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Messages and Communications - Guam Early Learning Council - Program Reports

1 message

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To: Guam Legislature Clerks Office <clerks@guamlegislature.org>

32-13-754
7.5.13
7:26am
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9/5/2013 9/5/2013 Guam Early Learning Council Program Reports (via email) 32-13-754

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From: **Teresita Naputi** <terry.naputi@guamcedders.org>
Date: Wed, Sep 4, 2013 at 4:38 PM
Subject: Guam Early Learning Council - Program Reports
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2013 SEP -5 AM 9:49
[signature]

Hafa Adai,

Attached are early childhood program quarterly reports from the following:

1. Project Tinituhon
2. Project Bisita I Familia
3. Project Karinu
4. DOE - Head Start
5. DOE - K-3rd Program

Reports that are still pending include: Guam Early Intervention System, Early Childhood Special Education, CCDF and I Famaguon-ta. Reports will be sent to you as soon as I receive them.

Also, attached is the GELC input to the Guam Evaluation and Improvement Rating System (GEIRS). The draft was provided to you on July 9 and public input took place on August 7, 2013. Updates will be made at the quarterly meeting

next week.

I will send the meeting agenda and the last quarterly meeting minutes tomorrow. Should you have any questions, feel free to contact me.

Thank you!

Terry

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Teresita I. Naputi

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5 attachments



 **DPHSS - Project Karinu Program Report.pdf**
502K

 **DOE - Head Start Program Report.pdf**
259K

 **DOE - K-3rd Program Report.pdf**
130K

 **DPHSS - Project Bisita Report.pdf**
366K

 **GELC INPUT_GEIRS - Final.pdf**
176K

	<p>Project Karinu Quarterly Report September 1, 2013</p>	
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Program Purpose:

- To develop, implement and sustain a system of care that promotes young children's (birth to five years of age) mental health; prevents disruption in young children's social, emotional development; and provides direct interventions for young children and their families.
- To expand Guam's capacity to serve young children, birth – 5, with diagnosable mental disorders through public health approach and system of care framework.
- To provide a comprehensive array of accessible services that is clinically effective and developmentally, culturally and linguistically appropriate.

Number kids served:

- As of September 1, 2013, – 277 Referrals were received by Project Karinu (collectively since 6/1/11).
- Referrals are primarily from Family Members (parents & grandparents), Child Welfare (Child Protective Services) Behavioral Health and Wellness Center (Healing Hearts) & Department of Education (Guam Early Intervention System).
- **Program Highlights / Challenges:**
 - 7/3/13 - Karinu Core Team Meeting
 - 7/5/13 - Service Delivery Review w/ Dr. Kirk Bellis
 - 7/6/12 - Outreach – Guam's Moms 1st Annual Diaper Drive – Ypao Beach Park
 - 7/16/13 - Karinu CEAT Meeting – CEDDERS Evaluation
 - 7/16/13 - Karinu Play Date – Agana Shopping Center
 - 7/17/13 - TA Conference Call w/ Becky Ornelas, Barbara Huff & Kim Williams
 - 7/17/13 - Robyn Jones – Wrap Coordinator 1st day
 - 7/18/13 - Karinu Policy & Procedures Meeting
 - 7/18/13 - Conference Call James Sawyer - Summer of Learning
 - 7/18/13 - Karinu Policy and Procedures Meeting
 - 7/21/13 - Outreach - Liberation Day Parade
 - 7/25/13 - Karinu Policy & Procedures Meeting
 - 7/26/13 - Project Officer Andrew Hunt Conference Call
 - 7/26/13 - Peer Family Support Group Karinu Conf. Room
 - 7/27/13 - Pediatric CPR & Basic First Aid – 6 Karinu Staff Certified
 - 7/29/13 - Outreach – Immunization Clinic – Micronesia Mall
 - 7/30/13 - National Evaluation Site Visit Pre-Planning Mtg. CEDDERS
 - 7/31/13 - Karinu Family Orientation

 - 8/1/13 - Outreach - Karinu & Immunization Zero Down
 - 8/1/13 - Karinu Family Driven Workgroup Mtg.
 - 8/6/13 - Karinu Project Director Interviews
 - 8/6/13 - Cross Agency Standards Operating Procedures

