DOCUMENT RESUME

ED 472 734 PS 031 002

TITLE Greater Minneapolis Day Care Association 2000-2001 Annual

Report: Supporting Quality Child Care.

INSTITUTION Greater Minneapolis Day Care Association, MN.

SPONS AGENCY General Mills Foundation, Wayzata, MN.; Minneapolis

Foundation, MN.; Prudential Foundation, Newark, NJ.

PUB DATE 2001-12-00

NOTE 13p.

AVAILABLE FROM Greater Minneapolis Day Care Association, 1628 Elliot Avenue

South, Minneapolis, MN 55404. Tel: 612-341-1177; Web site:

http://www.gmdca.org. For full text:
http://www.gmdca.org/annualreport.pdf.

PUB TYPE Reports - Descriptive (141)

EDRS PRICE EDRS Price MF01/PC01 Plus Postage.

DESCRIPTORS Annual Reports; *Child Care; Infants; *Organizations

(Groups); Program Descriptions; Program Improvement; Toddlers

IDENTIFIERS *Day Care Quality; Minnesota (Minneapolis)

ABSTRACT

This annual report of the Greater Minneapolis Day Care Association (GMDCA) details the accomplishments of the organization for 2000-2001. The report begins with a letter from the executive director focusing on the need to change our thinking about the care and education of young children, then describes components of quality child care and how the GMDCA support quality child care. The report next describes the MetroKids childcare program in Minneapolis, asserts the GMDCA support of the Infant Toddler Training Intensive initiative, and describes how public investment helps to create quality child care. The report then lists GMCDA services provided in 2000-2001, and presents a parent perspective on quality. The report also includes a statement of financial position for GMDCA. Completing the annual report is a list of board members, volunteers, and donors. (KB)



Greater Minneapolis Day Care Association

[']2000--2001 Annual Report



Supporting 1: 11 To Child care

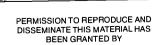


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Sharon Henry

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)



31602



December 2001

Dear Friends.

Recently, I read the National Association for the Education of Young Children (NAEYC) Position Statement on School Readiness. I found it to be a helpful and reader-friendly explanation of why quality child care matters.

NAEYC addresses the complexity of children's growth and development and the importance of discussions about school readiness being holistic. For example, any reliable definition of school readiness or quality child care should start with the family. It states, "Supporting families' child rearing efforts is critically important for ensuring that more young children enter school ready to succeed." Children who are ready for school are active, curious, and eager to learnqualities we desire for all children.

It is important that we acknowledge that school readiness does not begin at 3 or 4 years of age. Although many of us know this intuitively, new infant brain research confirms that a healthy start begins in infancy, with benefits lasting beyond kindergarten. Infants, toddlers, and preschoolers who experience consistent, trusting, nurturing relationships with caring adults are, in fact, becoming "school ready."

I believe that as a society, we need to change our thinking about the care and education

of young children. Our culture and community have seen dramatic changes in the past generation. Today, the majority of Minnesota women (70%) are in the workforce. And, our community is becoming increasingly diverse. Between 1990 and 2000, Hennepin County experienced nearly a 300% increase in children in public schools whose first language is not English. During the same decade, the percentage of children attending Minneapolis Public Schools who received free or reduced-price lunch rose from 47.6% to 65.3%. We must realize that the early years of a child's life are critically important for preparing children to be successful in school and life. We have an

opportunity—and an obligation to our young children—to pay as much attention to the early care and education system as we do the K-12 system. Without adequate public and private investment in the birth-to-5-years, we are merely playing catch-up in subsequent years, at a higher cost, and with lower returns.

Sincerely,

Showns Herong-13

Sharon Henry-Blythe, Executive Director

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Mission.

Minneapolis Day Care Association is Committed to the Healthy Development

Greater

of All Children.

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Supporting Quality

Child Care

in Hennepin County

What is quality child care?

