

Early Learning Coalition of Florida's Heartland, Inc.

www.elcfh.org

ELCFH Quality Committee Meeting Thursday, August 14, 2025 at 9:00 AM via ZOOM

Zoom meeting link: <https://us02web.zoom.us/j/82056356392?pwd=cbx6zSUOi7hu8xfDPSvQFKEXPOB0DL1>

Meeting ID: 820 5635 6392

Password: 743446

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Agenda Item	Content
1. Opening Committee Chair: Susan Norris	<ul style="list-style-type: none">• Welcome and Introductions• Review- 5.15.25 Quality Comm meeting minutes (p.2-4)
2. Discussion Anne Brewer p.5 p.6 p.7	Items for Committee discussion are: <ul style="list-style-type: none">a. Hurricane Season- child care program COOP/ emergency preparations- Hurricane Disaster funding conversationb. VPK sub and VPK teacher break time clarificationc. COP for Kindergarten Transitiond. ELCFH Provider Event- February 21, 2026- Steve Fitee. Directors meetings- low participation in Highlandsf. VPK Readiness Rates
3. Healthy Families p.8-9	Updates from the Healthy Families Charlotte and DeSoto/ Hardee Programs - Maria Magowan and Trena Miller
4. Open Forum	Other items for discussion? <ul style="list-style-type: none">• Follow-up VPK meeting- date pending• Contracted Provider Meeting- 8.21.25 at 6:00 PM via ZOOMAnnual Meeting- 8.27.25- Turner Center Annex in Arcadia• Invitations for all meetings have gone out
5. Adjourn	

Item 1: ELCFH Quality Committee (ZOOM) Meeting Minutes- May 15, 2025

ELCFH Quality Committee Meeting Minutes- May 15, 2025

Committee/ Board Members Present: Susan Norris, Maria Magowan, Susan Flemming, Trena Miller
Leigh Ann Moccia, Enrico Pucci

