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CMAS
Care for Newcomer Children (CNC)
A NEW TYPE OF CHILD CARE SUPPORT
17 Fairmeadow Ave. • Suite 211 • Toronto ON • M2P 1W6 • Tel: 416-395-5027 • Fax: 416-395-5190 • www.cmascanada.ca
Funded by: Citizenship and Immigration Canada / Financé par: Citoyenneté et Immigration Canada
Supporting Child Care in the Settlement Community / Soutien de la garde des enfants dans la Communauté de règlement

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Agenda

- Welcome
- CNC – The beginning
- CNC Model
- Support
- Change
- Q & A
- Where do we go from here?

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The work you do is so important as it helps newcomer families as they start their life in Canada!

We all have something in common… we believe that supporting newcomer children is important because today's children will be the leaders of the future.

To create a good future, we need to give newcomer children a good start and providing quality care helps achieve this.

We are committed to providing care that ensures the best start possible for children who use our services.

Care of newcomer children may be seen as a support – but we all know that while the children are in our care, we have an opportunity and obligation to provide a nurturing, caring experience that supports their settlement and learning

Quality Care for Newcomer Children supports that concept and goal.

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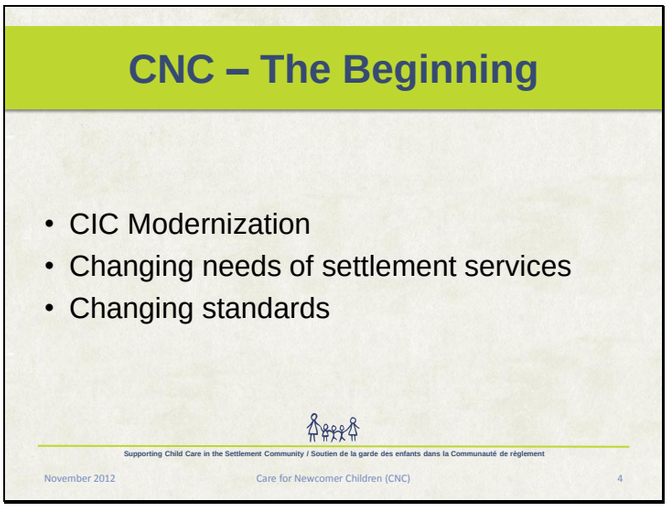

CIC asked CMAS to propose new ways for organizations to offer child care to support the modernization of settlement services.

Settlement services needs have changed.

- As services were added over the years, they were excluded from the child care supports - for example: ELT – JSW
- Some programs needed to operate with 2 sets of requirements (National LINC Childminding Requirements and Occasional Child Care Requirements)

Some of the requirements had become outdated and did not keep up with changes in standards. For example:

- staff TB testing and how often it is required.

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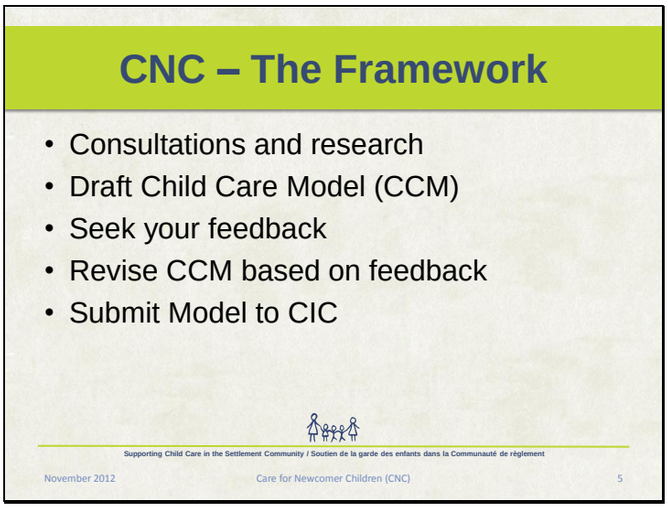

Once the project began, a guiding framework was developed.

We knew it was essential that the following things take place:

- Gather your opinions, suggestions and impressions
- Conduct research in the field of child care including settlement
- Use this information to develop a Model of child care
- Share the Model with you
- Gather feedback on the proposed Model
- Make adjustments to the proposed Model based on feedback

Once all of these steps were taken we submitted the proposed model, research and recommendations to CIC

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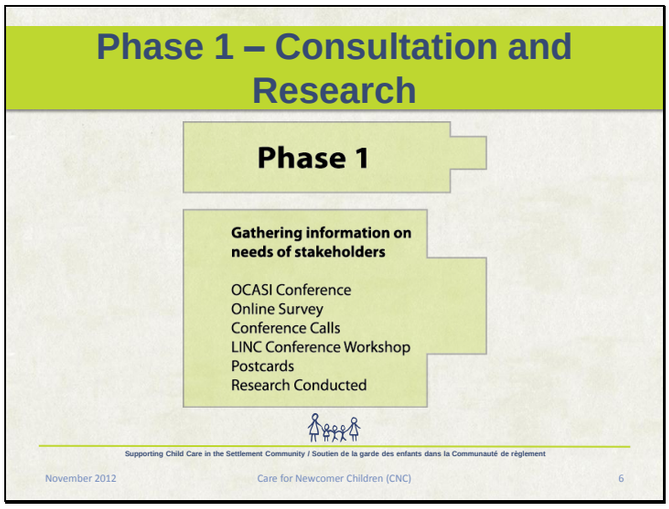

CMAS conducted the design and development of the new Model over a number of phases:

PHASE I – Included Consultation and Research

In 2009 – when we reached out nationally to collect input, we asked for information through

- A workshop at the OCASI Executive Directors Conference
- A series of workshops at the Professional Development Conference for LINC Childminders
- Questionnaire (Postcards) at the Professional Development Conference for LINC Childminders
- On-line Survey open to all stakeholders
- Conference Calls – held with various stakeholders

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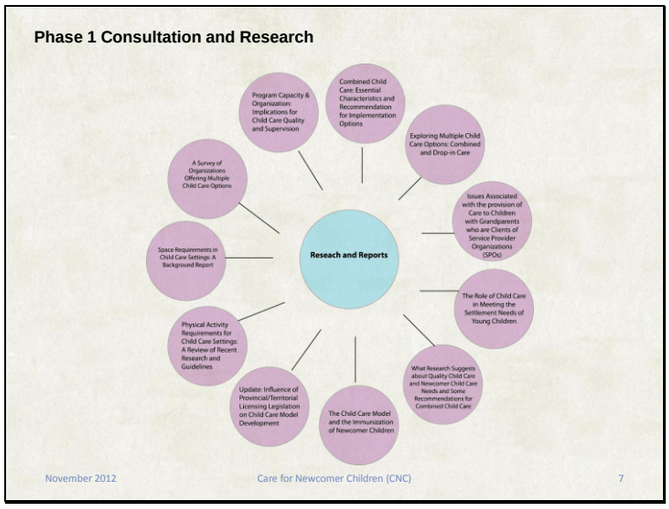

There was also an enormous amount of RESEARCH and Reporting completed.