Over time, child development researchers and professionals have developed a commonly accepted set of quality indicators for child care programs. These include:

- · Low child-to-adult ratio
- · Small group size
- · Qualified and consistent staff
- · Adequate teacher wages and benefits
- · Ongoing teacher training and peer support
- · Sensitive and responsive teacher-child interactions
- · Culturally appropriate care
- · Healthy and safe environments
- Developmentally appropriate environments, activities, and learning materials
- · Positive communication with parents.
- · Sound program administration
- Nutritional food service

Most professionals, however, will also agree that the definition of "quality child care" is evolving. It must expand to accommodate new research findings on infant brain development, for example, or the link between pesticides and health risks for children, or the growing understanding of the importance of culturally appropriate child care.

Why does quality matter?

Quality child care is linked to better outcomes for children, such as healthy social, emotional, physical and cognitive development, better language and communication skills, and engagement in arts and creativity.



How does GMDCA support quality child care in Hennepin County?

- We provide information and resources to parents so they can identify, afford, and choose quality child care for their children.
- We provide training, support, and resources to child care providers to help them improve the quality of their programs.
- We strive to increase public and private sector awareness of, commitment to, and investment in a high-quality child care system.



The Recipe for Quality:

Caring for Babies at MetroKids



MetroKids, located in the First Covenant Church, opened in 1999 to provide care for children ages 2 to 5 years old. Today, the program serves 54 children, ages 6 weeks to 5 years. Its mission is to provide high quality, Christian early education in an urban setting.

Elizabeth Couldron, Director of MetroKids, remembers receiving a call early in their second year of operation from a GMDCA staff member, urging her to consider opening an infant room. GMDCA was receiving calls from parents expressing a need for infant care near downtown Minneapolis. Ms. Couldron was hesitant because of the start-up costs associated with infant care. She also wanted to have just the right person on staff, one with exceptional expertise in caring for infants. She found that person in Alice, now a lead teacher with MetroKids. With more than 20 years of experience as a child care provider in both center and home settings, Alice explains her commitment to caring for babies, saying, "Every day is different, and I love being a part of their development."

Through GMDCA's State Service Development Grant process, Metro-Kids was awarded a grant to enable them to open an infant room. They used the grant to purchase nearly all the necessary equipment, including cribs, high chairs, toys, soft climbing blocks and diaper-changing tables.

The infant room opened at capacity with eight babies. Soon afterward, they added four more infant slots, bringing their total to 12 to meet the demand. Many Metro-Kids parents work at nearby Hennepin County Medical Center, as well as other downtown businesses.

Early on, MetroKids' infant room staff participated in a statewide in-service training—Infant Toddler Training Intensive (ITTI)—a joint effort of the Minnesota Child Care Resource and Referral Network and GMDCA. Alice and two of the other infant room staff, Gidget and Shellie, agree the training helps them provide the best possible care for babies. They learned about the week-by-week and month-by-month developmental needs of babies. Research supports what most of us know, that a baby's brain and physical development changes almost daily. By anticipating an infant's needs and learning positive ways to respond, the caregiver's daily interactions with the child are enriched. MetroKids staff communicate regularly with parents about how the needs of their child are being met and with each other about the infants in their care.



2



Toddler Training

Intensive (ITTI)

Care

Supports Quality MetroKids knows the ingredients necessary for a quality infant care program. With public support they were able to purchase equipment and fund expansion and staff training. A forgivable loan from the City of Minneapolis helped them purchase and

install outdoor playground equipment. Staff receive highquality training, and MetroKids strives to pay competitive wages in a field that is generally underpaid. Another ingredient is affordability-parents must be able to afford child care, either through direct subsidy or tax credits. However, the most basic ingredient—committed caregivers like Alice, Gidget, and Shellie—puts the quality in child care.

ITTI is an initiative supported by the Bush Foundation and the Minnesota Department of Children, Families & Learning and is carried out by the Minnesota Child Care Resource and Referral Network (GMDCA is a member of the Network serving Hennepin County). Across the state, 140 trainers offer ITTI training covering each county or region. Last year, 664 providers attended ITTI training offered by GMDCA in Hennepin County.