Staff Members Present: Anne Bouhebent, Beth Mueller, Janet Lane

Guests Present: Altagracia Lajara-Paredes, Tonya Wallace, Melissa Wiest

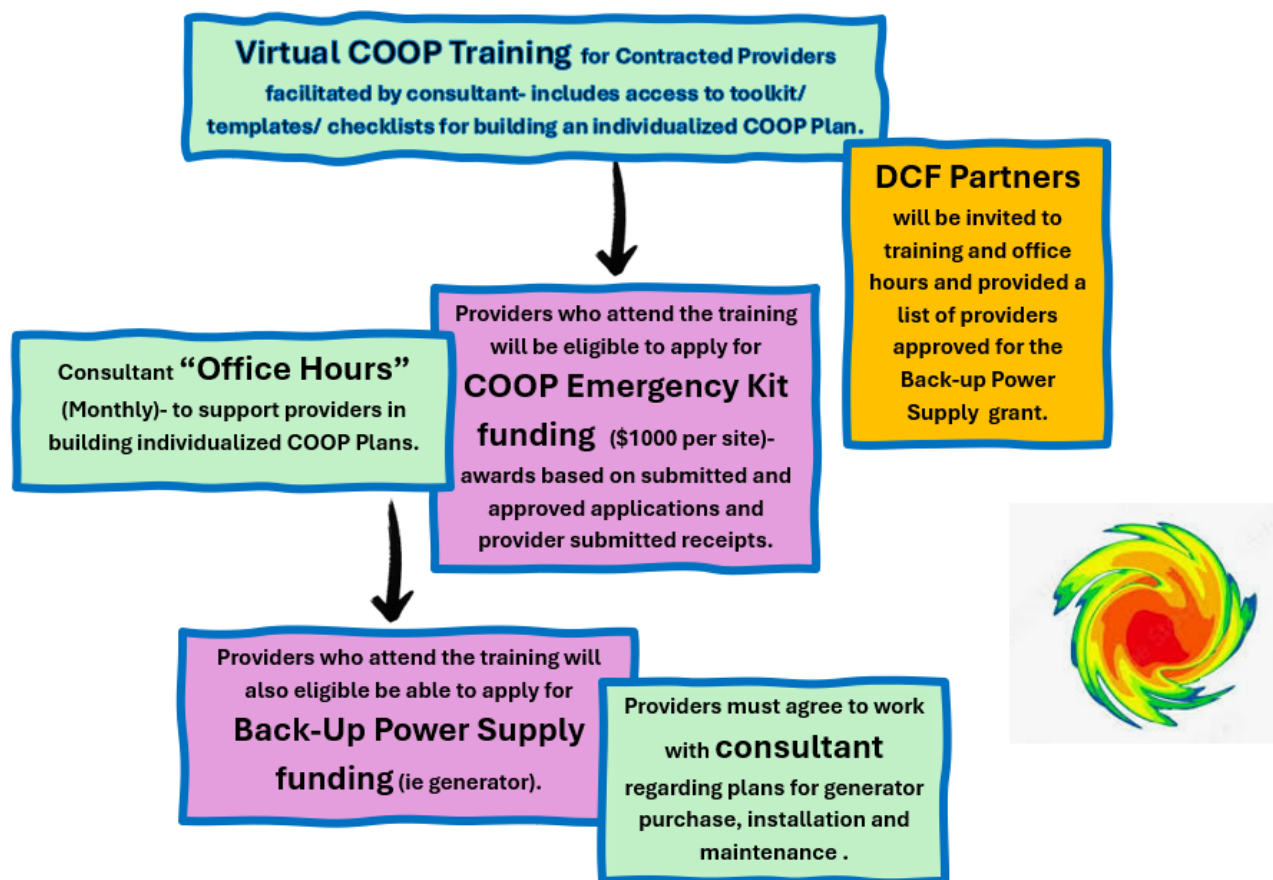
Agenda Items	Item Overview	Comments/ Actions
1. Opening	The meeting opened at 9:00 AM. Introductions were made. The 3.13.25 Quality Committee meeting minutes and 4.24.25 Contracted Provider meeting notes were reviewed.	
2. Committee Discussion	<p>2025 Legislative Updates:</p> <p>HB 859 passed which addresses <i>Access to School Readiness Programs for Economically Disadvantaged Households</i>. It is anticipated that this would be a great help especially to households with two working parents. Important rule updates were approved by the State Board of Education on April 9, 2025 and shared broadly with providers. These rule updates will take effect at the start of next fiscal year (July 1, 2025).</p> <p><u>6M-4.400: Required Parent Copayment</u></p> <ol style="list-style-type: none"> 1. Family copayment not to exceed 7% of the family's income. 2. Removes family size as criteria for assessed copayment. 3. Family will make only one copayment to one-authorized provider. <p><u>6M-4.500: Child Attendance and Provider Reimbursement</u></p> <ol style="list-style-type: none"> 1. Reimbursement not paid prior to student's first day of attendance or after student's last day of attendance. 2. Add provider reimbursement for one staff training day approved by the coalition as a 13th holiday in the SR contract. 3. Remove quality performance differential (QPI) of 4% for providers with program assessment composite scores of 4.50 to 4.99. This means that effective July 1, 2025, providers with a SR composite score between 4.50 and 4.99 will no longer receive a 4% QPI differential. There is no change for providers with a SR composite score of 5.00 and higher <p>DEL is developing supplemental materials and guidance to assist ELCs and providers with implementation of the revised elements of the rules. The ELCFH will issue additional information regarding the 13th holiday allowed for staff training and how to address the child co-pay per family in Portal as this become available. Committee members were advised to keep an eye on ELCFH blasts for more information!</p> <p>Provider appreciation day was May 9, 2025- the ELCFH distributed a simple gift to all teachers with good feedback. Ideas for next year are welcomed!</p>	