To ensure that we developed the best Model, we conducted exhaustive research to gather current information in both the child care and settlement fields. We worked with experts in fields such as fire safety, public health, immunization and nutrition. Some of the research led to the development of reports. Some of these reports were:

- Space Requirements in Child Care Settings: A Background Report
- Physical Activity Requirements for Child Care Settings: A Review of Recent Research and Guidelines
- Update: Influence of Provincial/Territorial Licensing Legislation on Child Care Model Development
- The Child Care Model and the Immunization of Newcomer Children
- What Research Suggests about Quality Child Care and Newcomer Child Care Needs and Some Recommendations for Combined Care
- The Role of Child Care in Meeting the Settlement Needs of Young Children
- Issues Associated with the Provision of Care to Children with Grandparents who are Clients of Service Provider Organizations
- Exploring Multiple Child Care Options: Combined and Drop-in Care
- Combined Child Care: Essential Characteristics and Recommendations for Implementation Options
- Program Capacity and Organization: Implications for child Care Quality and Supervision
- A Survey of Organizations Offering Multiple Child Care Options

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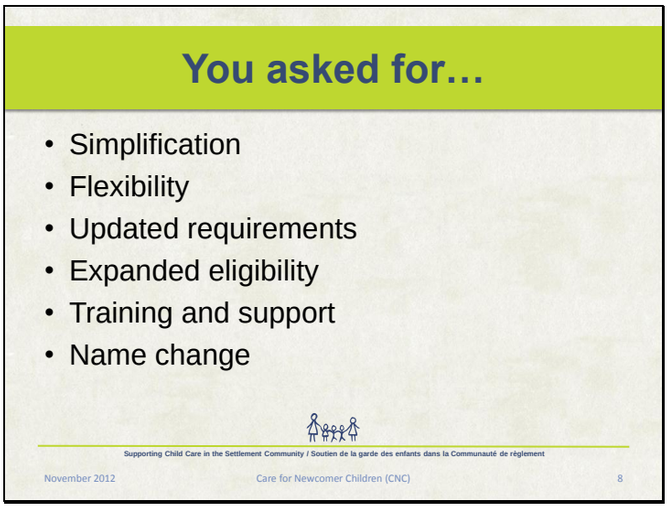

During the consultations you told us that the design had to be:
- simple and
- provide flexibility

- You asked for the outdated requirements to be updated or removed.

- You told us that it would help to have expanded eligibility:
    - Age of care expanded to include infants (for OCC) and School age
    - Child care space available regardless of the program that parents are using - so that more parents would be eligible to use the child care supports

We heard that childcare staff should have training in caring for children and settlement of children.

Program operation should be supported by strong standards and information about best practices
    - It would be better if planning time be provided to help with managing the program e.g. registration

AND, FINALLY!

- The program should have a name change

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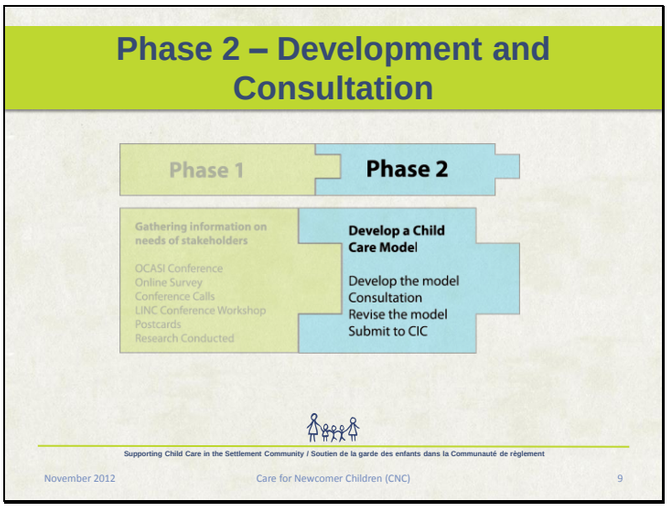

Phase II - Included Development and Consultation

- We took all the research and information from the initial consultation and guiding by an advisory committee.
- We drafted a proposed model
- The Model was presented back to you for your feedback
- The feedback was used as the basis to make revisions to the Model.

All in all, we compiled input from about 500 stakeholders before finalizing the proposed model and submitting it to CIC in March 2010

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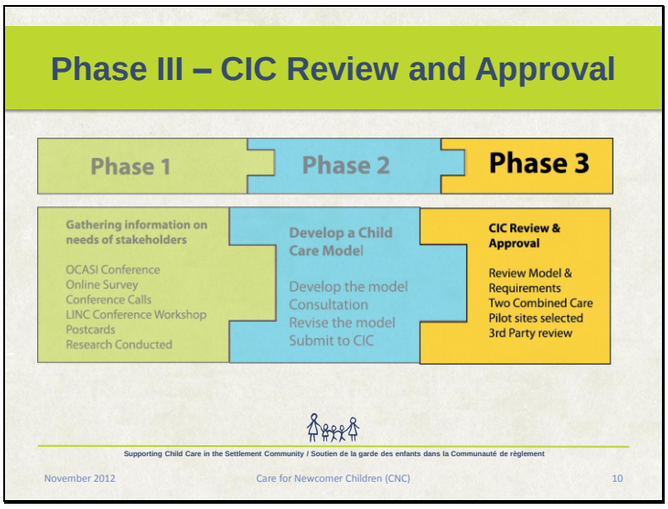

Phase III – CIC Review & Approval

In 2011 CIC reviewed the proposed Model and requirements.

CMAS met with CIC several times providing clarification on various items such as:

- Addressing Health and safety needs
- Settlement needs
- And the practical application of the proposed Model and it's three types of care, Long Term, Short Term and Combined Care

CIC decided to have CMAS test out the biggest change with in the model - Combined Care to gain an understanding on how it work within a settlement setting. So, in the Summer of 2011 - CIC chose two pilot sites to test out Combined Care

To determine the effectiveness on an overall scale of Combined care, CIC requested that a 3rd party assessment be done. Having it performed by an outside Research based company, who had no vested interest in the Model meant that the results would be more assured of being unbiased.

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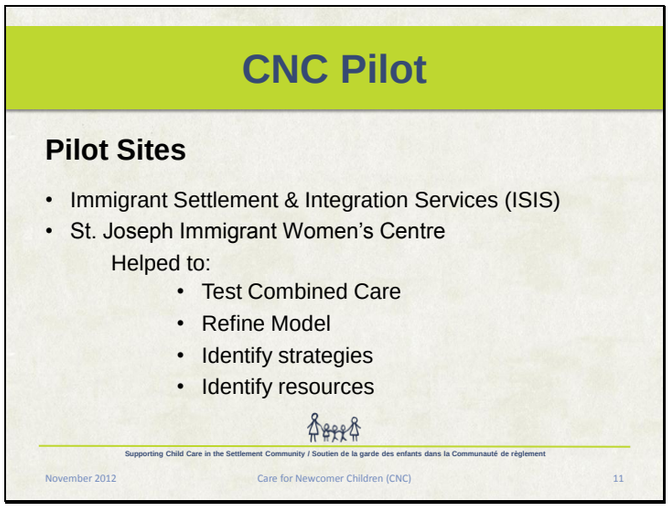

The pilot was conducted at two sites and we want to thank them for their participation.

• ISIS (Immigrant Settlement and Integration Services) in Halifax

- ISIS has been operating LINC Childminding for many years, and they wanted to offer short-term care, which currently isn't available outside of Ontario.
- They were excited by the opportunity to test out this new type of care.
- They felt it would allow them to provide services to more families and increase uptake in their adult programs.