Anyone who works with young children may take this training, which totals 40 hours. Child care providers receive in-service hours that satisfy licensing requirements, and ITTI helps fulfill requirements of a Child Development Associate degree.

The four modules (10 hours each) of ITTI consist of:

- Social/Emotional Growth and Socialization What do children need at different ages? How do I respond to different personalities? What's the difference between quidance, discipline, and punishment?
- Group Care

What effect do physical spaces have on children? How can I evaluate the space we use? What is respectful caregiving?

Learning & Development

How do children begin to understand their world? How can I help children learn and grow? How does language develop? How do I meet the needs of children with different abilities?

Culture, Family & Providers

How do I support the culture of each child and reflect it in my program? How do parents and caregivers understand each other's roles? How can parents and caregivers become partners in raising children?

GMDCA will continue to support this project in 2002. Providers who take this training are eligible to apply for special infant toddler grants that can be used to improve the quality of infant and toddler care.



66 Public subsidies play a mile to enabling lower income families to avail themselves of higher tradition child care. 99

The City of Minneapolis has a long history of investing in child care. In 1975, Minneapolis was one of the first cities in the country to invest federal Community Development Block Grant (CDBG) dollars in child care. Although CDBG funds were intended to benefit low- and moderate-income persons, they were often used initially for brick-and-mortar projects, such as police stations.

Jim Nicholie, a long-time GMDCA employee and community activist, recalls that it was a challenge to get the City to commit these funds to child care. "It took an enormous community organizing effort to persuade the City that it was in their interest to help create more child care," said Jim. Once convinced of the need, however, "the City became an ally in using CDBG dollars for child care." A partnership between the City and GMDCA was launched.

"The child care landscape was very different 26 years ago," recalls Peg LaBore, Executive Director of the Family Tree Clinic in St. Paul and a former GMDCA employee. "There weren't many child care programs at all. The rationale for the City's investment in child care was about employment—low-income parents needed child care so they could work." CDBG funds were used to create more child care and to help low-income parents pay for it. In fact, the statewide Basic Sliding Fee Child Care Assistance program began in Minneapolis.

The City's interest in child care continues to be linked to employment. Today, Minnesota has the highest percentage (70%) of women in the workforce nationwide. Minneapolis has approximately 16,000 licensed child care slots in a variety of settings, including child care centers, homebased child care programs, preschools, and school-age care

programs. Recent census data indicate that more than 62,500 children, ages birth to 12 years, live in Minneapolis.

As the child care field has matured over the past three decades, we have come to understand more about what constitutes good child care and the risks for children in poorquality care. In recent years, GMDCA has focused Minneapolis CDBG dollars not only on increasing the supply of child care but on improving the quality of care.

According to Ellie Ulrich, Program Analyst for the Minneapolis Department of Health and Family Support, "Investing in child care helps the City fulfill its mission in two ways: Minneapolis parents can't be self-sufficient without affordable child care; and quality and safe child care is critical for the healthy development of children."

In 2000-2001, GMDCA's CDBG contract with the City of Minneapolis totaled \$884,393. A majority of the funds were passed on to parents and providers through: 1) child care assistance for low-income parents, 2) facility renovation loans for family child care providers and centers, and 3) subcontracts with three community organizations to increase culturally appropriate care for children of color and immigrant children. CDBG funds also allow GMDCA to provide a variety of quality improvement services to child care providers.

Nine other cities in Hennepin County contribute CDBG dollars to GMDCA to help families in those communities afford higher quality child care, including Crystal, Eden Prairie, Edina, Golden Valley, Maple Grove, Minnetonka, New Hope, Plymouth, and Richfield.

We commend these cities for their commitment of public dollars to increase the quantity, affordability, and quality of child care in Hennepin County. Undoubtedly, child care in our community is better because of these public investments.





GMDCA Services

July 2000-June 2001



GMDCA coordinated several child care subsidy programs. including the Basic Sliding Fee, which helped a total of 1,403 low- and moderate-income families in Hennepin County with 2,321 children pay for child care.