- 8/7/13 - Kariñu Core Team Mtg.
- 8/7/13 - Kariñu/CEDDERS Family Photo Session
- 8/8/13 - Kariñu Social Marketing/Sustainability Workgroup
- 8/9/13 - Karinu Policy and Procedure Mtg.
- 8/10/13 - Outreach - Kid Care Agana Shopping Center
- 8/11/13 - Outreach - Governor 1st Family Fair Micronesia Mall
- 8/13/13 - Cross Agency – SOP Universal Referral and Intake Form
- 8/14/13 - Kariñu Family Respite Play Date – Santa Barbara Church
- 8/20/13 - Cross Agency – SOP Universal Referral and Intake Form
- 8/21/13 - Kariñu/In Famagu'on-ta Parent Café Briefing/Planning Mtg.
- 8/21/13 - Kariñu Sustainability TA Conference Call w/Barbara Huff
- 8/22/13 - Rigalu Foundation – Donation 40 Uniform Vouchers
- 8/23/13 - Parent Café – Sheraton Laguna Guam *“Back to School”*
- 8/23/13 - Kariñu Policy and Procedure Mtg.
- 8/24-25/13 - DSM-V Training Washington DC
- 8/26/13 - Andrew Hunt Fact to Face Mtg.
- 8/27/13 - CEAT Mtg. CEDDERS
- 8/27/13 - Cross Agency – SOP Universal Referral and Intake Form
- 8/29/13 - Kariñu Family Orientation
- 8/30/13 - Project Kariñu – Project Officer conference call Andrew Hunt
- 8/30/13 - Bureau Budget Management Research - No Cost Extension Mtg.
- 8/30/13 - National Evaluation Site Visit planning and preparation approval



Department of Education
Guam Head Start Program
Quarterly Report



Program Purpose:

Promote School readiness of low income children by enhancing their cognitive, social, and emotional development – (1) in a learning environment that supports children’s growth in language, literacy, mathematics, science, social and emotional functioning, creative arts, physical skills, and approaches to learning, and (2) Through the provision to low income children and their families of health, educational, nutritional, social, mental and other services that are determined, based on family needs assessments to be necessary.

Number kids enrolled: 534

The program enrolled 534. The program currently has 414 on a waiting list: 274 registered prior to selection. 140 are on the late registration call back listing as of September 4.

The program enrolled 9 homeless families, 8 foster families, and 71 TANF 12 referrals from Child Welfare

Special Education: 33 enrolled. 26 potential referrals

Program Highlights/ Challenges:

- ❖ The Asan Parent Resource center will be opened daily from 2:30 – 5 to parents. Head Start family services staff will be available to assist the families. The center has a child room with learning centers. The program is planning activities and training for families and parents at this site. The site has wifi and computers.
- ❖ The ECE specialist from Region IX spent 4 days working with classroom staff to strengthen Instructional Supports (Concept development, Quality Feedback and Language Modeling), family outcomes, and introducing new Pedestrian Safety and My Plate kits for use in the classroom.
- ❖ The program applied for and received a supplemental grant for training and technical Assistance totaling \$20,000. These funds are specific to the Region IX Hawaii/Outer Pacific trainings. The basic Training and Technical Assistance grant breakdown will not be changed.
- ❖ The Annual Program Information Report will be posted on the website:
Summary of services for last year.
 - # children who were enrolled: 573: 39 children dropped out of the program.

- #families who indicated:
 - Medical home: 569
 - Dental home: 560
- # children referred to the Mental Health Consultant: 97
 - 28 where referred for further services
- # children needing medical follow up: 43.
 - # who received treatment / follow-up: 40
- # children needing dental follow up: 104
 - # who received treatment/follow: 102
- BMI data:
 - Underweight: 23
 - Overweight: 59
 - Obese: 65
- Immunizations: Completed 411: those needing updates but are still within the age guidelines: 136
- Children with disabilities: 58
 - Identified prior to enrollment: 47
 - Identified during the year: 11
- Family services support: Total number of families receiving at least one of the following services: 313
 - Emergency/Crisis intervention: 13
 - Housing assistance: 77
 - Mental Health Services: 64
 - ESL training: 32
 - Adult Education to include GED: 64
 - Job Training: 37
 - Substance abuse prevention: 1
 - Child Abuse and neglect services: 7
 - Domestic Violence services: 3
 - Child Support Assistance: 5
 - Health Education: 96
 - Assistance to families of incarcerated individuals: 3
 - Parenting Education: 210