•St. Joseph's Immigrant Women in Hamilton

- St. Joe's had 3 locations and jumped in.
- At St. Joseph's, they had successfully offered OCC and LINC Childminding in separate spaces for years.
- When they were presented with the idea of participating in the pilot, they enthusiastically took on the challenge.

There was a lot of work to get started, including creating new policies and procedures, information and training staff.

There role was to use the experience of providing combined care to help to:

- Test the effectiveness of Combined Care
- Help us to refine elements of the model
- Identified strategies and resources

Their ongoing feedback was an integral part of ensuring that the model and requirements would be effective for programs.

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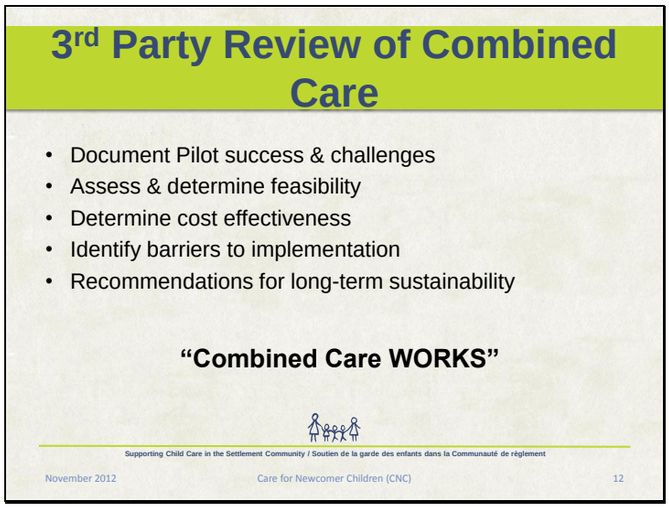

E-NOVA Consulting and Eco-Ethonomics conducted the 3rd Party Assessment of Combined Care

Their mandate included:

•Document successes and challenges that the pilot sites experienced in the operation of the Combined Care
•Determine the effectiveness the implementation of Combined Care at the 2 Pilot sites
•Determine the cost implications and efficiencies of Combined Care
•Assess and determine the feasibility of Combined Care
•Identify suggestions for more efficient CNC delivery, as well as risk and barriers to implementation of a full CNC model
•Make recommendations for ensuring the long term sustainability of the CC and CNC Model

Some of the findings were:

•Combined Care is likely to have a positive impact on uptake
•It makes it easier for newcomers to access service sooner after arrival
•It allowed for more clients to use the services
•Maintaining quality may require more effort from the staff when compared to short term care
•Biggest challenges to efficiency seems to be linked to client registration, orientation to the services and scheduling and integrating short term children

But all in all, the final research supported the concept that 'Combined Care WORKS!"

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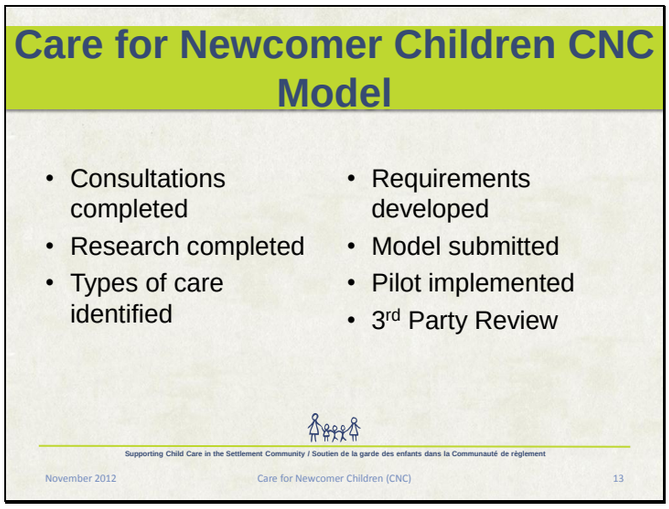

To summarize:

Consultations across Canada were completed in the form of surveys, conference calls, personal and telephone interviews, emails and advisory committee input.

Research was completed by interviews with subject matter experts in the specific and related fields involved in the care of children in the settlement community. This research included input from the fire department and public health.

3 types of care were determined to be best able to serve the needs of the settlement sector.

A detailed series of Requirements were developed and a Model designed.

The Model was detailed in a comprehensive report and submitted to CIC for consideration

CIC had many questions and clarification on various points were extended to them before they decided to begin with a Pilot project, which was implemented.

To ensure that the concept and application of the Model was rigorously assessed without bias, a 3rd Party was hired to review it in detail and submit their report to CIC.

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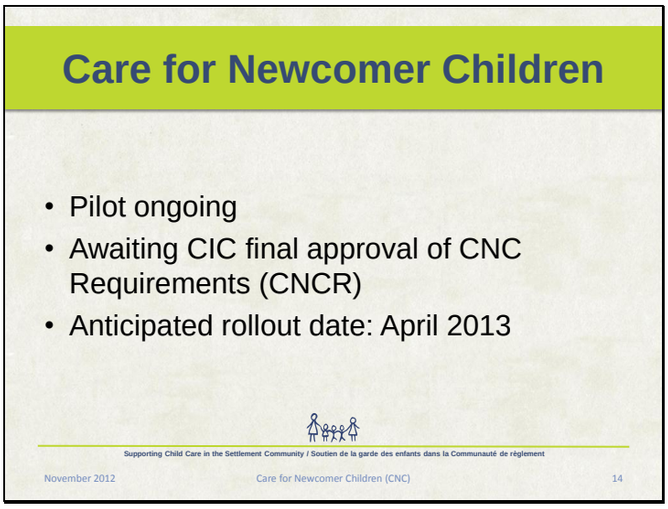

This is where we are at now

- Pilot ongoing
  - The Pilot participants will continue to offer Combined Care and help guide us as to items of interest to improve on an ongoing basis by providing feedback

- Awaiting CIC final approval for Requirements
  - Individual items are still being revised however
  - We are almost at the end

- Anticipated rollout date for CNC: April, 2013

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Now we are going to look at Care for Newcomer Children- what it is and some of the requirements that support it.
Please remember that what is discussed throughout the presentation are possibilities for providing CNC. What type/s of CNC you will actually provide will be determined between CIC and your organization.

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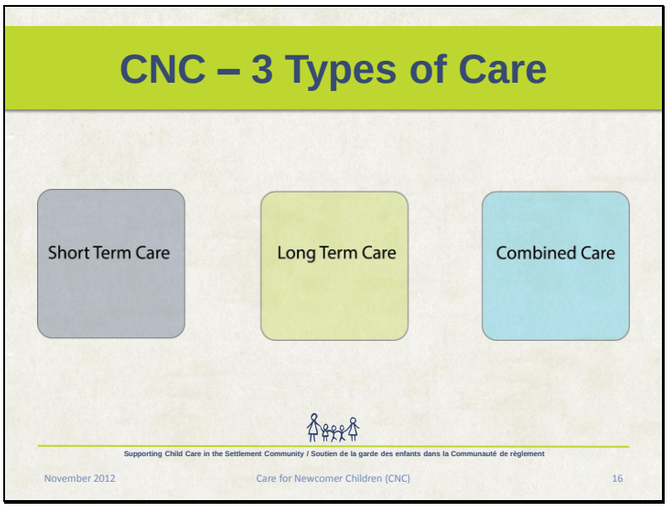

Let's talk about what CNC actually is.

