



TESTIMONY
BEFORE THE NEW YORK CITY COUNCIL COMMITTEES ON
HEALTH AND GENERAL WELFARE
Oversight: Coordination between the Department of Health and the
Administration for Children’s Services’ When Inspecting and
Monitoring Child Care Centers in New York City

November 10, 2011

Good morning. My name is Andrea Anthony and I am the Executive Director of the Day Care Council of New York, Inc. The Day Care Council of New York is the membership organization for more than 175 nonprofit organizations that sponsor approximately 300 publicly funded child care programs throughout the five boroughs. These private nonprofit organizations are under contract with the Administration for Children’s Services (ACS) to provide education and care to infants, toddlers, and young children aged 2.6 to 4 years old.

As of September 2011, there were 24,758 young children in center-based programs representing more than 61.2 percent of the total population of 40,460 children in the publicly-funded system. It must be noted that I presented testimony before the State Legislature in May of 2009, but at that time, there were 34,758 in center-based programs within an overall total of 55,787 children. It is disheartening to know that slots for 15,000 young children have been eliminated in 2.5 years. Without the work and support of the City Council, we recognize it would be many more. We sincerely appreciate your efforts on behalf of low-income families who need child care.

I would like to thank the Chair of the City Council’s Committee on Health, Marie Del Carmen Arroyo and the Chair of the General Welfare Committee, Annabel Palma, for holding this hearing. We are aware that this hearing was caused in response to a child’s death at a child care center in Staten Island four months ago. It is unfortunate that such an incident occurred and our hearts go out to the parents who we know are grieving for the child. The child care center in question is not a member agency of the Day Care Council. We have not had any contact with this center. However, according to news reports, it appeared that one of the causes of the child’s death was the lack of CPR training for one staff member. We are in the process of training our

staff to provide such CPR training to child care center staff. This training is being provided by the American Red Cross. Hopefully, this resource will prevent other such incidents in child care centers.

In the area of coordination between the Department of Health and Mental Hygiene and the Administration for Children Services on monitoring and inspections, I discussed this issue with approximately 10 center directors who identified three issues: (1) the lack of coordination and cooperation between these two city agencies on “swing licenses”; (2) the inability of ACS to increase the budgets of publicly funded child care programs to comply with the teaching staff qualifications outlined in Article 47; and (3) disturbing directives and the tribunals by the DOH.

In regards to the swing license, one director said in the case of an emergency, it takes Department of Health anywhere between 48 – 72 hours or even as much as four days to obtain this license which permits the child care agency to move the children from the affected center to another center. This delay means the families are in limbo until the matter is resolved causing parents much anxiety or fear of losing their jobs, and a major disruption for the children involved. It was recommended that the issue could possibly be resolved much quicker if ACS was involved from the very beginning.

The second issue, paying teachers who become certified by the State Department of Education, the new salary in the collective bargaining agreement between District Council 1707 and the Day Care Council, is contingent on available funding. We must advocate for individuals who continue their education after receiving a bachelor’s degree, take the necessary exams offered by the State Department of Education, pass those exams and are then told that they cannot receive the salary increase outlined in the collective bargaining agreement. Directors submits a request to ACS to increase their budget to accommodate this change, but are told there is no funding. If we want certified teachers in the classroom as directed by Article 47 of the Health code, then we must pay them for their qualifications. At this time, the salary for two years of service is \$36,542 and increases to \$39,198 after five years based on the last executed collective bargaining which expired on March 31, 2006. As you can see, the difference between the two salaries \$2,656 is less than one percent after working five years in the publicly funded child care system. Just as a comparison, individuals who are members of the United Federation of Teachers with only a bachelor’s degree start at \$45,530 as of May 2008.

The final issue brought to my attention was a directive ordered by a DOH inspector that left the center staff questioning why their comment on the directive was completely ignored. According to one director, a DOH inspector ordered them to replace their self-closing bathroom doors with swinging doors ignoring the fact that the center has 40 employees and that the bathroom is not unisex. When the director objected, the response was that the bathroom has stalls. ACS' monitoring staff has decreased over the years and that DOH has taken over this responsibility. For the most part, some of our members state the ACS monitoring visits were constructive and did not cause the anxieties that now arise with DOH. These inspections are unannounced. Another issue that was brought to my attention was the DOH tribunals which charge agencies fees for infractions. Directors have commented that the primary purpose of the tribunals seems to be the collection of money for the City, rather than as a means of offering constructive guidance. I am not familiar with the procedures of the tribunals to comment much further.

Lastly, I would like to say that the Day Care Council works very closely with ACS and DOH. ACS has utilized our technical assistance to monitor and assist our member agencies on operations and program issues for several years. This has been a smooth and cooperative relationship. In addition, the Council works very closely with the DOH on a number of child care issues and will soon assist DOH in the area of technical assisted as well. Under the leadership of Frank Cresciullo, we have enjoyed an open door policy to discuss issues affecting child care providers, such as their lost child protocol policy. It should be noted that to get a pulse on our member agencies, the new acting Deputy Commissioner, Sarah Vecchiotti, had been making site visits to Council member agencies to discuss various issues of concerns, with the exception of "Early Learn" RFP. Ms. Vecchiotti has demonstrated to us that she is more than willing to listen and address problems facing child care agencies. Given the current leadership in these two city agencies, I believe outstanding issues in the areas of inspections and monitoring can be resolved with a satisfactory outcome for all.

Thank you for the opportunity to testify this morning.