

# Child Care in a Pandemic:

## What We Learned from Emergency Child Care Programs and How We Can Safely Reopen Our Early Education System



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**Day Care Council  
of New York**

*Educated Children Are Our Future*



The Day Care Council of New York, Inc. is a diverse membership organization of 93 non-profit agencies that operate more than 200 publicly funded child care centers and family child care programs in New York City. For over 70 years, the Council has worked with its members to maintain high standards of child developmental, educational and social services. The Council's mission is to seek support for and assist in the development of quality child and family care services which are designed to promote the sound growth and development of children and their families.

## **EXECUTIVE SUMMARY**

In late March, soon after the COVID-19 pandemic shut down New York City's 1,800 schools, including the City's Pre-K for All programs, 93 regional enrichment centers (RECs) opened to serve the child care needs of first responders and essential workers. Soon after the city also opened emergency child care programs (ECCs) located in community-based organizations (CBOs) and family child care (FCC) provider programs, which include both nonprofit and for-profit private providers. These ECCs, which unlike the RECs opened quietly and with almost no media attention, are dedicated to solely serving children under the age of 5, including infants and toddlers. Currently there are 46 ECCs located in CBOs and 72 FCC providers contracted by the NYC Department of Education (DOE) to serve essential workers.

These community-based and home-based ECCs provide a unique window into what has worked and has not worked for child care programs operating during the pandemic. As the City looks towards reopening public schools and child care centers in September, it is critical to gather lessons learned and other information on how ECCs are able to operate in this pandemic in order to inform the conversation on how to reopen safely while still meeting the education needs of young children.

In June, the Day Care Council of New York (DCCNY) examined a sample of 13 ECCs to determine how they are operating during this pandemic. DCCNY interviewed a total of nine center-based providers and four family child care providers to determine current and best health, safety, and instructional practices in an emergency setting and to develop a set of recommendations based on the findings of the interviews.

Interviews revealed that providers serving the children of frontline workers all felt a sense of pride and purpose in being able to serve essential workers during this time of crisis, but there was also considerable anxiety. The two primary concerns were seemingly conflicting: public health requirements and economic viability. Providers noted that taking the very measures needed to protect the health of their staff and families—for instance, reducing the number of children served—threatened their financial viability.

As the city prepares to reopen its early education system, efforts to ensure the health and safety of families and staff must come with financial assistance to providers, both center-based and home-based. If not, privately operated home-based and community-based programs may be forced to close, and New York City could lose significant child care capacity for its youngest children. This would have immediate and serious implications for parents' ability to stay employed, especially for working women and families who are unable to afford private care in their own homes.

## **SELECTED KEY FINDINGS**

- Deep cleanings and the sanitizing of the centers and FCC programs has become routine for providers and not a burden. Most providers did not complain about the CDC requirements on the increased frequency of cleanings. Instead these cleaning procedures are a part of the new normal of operating under pandemic conditions.
- Providers are concerned about the supply of personal protective equipment (PPE) in the long term.

- FCC providers recommend that other programs that are considering reopening take a survey of their families to determine what policies would make the parents feel safe about returning to the program.
- Nurses, provided to center-based ECCs by the Department of Education, are critical to the safe operation and morale of the staff.
- Social distancing and mask wearing are difficult for young children. Many providers do not feel it is developmentally appropriate to force them to wear them.
- Across 13 ECCs, including both center-based and home-based providers, no children or staff report having become sick with COVID-19.
- Family child care providers are worried that complying with CDC guidelines regarding the limited number of children they can serve will result in them not being able to pay their own rent.
- Centers serving primarily private pay families may be hardest hit financially as, unlike publicly-contracted centers, which are still receiving funding for enrolled children, most private pay centers are steadily losing tuition as families shelter-in-place.
- There is widespread uncertainty about the summer and future. While there have been discussions among public policy experts about how public schools will reopen in September, it is still unclear to families and providers whether child care programs will reopen then. Providers say that many families did not even realize that family child care has been operating during the pandemic.
- Centers and family child care providers will likely lose parents both in the short and long term due to families moving from New York City, families keeping children home because they are now unemployed, or because of health concerns.
- Both center-based ECCs and FCCs are deeply concerned about the mental health and well-being of the young children in their care. Providers report that they are seeing clear signs of distress in their children, who have not been able to socialize and express affection in developmentally-appropriate ways.

