Supporting Emergency Child Care During the COVID-19 Crisis:
How Head Start and Early Head Start Programs Can Help

The organizations that operate Head Start programs are part of their local communities, and programs can be part of the foundation of community support in difficult times. Head Start staff are skilled early childhood professionals with completed background checks. Closed Head Start centers are high-quality child care environments that already meet local licensing requirements. These Head Start resources can help support emergency child care, a critical need in many communities impacted by coronavirus disease 2019 (COVID-19), especially for medical personnel and other essential workers.

Below, the Office of Head Start (OHS) clarifies the information previously issued in Temporarily Repurposing Head Start and Early Head Start Centers: Partnering to Support Emergency Child Care During the COVID-19 Crisis on March 24, 2020, and Serving Needs Beyond Head Start on April 1, 2020. This provides clarification on how programs can support, when possible, the use of closed Head Start centers as temporary child care centers for medical personnel and essential workers.

Supporting enrolled Head Start children and families, even during program closures, in creative and innovative ways must be a Head Start program’s first priority. Services during closures include ensuring enrolled children continue to receive nutritious meals, child development and learning experiences continue, and family engagement improves economic stability. There are many amazing examples of how programs are continuing to support their children and families in creative ways.

By law, Head Start funds can only be used to provide Head Start services to eligible children and families. However, Head Start facilities, equipment, materials, and supplies can be used to support emergency child care, subject to cost reimbursement or replacement. Head Start staff may also have the option to support emergency child care operations in addition to the work they are doing to continue Head Start services.

As Head Start programs make decisions about serving the child care needs of their communities beyond their Head Start population, OHS would like to remind grantees of relevant flexibilities.

Facilities

Head Start programs may generally use their existing facilities to provide emergency child care. Grantees that own facilities, or are already paying leases for facilities in which Head Start centers are located, may use them.

If a grantee temporarily leases Head Start space to another entity to offer child care, they must consider and address associated legal, fiscal, licensing, and practical considerations. It is up to the grantee to decide the amount, if any, of rental charges to be paid during such occupancy. Any additional cost for the use of the facility for child care purposes must be borne by the child care operation. Rental costs may also be used to reimburse the Head Start program for materials, supplies, or damage to equipment purchased with Head Start funds.

Head Start programs should arrange use agreements with any persons or entities using their facilities. The National Head Start Association (NHSA) has drafted a sample agreement agencies could consider. Such use agreements should address:

- A process for quick resumption of Head Start services when it is safe for Head Start staff and children to return to the facilities
- Replacement of materials and reimbursement of costs associated with damaged facilities and equipment

Equipment, Supplies, and Materials
Head Start programs may use, or allow a child care provider operating in a Head Start center to use, their equipment, materials, and supplies to provide emergency child care. The cost of equipment, materials, and supplies purchased with Head Start funds but used for emergency child care must be paid to the grantee or replaced in the center prior to ending their occupancy. This ensures centers are able, when possible, to resume Head Start services. Likewise, the cost of repair or replacement of any damage to facilities or equipment must be paid by the child care program.

**Staff Availability**

Head Start staff may support emergency child care operations, either in Head Start facilities or elsewhere. Head Start staff's first priority must be supporting ongoing services to enrolled Head Start children and families. However, Head Start staff may support emergency child care so long as they continue to support Head Start children and families to the extent feasible during program closures. Any work outside of Head Start responsibilities must be optional, as determined by each staff person. Head Start staff that engage in emergency child care must remain available to return to Head Start centers when the center reopens.

**Staff Wages**

Head Start staff may receive wages for hours worked in a child care program and still receive Head Start pay for what would be their regular work hours when Head Start is fully operational. Any hours they work in a child care program must be outside of the duties they are expected to perform to support ongoing services to Head Start children and families. Head Start staff employed by grantees must continue to be paid wages and benefits by Head Start funds while the Head Start centers are closed.

**Example:** A Head Start teacher is currently being paid his/her Head Start salary during Head Start program closures. The teacher continues to meet assigned Head Start responsibilities remotely, but has time available during emergency child care center operating hours. This teacher can continue to receive their Head Start wages and can also be paid for time the teacher works in a child care center caring for the children of emergency and essential workers. The teacher will still be responsible for continued support to her Head Start children and families, to the extent possible, during program closures. Each Head Start employee who also takes on additional paid work remains responsible for fulfilling their assigned Head Start responsibilities, while supporting an urgent need within their communities. They must be prepared to return to the Head Start facility upon its opening.

**Cost Allocation**

Many grantees use multiple funding sources, including Head Start and child care subsidy funds, to meet the needs of children and families in their communities. Grantees have developed complex cost allocation plans to address shared costs during normal Head Start and child care operations. Those allocation plans allow grantees to precisely identify the funding source and allocable costs for each benefitted program. During these unsettled times, children, families, and communities have diverse needs that must be addressed in new and innovative ways. Under the circumstances of the current national emergency, it is not possible for grantees to make detailed cost allocation projections without undue effort or cost.

Grantees choosing to offer child care services for essential personnel responding to COVID-19 may use existing Head Start funds to support the provision of child care services as long as Head Start enrolled children benefit from those services. Grantees must adequately document all child care costs. Once the need for COVID-19-responsive child care services ends, grantees must establish a reasonable basis for charging costs and adjust the amounts charged to their various funding sources. This is to assure child care costs have been allocated to reflect the relative benefit of services to Head Start-enrolled children and other children receiving child care. The basis for allocation, while at the discretion of the grantee, may be as simple as the proportion of Head Start-enrolled children to the other children served. The temporary provision of child care services by Head Start grantees must not interfere with the program's ability to resume Head Start or Early Head Start center-based services for previously enrolled children, or services to currently-enrolled Head Start children.

**Local Decision-making**

OHS is empowering grantee leadership to make decisions to help meet extraordinary community need in this unprecedented time. As staff and programs make local decisions about supporting efforts beyond Head Start programming, consider these principles:

- Maintain support of Head Start children and families to the extent feasible
• Ensure Head Start staff and facilities are available and ready to resume operations when the time comes
• Fully inform staff of possible health risks to themselves and their own families

Beyond providing facilities and staff, there are many ways Head Start programs can help with emergency child care in their community. They can create or join planning teams and share training information and resources with other child care staff.

Programs with additional questions should contact their program specialist.