

COVID'S IMPACT ON THE EARLY CHILDHOOD WORKFORCE IN SOUTH CAROLINA

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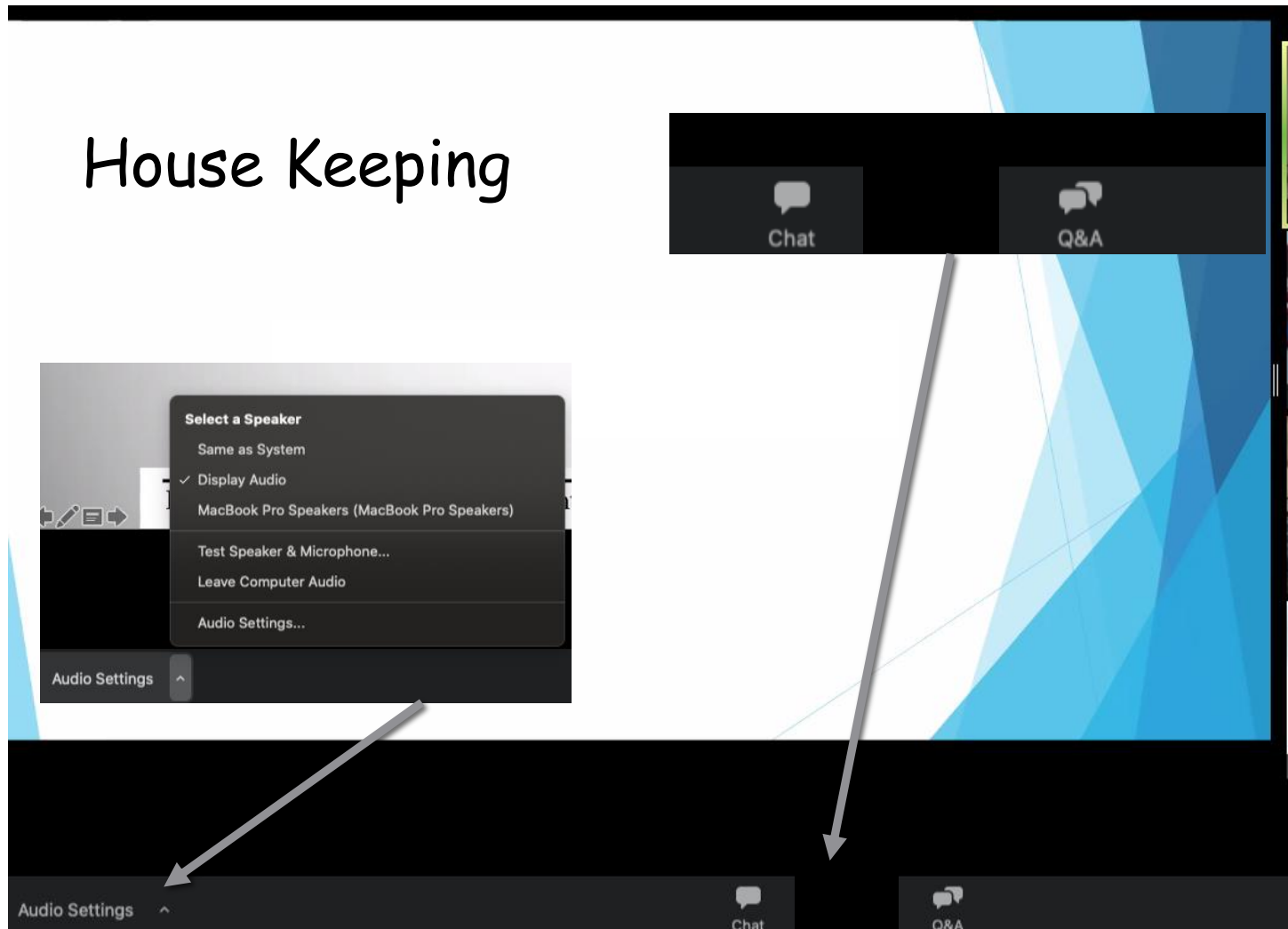
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INSTITUTE *for* CHILD SUCCESS

House Keeping

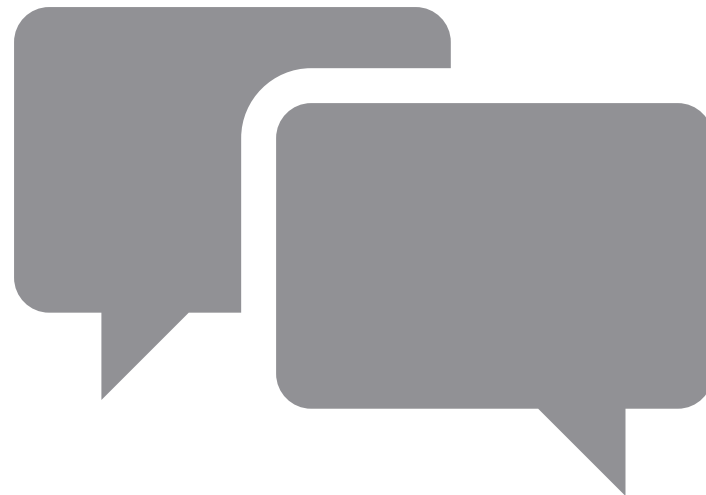


Session Goals

- Highlight findings from ICS research (and others) on child-serving workforce in South Carolina in wake of COVID
 - Particularly child care and pediatric health providers
- Discuss individual sector findings as well as overarching issues which threaten family and child well-being
- Opportunities and responses
- Participants discussion & “troubleshooting” challenges to reopening and recovery

