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ELCFH Quality Committee Meeting
Thursday, August 20, 2026 at 9:00 AM via ZOOM

Zoom meeting link: <https://us02web.zoom.us/j/88330784354?pwd=AncDxLrp08x5PtLYfjXW0dSDqxxTdc.1>

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Agenda Item	Content
Opening	Welcome and Introductions- <i>Susan Norris, Committee Chair</i>
Discussion & Recommendations p.2-3 p.4 p.5 p.6 p.7	Items for Committee discussion/ recommendations to the Board are: 1. Review- 5.21.26- Quality Comm meeting minutes 2. Faith-based Provider Rep: <i>Ericka Brown, DeSoto County</i> 3. Provider Policy revisions (<i>recommendations to ELCFH Board</i>): a. CP1- Contracting, Programs Assessment b. CP3- Child Screening c. CP4- Provider Specials Needs Rate 4. Hurricane Ian Relief Grant- next steps....
News & Updates p.8-10	5. Provider Sanctions update 6. Provider Event- February 27, 2027 7. Book Bag Buddies update 8. DEL Updates – VPK
Healthy Families p.11-12	Updates from the Healthy Families Charlotte and DeSoto/ Hardee Programs - <i>Trena Miller and Maria Magowan</i>
Open Forum	Other items for discussion? • ELCFH Annual Board Meeting- Wed, 8.26 at 10AM - Turner Center, Arcadia • Contracted Provider ZOOM Call: Thursday, Sept 17th at 6PM • Quality Committee ZOOM call: Thursday, October 15 @ 9AM
Adjourn	

Item 1: ELCFH Quality Committee (ZOOM) Meeting Minutes- May 21, 2026

Committee/ Board Members Present: Susan Norris, Trena Miller, Billie-Jo Moretta, Maria Magowan, Rick Pucci, Susan Fleming

Staff Members Present: Anne Brewer, Beth Mueller, Janet Lane, Pam Hillestad

Agenda Items	Item Overview	Comments/ Actions
1. Opening	The meeting opened at 9:00 AM. Introductions were made. The 3.12.26 Quality Committee meeting minutes were presented and reviewed.	
2. Committee Discussion Items	Contracted provider meetings- Two meetings were held (April 21 and May 14) and specifically addressed the required SR/ VPK Provider Orientation. Providers are required to attend home coalition orientation in order to contract for the following fiscal year. SR position statement visual aids- two ideas of visual aids were presented (as developed by an ELCFH Board Member). Both highlight core points of the recently adopted ELCFH SR Position statement. These were used in a recent presentation of the SR statement to Chancellor Cari Miller and ELCFH Staff, and Chancellor Miller advised that these were a good way to highlight these important ideas. The committee agreed that tools with concrete ideas to support providers (included printed color versions of the graphic) would be useful. The ELCFH will continue internal dialogue to develop materials for TA use and bring back to the committee. Provider Handbook- new policy- CP 14 which addresses developmentally appropriate practices and required classroom implementation of lesson plans was presented and discussed. <u>Committee members recommended Board approval CP14 as presented and incorporation into the ELCFH Provider Handbook.</u> Hurricane Ian Relief Grant updates- An updated document listing the phases of this federal grant was presented. New movement is specific to vendor contracting for the COOP provider site kits, launch of the Childcare Development & Supply grant and contracting with a vendor for mental health training for providers in the spring 2027. Provider Sanctions- The committee reviewed the case of one provider who has numerous citations issued by DCF over the past three fiscal years. This provider had	

	been placed on corrective action and probation with the ELCFH but unfortunately did not meet the required terms. As a result the provider is not eligible to apply as an SR/ VPK provider until they can provide a clean DCF inspection of all standards monitored with children present. ELCFH Board approved policy was reviewed along with the DEL Health and Safety Rule. Continued TA is being provided to the site and the ELCFH looks forward to working with them again as a contracted provider once they are able to meet the minimum standards.
3. 26-27 Discussion Items	The following items were discussed in preparation for FY 26-27: • Director Boot Camp series for FY 26-27 will be facilitated. This is a networking opportunity for new/ struggling providers to meet with and learn from seasoned providers. • Faith-based Provider representative recruitment- will be facilitated during the summer. • New CLASS tool (2nd edition) will be utilized for pre-k effective July 2026. The infant/ toddler tools have been combined and will be used starting July 2027. • SR/ VPK Contract updates- as provided by DEL were shared
4. Healthy Families	The Charlotte program provided the 3rd quarter performance measures report (1.1.26 – 3.31.26), noting all measure performance showing as “exceeded”. The program has hired the last open positions which requires Spanish speaking and is in process of building the caseload. The site audit is scheduled for the week of June 22nd. The DeSoto/ Hardee program is in process of hiring a program supervisor and home visitor. Three performance measures from the 3rd quarter report were not met mostly because of the low numbers that were due (2/3). The program also provided the Thriving Together Action plan for 2026 with areas of growth notes for evening opportunities for families to attend parent groups, staff training on families with children with ASD, and also get more referrals in Hardee County. The ELCFH will help with a connection to CARD in Hardee County for the staff training piece.
5. Open Forum	The meeting calendar for FY 26-27 will be issued after the 5.27.26 Board meeting. Invitations will be sent along with the calendar and regular meetings postings. Both the calendar and postings can be found on the ELCFH website: About Early Learning Coalition of Florida's Heartland.
6. Adjourn	The meeting adjourned at 10:19 AM.