❖ Challenges:

- Staffing:
 - limited term part time Aides: 7 hours/day for 187 days (School calendar plus one day). Of the 21 the program recommended for the 15 vacancies, the program still needs 2 more.
- Potential impact of the Hay Study. Personnel costs are expected to exceed the grant award amount.
- Move to Tiyan



K-3 Early Childhood
Education
Quarterly Report



September 2013

Program Purpose – K-3 Early Childhood Education Program

The Department of Education's Early Childhood Education (ECE) encompasses all programs and services for children from kindergarten through grade three. The Early Childhood Education programs include addressing students that are second language learners; teaching to the K-3 Content Standards & Performance Indicators; and assessing students at their developmental level.

Program Highlights/ Challenges

Highlights:

The Department of Education's K-3 Early Childhood Program serves students from Kindergarten through 3rd grade. On Wednesday, July 31st and Thursday, August 1st, a K-1 Brigance Training was held for the district's Kindergarten Representatives on the use of the K-1 Brigance Assessment Tool. During the training, fifty-eight (58) Kindergarten teachers were able to participate in group sessions that allowed them to go over the different components of the tool, as well as, view a video-clip on the administration of the K-1 Brigance Assessment Tool. Each participating Kindergarten Teacher signed a commitment letter that will address the following: Pre-Assessing incoming Kindergarten student in August 2013 and Post-Assessing the same group of students in May 2014.

As of September 4, 2013, 37 Kindergarten teachers who were not able to attend the K-1 Brigance Assessment Training were able to pick-up their Brigance Assessment Kit.

Follow-Up:

I. The Division of Curriculum & Instruction will continue to monitor and support the implementation of the K-1 Brigance Assessments at the participating public elementary schools.

	<p align="center">Project Bisita I Familia Quarterly Report September 2013</p>	
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Program Purpose:

- To provide evidence-based home visitation services to improve outcomes for children (birth-8years)
- Strengthen and improve the programs and activities carried out under the Maternal and Child Health Program
- To identify and provide comprehensive services of the Health Families of America (HFA) and Parents As Teachers (PAT) Evidence-based Home Visiting models to improve outcomes for families that reside in at-risk communities at Astumbo Dededo.

Number kids served:

- Total number of Families in Project Bisita: **20 Families in Dededo**, in the program.
- Total number of children < 1yr: **21 babies**,
- Total number of children encounters - 99 children with these **20 families**.
- So the 2 home visitors have **9-10** families to home visit according to the HFA model.
- Within the families there are 3 Teenage moms, one teenager with twins, and 2 teens with repeated pregnancies.

Program Highlights/ Challenges:

- Project Bisita staff attended
 - Pediatric Physician Meeting on June 13, 2013 at GMHA Conference Room, 6 Pediatricians attended the meeting. A PowerPoint presentation was done as a overview/orientation to Project Bisita.
 - Staff of PBIF prepared Father Day’s giveaways to the “Fathers” of their families, on June 10-12, 2013 the staff delivered the gifts to their fathers of their families.
 - The Nurse Supervisor I attended a Management Training at the UOG from July 8-12, 2013. The class was possible by the DPHSS and UOG partnership agreement to expanding leadership training to staff from GOVGUAM.
 - Three staff of PBIF/BFHNS was able to attend the “Healthy Homes” training that was sponsored by the DPHSS DEH. This was a strong recommendation from MIECHV project officer to attend.
 - The staff of the BFHNS were able to participate with Immunization Outreaches:
 - “Back to School” Child Immunization Outreaches in Micro Mall on July 29, and August 14, 2013 and CRHC “Extended Immunization Clinic”
 - WIC Child Immunization at NCHC on June 7 and July 5, 2013.
 - The staff of BFHNS and PBIF attended the First “Guam EDHI” Summit and Conference on August 29-30, 2013.
 - The staff of PBIF and Karinu also participated in the “First Lady’s Working Family Fair” on August 11, 2013 from 10am-3pm at Micro Mall.
 - The PBIF also participate in “Project Kidcare” fair on August 12, 2013 at ASC.
- A MOU is being routed with Project Karinu and Project Bisita working with CEDDERS on developing and launch a data system, so that able to link to the clients they serve.
- Home visiting protocols are completed and are being reviewed by the BFHNS Policy Review Committee for final approval.
- 2014 MIECHV Formula Grant was approved and funding was received on August, 2013.
- The staff of Project Bisita is located at the Northern Community Health Center, Dededo in Room 30 and can be reached at **635-7408/10**.

