to take turns • Recognizing different communication styles of each child & accordingly • Understanding a child's mood while interacting • Employ one-on-one strategies for child & child teacher as needed • Giving positive reinforcement to children when deemed appropriate 	<ul style="list-style-type: none"> • Give children & time to share verbally • Establish various methods based on age of child(ren) where methods that could work with younger children may not work with older children such as pre-school age • Formulate staff schedules to observe which children respond to teachers. Some children respond differently to a different teacher. • Observations of interactions of teacher and child; CCDF used to conduct these observations to monitor responses
Promoting equality for all children through positive guidance and interactions based on their needs	<ul style="list-style-type: none"> • Parents can fill out in enrollment application of any pertinent personal information of child such needs, wants, dispositions, preferences, etc. 	<ul style="list-style-type: none"> • Accommodate, adapt, & be fair of care given depending on child especially those with special needs



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



	<ul style="list-style-type: none"> • Ensure that every child is included and feels included; Observation can show that children are smiling and actively listening or engaging with the teacher and/or activity
Teacher demonstrates and reinforces positive behaviors through modeling appropriate verbal and physical language, actions, manners, and habits.	<ul style="list-style-type: none"> • Ensure teachers understand employee handbooks • Teachers holding accountability of operations with students and other teachers • Providing feedback to help give improvements on teachers' handling and care of child(ren) • Administer any necessary disciplinary actions for teachers; with some kind of corrective action plan <ul style="list-style-type: none"> • Provide support to teachers who have difficulty with overactive or difficult children • Provide technical support for teachers for improvement • Promote mindfulness for both teachers & children; check breakdown • Promote positive behaviors and models for teachers with incentives
Teacher and child learn from each other from important teacher-child interactions. The teacher learns from the child	<ul style="list-style-type: none"> • Establish relationship of who is the "teacher & who is the "student" • Form holistic approaches amongst children • Clear communication methods between the two such as the "talking stick" • Create awareness of cultural humility, behaviors, & mannerism of the child(ren) <ul style="list-style-type: none"> • Give opportunities to lead and understand their and their teacher's role • Have teachers fill out a survey inquiring experiences with children • Gather feedback from teachers, possibly give channels to see how other teachers & students can learn from each other
Implement performance evaluations (quarterly or as needed) to target strengths and weaknesses of teaching staff to provide effective supports like trainings and materials.	<ul style="list-style-type: none"> • Implement assessment methods and tools • Have evaluations of teachers and how they are fare with interactions; possibly have them annual, semi-annually, or quarterly <ul style="list-style-type: none"> • Establish probationary period for teachers who are working with children • Provide a time frame to assist teachers, new or veteran, in where and what areas they can improve

LEARNING ENVIRONMENT	
Quality Indicator	Evidence
Centers develop a safe, positive, and age-appropriate learning environment that benefits all children and staff	<ul style="list-style-type: none"> • Creating specific, designated spaces for children & activities. Examples include: Separate rooms or buildings based on children's age Separate indoor and outdoor environments and equipment Designate safe areas for any toddlers or infants that can crawl • Providing varying activities such as: Singing/oral speaking lessons Drawing/coloring Playtime with toys or child equipment • Conscious speech that is appropriate around children • Ask for parental feedback of curriculum, lesson plan, center activities, etc.
Center implements an educational plan	<ul style="list-style-type: none"> • Usage of Early Learning Guidelines assists teachers and helps give a framework of what they can teach with the children, can also help • Providers adapting and being flexible for the needs of the children



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



to help children grow in all developmental domains	build themed & structured routines or schedules • Using applications such as Brightwheel to help promote attendance and communication with parents.	• Providing visual aid to children to help with lessons • Structured outdoor play to help children have a physical activity • Implementing teaching strategies to varying ages of the children
Families and children in care have access to age-appropriate & reliable sources of instructional materials	• Building rapport with parents so the center knows what can be provided. • Holding a discussion with parents & having documentation what is requested • Asking parents to fill out surveys to gauge needs for child	• Providing varying resources & materials that are appropriate • Giving children projects that can help engagement between child and parent(s)
Center offers opportunities for each child to safely explore to learn	• Thematic ways to encourage different learning for children such as: 1. STEM activities 2. Movies 3. Sparks curriculum 4. Interactivities days 5. Play days 6. Culture activities	• Teachers may ask children what they would like to learn

PROFESSIONAL DEVELOPMENT & STAFF SUPPORT	
Quality Indicator	Evidence
Employees possess foundational knowledge of childcare services to perform, with the support of continuing education, experience, and accessible training opportunities in pursuit of continuous professional improvement	<ul style="list-style-type: none"> • Center has a minimum of 2 providers with Pediatric First Aid and CPR • Lead Providers and Directors have at least 1 hour of culture humility related courses • All Teachers have completed a Behavior Treatment Assessment course • Directors creates Professional Development Plans for their staff <ul style="list-style-type: none"> • At least 50% of staff should be qualified as a Lead Provider or above according to Guam's Plan for Professional Development. • All staff members meet the minimum of 15hrs of Health and Safety training annually