- CNC allows organizations to design child care supports that directly complement the adult services they provide.
- CNC includes 3 types of care for organizations to choose from.
  - **Long Term**
  - **Short Term and/or**
  - **Combined.**

- Organizations may offer one or more than one type of care depending on the needs of their clients and funding conditions.

Let's take a closer look at each option.

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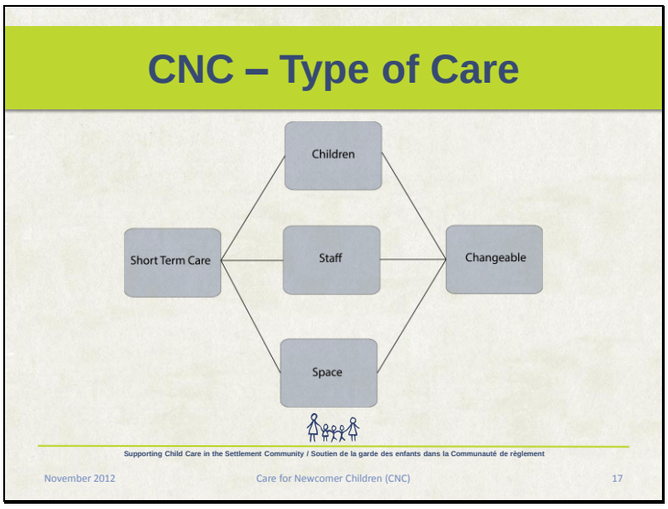

Short term care is similar to the OCC (Occasional Care) program.

- OCC has its own set of requirements and is, for the time being, only offered in Ontario, so those of you from other Provinces would not necessarily have heard of it.

Short Term Care - Provided when care is needed for short periods of time such as:
Parents attending counseling appointments or workshops

- In Short Term care:
  - Sessions may last a few hours or a few days
  - The children may come in once or several times,
  - The number of children may vary
  - Children might be different from day to day
  - Staff might be different from day to day
  - The space used or allocated may change -- Your organization may wish to offer care in the community – taking advantage of a mobile way of providing care.

  - So all elements could be **changeable.**

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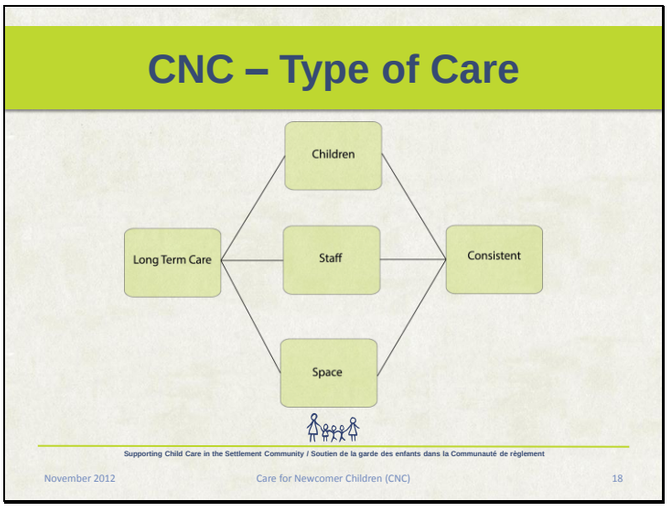

Long Term Care – is similar to LINC & ELT programs or traditional Childminding as care is usually given to children whose parents attend language programs.

- It is offered on an ongoing basis
    - The children who attend are the same ones every day
    - The staff who work with them are the same ones every day
    - The space where they are cared for is the same every day

- Everything is consistent.

- You will continue to provide consistent care for children by staff in the same space.

- The differences for long term programs would be in the Requirements the changes you will experience is not the type of care but more about how you provide the care.

- If your organization only offers language classes it is likely you will offer long term care and you already know how to do this.

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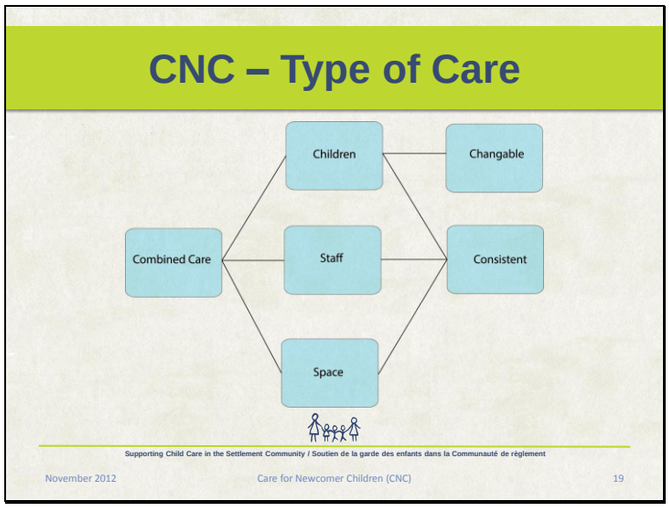

Combined Care - This is the newest type of care

Many of you over the years have had to turn away parents who needed child care because they were using settlement services when you only offered child care for Language training. Now you will be able to provide them the care they need.

•Combined care is one child care space that serves parents who use both language and settlement services.
•A combined care program will dedicate a certain number of spaces for long term and short term care.
•The staff and space are consistent. There will be children who attend on a daily basis and those who will change.
•If you offer BOTH settlement and language classes, your programs are the ones that could benefit from COMBINED CARE.

- You may have vacancies in your childminding programs that can be allocated to short term care, you might have both OCC and Childminding and find that you can combine into one program and serve all of your family needs. Or you might continue to operate in the 2 spaces but care for both long term and short term in both.

This is one example of the flexibility you will find in CNC.

This Combined Care option gives you different ways to use and allocate the space and staff.

ADVANTAGES:

•The 3rd Party review results showed:

- staff observed more stable attendance of the programs and services since the start of the combined care pilot.
- The quality of service is improved: parents do not have to bring their children to workshops or one-on-one sessions, and can focus more.
- It leads to positive settlement benefits for the child as well as for the parents.
- It can be provided without compromising the safety and quality standards for CIC funded child care.

•Combined Care offers greater flexibility in providing care for children.
•Parents have easier access to settlement services as they can access care for their children regardless of CIC funded program they attend.
•Space that is not used by children who come on a regular basis, can be allocated to short-term children if the space allows.
•Potential for increased uptake.

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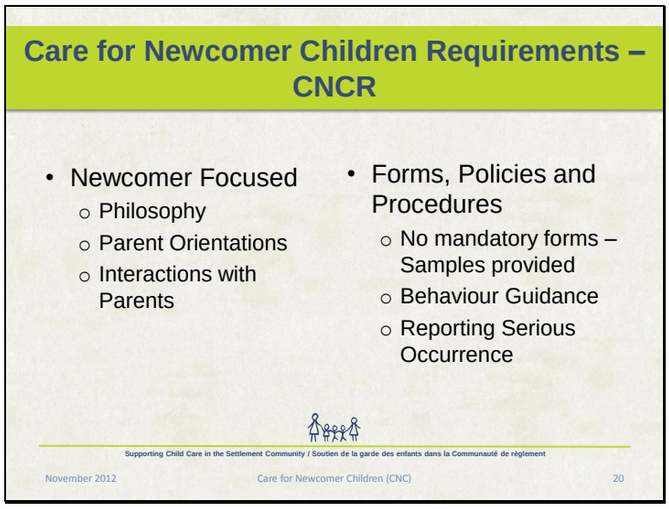

To support CNC, a set of requirements was developed. You will find many of the requirements are the same or similar to those you are use to. We will focus today on those that are different:

•The requirements are more focused on the needs of the Newcomer Family.