Item 3: ELCFH Provider Handbook- Policy Updates

CP1- Contracting, Program Assessment and Consideration for local childcare capacity

Child Care Providers who choose to contract for School Readiness are required to adhere to the provisions as listed in the DEL Health and Safety Handbook (DEL SR-6202; 6M-4.620 F.A.C.) and achieve the CLASS observation minimum threshold score (Rule 6M-4.740 F.A.C.). A composite Classroom Assessment Scoring System (CLASS) observation score meeting the minimum threshold must be attained in order to contract with the ELCFH. A provider who does not meet this score will be required to have a second program assessment at their own cost and must attain the minimum threshold score as a condition of contracting. The request for a second program assessment must be submitted to the ELCFH within 30 days of the first program assessment. The ELCFH will provide coaching and technical assistance support to help the provider best prepare for the second program assessment.

Exceptions to the minimum threshold programs assessment score may only exist if the ELCFH identifies/ verifies the provider as essential to meeting local childcare capacity needs as defined in the ELCFH School Readiness Plan. In cases where the provider does not meet one or both of these requirements, the provider will be reviewed for contract eligibility with consideration given by the ELCFH regarding the local capacity needs. Local capacity determination is defined as the city/ town/ vicinity in which the provider is situated while reviewing other childcare program availability for families in that same area. Such review will be presented by ELCFH management to the Quality Committee for review and consensus; determinations regarding continued contracting will be reported to the Board at the following applicable meeting.

All SR and VPK Providers are required to have an annual contract orientation with the ELCFH. This includes providers located in counties outside of the ELCFH four county service area.

CP3- Child Screening

Reference: 6M-4.720 Screening of Children in the School Readiness program

Background: Early Learning Coalitions are required to assure children age six weeks to 60 months are screened using a family friendly, valid and reliable screening tool/ process that reviews each developmental domain. Children who have potential concerns noted via the screening process are to be provided with individualized supports by the ELCFH and connection to community resources.

Policy Rationale: Newly enrolled, redetermined or re-enrolled SR children age 6 weeks to age 60 months will be screened using the Ages and Stages Questionnaire (ASQ) system no later than 45 calendar days after the child's initial enrollment/ re-enrollment in the School Readiness Program.

Policy: As families enroll or redetermine for School Readiness services as required through the Division of Early Learning Portal System, an automatic prompt will provide access to the ASQ/ ASQ:SE tool specific to the child's age.

Process:

- Families have **five twenty days** to choose to complete, decline or defer the screening process within the DEL Portal System
- After **5 20 days** if parent has not completed screenings they will move automatically through Portal function to the Provider for completion. Providers will log into their Provider Portal to find their incomplete screening queue to complete assigned screenings by the due date. **The ELCFH will encourage provider completion and send an email notification no later than 15 days after the provider screening start date. The notification email will include the screening start date for provider, screening due date, child's name and date of birth.**
- Once completed by either the family or the provider, the ELCFH will review the screening results and provide access to the summary for the family and provider within 15 days. ELCFH staff will initiate interventions as applicable within 30 days of receipt of the screening results.
- Interventions will provide short and long term goals with engagement of the family and provider to support concern areas for the child.
- Intervention implementation will include technical assistance, coaching, observation, program accommodation, and/or parent-teacher education as applicable.
- Plan evaluation will be conducted periodically to assess the applied supports; evaluation may include referral to partner agencies for further screening and evaluation to determine eligibility for services.

CP4- Provider Rate Reimbursement- Children with Special Needs

Children with special needs who receive child care services may require accommodations on the part of the childcare provider. These accommodations can be critical to assure a healthy and safe child care experience. To support needed accommodations for children with special needs in the child care setting, the ELCFH is authorized to offer a special needs rate that is applied to provider payments. The special needs rate is twenty percent more than the regular infant rate for children at all age levels. Gold Seal providers receive twenty percent more than the Gold Seal infant rate.