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



<p>Provide continuous support through professional development opportunities designed to contribute to teachers' skills and knowledge to excel in child care settings and excel to higher level positions</p>	<ul style="list-style-type: none"> • All staff members must complete a Culturally Humility course (1hr min.) • Center provides at least 1 teacher to complete a Special Education Needs training • Center provides proof that staff understands provider requirements according to the GPPD • Owner/Director should be certified as a Pediatric CPR & First Aid instructor and certify newly hired staff members. • Center encourages and supports staff to attend ECE related seminars and trainings conducted by Guam's ECE communities
<p>Justified wage that serves to compensate for the dynamics of working in a child care setting, that also considers incentives based on experience and performance to encourage staff continuity, reliability, and retention</p>	<ul style="list-style-type: none"> • Holiday pay or paid Holidays off • Paid Sick & vacation leave • Staff are allowed leave for their birthday • Annual raises (requirements shall be in employee handbook) • Center has an "employee incentive/bonuses program" established • Center has an Employee Appreciation program
<p>Center supports the social and emotional wellbeing of employees through communication and teamwork to influence the motivation and passion to be working in the childcare setting</p>	<ul style="list-style-type: none"> • Center provides Incentives and rewards to support staff's social and emotional wellbeing • Staff are allowed time off to observe holidays • Center creates different monthly themes for their center • Center provides a Mental Health related training course • Center provides access and support to counseling and resources to their employees



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



FAMILY ENGAGEMENT & SUPPORT	
Quality Indicator	Evidence
Efficient communication through technology, paper, and/or in-person interactions with center families	<ul style="list-style-type: none"> • In-person verbal communication with parents/families • monthly news letters • Flyers/announcement boards • parent binders <ul style="list-style-type: none"> • communication apps. (Whatsapp, Brightwheel, Procare) • Create Whatsapp group with parents and staff • email updates • direct access to staff via text messages
Offer opportunities to support and accommodate employees to communicate and interact with center families to build trusting relationships	<ul style="list-style-type: none"> • encouraging teachers to interact with the families • Field trips • In-house Holiday activities • family visitations to center • open houses and Parent Teacher Conferences. <ul style="list-style-type: none"> • Birthday celebrations that include child's family • assist in awareness of events outside of the center • teacher personally updates families on their child(ren)
Accommodate families to the best of the center's abilities	<ul style="list-style-type: none"> • Center assists families with enrollment, updating information, status changes in application as needed. • Center Provides assessment tools to gauge the needs of a family • Center uses ASQ's • allowing family to visit center <ul style="list-style-type: none"> • curriculum, resources, and activities are aligned with family and social worker's recommendations. • Center uses assessment tools to improve support for children with special needs • Center has a parent handbook
Understanding each individual child and their needs, to build and display positive relationships with their unique families	<ul style="list-style-type: none"> • Thematic learning activities • Center promotes Spirit week <ul style="list-style-type: none"> • Center celebrates United Nations Day • Binders displaying child's work and progress to share with family

Next Steps

The overall goal of conducting this workgroup session is to collect evidence that support each indicator identified in the current QIS design. The evidences proposed will later serve as a tool to identify and validate quality of service implemented in the center. The overall goal of conducting the workgroup sessions with child care providers is to ensure that the QIS is developed with a homegrown approach that is supportive of providers' recommendations and considers the cultural diversity of families.



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



The Quality Improvement System is divided into three phases. Following the completion of each phase will initiate stakeholder engagement with parents and an advisory committee for additional recommendations.

- Phase one is to define quality and indicators of quality;
- Phase two is to develop a Quality Improvement System framework.
- Phase three is the implementation and evaluation of QIS.

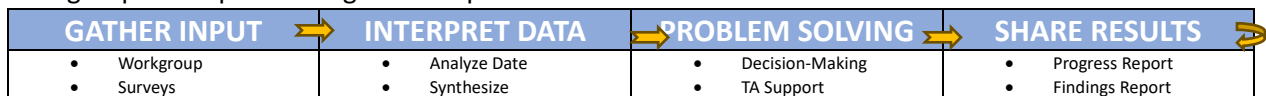
This session completed the first phase of the quality improvement system of defining quality. A total of five (5) provider workgroup sessions were conducted to complete the first phase.

The next step is to share the progress of the QIS with parents of children who receive subsidy under CCDF. BCCS plans to conduct its first parent focus group with a goal of reaching culturally diverse families. The parent focus group will allow parents to be introduced to what a QIS is, understand the progress of the QIS design, and allow parents to provide feedback and recommendations. The results from the parent focus group will later be announced and discussed in the next provider workgroup session.

Following the parent focus group, BCCS will initiate its first meeting with the State advisory council, Guam Early Learning Council (GELC). This meeting will serve as an introduction of the QIS for the advisory council members. BCCS will engage with GELC to ensure that the QIS is aligned with the overall goals of early childhood education in Guam. This will also provide an opportunity for BCCS to ensure that the QIS design translates efficiently as children transition to school.

Feedback Loop

BCCS is committed to the integrity of our work, and have developed a feedback loop that providers in the workgroup can expect throughout the process:



The feedback loop moves in a cycle and is intended to focus on collaborative efforts & supports.