Discussion

- We'll use the Q&A feature throughout the presentation to engage in discussion
- Feel free to include Qs that are related to a specific slide or for broader discussion later on in the session
 - Ideally, we want this to be an opportunity to share challenges you are hearing/seeing in your part of the field and for other attendees to learn from and respond to each other



COVID Response Research in SC

Child Care Provider Survey

- 98 respondents
- Surveyed mid April
- Provider types:
 - Child care center: 77%
 - Family/group care home: 9%
 - Faith-based center: 8%
 - Head Start/4K Center: 6%
- Geography – 20 counties:
 - Spartanburg, 17%
 - Richland, 11%
 - York, 9%
 - Horry, 8%
 - Charleston, 7%

Pediatrician Survey

- 69 respondents
- Surveyed late May
- Practice types
 - Academic affiliated: 29%
 - Small independent: 23%
 - Large independent: 20%
- Geography - 24 counties
 - Greenville, 43%
 - Charleston, 14%
 - Richland, 14%
 - Beaufort, 9%
 - Horry, 9%

Child Care Sector

COVID Forces a National Crisis in Child Care

50% would not survive a **closure of 2 weeks**

- National (NAEYC) (3/12-25)

Of those open, 85% are at **50% or less of capacity**

- National NAEYC (4/2-10)

1/3 could **close permanently** without immediate financial relief

- North Carolina (4/9)

Many unable to make next **mortgage/rent payment** for home and/or business.

- Nebraska (4/6)

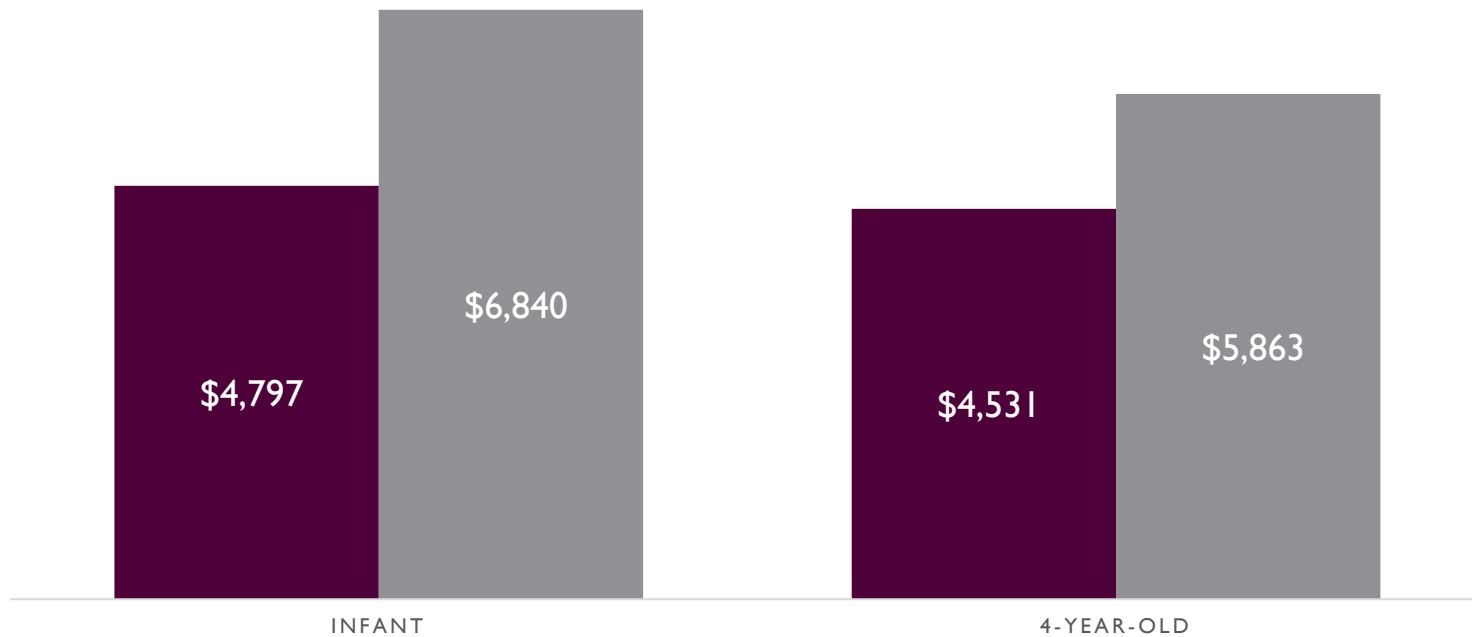
72% of closed providers were **no longer collecting tuition**