## **RECOMMENDATIONS:**

- Provide transparency over when child care centers can reopen so parents and providers can plan for reopening.
- Ensure families know their options when determining whether they want a center or family child care provider. It is important to support the sustainability of home-based businesses as well as center-based child care providers. Both provide safe and educational spaces for children.
- Provide all community-based organizations with the same access to nurses, weekly professional cleanings, and training around new cleaning and health protocols as public schools.

- Do not adopt a blended model of half-days, where one cohort of children attend in the morning and a second cohort attends in the afternoon. Most of the ECC providers endorsed a model where different cohorts of children attend for a full day on alternating schedules, either every other day or every other week. Half-days mean more people move through the center or a home in one day, which would require more cleanings and a complex schedule of staggered arrival and pick-up times.
- Family child care providers' financial concerns must be addressed to preserve child care for the very youngest and most vulnerable children, especially for infants and toddlers, as there is already a limited supply of slots for them.
- Any subsidy provided to offset CDC recommendations for smaller classroom sizes must not be based on current attendance and/or enrollment. Instead implement a new system that provides a subsidy that covers a percentage of the number of children who are not able to attend in-person, or subsidize the fixed costs of running a center, such as the rent.
- To sustain the city's child care capacity, it is critical to support even the private-pay tuition slots. If families do not return and CDC guidelines have to be implemented, these centers will be forced to close, which includes their Pre-K for All classrooms. This could threaten the Pre-K for All program, given that community child care centers provide almost half of the Pre-K for All slots.
- Provide mental health consultants and trainings to both center-based and home-based providers so they can better support the mental health and well-being of the children they care for and the families they serve.

## **INTRODUCTION**

In late March, soon after the COVID-19 pandemic shut down New York City's 1,800 schools, including the City's Pre-K for All programs, 93 regional enrichment centers (RECs) opened to serve the child care needs of first responders and essential workers. Soon after the city also opened emergency child care programs (ECCs) located in community-based organizations (CBOs) and family child care (FCC) provider programs, which include both nonprofit and for-profit private providers. These ECCs, which unlike the RECs opened quietly and with almost no media attention, are dedicated to solely serving children under the age of five, including infants and toddlers. Currently there are 46 ECCs located in CBOs and 72 FCC providers contracted by the NYC Department of Education (DOE) to serve essential workers.

These community-based and home-based ECCs provide a unique window into what has and has not worked for child care programs operating during the pandemic. As the City looks towards reopening public schools and child care centers, it is critical to gather lessons learned and other information on how ECCs are able to operate in this pandemic in order to inform the conversation on how to reopen safely while still meeting the education needs of young children.

Up until now, there has been little information about how these ECCs operate, including how they interpret and follow public health guidance from City agencies and the Center for Disease Control (CDC), how they care for children as young as infants while providing educational supports to school-aged children, and what operational challenges they face. News outlets have examined how public school RECs operate, but CBOs, which normally provide 50% of the slots in the City's Pre-K for All program and all capacity in the City's EarlyLearn program, have not yet been part of this conversation.

Family child care programs are also removed from the conversation, largely because they are regulated by New York State Office of Children and Family Services (OCFS) and not by the City. While centers in New York City have been closed since March, FCC programs have continued to serve the families of essential workers during the entire pandemic. They have established a set of routines that include thorough cleanings and changes to operations to keep their families and their homes free of the virus. FCC providers have a great deal of knowledge to share with child care centers about how to safely reopen during this ongoing pandemic.

This report describes and examines the current operations of a sample of ECCs located in community-based organizations and FCC programs. Cleaning practices, drop-off and pick-up policies, masks, playtime, and food are all discussed in the context of preventing the spread of COVID-19. This report synthesizes 13 interviews into set of key findings and recommendations to be considered in the discussion of reopening New York City's early education system.

