



**Program Committee Meeting Minutes  
September 16, 2009 at 8:30 a.m.  
15506 County Line Road, Suite 102  
Spring Hill, FL 34610**

**Committee Members Present: Dave Meglay, Chair; Jayne Goldstein, Sonya Jackson, Beth Rawls, Mary Beth Wehnes**

**Staff Present: Jim Farrelly, Ramute “Jak” Jakubauskas, Betsy Kier**

**I. Welcome and Call to Order: Mr. Dave Meglay, Committee Chair**

Mr. Meglay, Chair, called the Program Committee to order at 8:36 a.m. Mr. Meglay requested a motion to adopt the draft minutes from the August 19, 2009 meeting. Ms. Wehnes so moved and Ms. Goldstein seconded the motion. All were in favor with no abstentions and the motion carried.

**II. Discussion, Centers Below Monitoring Standards – Ms. Betsy Kier**

Ms. Kier reviewed the following centers that are currently on Corrective Action Plans:

HOL – The center is doing well and will be coming off this list. They have implemented a Coalition approved curriculum and spot checks will continue.

WCOP – Two (2) specific items were given the Provider to work on - insuring that all required equipment is on-site and accessible to children throughout the day; this must be completed within a week. There is no on-site owner at this center, but a new director is in place who has made a significant difference and who has the authority and is working to make things happen.

LFSH – Mr. Farrelly and Ms. Kier met with the director but not the owner who was out of state; the director did state that changes have been implemented and there would be no issues achieving the minimum assessment required. However, a follow up assessment was done and they scored a 62%. There is no curriculum or developmental activities in place.

The owner called, stated she is out of town until mid-October, but is concerned and wants to meet. Ms. Kier stated there were no major health or safety issues with this center, but the programmatic issues have resulted in their being on probation since July 16, 2009 with no substantial changes. Ms. Kier recommends a meeting or a conference call with both the owner and the director and one (1) more assessment. Mr. Meglay stated the center needs to know changes need to be made now or their contract will be canceled.

LA – The last assessment resulted in this center meeting the minimum required scores. They are being removed from the Corrective Action Plan.

HLDC – Ms. Kier reported this was the center that came to the last Board meeting and they have had a one-on-one with Mr. Farrelly. They agreed to an “all or nothing” follow up assessment. Three (3) Coalition staff members were sent and the center scored a 65%. However, all visiting Coalition staff stated this was the best the program has ever looked. Ms. Kier reported that part of the problem was the center had, on the day of re-evaluation, switched to another Coalition approved curriculum. Ms. Kier has spoken with the owner/director and inquired why the curriculum was changed as it resulted in lost points and the owner was distraught and felt she let everyone down. Mr. Farrelly stated this provider had agreed to their contract being canceled if they failed this assessment. **The Committee agreed that HLDC’s contract will be terminated.**

EDC – Continuing to work with this provider. Only two (2) classrooms are under the minimum standard. Technical Assistance is continuing to be provided and another follow up will be done prior to the next Committee meeting.

CKA – The owner came in to meet with Mr. Farrelly and Ms. Kier. At the center’s last assessment they scored a 91%, well above standard.

FP – There is no update as there is an ongoing investigation into the recent injury of a child on the playground. There was further discussion on some of the other findings related to this center.

JBFHC – At the last follow up, they scored an 88%, well above standard.

S&G – The provider met with Ms. Kier and Mr. Farrelly. During the follow up, minimum standard was not met. There is still no curriculum, they were out of ratio, and only one (1) out of four (4) classrooms met the minimum. The Training Specialist has been working with the director and staff. The director is knowledgeable in Early Learning but is not holding her staff accountable. Health department and licensing issues have been ongoing. **All Committee members were in agreement on canceling this center’s contract.**

HDP – Mr. Farrelly informed the Committee that this center also has an absentee owner and during their last follow up they scored a 38%. The Coalition has performed at least four (4) evaluations at this center. At the last Committee meeting, it was agreed to terminate their contract and a letter was sent to the center and also to the parents. However, the following week the Coalition received a special request from a Board member to offer the center another chance and Mr. Farrelly then involved the Board Chair in the decision.

Since that time, two (2) Provider Specialists conducted a follow-up evaluation and the center passed. DCF may implement a provisional license; if this happens the Coalition could cancel their contract. Ms. Kier stated this center will require on-going assistance with their curriculum and informed them that the Curriculum Specialist will be working with them on a regular basis.

Mr. Meglay stated that the special request should have been brought to the immediate attention of this Committee. It was agreed that no future action of this type will be taken without the approval of the Committee. There was further discussion on how this type of special request by a Board member affects the work of the Committee and that other centers facing the same assessment issues may resort to this same approach even though the Coalition has an appeal process in place. Discussion also included how this would undermine the authority of the staff that has performed the assessments and follow ups.

The Committee determined that, in the future, should Mr. Farrelly be approached again by a Board member with a “special request,” he would inform that individual that the “special request” needs to be brought to the attention of the appropriate Committee for any action.

The Committee also agreed that a letter should be sent to HDP stating the Committee has recommended spot monitoring to ensure they maintain compliance.

### **III. ARRA Funding Update**

Ms. Kier stated that the Coalition is moving ahead slowly. Currently there are nine (9) children enrolled in part “B” (clients receiving unemployment compensation). The Coalition is now beginning to receive referrals from Career Central. Mr. Meglay inquired how the public is being informed of these programs. Ms. Kier replied that providers are aware of the “A” and “B” programs and will inform parents, a press release will be distributed and information will also be posted on Twitter and Face Book.

### **IV. VPK Outreach and Awareness**

Ms. Kier explained she has obtained several quotes for newspaper advertising, \$3,800 for 95,000 inserts, and the postcard mailing, \$6,025 for a direct mailing to approximately 15,000 households in both Pasco and Hernando counties. This would leave approximately \$3,550 for the printing of VPK handbooks. **All Committee members were in agreement on presenting the VPK Outreach and Awareness budget to the full Board.**

### **V. Review of Performance Letter from OEL/AWI**

Ms. Kier explained the Coalition’s three (3) year review had been done in April with only minor findings that included missing language in the Coalition’s contract with CDS and missing database codes. Ms. Kier is working on a corrective action plan to be submitted next week.

A brief discussion followed on the possibility of the Board going to bi-monthly or quarterly meetings with the Committees continuing to meet monthly.

## **VI. Review of VPK and School Readiness Report from OEL/AWI**

Ms. Kier reported this review had also been done in April and again there were only minor issues. She also stated this is the cleanest audit the Coalition has ever had and that Ms. Pat Weyer (AWI) had commented this audit was “almost world class.” A corrective action plan will be submitted in October.

Mr. Farrelly reported that the Coalition’s monitoring staff has increased to three (3) with the addition of Ms. Mayna White as a Provider Specialist, the transfer of Ms. LuAnn LaCava to the Curriculum Specialist position and the addition of Ms. Sheila Chambers as the new Provider Specialist.

Mr. Farrelly announced that Ms. Nicole Flechas, Quality Manager, has resigned. She has recently passed her licensing exam and is now a Licensed Mental Health Counselor (LMHC).

## **VII. Selection of Next Meeting Date**

The next Program Committee meeting will be held on Wednesday, October 14, 2009 at 8:30 a.m.

## **VIII. Public Input**

None.

## **IX. Adjournment**

With no further discussion, Mr. Meglay adjourned the Program Committee meeting at 9:50 a.m.

Respectfully submitted by,

Ramute “Jak” Jakubauskas,  
Administrative Assistant