

NIH Child Care Board Meeting Minutes
December 3, 2015
Building 45, Room A

Members in Attendance: Andrew Bremer, Deborah Coelho, Eric Cole, Deborah Coelho, Theresa Cruz, Chao Jiang, Sybil Philip, Reaya Reuss, Sheri Schully, Erin Williams, Christine Moretto Wishnoff, Richard Wyatt, Heather Rogers, Kristin Dupre, Kimberley LeBlanc, Tonya Lee, Ivan Locke, Julie Pelletier, Mary Ellen Savarese

Center Liaisons Attending: POPI: Christina Segura, Jennifer Rooms, Jacco de Zwart **ChildKind:** Jaydah Wilson, Emily Place **ECDC:** Andrea Brush

Guests: Susan Cook DATS, Stephanie Hixon ORF, Judith Walters NINDS, Bamini Jayabalasingham ORWH

Members Absent: Suzanne Ryan

I. Welcome and Introduction of Board Members and Attendees -

Chair Schully called the meeting to order and welcomed everyone.

II. Approval of Minutes from October 2015 – Vice-chair Reuss asked for approval of the minutes from the October 22, 2015 meeting. A motion was made, seconded and approved.

III. Chair Updates:

- **Benchmark Study-** Ms. Lee presented a brief status report regarding the study. The final timeline and interview questions should be received from the contractor this week. They have been working to connect with other federal agencies and the private sector. They are slated to present their report at the March, 2016 board meeting. The Board identified OITE and WSA as stake holders, who should be invited to hear the presentation. Vice-Chair Reuss highlighted the Federal Viewpoint Survey results as a possible data resource for the committees
- **NIH Working Group on Women in Biomedical Careers-** On November 12, 2015 Chair Schully presented an overview of the Board’s work to the group. Cross promotion and the Benchmark Study were two main topics of discussion. She requested the group provide a list of stockholders or interest groups, who the board should include in the Benchmark Study.
- **Aging and Dependent Care Committee-** Ms. Williams shared the goals established by the committee. They will begin tackling the goals in December and January.
 1. The committee would like to determine whether the group will be called a “committee”, “board”, or “council”.

2. It would like to determine the level of interest on aging/adult dependent care issues, at other IC's.
3. Determining NIH resources which are already available to the community.
4. The committee would like to assist with developing a support group, for individuals dealing with adult/aging dependent care issues.
5. There first undertaking will be establishing a ListServ for adult/aging dependent care. Cooper McClendon, a Presidential Management Fellow, will be assisting the committee. Her first task will be to establish the ListServ.
6. The committee will assist in identifying topics for webinars and outreach events, and draft articles focusing on aging and adult dependent care issues.

Dr. Collins has approved resources to support this endeavor. Interviews are being held to fill a position to assist with wellness and dependent care.

- **Back-up Care-** Dr. Bremer provided a brief update on the program. Bright Horizons is the contractor for the NIH Back-up Care Program. The company was asked to provide utilization data and how the program was being accessed by staff. Fellows are currently unable to utilize this program. 90% of the program was utilized in the last 12 months. NIH does not pay for the cost of care, it allocates resources for the contract to provide the Back-up Care Program services. Currently the program is in the first of a five year contract. There currently is very low usage for adult dependent, aging, or self-care.

A determination on how to expand the program will be needed, especially if fellows are authorized to utilize the service

- **Subsidy Committee-** Ms. Philip announced Dr. Cruz agreed to be the co-chair for this committee. The committee has updated their work plan for the year. The five goals the committee will focus efforts on this year are:
 1. Due to the language change in the NIH Manual Chapter, to include Title 42 employees, the NIH Subsidy Program flyer and other marketing material will be edited to reflect the change.
 2. The committee also felt the words "lower income" could be a barrier for some employees. There is currently a GS 14 utilizing the program. Most would not consider a GS 14 as low income. But when considering the total adjusted family income, they may be eligible. Ms. Lee is exploring if there are regulatory issues with changing the terminology.
 3. The committee will work with the Strategic Planning Committee to

increase utilization and mainstream marketing efforts. With that goal in mind, the committee wants to determine which IC's are not using the program.

4. The committee will request data from OHR to identify eligible populations. Specifically, the committee would like to determine the number of potential Title 42 employees who may be eligible to participate in the Subsidy Program.
5. It is also the goal of the committee to collaborate with the Legislative Committee to assess the possibility of offering the NIH Child Care Subsidy to fellows. If determined fellows cannot utilize the program, they would like to investigate other funding options.

Chair Schully shared information regarding a discussion during the Woman of Biomedical Careers meeting. Potentially, another funding options could be FAES. Subsidy at the center level may be called a scholarship, or sliding scale. Fellows can inquire about financial assistance from their own child care programs.

IV. Northwest Child Care Center-Ms. Hixson provided an update on the construction project.

- The comments for the Final Design Review are due on December 3, 2015.
- Architects are currently working on creating an optimal entry into the building. They are considering security comments, as they relate to the flow into and out of the center.
- They are currently reviewing the blast calculations. There will be no significant changes to the design. Their focus is currently on the door weight from the entry into playground and front entry into the building.
- They are continuing their work with Maryland Department of the Environment (MDE) on the comment responses for the pending amendment. They are using the current MD permit to proceed with construction work. The amendment is for the parking area. Work on the parking area is slated to begin in the spring of 2016. MDE is a very strong influence on ways to mitigate and capture rain fall more affectively. The pervious parking area and the green roof help meet the MDE requirements. Fill from another project on the campus and rocks with help with water drainage from the parking area.
- A fence and trailer have been installed on site. The construction workers are there daily.
- Clearing and grubbing, which means grass is taken away and trees are cleared, has begun. A temporary erosion and sedimentation control system is being installed. This will help mitigate the impact to the community, specifically during rain events.