- Louisiana (3/16-32)

High Parent Costs, Yet Thin Provider Margins

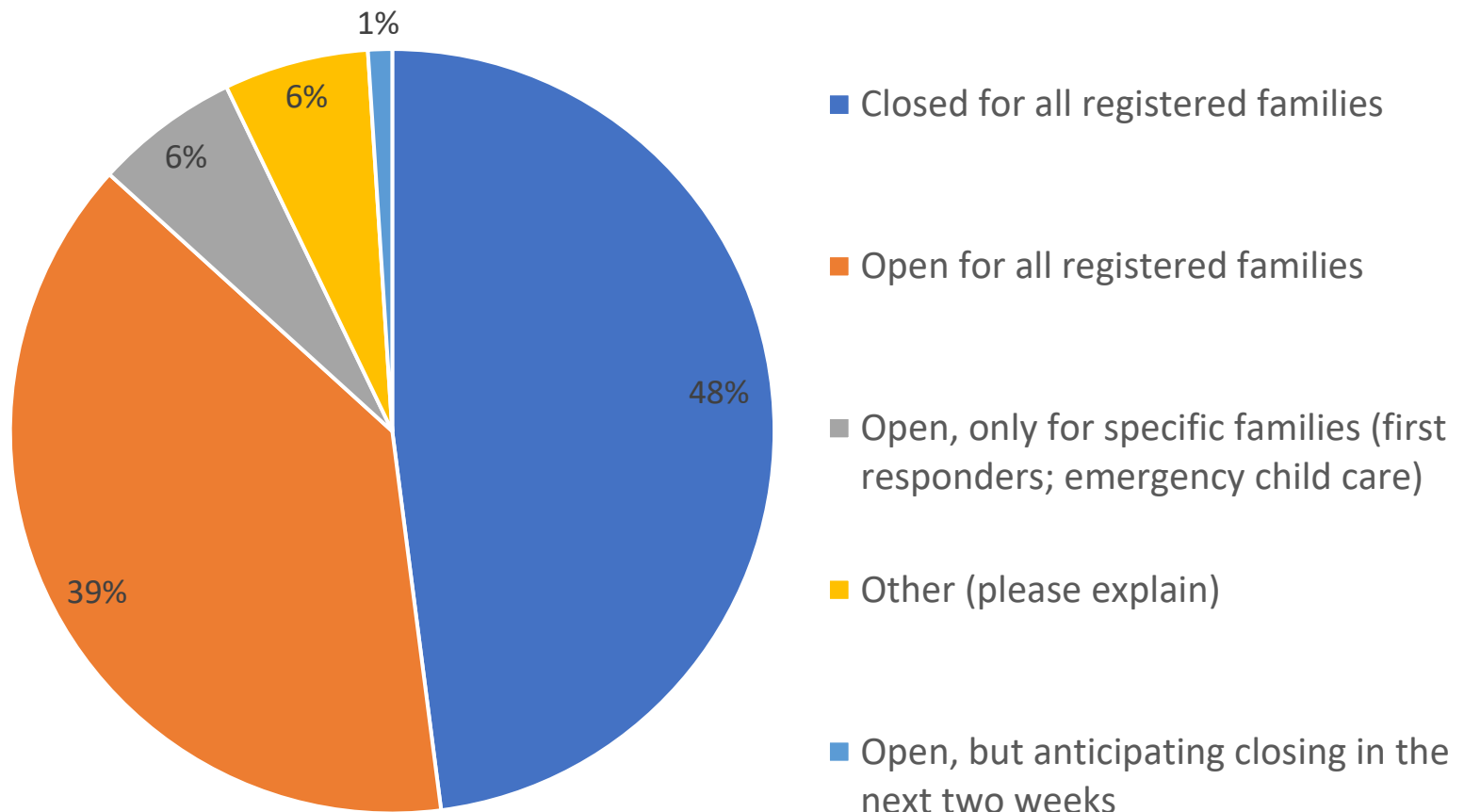
AVERAGE SC CARE COSTS*

■ Family child care home ■ Center-based care



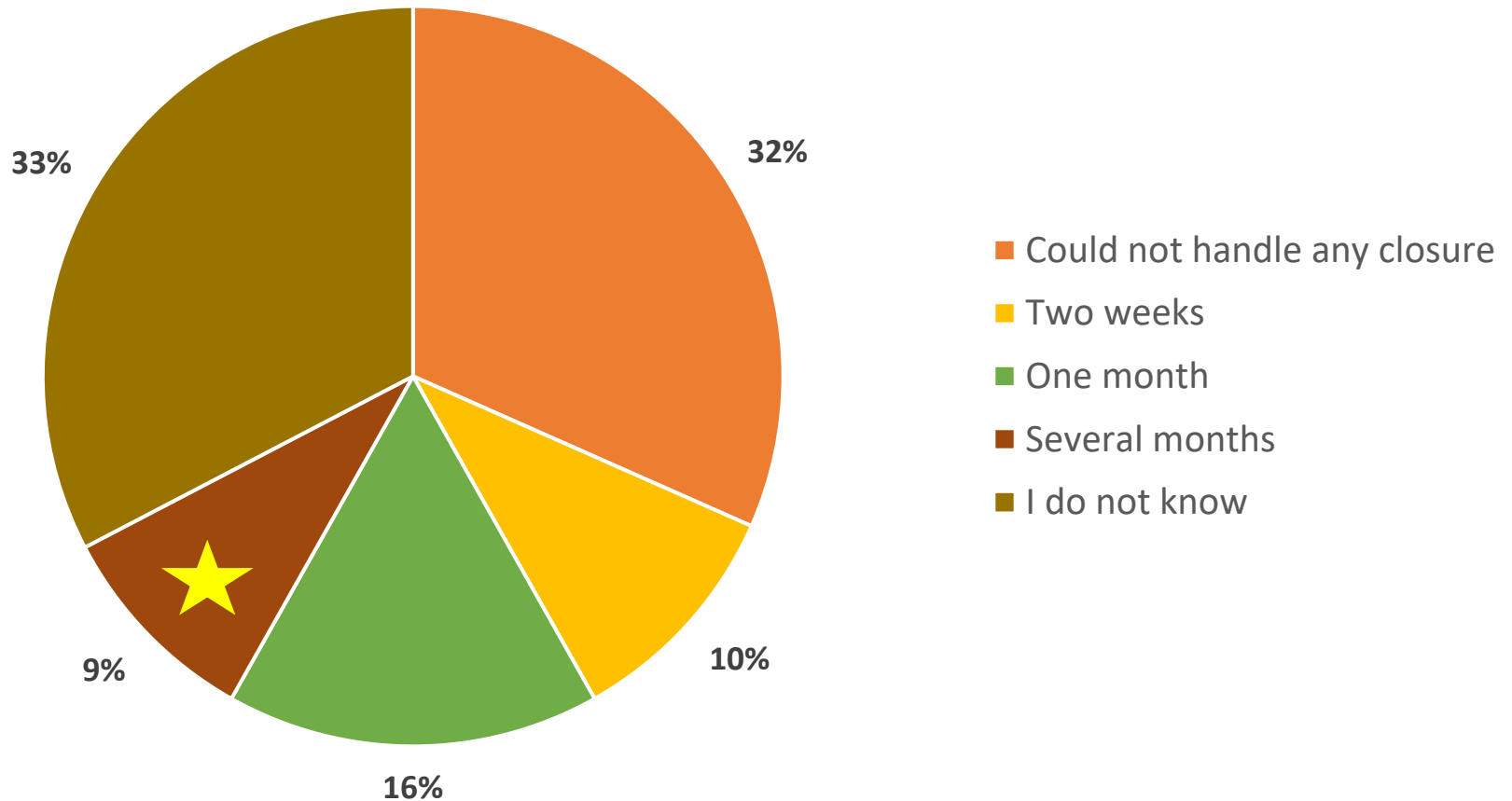
Operating Status

Operating Status (April 15, 2020)