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Guam Early Learning Council
 Input for
 The Guam Evaluation and Improvement Rating System (GEIRS)
 August 7, 2013

My name is Elaine Eclavea, Co- Chair of the Guam Early Learning Council (GELC). On behalf of my Co-Chair, First Lady Christine Calvo and the Early Learning Council members, we provide the following input on the draft Guam Evaluation and Improvement Rating System (GEIRS). With me that will be providing additional input is Janice Sablan- Ada, Chief of Staff, Office of the First Lady and Vera Blaz, Coordinator, Project Tinituhon: Guam’s Early Childhood Comprehensive System.

The GELC is the oversight body that would review performance data and revise policies for Guam’s Quality Rating and Improvement System (QRIS). A system-wide QRIS requires alignment, improvement, accountability and financial leverage of all early childhood programs that will enable every child to get a strong start in school. This is reflected on Guam’s Early Childhood State Plan.

In reviewing the “Operations Manual,” it does not clearly communicate how GEIRS will systematically evaluate, improve, and communicate the level of quality in early childhood programs that is easily understood by parents and providers.

GEIRS Page #	Referenced Section/Sentence
3	<p><u>GEIRS Background</u> “A QRIS provides a systematic approach to identify, evaluate and improve the quality of care in early childhood programs based on research and best practices.”</p>
	<p><i>GELC Input:</i> The GELC and other early care and education programs have not been given the purview to participate in the development of the GEIRS. Although Guam Community College (GCC) is contracted to develop the GEIRS for childcare centers by Department of Public Health & Social Services (DPHSS), DPHSS in its Child Care & Development Fund Program (CCDF) State Plan has a responsibility to develop a comprehensive QRIS that systematically addressed the need for quality improvement and accountability of early care and education on Guam.</p> <p>The GELC recommends that DPHSS in partnership with other early care and education programs be involved in the process of developing, implementing, piloting and evaluating a comprehensive QRIS. These early care and education program are inclusive of Head Start, Guam Early Intervention System, Early Childhood Special Education, Group and Family Child Care Providers, Preschool (public and private), and care by family, friends, and neighbors. The impact of a comprehensive QRIS will result in better, positive learning experiences for all Guam’s children that are served in ALL early care and education settings.</p> <p>The GELC recommends that DPHSS Bureau of Social Services Administration</p>

(BOSSA) Licensure be included in the development of GEIRS, based on the 2007 Child Care Licensing Study. There were 43 state licensing agencies that reported involvement in QRIS development. This is done intentionally to link QRIS to licensing as a mechanism to engage all providers required to be licensed.

3	“Evaluation of 32 state QRIS models, Guam’s Early Learning Guidelines, Guam’s Plan for Professional Development (GPPD), and Public Law 70-31 were referred to in the development of a QRIS that met the specific needs of the island and integrated the requirements of the law for licensed childcare centers.”
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GELC Input:
The GPPD referenced is an old version. The current version is dated on September 18, 2012. This is the version that was signed off by the Attorney General’s Office and sent to the Legislative Secretary. The correct version is available on the Guam ELC website at www.guamelc.org.

The law number referenced is incorrect. This document references Bill 70-31. The Public Law is 31-73 and was signed in June 2011.

4	“The committee was comprised of directors from various childcare centers who reviewed the proposal and provided input and recommendations.”
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GELC Input:
According to CCDF Quarterly Program Report provided to the GELC in July 2013, there are 34 licensed childcare centers receiving benefits from CCDF. Who made up the advisory committee? How many provided input to the proposal?