- Every program is required to have a program Philosophy that supports the development of the individual child and the settlement of the family.
- Parent Orientation and Translation–parent interactions:
    - You're likely doing orientations already, the requirements now allow you to do parent orientations over time for long term children, and talk about ongoing interactions with parents and how you can support them.
    - It is essential for parents to understand the rules and their responsibilities in using the child care program. To support this organizations must provide translation as necessary to ensure parents have an understanding.

•You will also find changes to Forms, Policies and Procedures:

- You no longer have to use MANDATORY forms for registration – the requirements set out what information must be collected. We'll be providing you with samples that you can modify to meet your needs.
- Behaviour Guidance requirements have changed and now identifies prohibited practices.
- The reporting of a serious occurrence will be to the organization responsible for monitoring the CNC program. You will also need to report to CIC according to your agreement. This change will allow you to be supported through the process of addressing the serious occurrence.

•Samples will be provided to help you.

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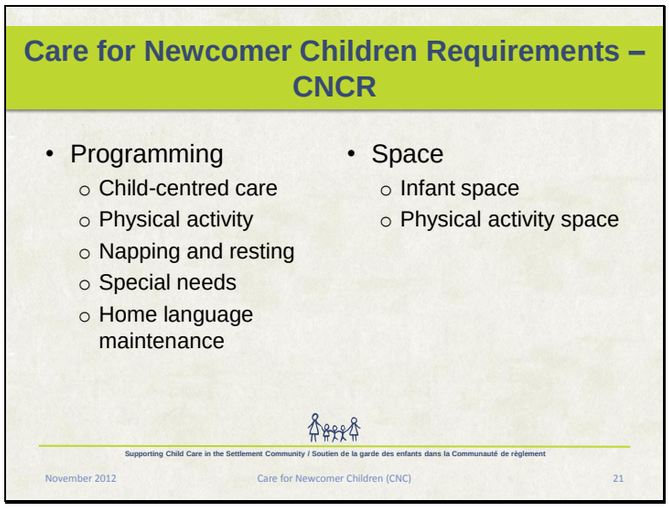

Programming

•**Child-centred care** – programming will have a greater focus on settlement needs, and programming must be done reflecting changing interests and abilities of the children.

•**Physical Activity** – for the first time, the requirements set out the minimum amount of physical activity for a program. If children are in care for more than two hours, the program must include at least 30 minutes with a combination of activities led by staff and the children's choice.

•For the first time, **Napping and Resting** are also included in the requirements and should be based on the needs of the child.

•**Special Needs -** this is the first time the requirements address children with special needs and our responsibility to work in partnership with parents and other professionals to provide quality care and support their development.

•**Home language** – the CNC environment and activities should reflect importance of home language maintenance and support learning a new language - you'll find lots of resources on our website to help you with that.

•**Space**

- **Infants** come with the highest risks. We also know they come with a large amount of equipment to support their care. Therefore infant space requirements have increased to accommodate large equipment for sleeping and eating.
    - Infant space requirements are now 16.8 square metres for each group of 3 infants (up from 8.3) Many programs are already meeting requirements such as this one.

- **Physical activity space** is now only required if there are children attending for more than 3 hours per day.
    - When a program provides care for children 3 hours or less physical activity space is no longer required. When children are provided care for more than 3 hours physical activity space is required.

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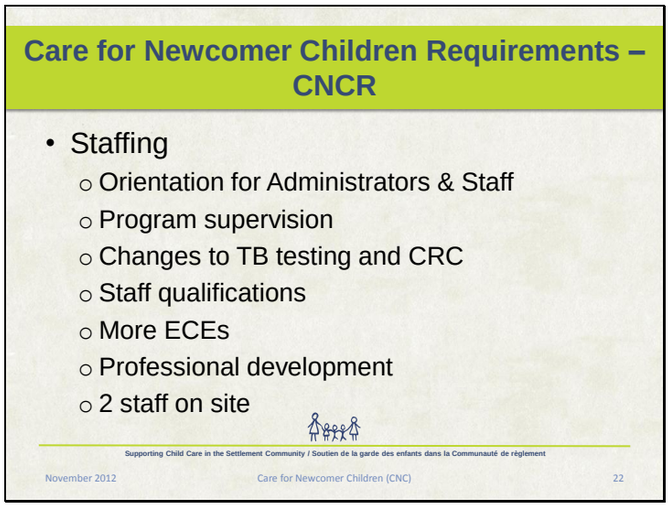

Staffing

•**Orientation** - ALL CNC administrators and staff must complete an orientation.

- Examples of important items: Must become familiar with laws around reporting of child abuse.

•**Program Supervision** – ONE PERSON MUST BE IN CHARGE OF THE PROGRAM AT ALL TIMES

- One CNC staff with ECE or equivalency is to be designated as having responsibility for the program.
- For Long and Short Term care – more than 32 children – an off ratio staff with designated responsibility is required.
- For Combined Care – more than 24 children – an off ratio staff with designated responsibility is required.

•**Changes to TB testing and CRC** –

- TB tests are only required upon hiring and as directed by local public health.
- Criminal Reference checks are updated every 3 years.

•**Staff qualifications**

- CNC now recognizes that the staff qualifications should be relevant to the age group for which you are caring – This opens the door for other qualifications such as.

Child and Youth Worker, or a Recreational Leader to work in a school age program.

•**More ECEs**

- The number of ECE's required has increased – the CNCR requires 1 ECE per 24 children – Before the requirement was 1 per site.

•**Professional development**

- Goal is to ensure Professional Development is part of ongoing standards that support safe quality care.
- All full-time staff working in a CNC program must complete 5 hours per year of Professional Development.
- This can be accomplished by taking online courses, participating in webinars, attending conferences such as this one, etc.

•**2 Staff on site** during the operation of any CNC session at all times.

- It has been recommended for many years that there be 2 staff on site this is now a requirement. If the ratio of staff to children can be met by one CNC staff the second person can be a CNC volunteer

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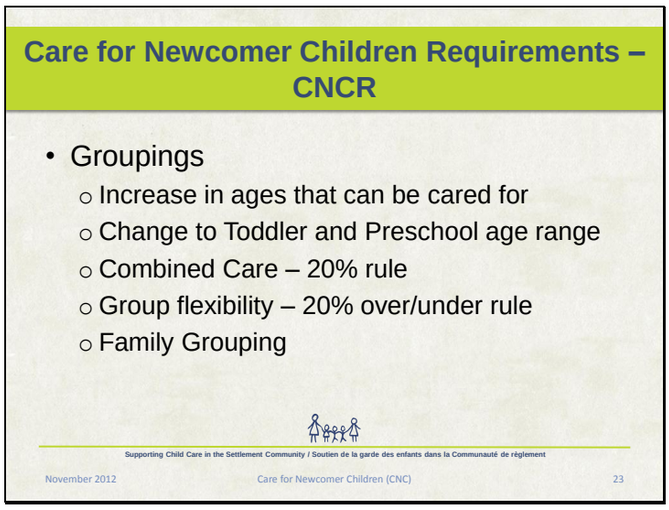

With the three types of care, there are some changes to group size and ratios.