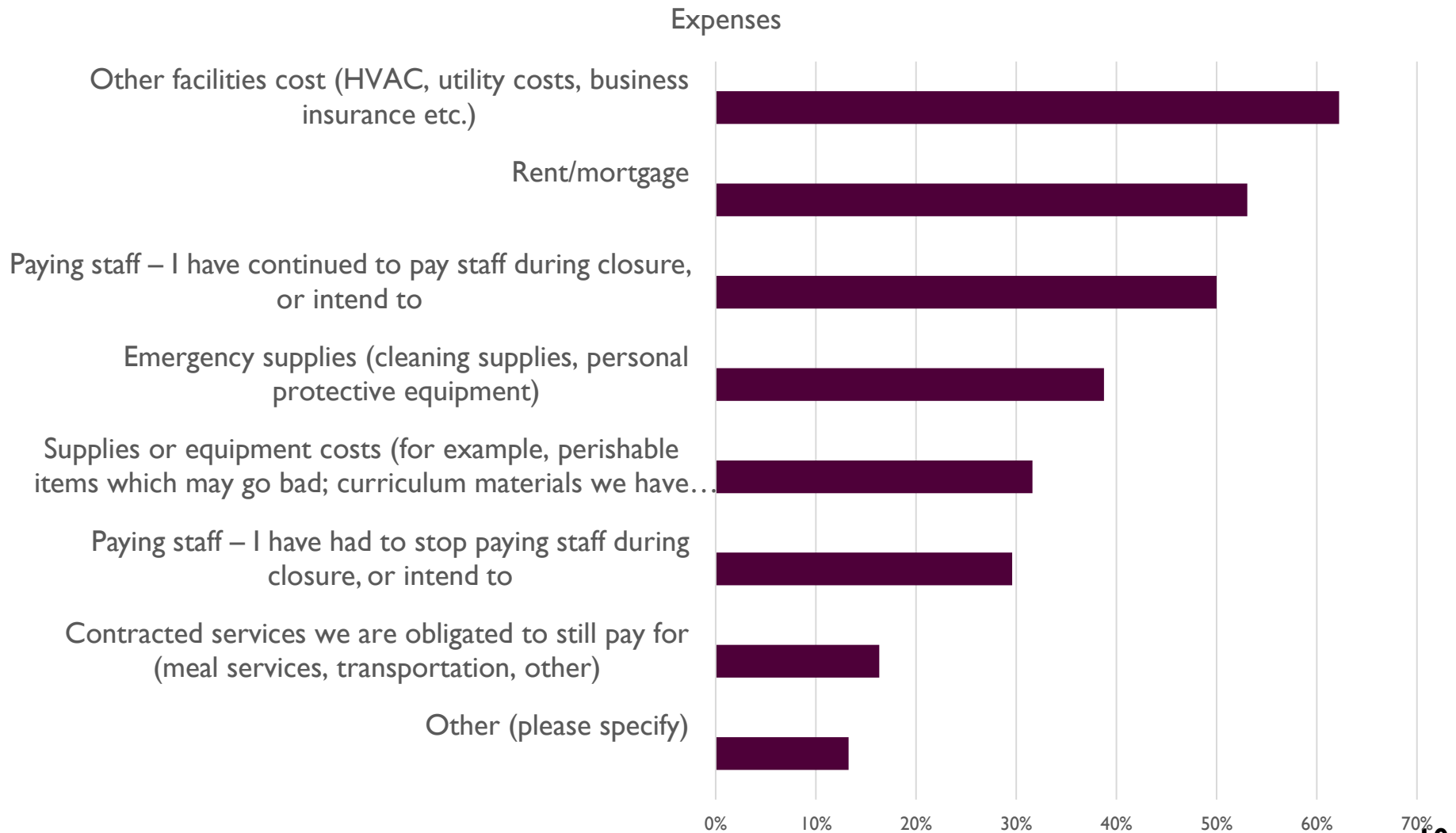


Continuing Operations

How long could your center financially survive closure?