- Her team received a baseline schedule and it is currently in review by the NIH. The beneficial occupancy of the building is mid-December 2016. That is the point of time when furniture could be moved in and the final punch list is accomplished. Turnover of the facility is targeted for February 2017.
- Submittals are being reviewed for site utilities, concrete, and temporary electrical structures. The site utilities are the most critical. A retaining wall submittal should be received today. This will lead to the build-up of fill on the back side to prepare for the construction pad for the building. The construction pad will be completed in two parts. The first phase is what is currently being worked on and requires the least amount of fill. The fill material will be coming from another project on campus, which is a cost saving to NIH. Coordinating schedules with the other projects are taking place.
- Site overview diagrams were provided. Ms. Hixson shared several images which showed the exterior layout and interior floor plan of the building. They are working very closely with the Family Lodge and Children's Inn to ensure minimal disruptions.

A concern over potential traffic flow issues were raised and addressed. No change to the current street layout is planned until the Clinical Center addition is constructed. If a traffic problem develops, the program can work with Transportation to assess if additional signage and/or crosswalks are needed to ensure safety.

There will be retractable bollards on each side of the fire lane and fixed bollards on the sides. Their intention is to use fixed bollards, as much as possible, due to the cost and maintenance needs of retractable bollards.

Security requirements have changed to include a double badging process. This alleviates piggy backing at the entries. There are many options being considered for re-orienting the entry doors. Someone with knowledge of double badging could brief the board at an upcoming meeting.

The layout of the facility is very similar to the child care program in Building 64. Storage was a big consideration in the design of the facility. The space is designed with three infant rooms, two or three toddler rooms, four rooms for two year olds, and four preschool rooms. The toddler and two year old rooms were designed to be inter-changed based on demand for care. The provider would determine the need. NWCCC has additional infant/toddler space, compared to Building 64. The Maryland State Regulations require 35 square feet of useable floor space for each child in the room. The National Association for the Education of Young Children (NAEYC) recommends 50 square feet per child. The rooms have been designed with a little more than 50 square feet for each child. If they put a lot of furniture in the rooms, it will still be comfortable for the children and staff.

V. Charter Committee- Vice-Chair Reuss updated the Board on the changes to the charter. A copy of the final draft was distributed. The changes included:

- Clarifying the process for identifying and selection of new members.
- Adjusting the minimum number of members on the board.
- Raising the percentage of members which makes up a quorum.

A clarification of term limits was requested. It was request that the terminology of “no more than two full terms” be elaborated on with regards to including a partial term. Some members have taken over the term of someone who has left the Board, prior to completion of their term. One recommendation of the possible wording was, “completing the remaining term, of a prior Board member, shall not count toward a full term”.

Chair Schully asked for a motion to vote, with the caveat of adding a sentence expanding the language of partial terms and how they apply toward the two full term limit. It was determined that the final version will be sent to everyone for an email vote. All voting members must respond.

VI. Strategic Planning Committee- Mr. Cole and Ms. Williams provided an overview of their committee’s goals. They have five goals, three of which will be tackled this year.

1. The committee would like to identify groups not currently being reached. They need everyone’s help to identify stakeholders within the community. Some ideas they thought of are veterans, DADS, families with special needs, and grandparents. If anyone has connection with any other groups within the NIH community, please bring them to the committee’s attention.
2. General public relations. They would like the other committees to submit articles to the various NIH publications, highlighting the work of the Board. There are specific times which would be beneficial for committees to submit articles. The Subsidy Committee could compose an articles around tax season and the Back-up Care committee could submit around school vacations.
3. The other topic to consider is branding and marketing. There is a potential need for a new logo. They have thought of a really nice motto or tag line, which is NIH CARES. The group determined a need to promote the NIH Child Care Programs to all the different groups within the community.

Consistency is the thought behind determining a new logo. It needs to highlight the different campaign efforts of the Board. This will create a common theme, which can be carried throughout the promotions for everything. When members of the community see this brand, they will automatically associate the programs and supports that this group is bringing forth.

CARES could be an acronym for Connecting All Resources for Everyone and Supervisors. It is still a work in process.

A calendar to plan publication of articles for the various committees would be beneficial. This will help committees to stay on track and not duplicate efforts. This idea can be added to the next meeting agenda.

VII. Announcements and Adjourn-

Ms. Lee announced the completion of the NIH Back-up Care Webinar with Bright Horizons. There were 96 people registered and 75 actually on the call. Another Back-up Care presentation, which will only focus on the child care, will be offered on December 8, 2015. In February, there will be a presentation specifically addressing adult care.

On December 9-10, 2015 the Office of Disease Prevention, is holding a Pathways to Prevention Workshop. The focus is Total Worker Health. A notice will be emailed to everyone.

Ms. Wilson announced that POPI and ChildKind collaborated on building a gingerbread house for the competition. She invited everyone to go to Building 10 and vote for them. The name of their entry is Child's Play.

The meeting was adjourned at 11:24.

The next Board meeting will be January 28, 2016