## **METHODOLOGY**

In early June, the NYC Department of Education issued two requests for interviews to all community-based ECCs, both center-based and FCC providers, in their daily Bulletin to providers. The request stated that the Day Care Council of New York (DCCNY) was looking for ECC providers to interview to learn more about the operations of an ECC and to gather information about a possible reopening in September.

A total of 16 center-based and FCC providers responded to the request for interviews, however only nine centers wanted to share details about how they are currently operating. An additional



four family child care providers were recruited in order to have a sample that is representative of both center-based and home-based providers.

DCCNY interviewed nine center-based ECCs located in community-based settings. Each interview was conducted either via email or through a Zoom video call that lasted approximately 45 to 60 minutes, totaling in nearly nine hours of interviews. DCCNY also interviewed four family child care providers who have been caring for children throughout the pandemic. Each of those interviews was conducted via Zoom video call and lasted approximately 30 to 45 minutes. All interviews were recorded and transcribed for qualitative analysis. Representatives of the ECCs consented to be interviewed and recorded. While some providers agreed to be identified for the purposes of this report, others requested to remain anonymous. Additional questions and follow-up email correspondences were also conducted to better understand themes of discussion.

In total, the centers and home-based providers interviewed for this report are collectively taking care of 248 children during this pandemic. The number of children served by these ECCs fluctuates day by day. Under normal circumstances, these community-based providers would be caring for almost 1,000 children.

Centers and FCC providers interviewed were representative of size and type of ECCs. However, all participated in the DOE's Pre-K for All program or the New York State Health Department Child and Adult Care Food Program (CACFP). Most of the programs receive a mix of funding from private tuition dollars and public funds via EarlyLearn, Pre-K for All, or Human Resources Administration (HRA) voucher programs. Only one program, Chinese-American Planning Council's Little Star of Broome Street, was almost completely publicly funded. *Table 1* and *Table 2* below describes the home-based and center-based samples, respectively.

<b>Table 1. Home-based Emergency Child Care Program Sample (n=4)</b>			
<b><i>Family Child Care (FCC) Provider</i></b>	<b><i># of Children Normally Served</i></b>	<b><i># of Children Currently Served</i></b>	<b><i>Age Range of Current Children</i></b>
Mickel Cameron	16	16	2 – School-Age
Charlene McGee	10-13	6	3 – 5 years old
Family Child Care Provider A*	8	4	3 – 5 years old
Shellie Ann Richards	10-15	10-15	1 – 6 years old
<b>Total Number of Children</b>	<b>52 children</b>	<b>41 children</b>	
*This provider requested to remain anonymous.			

<b>Table 2. Center-based Emergency Child Care Program Sample (n=9)</b>			
<b><i>Name of Center</i></b>	<b><i># of Children Normally Served</i></b>	<b><i># of Children Currently Served</i></b>	<b><i>Age Range of Current Children</i></b>
Emergency Child Care Center <b>A*</b>	125	25	2 - School-Age
Little Friends School – Elmhurst	100	6	3 – 5 years old
Chinese-American Planning Council – Little Star of Broome Street	60	30	3 – 5 years old
Wonder Land P.A., LLC	176	44	2 - School-Age
Emergency Child Care Center <b>B*</b>	100	40	3 - School-Age (unspecified)
Emergency Child Care Center <b>C*</b>	63	13	Infant/Toddler - 4 years old
The Learning Experience (Bright Beginnings)	153	35	2 - School-Age (unspecified)
Manhattan Schoolhouse	63	17	1 - 4 years old
Imagine Early Learning Center – Mt. Sinai Location	81	38	Infant - 5 years old
<b>Total Number of Children</b>	<b>921 children</b>	<b>248 children</b>	
*These centers requested to remain anonymous.			



## **A DAY IN AN EMERGENCY CHILD CARE PROGRAM**

Despite the regulatory differences between child care centers and home-based FCC programs, the daily operations as it relates to COVID-19 practices do not differ significantly across auspices. We found both settings are trying to adapt to the same CDC guidelines. A typical day at an ECC, regardless of whether it is a center-based or home-based setting, begins before the morning drop off, as staff arrive to do early morning cleaning and preparation for the day. All staff arrive in their masks, and in some cases switch to a fresh mask upon arrival. At some centers, staff must also change into a set of scrubs to be worn for the duration of the day. At other centers and homes, staff must take off their shoes. Everyone must thoroughly wash their hands upon arrival.