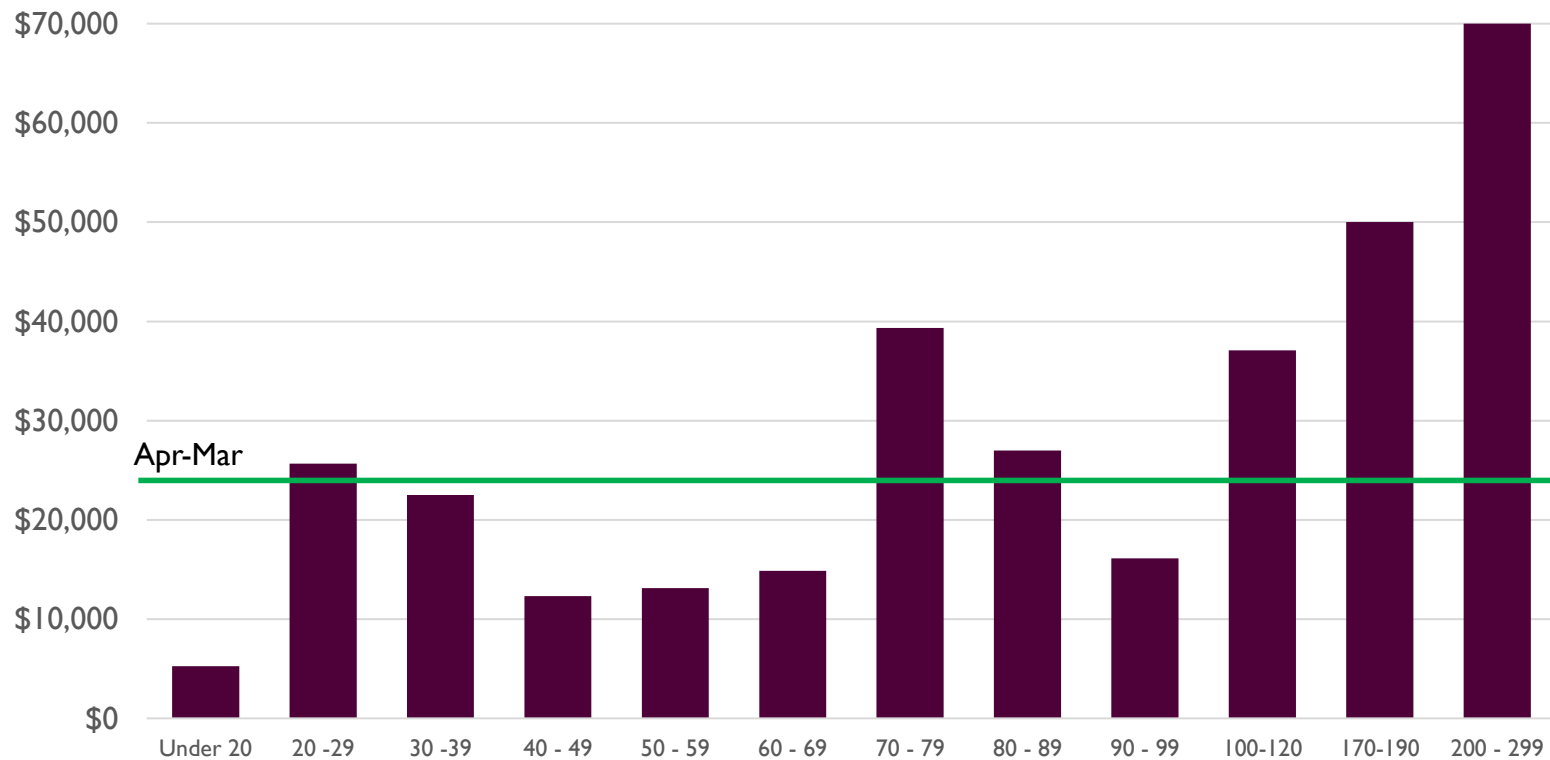
Cost Concerns



Economic Losses

- Current loss: **\$22,033**
- Projected loss: **\$31,070** (Apr 15- May 15)

Average Losses by Center Capacity*



Pediatric Health Care

Adjustments to Operations

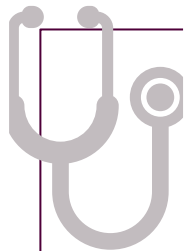
- Practices remained open, but made adjustments:
 - Fully open: 68%; In-Person only for certain visits: 32%