Providers are required to request this rate and document the modifications that have been made (or planned to be made) in order to serve the child. Documentation includes the parent/ guardian authorization with supporting documentation (ex: IFSP, IEP) and the completed provider application for the special needs provider rate on the ELCFH approved application forms. Additionally, beginning July 1, 2027, to receive a special needs differential, a SR provider must meet or exceed the minimum program assessment composite score identified in Rule 6M-4.740, F.A.C., and submit to the coalition documentation of instructional staff assigned by the provider to the child having met training requirements established in s. 1002.89(1)(d), F.S.

Once received, the ELCFH will review the full request to determine if the accommodation facilitated by the provider warrants the special needs rate. As needed, a site visit to verify existing or planned accommodations will be conducted. Once approved, a Child Development & Education (CDE) Specialist will be assigned to the child's case/ provider to provide support and to assure the agreed upon accommodation is continuously facilitated while the child is in care. Upon approval of the special needs rate, the provider will enter that rate into their profile and submit. The special needs rate request will be reviewed annually to assure the need still exists and accommodations are being made. Updated support documentation from the parent/ provider may be required as applicable.

Item 5: Hurricane Ian Disaster Funding- Implementation Phases

Funding Timeline: July 1, 2025 – June 30, 2028

Grant Scope as related to Hurricane Ian impact: *Materials, Supplies, Furnishings, and Equipment (MSFE); Child Care Supply Building (CCS); Mental Health Consultation or Services (MH); Quality Improvement Activities (QI)*

PHASE 1 (Completed!): January – June 2026 (Pre 2026 Hurricane Season)

- (QI) Child Care Biz **COOP Training and Plan Development**
- (QI) Distribution/ drop-ship **COOP Kits** with portable back-up power source to all participating COOP Plan completers

PHASE 2: June – December, 2026

- (MSFE) **Childcare Development & Supply Building:** Hurricane Ian related reimbursement/ development for turf, shade, fencing, and large playground equipment etc. (Charlotte, DeSoto, Hardee)
- (QI) Discovery Source **Weathering the Storm** curriculum and training
- Discussions in process:
 - Broaden distribution of backpack shelter kits
 - Broaden scope of Provider Grants (Charlotte, DeSoto, Hardee)
 - Facilitate additional round of COOP training (with recorded session from ChildCare Biz) to meet desired outcome of 50 providers certified

PHASE 3: January – June 2027

- (MH) Provider In-person Event- Devereux training- **FLIP-IT/ Challenging Behaviors** training (February, 2027) – *will serve as the launch to the FLIP-IT/ Challenging Behaviors bundles.*
- (MH) Provider Virtual Devereux Trainings:
 - Two virtual sessions:** specific to the bundle launch (dates pending) AND
 - Six virtual sessions:** specific to **Strengthening Future Resilience Disaster Preparedness for Early Learning Settings-** (dates pending)

PHASE 4: July 1, 2027 – June 30, 2028 (*pending 2nd allocation of Hurricane Ian funding if available*)
(QI) *ELCFH Considering curriculum and training initiative*

Item 11: DEL Updates:

VPK (agenda notes from the 8.12.26 DEL Statewide VPK Program Administrator Meeting)

- Back-To-School Reminders
 - VPK is a FREE, high-quality prekindergarten learning opportunity for Florida's 4- and 5-year-old children. ([Section 1\(b\), Art. IX, Florida Constitution](#) and [Section 1002.71\(8\), Florida Statutes](#))
 - Providers may not require a parent to pay fees or charges for any part of the VPK program, including, but not limited to, registration, supply, materials, or annual fees.
 - Providers may not require a parent to pay for supplemental services (e.g., "extended-day," "extended-year," "wrap-around," or "full-day" services) as a condition of serving the child in the VPK program.
- Emergent Literacy Training Requirement for VPK Instructors
 - Beginning in 2022, Florida law required every VPK classroom to have at least one VPK instructor who has completed three five-hour emergent literacy training courses. After completing the first three emergent literacy courses, VPK instructors must complete one emergent literacy course every five years.
 - List of approved courses- [DEL Professional Learning webpage](#)
- Summer VPK - Concluded
 - The last day of summer VPK was August 9th.
 - About 135 providers statewide offered summer VPK.

New Worlds Reading Initiative – Florida's free home literacy program for eligible VPK – 5th graders

- [Eligibility](#) – Children in a VPK program (private center, public or charter school) who have **ever** tested below grade level on FAST Star Early Literacy. Program enhancement allows incoming VPK to apply.
- [Apply Now](#) - Families can apply anytime, even if their child has not yet met eligibility.
- Check out these resources and share with providers and families - [Reading Resources for Families & Educators | New Worlds Reading](#)
- Questions? Contact support@newworldsreading.com or call (855) 399-1147.
- Visit the New Worlds Reading webpage for more information - [Free Books for Florida Students | New Worlds Reading](#).

Emergent Literacy Micro Credential – 60-hour, competency-based micro-credential that combines asynchronous online coursework with a job-embedded practicum. This program can be completed in 14 weeks with a suggested time commitment of three to four hours per week. This program is available to birth through pre-kindergarten early child care personnel (public or private) who have not previously earned a Lastinger Literacy Micro-Credential.