Center-based and home-based providers have established cleaning routines that have become part of the new normal. Though it was an adjustment at first, neither type of provider feels it is burdensome to their operations. Many providers commented that it is what is necessary for a safe environment. Cleaning is a constant part of the day, starting from morning until evening. At the centers, where there are usually custodians, the teachers and center directors wipe down door knobs, toys, and tables. One FCC provider said she has been paying \$700 for a deep professional cleaning of her home every two weeks since the beginning of the pandemic.

Despite providers' willingness to do the increased cleanings, there is concern and uncertainty over whether there will be enough money for supplies to do the cleanings in the future. At the centers, the DOE has been ensuring that there are adequate supplies, but providers worry about whether this will continue indefinitely. One FCC provider reported that she was running low on supplies despite having applied for a grant for personal protective equipment (PPE) supplies. The FCC provider also mentioned that parents have been bringing their own cleaning supplies to the home.

Under normal circumstances, morning drop off would begin with parents entering the centers or FCC provider homes to drop off their children. Now, to minimize the transmission of COVID-19, all parents must drop off their children outside of the centers and the family child care programs or in a special waiting area just outside the centers. At some centers where parents tend to arrive at the same time, staff have marked the sidewalk at six feet intervals, so parents know where to line up. Providers say that at most centers and FCC programs, parents naturally arrive at staggered times.

At centers, the families arrive in their masks and are greeted by a DOE-appointed nurse who takes the temperature of the children. At FCC programs, it is the provider who takes the temperature of the children and asks screening questions. At some locations, children must leave their shoes at the door and use tread socks or inside shoes.

Regulations require that all children must be logged when they arrive and when they leave the center or home. Usually parents sign their children in and out at pick up and drop off, but this changed in March. Now, only a center staff member or the FCC provider can sign each individual child in and out to reduce the sharing of pencils and sign-in sheets. One FCC provider has invested in software that allows parents to sign their children in via an app on their phones.

The 3 and 4-year olds must wear masks throughout the day, but programs say this is difficult. While the 4-year olds have a better understanding of why they must wear masks, it does not stop them from tugging on them, taking them off, and playing with them throughout the day.

Staff try, to varying degrees, to encourage the mask wearing, but say it is a losing battle. Despite these struggles, providers report that no children or staff have been diagnosed with COVID.

At some centers and FCC programs, children are assigned to activity areas which limit their interaction with other children—the exception being if the children are siblings from the same household. The children rotate among activity areas throughout the day. Every time a toy is played with, it is taken out of circulation to prevent other children from playing with the same toy. One FCC provider removed all toys with hard-to-clean surfaces. The staff are constantly sterilizing the toys throughout the day. For children enrolled in Pre-K for All, the curriculum continues to be implemented, largely unaffected by the new health and safety practices.

The care for infants and toddlers requires different practices. It is not required for children under the age of 2 to wear masks. Indeed, it is dangerous and a suffocation hazard. Infants and toddlers require closer contact and interactions. Staff having to wear masks means infants cannot see their faces, which is critical for infants' language and social development. Staff believe they've done their best to adjust, making a point that children can still hear the warmth and lilt of their voices as they speak and sing.

Lunch is no longer served family style. For programs that receive funding through CACFP, this is a significant departure from program guidelines. Children sit six feet apart to eat. In some centers there are plastic partitions, an important feature since masks must be taken off in order to eat. One FCC provider is using disposable paper plates and utensils as a precaution.

Children continue to play outdoors if there is a private playground available. At one center the children play on a private playground outside, which is then power washed every evening. At other centers, the children play in a gymnasium. FCC providers who were interviewed had backyards for the children, but they also said they no longer take the children for neighborhood walks.