Scheduling: Switch to “well visit” and “sick visit” times each day; shorter schedules re lower demand



Physical Space: Separating sick & well patient – parking lot/car waiting rooms; hallways; going immediately to exam room



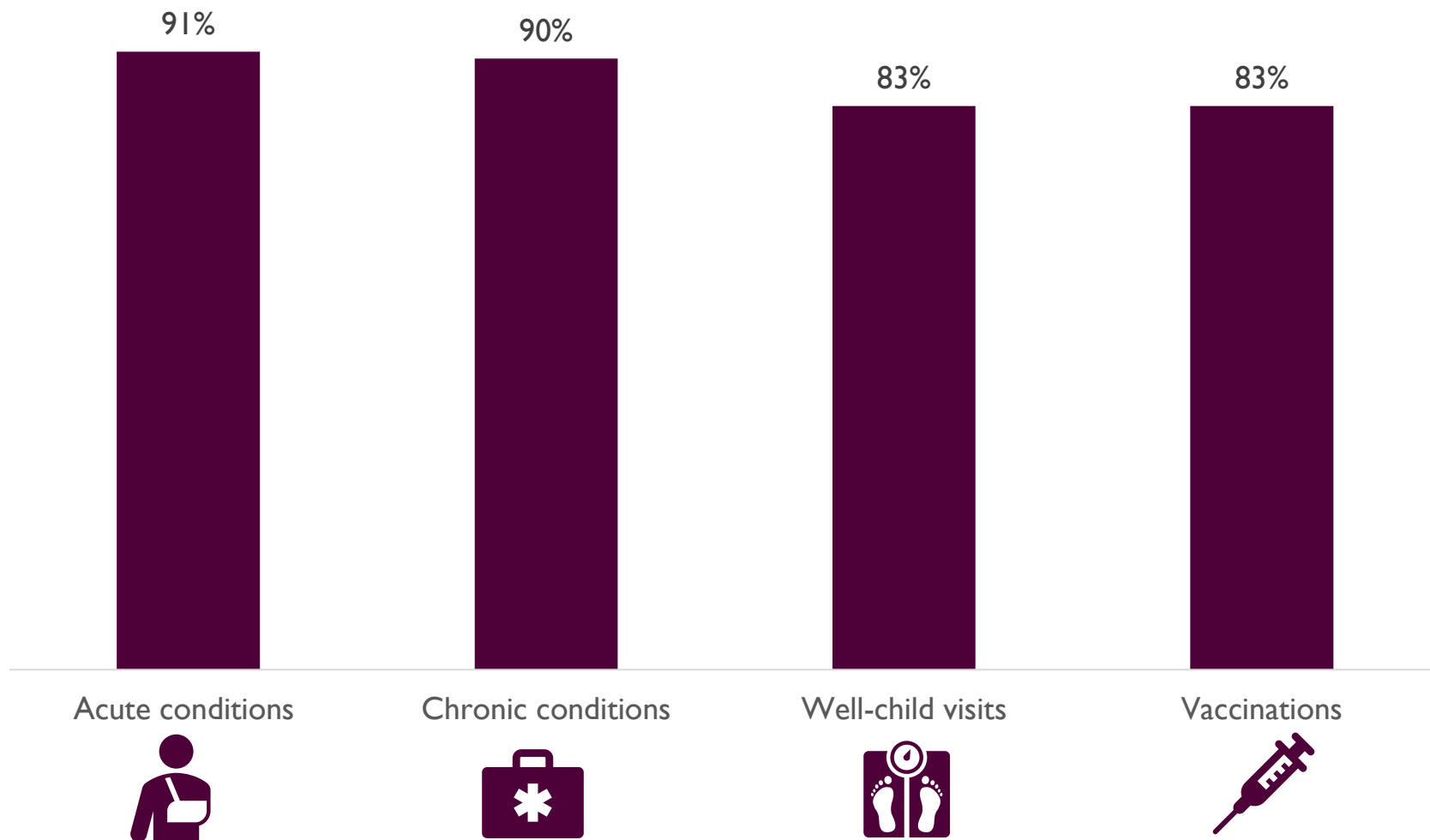
Personnel Adjustments: Minimize staff exposure: designated provider seeing sick children; weekly alternating between who sees sick visits