	<p>The Provider survey (via Jotform) results with a focus on <i>child care business, teacher salaries and incentives</i> was presented and discussed. The results help to provide a little insight into actual business practices in the four county service area. Other key topics such as curriculum will be surveyed in the future. A question regarding benefits was asked and needs further research. An idea is to look at a cohort of providers that can work with an insurance company or broker to discuss group rates for staff.</p> <p>Preparing for Hurricane Season- what do providers need to best prepare? The training catalogue from Save the Children on psychosocial support and education in emergencies was reviewed and a possible training identified. The ELCFH just created a new COOP and might be able to assist with a template of some kind for providers. It was agreed that aftermath info on reporting to the ELCFH, how to notify etc would be helpful.</p>
3. Healthy Families	<p>The DeSoto/ Hardee program reported the following:</p> <ul style="list-style-type: none"> • As shown on the Q3 report, 18 of 20 required performance measures have been met; the two outliers are due to issues of family retention. • The annual Quality Assurance site visit has been scheduled for June 3-5, 2025. • There is current staff vacancy for a home visitor position due to a staff resignation. • The program participated in remake learning (Patterson Foundation) in Desoto with a fun painting activity at the Healthy Families office. There were 51 participants for this event! • The program has recently submitted a grant focused on securing funding for a mental health counselor; this effort was supported by the ELCFH. <p>The Charlotte program reported the following:</p> <ul style="list-style-type: none"> • As stated on the Q3 report, one performance measure specific to HFPI administration was not met due to program families moving out of Florida. The core reason for families leaving is the lack of affordable housing. • The Program had its annual QA sit visit from April 30th -May 2nd and are currently pending the final report. • A program supervisor position was open and subsequently filled by a home visitor. The program is currently recruiting for the open home visitor position. • Community outreach to local agencies has been happening and as a result, 15 new families were enrolled between January through March 2025. This is a significant increase for the program!
4. Open Forum	<p>The following was shared:</p> <ul style="list-style-type: none"> • Child Enrollment- remains a serious issue for some provider sites. The ELCFH continues to survey providers for open sites and share that information with families listed as “eligible, not enrolled”. • HIPPY- reported an open home visitor position for Hardee County. • Director meet and greet- content idea for discussion is to bring curriculum sample and talk about the pros and cons. A provider survey asking about curriculum and how its working was also suggested- this would be great information for new providers. Provider handbooks for staff and parents would also been good to talk about and share.

	<ul style="list-style-type: none"> • VPK Program Schedule- a question was asked regarding when a program could officially start their VPK program for the school year. The program start date can be August 10th or later; it is fine to align with the school district schedule (or start a few days after).
5. Adjourn	The next Quality Committee meeting will be announced with the Board approved meeting scheduled (6.25.25). The meeting adjourned at 10:24 AM.

Item 2.a:

Hurricane Disaster Relief Funds- COOP Planning for Contracted Providers



Child Care/ Family Materials:

- **Virtual Resilience Training** for **all** contracted provider staff- including resource bundle.
- **Virtual Positive Behavior Support** training for Contracted Provider teachers- also includes resource bundle.
- Newly created **storm specific curriculum** with pack of preschool age books for all preschool classrooms (includes training on implementation).
- **Tiny Tegan** book and puppet kit (related to Tucker the Turtle- addresses big feelings)- for all contracted provider sites.
- **Hurricane Shelter kits** with developmentally appropriate materials including noise cancelling headphones for children (Charlotte County- community partners to help with storage and distribution of the kits at the shelters pre and post storm).

Item 2.b Clarification regarding VPK Teacher Breaks and VPK classroom subs

Florida Rule (6M-8.410 F.A.C) states: A VPK provider may assign a substitute instructor when a credentialed instructor is absent from the provider's premises. A substitute instructor may not be assigned when a credentialed instructor remains on the provider's premises in order for the credentialed instructor to offer instruction in a classroom other than the one to which the credentialed instructor is assigned.

This is basically saying that the VPK lead teacher cannot be pulled from their classroom during VPK class (instructional) time for other duties (giving a prospective family a tour of the program, completing paperwork etc.)