In contrast to drop-off time, parents tend to pick up their children at the same time. One FCC provider has assigned time slots for parents to arrive. At the end of the day after the children leave, the centers and FCC programs are completely cleaned and sanitized. At the larger centers, the custodial staff arrive to complete the cleanings. Other centers have hired professional cleaners to do the job. It is unclear whether they will have the funds to continue hiring the cleaners when programs fully reopen.

## **OVERVIEW OF FINDINGS & RECOMMENDATIONS**

Interviews revealed that providers caring for the children of essential workers felt a sense of pride and purpose in being able to serve during this time of crisis, but there was also considerable anxiety. The two biggest concerns were seemingly conflicting: public health requirements and economic viability. Providers noted that taking the very measures needed to protect the health of their staff and families—for instance, reducing the number of children served—threatened their financial viability.

## KEY FINDINGS

### *Health & Safety*

- **Parents and staff in the ECCs appreciate transparency around cleaning and health protocol.** It eases anxiety and allows families and staff to make fully informed decisions about their participation.
- **FCC providers recommend that other FCC programs that are considering reopening take a survey of their families** to determine what policies would make the parents feel safe about returning to the program. These policies should not only be developed based on CDC guidelines, but on what will make families feel safe.
- **Center-based providers expressed the importance of having an on-site trained health professional to help with drop off and to consult with on health concerns.** This has eased much anxiety for both families and center staff.
- **Social distancing and mask wearing is difficult for young children, many don't do it,** and providers do not feel it is developmentally appropriate to force them to wear them.
- **Despite this, at the 13 ECC programs interviewed, child care providers report that no children or staff have gotten sick with COVID-19.** Providers attribute this to the deep cleanings and the limited number of children.
- **Center directors do not believe they could accommodate more groups of small numbers of children** by creating makeshift classrooms in their gymnasiums. First, it is unclear whether the Department of Health would approve such a practice. Also, without a gymnasium, children would have nowhere to expend their energy and develop their gross motor skills.
- **Center-based and FCC providers report they are deeply concerned about the mental health and well-being of the children in their care.** Almost all the FCC providers have been taking care of their children since they were infants. Providers have observed that the children are crying more often, are acting more emotional or are acting out. Providers feel this experience has been traumatic for the children and want more guidance on how to appropriately respond and support the mental health of children and families.

### *Economic Sustainability*

- **Financial concerns loom large for both center-based and FCC providers. ECC providers stated that economic sustainability was one of their top concerns.** All but one center interviewed expressed worry about the future and how they will remain financially viable enough to stay in business. Many say they are in danger of closing due to lost tuition coupled with fixed expenses. Among the center-based programs interviewed, all but one provider received Paycheck Protection Program (PPP) funds. At the time of interviews, the center-based ECCs say they have not been reimbursed by DOE for operating specifically as emergency centers. The DOE has offered bridge loans

to help with cashflow. Centers have also been using their Pre-K for All advances and their PPP funds to stay afloat.

- **Centers that are not part of a larger organization are likely to need more financial support to stay open.** The one center interviewed that did not express concerns about finances was part of a large, well-resourced network of child care centers.
- **Centers primarily serving private-pay families may be hardest hit financially.** Most private-pay centers are steadily losing tuition as families shelter in place. It is also possible that their families may be the least likely to return in the fall as they may be able to afford other options.