You'll find there has been an increase in eligibility – all programs can care for all **age** groups – including infants and school age.

- Short term care will have different ratios from long term care, as will combined care.
- There has been a change to the **toddler and preschool age range** – now toddlers are from 19 months to 35 months and preschoolers from 36 month up to age 6.

- If you offer a **Combined Care** program, you may only have a few spaces to short term. If 20% or fewer are for short-term children, then you can use the long-term ratio of staff to children. If more than 20% of the children in your care are short-term, you require an extra staff

- **Group Flexibility** – there are times when you have children who are not quite old enough to move into the next age group, but they might be ready to move up, or you might have a child who would benefit from staying with their current group. The 20% over/under rule allows you a two month leeway and some flexibility for up to 20% in any age group.

- **Family Grouping** has also been introduced – which allows a variety of ages to be cared for in one program with a maximum of 5 children in a group. This will be particularly important to rural programs where they do not necessarily have large immigrant populations.

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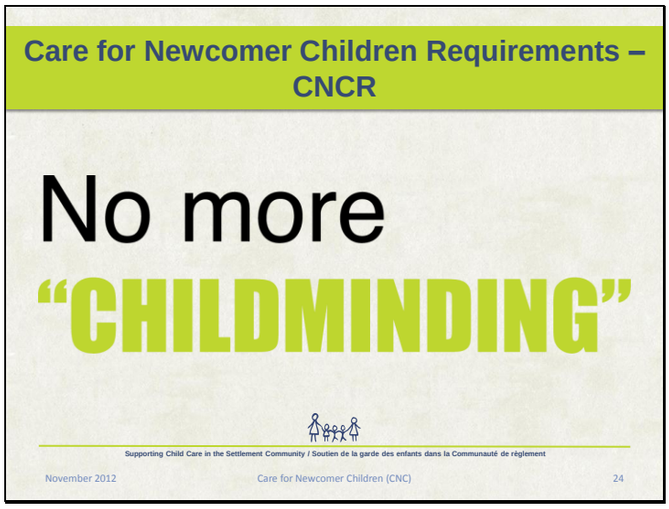

No more 'childminding'!!

After years of some frustration, the name has been changed to Care for Newcomer Children or CNC.

Each organization can now choose the title for staff, that best suits the organization.

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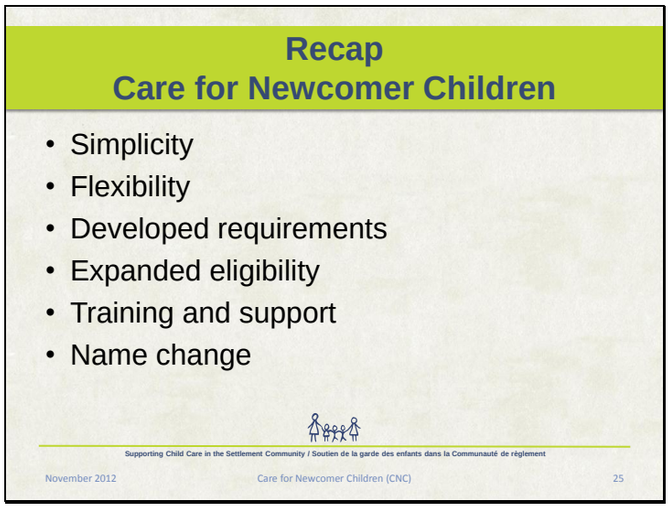

You asked for:

- Simplification
- Flexibility
- CNC gives you options from which you may choose with a single set of requirements to make it simple and flexible and easy to implement and maintain
- Developed new requirements
    - Requirements have been developed to support the 3 types of care
- Expanded eligibility
    - Eligibility has expanded to include more people who can use the program and the ages that can be cared for
- Training and support
    - CNC sets an increased standard for qualifications, initial training and ongoing training to ensure we are staying current within the profession
- Name Change
    - And finally, the name of the program has changed to better reflect the type of care and the professionals who work within it. – No More Childminding!

- The Care for Newcomer Children Model allows for organizations to finally create a Combined Care service that responds to their needs.

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The anticipated start date for the implementation of Care for Newcomer Children is April 2013.

Watch the CMAS website for the most current information! We will be keeping you up to date on these changes and giving you supports via our website.

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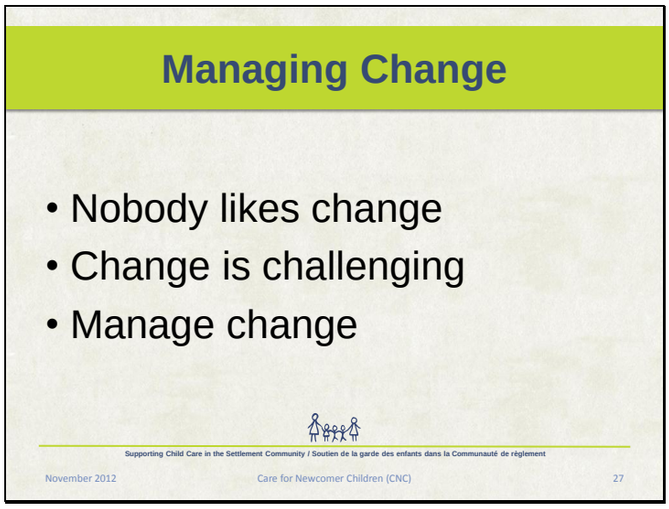

With the arrival of CNC we're all going to be experiencing change in our programs.

We know that many people do not like change – change puts us on edge.

Change can be challenging, it makes us move from doing the things we are comfortable with – to doing things we are not sure we can do –so we might be afraid of not looking good.

We encouraged team leads to come to the conference because you're going to be faced with getting your team on board for these changes. You will need to work with your team and help them through the transition.

To help you through the transition, we wanted to give you some information about how you and your team can understand and manage change.