GMDCA helped 5,687 families with 7,862 children locate child care and provided them with information about choosing quality programs. GMDCA maintains a current data base of more than 2.400 licensed child care providers in Hennepin County.

Renovation Loan Program

In partnership with the City of Minneapolis, GMDCA assisted 42 child care providers in Hennepin County create healthier and safer child care environments for approximately 723 children. Loans are available to eligible centers and family child care providers for indoor and outdoor improvements. Priorities for renovation include addressing indoor air quality hazards that could affect children's development.

Child Care Service Development Grants GMDCA awarded state-funded grants to 191 Hennepin County providers for start-up, emergency, and technical and service development, thus improving care for approximately 3,038 children.

Minneapolis Lead Project

GMDCA reduced lead hazards in 14 family child care facilities in Minneapolis, creating healthier environments for approximately 121 children.



2,961 providers attended training offered by GMDCA.

Minnesota Child Care Apprentice/Mentor Program (MCCAMP) In the final year of MCCAMP, seven participants completed the program.

Latino Initiative Project

Fifteen child care providers from the Latino community were supported with networking opportunities and training conducted in Spanish.

Technical Assistance to Providers

GMDCA staff responded to 3,575 calls from providers, offering technical assistance including information about business operations, start-up, referrals to other resources, child behavior and guidance, and parent/provider communications.

Consultation and Networking Support On-site consultations, Directors and Family Child Care Networks, and special needs service coordination supported 240 providers.

Toy-Lending Library

Twenty-five providers borrowed 550 toys and/or equipment that helped them meet needs of children in their care.

Strong Beginnings

This school-readiness program, funded by Minneapolis Public Schools, served 90 at-risk children, ages 3 to 5 years, and their parents through 15 Minneapolis child care programs. Strong Beginnings provided enhanced preschool, early intervention, and support to participating families and providers.





Parent
Perspectives
on Quality

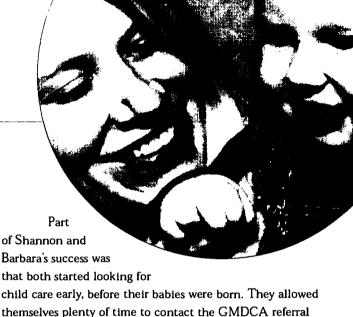
Last year, more than 5,000 parents called GMDCA for help in finding quality child care. Our nine Referral Specialists have over 90 years of combined experience assisting parents with selecting child care. Their collective wisdom and passion for children is evident in the way they support families anxious to find the best possible care for their children.

Not only do our Referral Specialists work hard to provide up-to-date, tailored lists of licensed child care programs, they also offer practical information on how to look for care that best meets the needs of children.

"Looking for child care is like looking for the perfect relationship," says Heidi Oxford, GMDCA's Referral Manager. "But parents usually have only a few weeks or months to complete the search!" Although this may seem insurmountable, two satisfied Minneapolis families shared their experiences and, not surprisingly, had much in common.

Shannon, whose infant is in a family child care home, said that she looked for a caregiver who reflected her own values. "I wanted a provider who would make [my baby] comfortable and give him the attention I'd give him," said Shannon. "When choosing a caregiver, you need to pay attention to your feelings about them." While Shannon was looking for someone with whom she felt comfortable, she also examined the environment carefully and checked out centers, as well as homes, before making her decision.

Barbara, who hired a provider to come into her home, reiterated the importance of evaluating your emotional response when making a decision. "Regardless of the number or quality of interview questions you prepare, it still comes down to intuition—does this person offer similar things that you would? Nothing will be perfect, but staying home doesn't ensure perfection, either," she said.



Both families believe that child care has enhanced their children's lives. Barbara's caregiver made her child feel "loved, secure and confident," while offering child development skills. Shannon is grateful that her caregiver is adaptable and accommodating, enabled through ongoing, open communication between them.

service, follow through on referrals, and visit programs.

Barbara is once again looking for child care after her provider resigned. She reflects back on her first experience and says it is "...unlike any other challenge. I was surprised at the anxiety I experienced and the amount of time it took."