This means that:

- A short restroom break (with a VPK sub covering the class) is fine!
- An regular break (such as a 30 minute lunch break) is not allowed.
- **Staff breaks cannot coincide with instructional time.**

And also to clarify- all VPK substitutes have the same requirements.

S. 1002.55 (3)(e), F.S., provides the requirements as well as Rule 6M-8.410.

(e) A private prekindergarten provider may assign a substitute instructor to temporarily replace a credentialed instructor if the credentialed instructor assigned to a prekindergarten class is absent, as long as the substitute instructor is of good moral character and has been screened before employment in accordance with level 2 background screening requirements in chapter 435. The department shall adopt rules to implement this paragraph which shall include required qualifications of substitute instructors and the circumstances and time limits for which a private prekindergarten provider may assign a substitute instructor.

KINDERGARTEN TRANSITION COMMUNITY OF PRACTICE

Early Learning Coalition
of Florida's Heartland, Inc.

Join us for one meeting or all to keep the
conversations going.

Let's Talk About Kindergarten!



BRIDGING THE GAP

Please join us for a series of informal Zoom meetings for Kindergarten & VPK/PreK teachers to share experiences, strategies and expectations with one another. This is a safe place to ask questions, share ideas and build connections to support our children and families as they transition from VPK to kindergarten.



01 09/25/2025

SHARED
EXPECTATIONS

02 11/17/2025

COMMON MYTHS

03 01/12/2026

STRATEGIES TO HELP
CHILDREN & FAMILIES

04 03/23/2026

ENDINGS & BEGINNINGS

6:30PM-7:30PM

ON ZOOM

MEETING ID: 819 8226 8821

PASSCODE: 980686

HEALTHY FAMILIES CHARLOTTE

Performance Measures (Quarterly)

(4/1/2025 - 6/30/2025)

Performance Measures	Percentage Achieved
Eighty (80) percent of all families will enroll in the program prenatally or within the first three months after the birth of the focus child.	N/D = 10/12 = 83%
Ninety (90) percent of families are assessed within 30 days of enrollment.	N/D = 18/20 = 90%
Eighty (80) percent of participants that enroll prenatally will have the Edinburgh Postnatal Depression Scale (EPDS) administered to them at least once prenatally.	N/D = 11/15 = 73%
Eighty (80) percent of participants will have the EPDS administered to them within the designated time period after the birth of the focus child.	N/D = 23/23 = 100%
Eighty (80) percent of participants will have the EPDS administered to them within the designated time period for any subsequent pregnancies.	Indeterminate
Ninety (90) percent of participants will be administered the CHEERS Check-In (CCI) Tool according to schedule.	N/D = 25/26 = 96%
Eighty-five (85) percent of participants will have the baseline HFPI administered to them within the designated time period.	N/D = 17/17 = 100%
Eighty-five (85) percent of participants will have the subsequent interval of the HFPI administered to them according to the designated intervals for the tool.	N/D = 5/5 = 100%
Eighty-five (85) percent of participants who were low on one or more HFPI subscales will improve on at least one of the low subscales from baseline to six months.	N/D = 1/1 = 100%
Ninety (90) percent of families will develop a Family Goal Plan with their home visitor within the first 90 days of enrollment.	N/D = 26/26 = 100%
Eighty (80) percent of primary participants that close on level three, level four or complete the program will have improved or maintained self-sufficiency while enrolled in the program.	Indeterminate
Ninety (90) percent of focus children will receive age appropriate developmental screenings according to schedule using the Ages and Stages Questionnaire, Third Edition (ASQ-3).	N/D = 14/16 = 88%
Ninety (90) percent of focus children will receive age appropriate social-emotional screenings according to schedule using the Ages and Stages Questionnaire: Social Emotional, Second Edition (ASQ:SE-2).	N/D = 10/10 = 100%
Eighty (80) percent of focus children will be up-to-date with immunizations at 24 months of age.	N/D = 1/1 = 100%
Eighty-five (85) percent of focus children will be up-to-date with well-child checks at 24 months of age.	N/D = 1/1 = 100%
Eighty-five (85) percent of focus children over 24 months old will have the most recent well-child checks according to the schedule.	N/D = 3/3 = 100%
Ninety (90) percent of focus children enrolled in the site six months or longer will be linked to a medical provider.	N/D = 35/35 = 100%
Ninety (90) percent of primary participants enrolled in the site six months or longer will be linked to a medical provider.	N/D = 32/32 = 100%
Eighty (80) percent of mothers enrolled in the project will not have a subsequent pregnancy within two years of the focus child's birth.	N/D = 57/57 = 100%
Seventy-five (75) percent of participants will have received at least seventy-five (75) percent of home visits according to the participant level.	N/D = 42/56 = 75%