#### *Logistics of Continuing to Operate and to Reopen*

- **FCC providers believe other FCC programs that closed due to the pandemic should begin planning for reopening.** As New York City reopens, more families will need care and the reduced capacity of all child care centers mean there will be a greater need for more programs to reopen. Right now, FCC programs, unlike centers, are open.
- **For center-based providers, there is widespread uncertainty about the summer and the future.** While there have been discussions among public policymakers about reopening schools in September, it is still unclear to families and providers whether child care centers will follow suit. In addition, some ECCs want to expand enrollment over the summer to include the children of more broadly-defined essential workers. This uncertainty makes it hard for both centers and families to plan.
- **Given the precarious financial situation of child care centers, all center-based providers interviewed are clinging to the hope that centers can open earlier.** Representatives from Manhattan Schoolhouse and Wonder Land report that they do not have the financial resources to stay afloat until September without increasing their enrollment. By the time the City is ready to reopen, these child care providers may have to permanently close their doors.
- **Most centers say they do not have extra space to add more, smaller classes.** This means that as centers reopen, if group sizes remain reduced based on CDC guidelines, centers will be forced to reduce their enrollment.
- **Parents and center staff do not want half-day schedules when centers reopen.** Based on feedback from the ECC providers surveys, parents do not want reopening to include half-days. Parents are concerned that half-day schedules will reduce the time they have to travel to and from work. Providers also report that half-days would mean more people moving in and out of the center throughout the day, which would create a need for even more cleaning. It would also complicate schedules for staggering drop off and pick up.
- **Centers worry about how to decide which families can return if numbers are reduced, or, if schedules are staggered, how to schedule families.** At Wonder Land child care center, directors reported that parents call them every day to ask when they will reopen. They expect that when they do, they will not be able to take all of the families back.

- **Some centers will likely lose parents both in the short and long term** due to families moving, families keeping children home because they are unemployed or have family members who are unemployed and can help out, or because of health concerns. One center-based provider reported that 24% of her families had already moved out of the City.

## RECOMMENDATIONS

- **Provide transparency on when child care centers can reopen so parents and providers can plan for reopening accordingly.**
- **Ensure families know their options when determining whether they want a center or family child care provider.** It is important to support the sustainability of home-based businesses as well as center-based child care providers. Both provide safe and educational spaces for children.
- **Start the reopening planning process by surveying families.** While the Department of Health and Mental Hygiene have required centers to stay closed, FCC programs have been allowed to stay open. FCC providers could reopen before September to help families during the economic recovery period. Center-based ECCs could also survey their families to determine what policies and measures would be necessary for them to feel safe enough to return.
- **Provide all community-based organizations with the same access to nurses, weekly professional cleanings, and training around new cleaning and health protocols as public schools.** As reopening policies scale up, CBOs must have the same level of support. Without it, the early childhood education system will continue to be fragmented, which threatens the equity and excellence agenda of the DOE.
- **Do not adopt a blended model of half-days, where one cohort of children attend in the morning and a second cohort attends in the afternoon.** Half-days will require more people, more cleanings and a complex schedule of staggered arrival and pick up times. The ECC providers interviewed preferred a model where different cohorts of children attend for a full day on alternating schedules, either every other day or every other week, though they said that even this model might be very difficult to align with parents' work schedules.
- **Address the financial concerns of FCC providers to preserve child care for the very youngest and most vulnerable children,** especially for infants and toddlers.
- **Establish a subsidy program that is not based on current attendance and enrollment to offset the CDC recommendations for smaller classroom sizes. Such a program should be based on a percentage of the number of children that cannot attend based on classroom restrictions.** Enrollment will fluctuate throughout the next year as families adjust to returning to work, but fixed expenses like rent will not change. Subsidy dollars could also cover other fixed expenses, like payroll, to help providers during the economic recovery.

- **Sustain the city’s child care capacity by supporting private-pay tuition slots for community-based child care programs.** If families do not return and CDC guidelines have to be implemented, these centers will be forced to close.
- **Provide mental health consultants and trainings to both center-based and FCC providers** so they can better support the mental health and well-being of the children they care for and the families they serve. These resources could begin immediately so that all providers are prepared before many of their families return.

## **CONCLUSION**

As the city prepares to open its early education system, efforts to ensure the health and safety of families and staff must come with financial assistance to providers, both center-based and home-based. If not, FCC and CBO programs may be forced to close, and New York City could lose significant child care capacity for its youngest and most vulnerable children. This would have immediate and serious implications for parents’ ability to stay employed, especially for working women and families who are unable to afford private care in their own homes.

Finally, it is critical to not forget the role that community-based organizations and family child care providers have played during this pandemic. These providers have kept their doors open, placing themselves and their staff at risk to ensure that essential workers have a safe place for their children while they serve our City. The discussions on reopening New York City’s early education system must incorporate the voices of providers, especially community-based organizations, family child care providers, and the families they serve.