Telehealth: Even among centers that remained fully open; particularly important for screening possible COVID cases

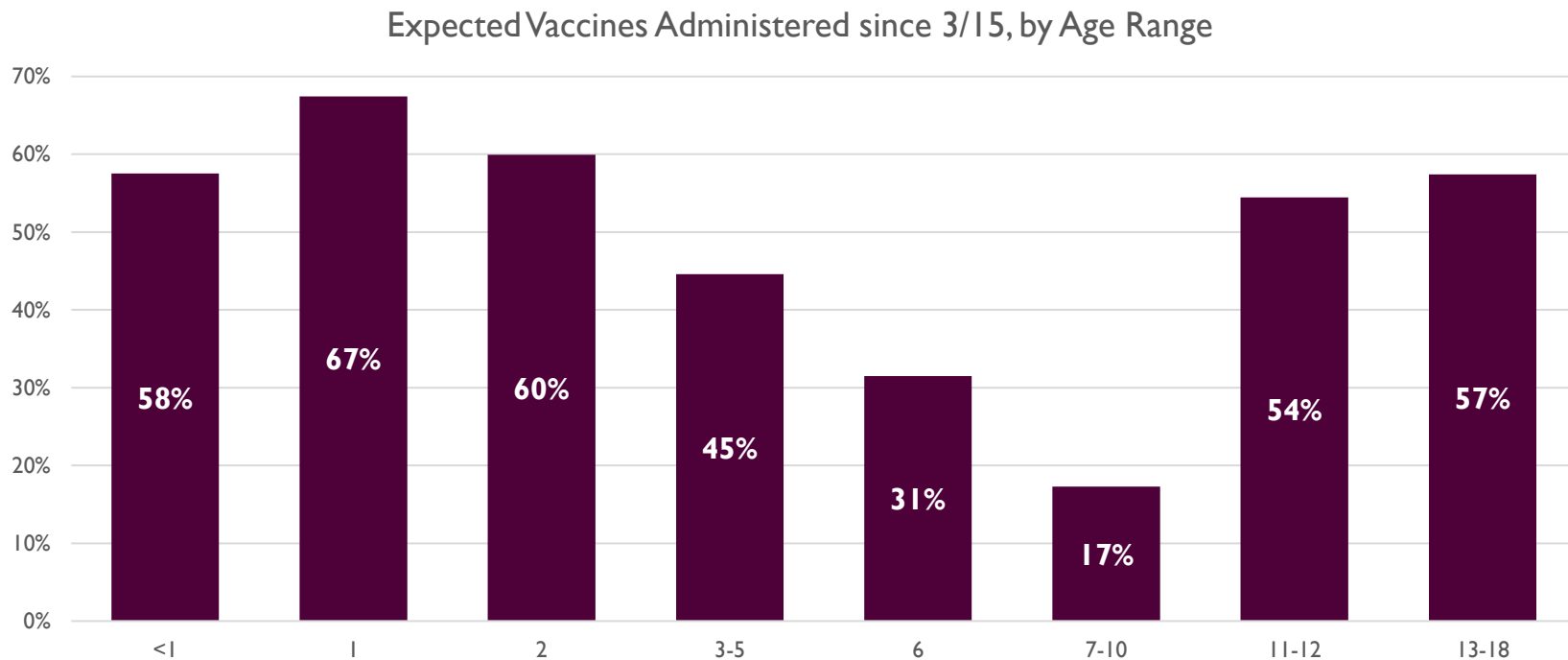
Reduced Visits & Immunizations

Percent Reporting Decrease



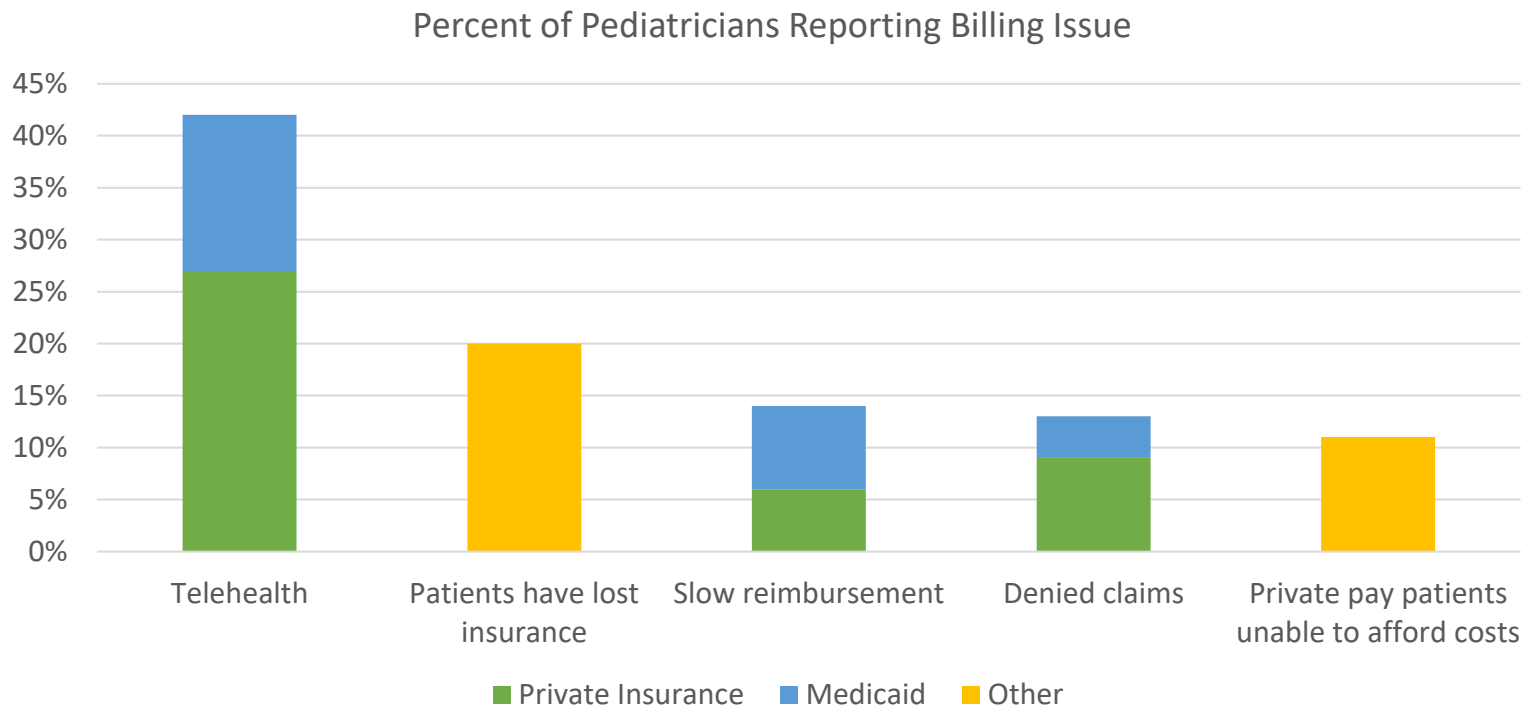
Vaccination Decreases

- Pediatrics most likely to say teens/tweens missing vax
- DHEC data aligns with that, and 3-5s
 - 7-10s are mostly “catch-up” vax



Business Issues

- Difficulty accessing PPE, especially masks
- Providers also reported slow/difficult reimbursement -> spending reserves



- Small independent practices were most likely to report a billing issue
- *Only* issue reported across all provider categories is the notable loss of insurance coverage by patients.

Trends & Opportunities

What's on their minds?

- Supplies for regular operations (groceries, wipes)
- Enrollment uncertainty

- COVID specific supplies (PPE, cleaning supplies)
- Government relief & financial assistance
- Cash flow
- Fear of losing business/closing
- Staffing: payroll, unemployment, & health and safety
- Stress & uncertainty
- **HOW ARE THE KIDS DOING?**

- Insurance reimbursement
- Technology issues (telehealth)
- Politicization of public health



Provider Well-Being

Pediatrician Stress



- Huge concern in both sectors
- Turnover levels in child care (pre-COVID) about 30%
- Pediatricians nationally reporting high rates of “all-time high stress”
- Both fear losing small business

Opportunities & Responses

- Continue to collect and amplify voices of experiences