4	<u>GEIRS Overview</u>
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GELC Input:
The GELC recommends that the “Overview” should be more descriptive. The terminology needs to be consistent. The four categories need to be more detailed. A Licensing Compliance component be added to ensure participating childcare providers have a license in good standing, no substantiated complaints, or no serious issues of noncompliance.

Is star rating the same as center rating?

4	“One star, however, still signifies childcare that is higher than the minimum DPHSS licensing requirements that all centers must meet on annual basis.”
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GELC Input:
DPHSS licensing requirement takes places every 2 years as indicated in page 13 on PL 31-73. GEIRS needs to be consistent and align with public law.

5	“The four categories under GEIRS establish measures that are necessary for quality care during the early childhood years, which include professional development requirements for directors and child care providers, family involvement, and a research-based assessment system for the curriculum and environment of a center.”
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GELC Input:

<p>The paragraph states there are four categories, but the paragraph only list 3. Are the categories the same as listed on page 4?</p>	
<p>What research based assessment system for curriculum and environment of a center would be used? Is it Early Childhood Environmental Rating Scale (ECERS) or Infant and Toddler Environmental Rating Scale (ITERS)? Need to describe each assessment.</p>	
5	<p>“Orientation sessions and technical support are provided to assist centers in understanding the GEIRS process and requirements. Monetary incentives are also given for centers that earn star ratings.”</p>
<p><i>GELC Input:</i> Who will be providing technical support and orientation? Who will provide the monetary incentives? More description is needed.</p>	
5	<p><u>State Analysis</u></p>
<p><i>GELC Input:</i> Of the 32 examined, what made the five states listed more significant than the rest? More specifically, what made those five states stand out as “model” QRIS programs? Hawaii’s plan was referenced as being used as the starting framework. This is a pilot program and hasn’t been proven to be effective.</p>	
6	<p><u>GEIRS Eligibility and Application Process</u></p>
<p><i>GELC Input:</i> How long are centers ineligible to apply? Are these the only eligibility requirements? Additional information is needed.</p>	
7	<p>“A GEIRS Application for Advancement/Renewal form can be picked up with an information packet at the GEIRS Administration Office located at DPHSS in Mangilao, Guam.”</p>
<p><i>GELC Input:</i> Where specifically is the GEIRS Administration Office? What is DPHSS – CCDF’s plan for the creation of a new office? Additional information is needed.</p>	
8	<p><u>GEIRS Evaluation Team</u></p>
<p><i>GELC Input:</i> How much educational experience do the mentors and assessors need? What are the minimum requirements for experience in early childhood? Additional information is needed.</p>	
9	<p>“Meet with assigned Assessors and schedule first observation visit if needed.”</p>
<p><i>GELC Input:</i> Won’t all centers need a first observation visit?</p>	
10	<p>“Conduct on-site interviews and document various types of observations done during the visits.”</p>
<p><i>GELC Input:</i> What specific observations will be done? More specific information is needed.</p>	
10	<p><u>Observation Visits</u></p>

<p><i>GELC Input:</i> How long are the observation visits? What specific observations will be conducted? How will the program ensure that the observations remain objective, even if two assessors are conducting the visits? What happens if the two assessors have differing observational notes? Additional information is needed.</p>	<p>12 <u>GEIRS Process</u></p>
<p><i>GELC Input:</i> Acceptance and Initial Steps Column: If application denied, what is the waiting period for re-application?</p>	<p>12 <u>GEIRS Report and Star Rating</u></p>
<p><i>GELC Input:</i> The indicators should be stated clearly. The assessments should be identified. If one center does not have infants and toddlers, there will be only one assessment used. If there is more than one assessment, this needs to be stated and described.</p> <p>For centers that need improvement, will a continuous quality improvement plan be developed? Additional information is needed for clarification.</p>	
<p>14</p>	<p><u>GEIRS Overall Star Rating Checklist</u></p>
<p><i>GELC Input:</i> Are these the indicators that are being referred on page 13? This section is unclear.</p> <p>*What if a center does not get any points for a specific requirement on the checklist? For example, Column A, they get 0 points for “50% of staff are CPR/First Aid certified?” What happens?</p> <p>Column A “Director/Assistant meet Level 3”: This is mandated by P.L. 31-73 page 44, #3; minimum licensing requirement for Director/Assistant. Page 4 of this manual references that 1 star is higher than the DPHSS Licensing Requirements.</p> <p>“No. of Providers meeting Level 2 – 25%”: This is also mandated by P.L. 31-73 page 45, #1.</p> <p>GEIRS indicates that Star 1 is more than licensing requirements, yet the first two requirements under staff as indicated in Star 1 are mandated under P.L. 31-73. There is inconsistency from what is indicated in statute.</p> <p>Further discussion is needed from other early care and education partners on whether GEIRS will be mandatory or voluntary.</p> <p>Column B Daily Health Check: How would this be documented?</p> <p>Column C:</p>	

