Attendance

Participants:

Name	Present?	Name	Present?	
Corina Perez	yes	Carrie Graber	yes	
Debbie Radie		Melissa Scott	yes	
Stephanie Lilly	yes	Micalene Stafford		
Grace Dietrich	yes	Jessi Cordero		
Liz Farrar Campbell	yes	Rod Belknap	yes	
Angie Benson		Becca Ellis	Yes – late arrival	
Tara Papandrew	yes	Judy Werkheiser	yes	
Valentina Brichuk		Kara Parris	No	

OCC Staff Present	
Facilitator	Abby Strom
Licensing Rep	Karey Hudspeth
Notetaker	Allison Delorey

INTRO QUESTIONS:

question about W9. Personally cannot accept the dollars that you're offering, have to go through my agency. What I've done before when I've been given a stipend is roll it back into the program. We do appreciate that. Is it possible to check if Southcoast Business has a W9

if you wouldn't mind sending me the business address, that's sometimes helpful to find a business. I appreciate that.

CLOSING COMMENTS:

I really appreciate how it's organized — will be a lot easier for programs to understand what they need to follow that was the goal — yay! Doing what we intended ©

Kule Headings Presented this Session (414-305)	Notes/Feedback/Follow-up
Definitions -0100	DEVELOPMENTALLY REPONSIVE: would we add anything about reaching out to supports/services. Not being in a silo, reaching out to Special Education, Inclusive Partners? you may see that reflected in other areas of the rules, as well. CHILD WITH SPECIAL NEEDS: Child with special needs — would they be included here? Yes, any child who requires some adaptation of standard care. Could be diagnosed disability or condition. Child with an allergy is it that you're looking to reidentify special needs and you're changing that, or the description of special needs? open to any and all feedback on this. Might be something you want to reflect on. If you want to provide feedback next week via SmartSheet please do so. INACCESSIBLE TO CHILDREN: taking into account age of children? For an infant room is it different than preschool room? Height, yes, infants aren't as high. Some consideration for height and age of children highly encourage leaving last bullet in there. Current position 18 years getting two centers licensed. Over the years certifiers let us keep solutions on

these shelves, then change of certifier made us lock them up. As soon as we did that our chemical use was cut in half, staff not using it. Intent is to make it accessible so they are using it. I highly applaud that.

MULTI-SITE COORDINATOR

Love that you're moving in direction of multi-site, don't think you're going far enough. From rural community – how to get center sustainable? One of biggest barriers is administrative cost. The way the rule is written is that it has to be a single classroom – limits who can do that. No more than 20. I question why is there a gap between expectation for Director on site if it's a single center vs. Being able to share on site between... why... maybe not voicing what I'm trying to get through. State has been moving toward right direction with shared services. This is moving in that direction, but it's not far enough. It would be great if for instance in rural Eastern OR, single organization could have multiple centers with one coordinator able to help with all of those. I can't do that and allow them to survey infant and preschool at same time, need to be able to have them under same roof. Would love to be able to remove word single so it would read "single organization overseeing..." and allow capacity to be larger... not sure it's going to developmentally affect kids whether MSC coordinating between 2 classrooms or 1, not sure why there's a distinction

VOLUNTEER

Sort of says volunteer can have unsupervised access, but they can't, right?

they can if they meet the qualifications of the position. I hear what you're saying when you read through that.

Linked to ORO as volunteer/teacher? How would you link them from your program to ORO?

will get back to you on that, will check with our liaison between ORO and the agency... would have to have staff file...

GENERAL:

since we're getting out of definitions – want to make general recommendation. Anything that has a predefined definition, if throughout the rules it could be italicized or bold... found things where I'd think it was defined and it's not... if there was some way to indicate within each rule there was a definition I think it would clarify many of the rules