- Revisiting research collected – fast-moving crisis and needs change
 - Especially with SC COVID rate increase AND back to school time
- Development of resources, supports, and materials through umbrella organizations
 - SC AAP; health foundations; informal health care provider networks
 - First Steps (state and county-level); Shared Services
- Advocacy support - continued need for public financial assistance
 - State and federal

Discussion

We'll draw Q&A questions from the Q&A/chat boxes in Zoom – keep sending those!

We want to hear about challenges you are seeing in child care/early education and in health care during this difficult time, as well as opportunities.



Resources

The Initial Economic Impact of COVID-19 on South Carolina's Child Care Sector: Survey Report

<https://www.instituteforchildsuccess.org/publication/covid-19s-economic-impact-on-sc-child-care-sector-survey-report/>

The Initial Economic Impact of COVID-19 On South Carolina's Child Care Sector: A Closer Look at Rural Counties

<https://www.instituteforchildsuccess.org/publication/initial-economic-impact-of-covid-19-south-carolina-child-care-sector-rural-counties/>

COVID-19 Blog Series:

<https://www.instituteforchildsuccess.org/category/covid-19/>

Pediatrician Survey Data – Coming Soon!



2020 Champions for Young Children Symposium

**Growing Together for
Better Beginnings**

Theme: Relationships, Resilience, and Recovery

August 6-7, 2020

Zoom

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