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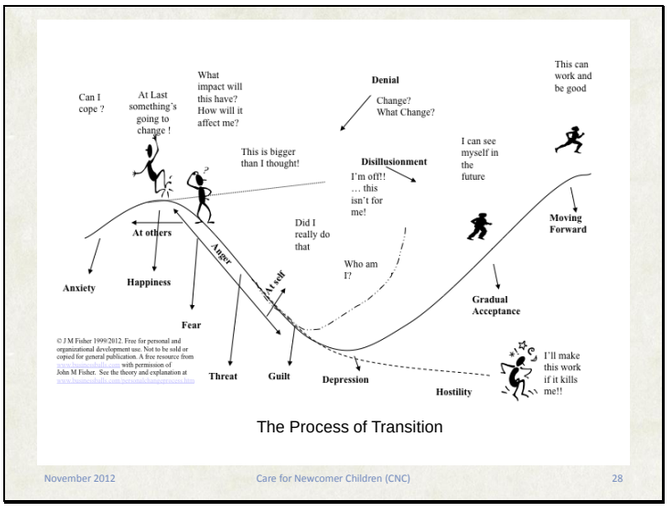


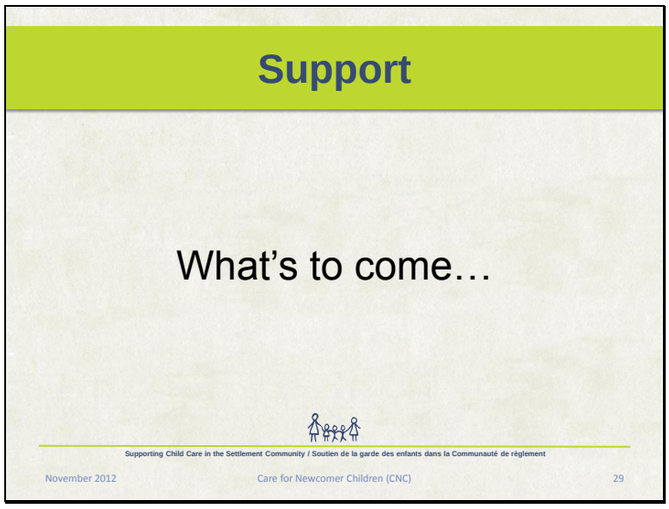
The Process of Transition

CHANGE MANAGEMENT DIAGRAM

- Different people react to change in different ways
  - Some jump right in
  - Some – not so much

- And everyone will have ups and downs. As you go through these changes, recognize that different team members will be at different stages in the process of change.

Slide 29



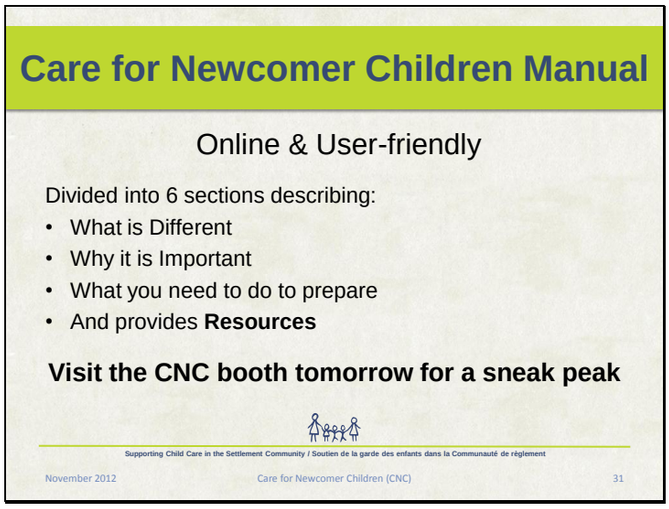
Now that we've done all that, we're going to talk about some of the supports that will be coming soon

Slide 30

One of the supports that we're most excited about is the CNC Manual, and we think you're going to be surprised by how easy it is to use, and how much it will help you!

The manual is a brand new kind of tool to help you and it builds on the experience and knowledge that you already have!

Slide 31



The manual has been designed to be user-friendly no matter what your learning style!

Everyone will not be expected to just read through a large manual.

- The manual is electronic, and because it's online, we're able to present the information to you in small sections.
- You can read it or listen to the audio narration, or you can download it to print.

Because you already have the knowledge of experience of operating a program, we set it up to show you what is different from what you're currently doing :

- Why that change is important.
- What you need to do to prepare.

And for each section, you'll also get

- sample policies
- procedures
- forms
- resources and
- even links to helpful outside resources as well

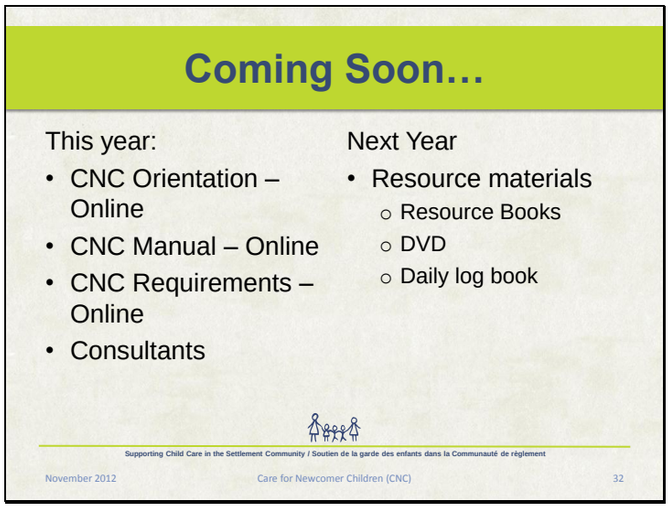
The CNC manual is divided into 6 sections,

- Getting Started: The Basics
- Space
- Staffing and Supervision
- Health and Safety
- Programs and Activities
- Parents

- Everything you find in the online manual is also available to download and print if you need a paper copy.

- It is also very easy to search to find the specific information you need.

Slide 32



Rest assured… we do have a plan to support you.

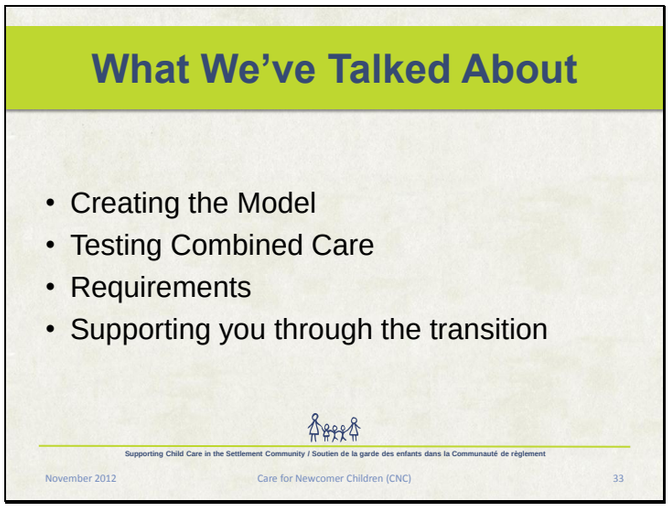
By the end of December, you will have: ELECTRONIC VERSION ONLY – NO PAPER COPY PROVIDED

- Online CNC Orientation
- Care for Newcomer Children Requirements
- CNC Manual
- Consultants will be available to assist in transitioning

- April onwards
  - A copy of "*Roots and Wings*" – this book will provide information on culture in the early childhood setting
  - A copy of "Reflecting Children's Lives - *Planning your Child Centered curriculum*" –
  - to go with it - a Martin Liberio DVD "*True North Values" Martin was a keynote for our conference and he understands child centered care. This video introduces the concept.*
  - Daily log book – CNC requires programs to keep a daily record of information

    - We hope to provide you with much more support in the 2013 contract.

