Early Support for Infants & Toddlers (ESIT) COVID-19 Pandemic Experiences

Key Learnings and Future Opportunities

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Purpose of the Survey

Survey Objectives

▶ Document highlights and challenges faced by ESIT during the COVID-19 pandemic.

▶ Learn from the crisis to improve future emergency responses.

▶ Recognize the resilience and adaptability of agencies.

▶ Special thanks to the Department of Children, Youth and Families for the partnership in distributing the survey and to ECDAW for vetting the survey questions.

Key Learnings from COVID-19

Innovative Solutions During the Pandemic

- **Telehealth Adoption**: Swift shift to telehealth services, crucial during and post-pandemic.

- **Remote Learning and Meetings**: Enhanced collaboration and cost reduction through virtual platforms.

- **Reflective Consultation and Capacity Building**: Grant funding supported these essential programs.

- **Digital Paperwork**: Improved efficiency with digital tools like DocuSign.

- **Virtual Services Transition**: Rapid response to virtual service delivery with comprehensive training and support.

- **Collaboration Tools**: Utilized shared tools like Google Docs and e-signature programs.

- **Electronic Medical Records**: Facilitated remote work and telehealth services.

- **Digital Transformation**: Accelerated adoption of digital systems and infrastructure improvements.

Funding and Support Mechanisms

Funding Sources and Financial Support

- **PPP Loans**: Maintained staffing levels and operational costs.
- **ARPA Funding**: Supported staff retention, technology needs, and operations.
- **CARES Act**: Provided direct financial relief and emergency childcare subsidies.
- **Enrollment and Referral Impacts**: Financial losses due to reduced referrals.
- **Support for Families**: Included Best Starts for Kids levy and city-funded services.
- **Grants and Donations**: Essential contributions from existing relationships and private donors.
- **Telehealth Insurance Reimbursements**: Facilitated remote services.
- **Employer Contributions**: Increased contributions to health insurance and out-of-pocket costs.

Staff Impacts and Learnings

- **Roles Most Impacted**: Family Resource Coordinators, Administrative Operations, Therapists, HR, and Direct Service Providers.

- **Remote Work**: Highlighted positives (flexibility, continuity) and challenges (isolation, utility costs).

- **Hybrid and In-Person Work**: Balancing remote and in-person work, monitoring performance.

- **Technology and Training**: Increased IT workloads, need for continuous training.

- **Mental Health and Morale**: Focus on self-care, managing burnout and compassion fatigue.

- **Operational Adjustments**: New policies, communication strategies, and hybrid work models.

PPE Distribution and Mandates

- **Standardization and Inventory Management**: Established processes and increased inventory cycles.

- **Distribution and Accessibility**: Ensured availability and accessibility of PPE.

- **Communication and Training**: Developed protocols and provided multilingual information.

- **Policy and Practice**: Created and updated policies based on best practices.

- **Challenges and Adaptations**: Initial challenges with PPE availability, regular leadership meetings.

- **Mandates and Flexibility**: Balanced mandatory and discretionary PPE use.

- **Long-Term Adjustments**: Permanent supply of PPE, maintained hygiene practices.

- **Community Impact**: Increased awareness of illness hygiene and the importance of PPE.

Communications and Coordination

- **Communication Efforts**: Performance teams, weekly updates, and inter-agency meetings.

- **Challenges**: Inconsistent communication from authorities, rapid information changes.

- **Coordination**: Collaborated with local agencies, frequent team meetings.

- **Family Communication**: Prioritized outreach through various channels.

- **Crisis Communication Plans**: Adapted rudimentary plans, emphasized need for solid plans.

- **Support and Resources**: Called for better coordination and clear guidelines from authorities.

Conclusion and Future Focus

Additional Insights

- **Flexibility and Coordination**: Importance of adaptability and sufficient funding.

- **Technology Integration**: Improved workflow and paperwork management.

- **Staff Appreciation**: Acknowledged staff dedication and efforts.

- **Burnout and Relationships**: Addressed burnout and the need for compassionate partnerships.

- **Positive Experiences**: Benefits and limitations of virtual services, outdoor meetings.

- **Challenges and Recommendations**: Need for policy templates, addressing economic disparities.

- **Unified Coordination**: Suggested state-level teams for unified directives.

- **Acknowledgements**: Appreciated feedback efforts and staff recognition.

Conclusion and Future Focus

Proposed Next Steps for the ESIT Community

- ▶ Continue to leverage innovative solutions developed during the pandemic.

- ▶ Ensure ongoing funding and support for telehealth and digital paperwork.

- ▶ Maintain robust communication and coordination strategies.

- ▶ **Address staff well-being and mental health needs.**

- ▶ **Develop comprehensive crisis communication plans.**

- ▶ Foster collaboration and knowledge sharing across agencies.

Conclusion and Future Focus

Proposed Call to Action

- Engage in continuous improvement and feedback processes.

- Address ESIT funding crisis

- Strengthen partnerships with local health jurisdictions and community organizations.

- Advocate for unified state-level coordination and support.

- Recognize and celebrate the resilience and dedication of the ESIT community.