Some requirements are verbal, how will that be documented for accurate reporting?	
15	<u>Overall Star Rating Point Scale</u>
<p><i>GELC Input:</i> If a center meets 1 requirement, so therefore gets 1 point equals 1 star. Is that how we are supposed to read the table?</p> <p>The table is not indicative of the language in paragraph 1, second sentence on page 13: “Each level has a set of indicators, ranging from two indicators to five.”</p>	
15	<u>Facility Profile Grid Sample</u>
<p><i>GELC Input:</i> A description of the graphic would help in understanding the system.</p>	
16/17	<u>Incentives</u>
<p><i>GELC Input:</i> Who will provide bonus incentives? What are an Annual Subsidiary Award and a Quality Incentive Award? More descriptive language should be included.</p> <p>Who will be providing the tangible awards?</p>	
16	“Centers that receive a GEIRS Star Rating will be exempted from GRT taxes for the year that the rating is in effect.”
<p><i>GELC Input:</i> Will this exemption be for all star ratings? The tax exemption is mandated by whom?</p>	
17	<u>Assessment</u>
<p><i>GELC Input:</i> The GELC recommends that the Advisory Committee be formed during the development of the QRIS not two years after implementation. It is important for the Advisory Committee to provide input in development and be involved from the beginning to ensure that the program is grounded. Who will comprise the Advisory Committee?</p>	
17/18	“This committee should also make suggestions for system-wide improvements and recommendations for short and long term goals related to further improving the quality of care in early childhood here on Guam.”
<p><i>GELC Input:</i> The GELC recommends that DPHSS, in collaboration with all early care and education partners, develop, implement, pilot and evaluate a comprehensive QRIS.</p>	
18	<u>Recommendations and Conclusion</u>
<p><i>GELC Input:</i> Recommendations should be included in the plan. The coaching and mentoring should be embedded in the monitoring and accountability.</p> <p>The GPPD is referenced in this plan. What will be included in a more “extensive</p>	

professional development plan” as recommended?	
19	“The ultimate goal of GEIRS is to raise the quality of care in early childhood education settings, which should make these investments worthwhile.”
<i>GELC Input:</i> The goal of GEIRS does not meet ALL early childhood education settings.	
19	FAQ #2
<i>GELC Input:</i> The GELC recommends that the QRIS funding history for CCDF be included in the GEIRS background.	

In the development of any governmental policy, the process utilized is just as important as the final outcome. Obtaining input from stakeholders over a period of time is an absolute requirement. When the GPPD was in development, numerous meetings over the course of several years took place to ensure that the plan would be utilized to its greatest extent. Many people were involved in the creation of the GPPD, which included child care center directors and caregivers, parents, educators, Guam Early Intervention System, and Head Start; a cross section of the community. While there has been evidence of input sessions involving a small segment of impacted stakeholders in the development of this draft of the GEIRS, it did not include other stakeholders that would be impacted by this critical and far-reaching policy.

It is unfortunate that given the existence of the GELC, and the agencies represented on the council, that the council itself was not utilized as a mechanism to facilitate the development of such an important policy as the GEIRS. As stated in the GELC vision that “all of Guam’s children will have healthy minds, bodies, and spirits as a foundation for lifelong success”, the inclusion of the council and its members could provide the impetus for creating a QRIS that is built upon a solid foundation. As Co-chairpersons of the council, we stand ready to be involved and to continue the momentum to produce a comprehensive framework to ensure that our systems for early childhood education fosters and implements best practices and educational supports and services for our young children. We must promote nothing less.