Shannon recommends that first-time parents begin their search as early as possible, especially if considering center care, which may have waiting lists of up to two years.

36 Using a referral service such as CDCDCA's made it much easier, with of good materials and options. 99

Regardless of the amount of help and guidance available, parents ultimately make the final decision regarding child care. Taking a cue from Shannon and Barbara, parents increase their chances of finding quality child care by trusting their intuition, being discerning, and starting early.





To the Board of Directors Greater Minneapolis Day Care Association Minneapolis, Minnesota

We have audited, in accordance with auditing standards generally accepted in the United States of America, the financial position of Greater Minneapolis Day Care Association as of June 30, 2001 and the related statements of financial position, functional expenses and cash flows for the year then ended (not presented herein); and in our report dated August 17, 2001, we expressed an unqualified opinion on those financial statements.



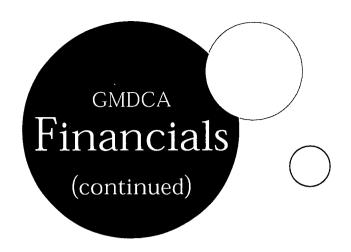
In our opinion, the information set forth in the accompanying condensed financial statements is fairly stated, in all material respects, in relation to the financial statements from which it has been derived.

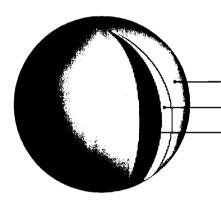
Kaliher, Passolt & Co., Ltd. Minnetonka, Minnesota August 17, 2001

Greater Minneapolis Day Care Association Statement of Financial Position June 30, 2001 and 2000

]
Assets			2000
Current Assets	Cash and cash equivalents	\$ 5,629	\$ 219,807
	Accounts receivable	881,335	669,698
	Notes receivable	127,406	147,642
	Grants receivable	5,776	12,549
Total Current Assets		1,890,146	2,049,696
Building and	Building (net of accumulated depreciation of		
Equipment,	\$169,570 in 2001 and \$154,803 in 2000)	42,550	79,797
at Cost	Equipment (net of accumulated depreciation of		
	\$219,204 in 2001 and \$169,089 in 2000)	345,594	390,153
Total Current Assets		\$ 2,235,740	\$ 2,439,849
	Refundable advances	477,387	648,200
Liabilities and Net A Current Liabilities	Accounts payable	\$ 27.050	\$ 29.684
	Accrued liabilities	1,319	3,075
Total Current Liabilities		505,756	680,959
Net Assets	Unrestricted Designated	227,411	250,897
	Undesignated	489,939	492,255
		717,350	743,152
	Temporarily restricted	1,012,634	1,015,738
Total Net Assets		1,729,984	1,758,890
Total Liabilities and Net Assets		\$ 2,235,740	\$ 2,439,849
			<u>· </u>
Program Services (includes \$8,529,419 in Program Pass-thru Dollars)		\$10,395,564	
General Administration		\$ 114,522	
Fund Raising		\$ 63,741	
Total		\$10,573,827	







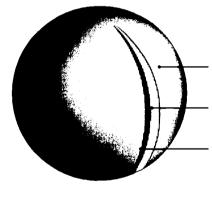
Revenue

Government: \$9,991,588 (94.8%)

Service Fees: \$180,810 (1.7%)

Other: \$372,523 (3.5%)

Total: \$10,544,921



Expenses

Program Services: \$10,395,564 (98.3%)

General Administration: \$114,522 (1.1%)

Fund Raising: \$63,741 (0.6%)

Total: \$10,573,827



GMDCA

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for 2000-2001

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Hennepin County Library

Louis Alemayehu

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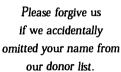
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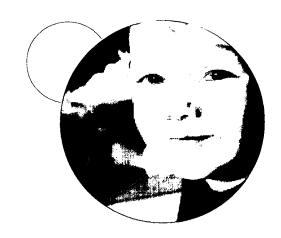


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