	thanks we'll take that – when we put rules into SOS there's no formatting, can take to implementation team. Even thinking about hyperlinking – can see if we can do that as well.
Application Process -0130	programs in public schools, on public school property also. They had to scramble it does also affect sites ON public school property but not in physical building, on the school grounds. curious – what about sites with multiple licensed programs within one building. Previously HS – whole center licensed, classrooms leased had individual licenses. Fire Marshal 6 months ago, didn't want to come back just to get that one classroom for a different program. have to double check - I think it's within a calendar year it's good with us. We understand that – would encourage you to talk to LS about as well.
Certification Process -0150	No comments
Policies -0200	we do include this, important for parents to know – different parenting philosophies. Some want worksheets, some learn through play. Important before parent puts child in program that they understand which you're going to do. We're not putting 3 year olds at a table to do worksheets but they are learning through play. I think it's important I agree – just had a center based program reach out to me. Topics about banning books – parents had questions on curriculum, wanted to know what's being taught within program. Really important to highlight and share with parents. Centers are covering themselves – no issues outside. for all reasons – gives truly transparency what parents can expect from program. coming back from HeadStart conference – in the car. Yes would be really helpful to know. curious - "Center philosophy" instead of "curriculum philosophy" not purchasing a curriculum like Creative Curriculum, but every center should have a philosophy. Would center work better than curriculum? ASSESSMENT AND PROGRAM PARTICIPATION

Whether to provide or continue... first sentence intends you can make decision before you've done A, B, and C

I think my slide is wrong – we've edited this. I think it got cut and pasted wrong, that's my fault I apologize... it does read "Center's decision whether to provide or continue care..." I'll go back in and review Department of Justice guidance on this. I think there's an error in the way this is written. Want to make sure – this is important, will come back next week with this. Liz: second part of A "or an explanation of why center..." that could apply to those who haven't been enrolled yet, right? I think it works as is.

for a for pay center and we have... remove because of payment or something, are they violating this rule and setting themselves up to get sued basically? I know if it's state or federal programs you can't just remove them. But if it's for pay, how does that land?

OCC doesn't get involved in monetary issues. If a program chooses to disenroll for family's failure to pay, that's a business decision they could make. getting a little shy with rules around suspension and expulsion, exclusion.

Emergency Preparedness & Response - 0210

FIRE SAFETY/DESIGNATED SAFE AREAS:

I think most probably already cover this rule

WEATHER

helpful to have heat excess and cold index – restrictions of amounts of time being spent as it gets higher?

we don't have that in rule, we would want you – there are additional resources.. For when green zone, yellow zone, red zone, depends on ages of children in care, how long they should be outside specifically for heat. Can't remember who puts that resource out

we use something from a HS standard, but not everybody knows. Maybe some links that direct to that would be helpful?

two questions. One on this section – who is the local authority the rule is referring to on heat and cold? Public health? Who is making that call?

I'm not sure, will follow up

could be public health – but local. When I hear local I want to make sure I know who is responsible

you're responsible (3) I think it's because weather is different in every region – but you're right, who is that local authority? Where is that

coming from? I will follow up. Tara's question in chat – indoor temps for heat, we do have those. Facility.. We do have a temperature range.

PHYSICIAN/MEDICAL CARE

approved by parents for designation?

you will put in your emergency plan – you're getting authorization to allow for medical transport, where they will be taken. They may be taken – parent may specify... some specify... as a facility, if parent does not identify that you as the facility need to identify where you'll take a child in an emergency.

other quick question – licensed physician, hospital, clinic. If there was truly an emergency they'll get there by life flight. Would be call of emergency responder on the scene. How will my little folks be... really depends on the extent of the emergency whether a local clinic can handle it. Wonder if part of the plan could be rather than identifying specific entity, the staff dials 911. We leave it up to the discretion of emergency responders and the extent of kiddo's need. For rural oregon removed from all physicians – if there's some way language could be modified slightly.

great feedback, We were concerned when we first proposed this.

How will rural communities furthest away do this? Thank you for that feedback.

Child Care Aware is watch guide, says HeadStart does have charts available on their website

5 min break at 1:06 pm – come back at 1:11pm

need emergency contact for staff, too we're going to cover that!

FISCAL IMPACTS

No comments

Records (Staff-0240, Children-0220, Program-0250)

RETENTION AND ACCESS:

comment – electronic record systems now, a lot of places there's only 1-2 people who have access due to confidentiality, it's really difficult to have the 1-2 persons on site. I guess they'd almost have to do duplicate... tough when you move all electronic records

we do address confidentiality in E – keep confidential, only available as necessary, and individual child's parents and staff as requested. We don't need

access to identifying personnel information, W4s, SSN cards... just records required in rule to have access to. Might be an issue – if you have access to some you have access to all... depending on electronic system. Just need to ensure someone on site has access to records OCC may request, or keep them all on paper.