Note: N = numerator D = denominator A result of indeterminate means the denominator (D) value is 0. Bold numbers met goals.

HEALTHY FAMILIES DESOTO/HARDEE
Performance Measures (Quarterly)
(4/1/2025 - 6/30/2025)

Performance Measures	Percentage Achieved
Eighty (80) percent of all families will enroll in the program prenatally or within the first three months after the birth of the focus child.	N/D = 5/7 = 71%
Ninety (90) percent of families are assessed within 30 days of enrollment.	N/D = 13/13 = 100%
Eighty (80) percent of participants that enroll prenatally will have the Edinburgh Postnatal Depression Scale (EPDS) administered to them at least once prenatally.	N/D = 2/3 = 67%
Eighty (80) percent of participants will have the EPDS administered to them within the designated time period after the birth of the focus child.	N/D = 11/12 = 82%
Eighty (80) percent of participants will have the EPDS administered to them within the designated time period for any subsequent pregnancies.	Indeterminate
Ninety (90) percent of participants will be administered the CHEERS Check-in (CCI) Tool according to schedule.	N/D = 46/46 = 100%
Eighty-five (85) percent of participants will have the baseline HFPI administered to them within the designated time period.	N/D = 9/9 = 100%
Eighty-five (85) percent of participants will have the subsequent interval of the HFPI administered to them according to the designated intervals for the tool.	N/D = 5/5 = 100%
Eighty-five (85) percent of participants who were low on one or more HFPI subscales will improve on at least one of the low subscales from baseline to six months.	Indeterminate
Ninety (90) percent of families will develop a Family Goal Plan with their home visitor within the first 90 days of enrollment.	N/D = 15/15 = 100%
Eighty (80) percent of primary participants that close on level three, level four or complete the program will have improved or maintained self-sufficiency while enrolled in the program.	N/D = 3/5 = 60%
Ninety (90) percent of focus children will receive age appropriate developmental screenings according to schedule using the Ages and Stages Questionnaire, Third Edition (ASQ-3).	N/D = 31/32 = 87%
Ninety (90) percent of focus children will receive age appropriate social-emotional screenings according to schedule using the Ages and Stages Questionnaire: Social Emotional, Second Edition (ASQ:SE-2).	N/D = 33/33 = 100%
Eighty (80) percent of focus children will be up-to-date with immunizations at 24 months of age.	N/D = 1/1 = 100%
Eighty-five (85) percent of focus children will be up-to-date with well-child checks at 24 months of age.	N/D = 1/1 = 100%
Eighty-five (85) percent of focus children over 24 months old will have the most recent well-child checks according to the schedule.	N/D = 6/6 = 100%
Ninety (90) percent of focus children enrolled in the site six months or longer will be linked to a medical provider.	N/D = 21/21 = 100%
Ninety (90) percent of primary participants enrolled in the site six months or longer will be linked to a medical provider.	N/D = 26/26 = 100%
Eighty (80) percent of mothers enrolled in the project will not have a subsequent pregnancy within two years of the focus child's birth.	N/D = 65/65 = 100%
Seventy-five (75) percent of participants will have received at least seventy-five (75) percent of home visits according to the participant level.	N/D = 51/60 = 85%

Note: N = numerator D = denominator A result of Indeterminate means the denominator (D) value is 0. Bold numbers met goals.