- \$1,000 completion stipend for eligible early child care personnel and early learning instructional staff.
- Satisfies the Emergent Literacy Course Requirement for VPK Instructors.
- Satisfies the 40-hour reading requirement for renewal for certified Florida educators if completed after October 21, 2024.
- Term Dates for 2026-2027
 - FALL A-8/31/26-12/8/26**
Application window 7/27-8/14 **WAITLISTED**
 - FALL B-10/12/26-1/19/27**
Application window 9/7-9/25
 - SPRING-2/8/27-5/18/27**
Application 1/4/27-1/22/27

Updating DCF Transcripts –

- **DCF Staff or Director Credential** – Reach out to the Child Care Training Information Center at hqw.child.care.training@myflfamilies.com or 1-888-352-2842
- **VPK Director Endorsement** – Once the [required courses](#) are complete, the endorsement will automatically show on the transcript alongside the DCF Director Credential, when present.
- **VPK Instructor Emergent Literacy Course Requirement** – Transcript will update automatically when [course](#) requirement is complete.
- **FAST Star Early Literacy Educator Academy (EA) Courses** – May take up to two weeks to appear on DCF transcript if all information used to create their Educator Academy account is consistent with the student's DCF account (First Name, Last Name, Email, DCF Student ID).
 - A certificate of completion is generated in the EA platform upon course completion and can be used in place of the DCF transcript, if needed.
 - The [FAST Star Early Literacy Educator Academy Enrollment Guidance](#) outlines all the above.
- **Competency 1 of the Florida Reading Endorsement**
 - Must provide documentation of *course completion* via **college or university transcript, school district training transcript or certificate of course completion**. The documentation must include the organization name, educator's name and a statement that course completion satisfies Competency 1 of the Florida Reading Endorsement. The Reading Endorsement on the Florida Professional Educator Certificate is not sufficient.
 - Submit request and required documentation to VPKQuestions@del.fldoe.org and Aurora.Rogers@del.fldoe.org.
- **Emergent Literacy Micro Credential and UF Lastinger Learning Courses**
 - Any training completed through UF Lastinger is automatically transferred onto a student's DCF transcript. Once the system has a record of all three components completed for a student, then it will award them the Micro-Credential.
 - **IMPORTANT: Students must ensure that all information matches between DCF and UF Lastinger accounts** (First Name, Last Name, Email, DCF Student ID).
 - Students may upload certificates of course completion via the "FL Pathways" option on the DCF Registry menu.
 - If there are issues with training not transferring, reach out to the support team at Lastinger Center.
 - Email: support@lastingerlearning.com
 - Phone: (352) 559-8950

Healthy Families Updates:

HEALTHY FAMILIES CHARLOTTE Performance Measures (Quarterly) (4/1/2026 - 6/30/2026)

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 = 6/6 = 83%
Ninety (90) percent of families are assessed within 30 days of enrollment.	N/D = 8/9 = 89%
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 = 8/8 = 100%
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 = 13/14 = 93%
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 = 40/41 = 98%
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 = 12/13 = 92%
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 = 19/19 = 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 = 28/29 = 97%
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 = 23/23 = 100%
Ninety (90) percent of focus children enrolled in the site six months or longer will be linked to a medical provider.	N/D = 29/29 = 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 focus children will be up-to-date with immunizations at 24 months of age.	Indeterminate
Eighty-five (85) percent of focus children will be up-to-date with well-child checks at 24 months of age.	Indeterminate
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 = 2/2 = 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 = 64/64 = 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 = 55/65 = 85%

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)
(4/1/2026 - 6/30/2026)

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 = 4/4 = 100%
Ninety (90) percent of families are assessed within 30 days of enrollment.	N/D = 7/9 = 78%
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 = 6/6 = 100%
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 = 4/4 = 100%
Eighty (80) percent of participants will have the EPDS administered to them within the designated time period for any subsequent pregnancies.	N/D = 3/3 = 100%
Ninety (90) percent of participants will be administered the CHEERS Check-In (CCI) Tool according to schedule.	N/D = 31/32 = 97%
Eighty-five (85) percent of participants will have the baseline HFPI administered to them within the designated time period.	N/D = 5/5 = 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 = 2/2 = 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 = 11/11 = 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 = 1/1 = 100%
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 = 25/26 = 96%
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 = 37/37 = 100%
Ninety (90) percent of focus children enrolled in the site six months or longer will be linked to a medical provider.	N/D = 8/8 = 100%
Ninety (90) percent of primary participants enrolled in the site six months or longer will be linked to a medical provider.	N/D = 12/12 = 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%
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 = 40/40 = 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 = 41/48 = 85%

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