CHILDREN'S RECORDS/IMMUNIZATIONS

is there a timeframe? If they're not following through that could go on indefinitely

OCC doesn't have a timeline, not ours to regulate (immunization records). I can look into that.

STAFF RECORDS:

in chat: Their R number being on the SQTL report is not good enough?

Need confirmation from us or call and document that phone call. Could be a delay with SQTL

Parental Permissions-0230

SPECIAL OCCASIONS

question about participation in special occasions – how is special occasions defined? If someone brings in cupcakes does the center need permission from all parents? Valentine's day part? What happens if permission slip doesn't come back? 2 year old wants to participate regardless

special occasions – parent control around what child eats. Beyond what's served for a meal or snack, participation in a party where food is served, if parents are bringing items in. Want parents to know what child is being served while in care. Could just be a sheet – pick up sheet – we're having this on this day, doesn't have to go home. However facility can get that permission, have it documented... Judy asked in chat... we'll go over that in third meeting

2 year old classroom had a Valentine's Day... same food, same staff, but everything was red and pink. Is that considered special even though food is prepared same but has a theme? Does it apply for special occasions like... if food, can they participate in other parts not related to food? There's so much ambiguity around "special occasion" -- I understand for outside food, but I'm not clear what's the thing we're trying to prevent from happening if it's prepared in a licensed center. Could be burdensome to collect permission for every thing center wants to do if they're not using outside food

want to make sure I heard your question so I can go back and ask about intent — have we defined special occasion, and is this only for food that is

	served not prepared by facility itself? And it could be a barrier or burdensome to collect that permission from parents. If a parent says no or you don't have it, are children able to participate in the rest of the activity/occasion and not just food that's right. if they don't get permission, could it be a phone call? yes, document that they said it. Don't want to deny participation if a piece of paper didn't come back. Seems nitpicky, I can see adding it on enrollment, yeah
Items available for Review -0260	parents and public to view: if these have to be posted for public, posted outside Center? don't have to be outside let anyone in public inside? no that's not the intent – if that's the way it reads we'll want to adjust it. Thanks for that feedback. NEIGHBORHOOD WALK: in chat: For the neighborhood walk how far from the center is considered under this definition? We don't have parameters set on how far away – can take that back. When does a neighborhood walk become a field trip?
Notifications -0270	in chat: Is the natural disaster one realistic? If it's a serious natural disaster, I wonder whether this would be feasible if phone lines and power are down could be flexibility in an emergency if big one hits, going into state of emergency. We may be given authority to make new rules, like with pandemic, to support child care. We have to have plans for that. Definitely some flexibility given for natural disasters. TEMPORARY CLOSURE in chat: does this mean all center? what if it is a specific classroom for staffing or illness? Would you want us to notify if we close a classroom Thurs/Fri due to staff being ill and ratios? I'll go back - I don't think that's the intent. I'll double check for you. NOTIFY PARENTS:

	we notify when breathing is impacted will take that back to the group. We do require epi pen – breathing could be impacted for various reasons though. That's a good question.
General Staffing Requirements-0305	I don't think you have to have a written procedure – the way it was originally written was "know every child's name" which was brought to us as unrealistic especially with substitutes who are unfamiliar. Or 75 children in a gym and they may not know every child's name. So I think the intent of this is really for substitutes to know each child's - be able to identify each child in specific situations. If there are allergies you want to know has a lavender allergy – want to know anyone who is interacting, how they can identify and connect with that pertinent information. No requirement you have a written policy, just need to be able to verbalized how I'd be able to identify each child. poster with picture/name, sticker that indicates an allergy to check inside the cabinet? it could be. The intent is that it's flexible, program can determine how that is implemented. we had identical triplets – was important everyone had a way to tell them apart to can see that would be very difficult
Duties and Qualifications of the Director-0320	Moved to next meeting
Duties and Qualifications of Teachers- 0330	Moved to next meeting
Duties and Qualification of Aides-0340	Moved to next meeting.