Slide 33

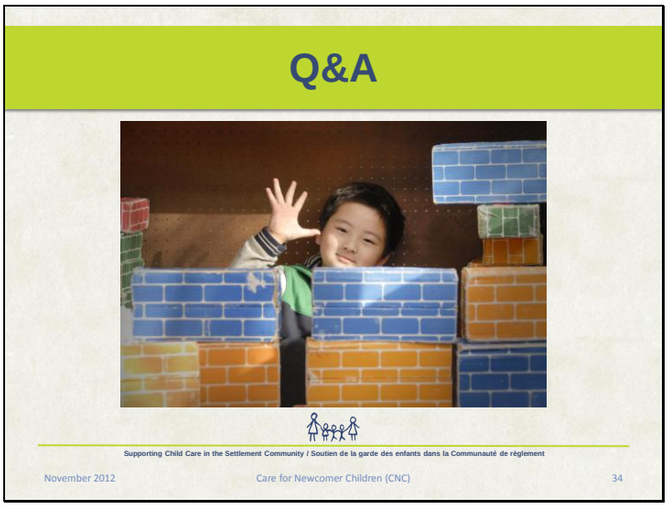


Before we move to question and answers, let's just review what we've talked about:

- We have told you how we used your input in the design and development phase of the model, and how the Model was built using the advisory committee, and research.
    - We got your feedback on the Model.
    - CIC reviewed the Model.
- We tested Combined Care through the pilot.
    - We've used all the information from that pilot and the 3rd party review to develop supports and resources to help you as you transition into Care for Newcomer Children.
    - We provided you with an introduction to the types of care within CNC.
- And talked about requirements and how they might apply in programs.
- And we spoke a little bit about getting ready for change.
    - And the support you can expect moving forward.

So now we are going to open the discussion up to questions and answers

Slide 34

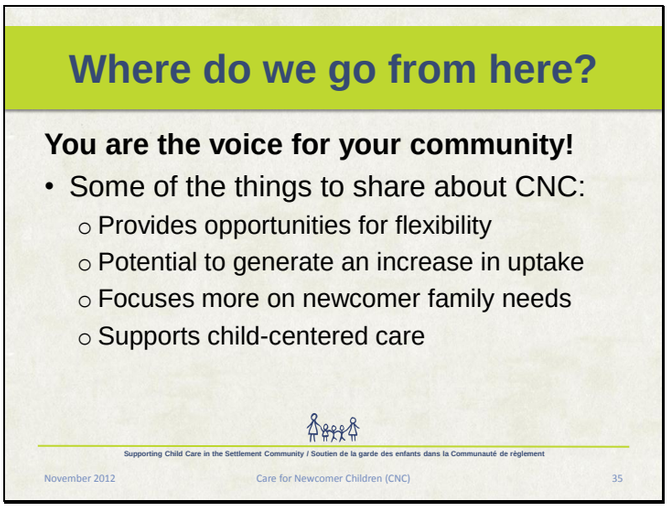


Please keep in mind that until the CNC Requirements are finalized, while we are somewhat restricted on what we can tell you with certainty, we are not restricted in hearing you.

Having said that, we are most interested in acquiring feedback or entertaining questions from all of you as your input continues to be very important to us and the project.

Now, if any of you have any questions, I'd be glad to try to open the floor to them now.

Slide 35



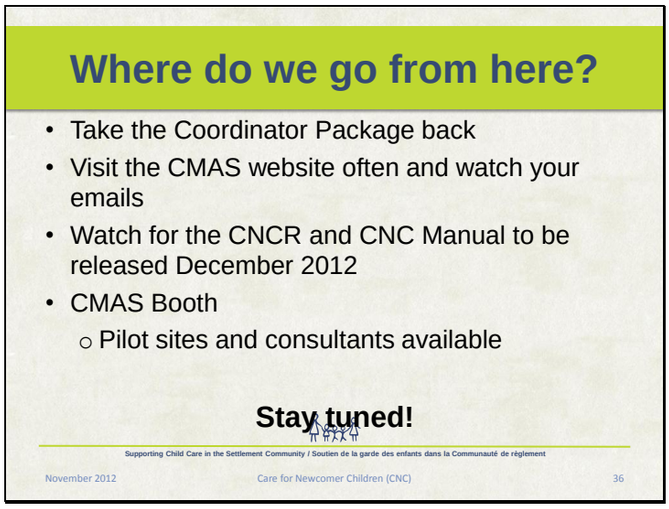
We know that you've been given a lot of information today, and transitioning won't necessarily be easy. As the lead we are asking that you try to take back the information you learned today to your organization; talk to your administrator and colleagues and share some of the information presented.

•Share with them about how CNC:

- Provides opportunities for flexibility in the delivery of services – you can choose between the types of care – which has the potential to generate an increase in uptake for organizations.
- Provides more services and options to more parents as well.
- Focuses more on newcomer family needs and reinforces child-centred care – orientation with parents, providing them with information on parenting in the community, by creating programming and a philosophy that focuses on the individual needs of the child regarding their development and settlement.

Our most fervent wish is that we are all be able to transition seamlessly into Care for Newcomer Children.

Slide 36



Because there has been so much information covered, we're providing a Coordinator Package for you to take back with you.

- If there's more than one of you working with the same coordinator, please just TAKE BACK 1 PACKAGE PER coordinator.
    - Be sure to give the package to your administrator along with the Resource sheet.
- Visit the CMAS website often and watch your emails.
    - All CMAS communications has been moved online.
    - Allows for quick dissemination of information.
    - Allows for unlimited reviews of the information at your convenience.

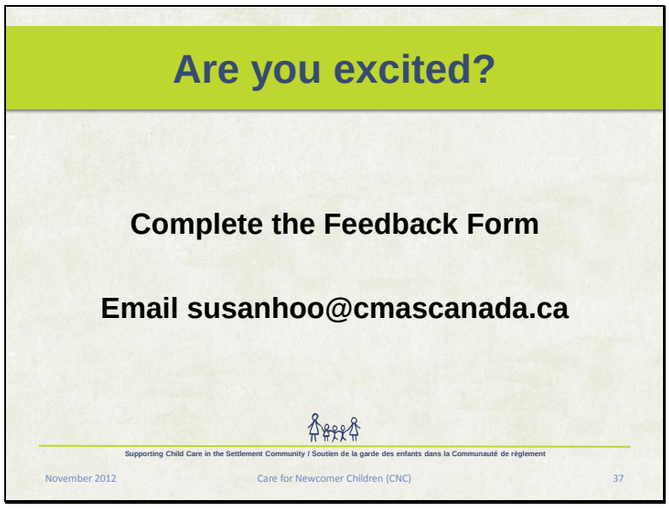
- Watch for the CNCR and CNC Manual to be released December 2012.

- CMAS Booth:
    - Consultants and representatives from the pilot sites will be available at the CMAS Booth tomorrow to answer questions
    - French questions will be supported by Janice Marshall
    - AND you can watch a short Demo of the Manual there as well.

- Stay Tuned!
    - Our goal is to provide resources on an ongoing basis throughout the process.
    - We would like to use your ideas in the development and implementation.

Having your input is part of the process and will continue as we help you to implement CNC.

Slide 37



Please complete the Feedback form. This will help us gather your questions to further develop resources. If you have written questions on the sticky notes, even if you had them answered today, please leave the question with us so we can use that information as well.

If we have excited you enough and you are interested in providing more information in the future, we would ask that you email the Manager of CMAS to indicate your interest.

Meanwhile, as I mentioned before, check the CMAS website on an ongoing basis as all updates and responses to questions will be uploaded continually. We intend to update the FAQ and make the answers available to you as soon as possible.

If you think of more questions after you leave the conference, write them down and hand them in at the CMAS booth and we'll input them in the Q&A section on the CMAS website

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