

HOS Report
9/16/21

ESSER III

There are a few webinars that should be posted for ESSER III soon. The application for FIN 160/161 is due October 1. We have done much of the leg work, and need to circle back to our planning this week and next so that we can get the application done in a way that offers us the most broad uses of the money as possible while offering some new programs as part of the learning loss recovery concept.

Food Service

The menu is under constant change as items may or may not be available due to supply, shipping, or other problems in the supply chain. We have back up plans, and a solid inventory should issues arise. The menu will probably be in flux for the duration of the school year.

Bussing

Like many other places in the state, student bussing has become a struggle here also. WAPS staff is working diligently with First Student, but staffing shortages and a new resignation have significantly stressed an already difficult process. In the metro, other Charters are reporting that large schools are abandoning their secondary school bussing in favor of metro bus passes so elementary students are bussed to school.

One example of the bussing issue on the national stage is that Massachusetts Governor Charlie Baker has deployed National Guard personnel to address the driver shortage.

Authorizer

Our first official VOA site visit is set for 9/20/21. The template for the visit is in the Consent Agenda folder. It is my goal to have it mostly populated before Monday's visit. Stephanie Olsen will be onsite for most of the day conducting the initial visit. All September submissions including a new element, a preliminary UFARS data submission. All submissions are up to date, and ahead of schedule through October. The next one is the Annual Report, WBWF.

Title I and II

Both are submitted and approved.

HEF

Quarterly HEF Grant submitted 9/15/21

By-Laws

Upon reviewing our By-Laws with MACS, it has become clear that many revisions were needed. The biggest change is that there is no provision stating that a charter school must be a

membership organization. Therefore, that language, along with other concepts that we will review in the Board Cycle of Review segment, have been changed on the By-Laws DRAFT included. This is a very different document than that last one as it was built from a MACS model example and reviewed with MACS leadership.

ADSI

We had to submit an updated budget with the change in staffing of the behavior intervention position. We had to wait until recently as we could not do that until we had a proper licensure secured for the staff member in that position.

In school testing, FIN 170

For the time being, we are not planning to offer any of the MDE onsite testing options. There is a grant available (FIN 170) to staff that program that will provide funding for a staff person to admin a testing program if we need it. I have completed and submitted the documentation for that grant so that we have the ability to bring in someone to do the testing program without it hitting our budget if we choose to do so. The money is available through this school year, and may only be used to directly support an in school covid testing program.

Montessori reimbursement

Amy O and Josh C are collecting paperwork for their reimbursement process. They have successfully completed their programs, and we are working to collect the required documents to confirm that, allowing the reimbursement to begin.

OSHA ETS

I am working with IEA (they did our capacity assessment when Covid began, created the original plan template, etc) to bring in training on a new OSHA Covid standard or ETS (Emergency Temporary Standard). It relates to anyone that works with Covid positive or potentially Covid positive students in our case. It will include a hazard assessment template, a template to generate a plan for those required to do so through the ETS process, and a training for those individuals.

Ed MN

Please see the Joint Equity Statement from Ed MN. This is for discussion only, should you want to do so. There is a lot of chatter in our weekly MACS meetings on this right now, particularly around CRT.

ORC

Daily rate up from \$221 to \$265 this year (original proposal was \$308.50) We were held harmless from 2017 through last year at the \$211 rate. I am exploring our projected FTE count for the year with BKDV , and whether or not we have room for more employees without hitting the ALE threshold. The cost of the ORC is at a point where I will be investigating other options.

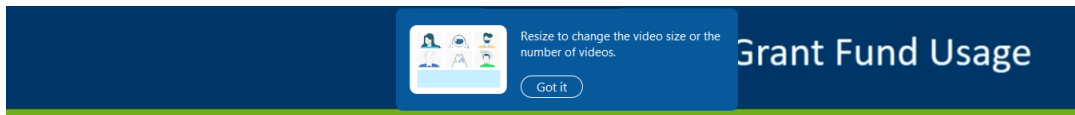
DHS stabilization Grant

This grant is being offered through June 2023. The application is monthly, and the amount is based on FTE which is considered a 1.0 at 32 hours/week. Only staff eligible for it are those providing regular care to the pre-k kids.

Regarding your question, based on State Statute there are 2 allowable reasons for a waiver:

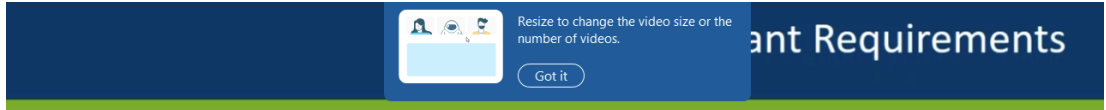
- 1. A contract with an employee bargaining unit (for example a union) prohibits increased compensation for employees of your program.*
- 2. Financial Hardship*

If your program is experiencing financial hardship, you will be asked to provide information about your financial situation in order to determine if your financial hardship qualifies for the waiver. In order to qualify, a provider must have an operating loss (revenue – expenses), for the previous calendar month, larger than the Base Grant payment you would be eligible to receive based on the number of FTEs you report.



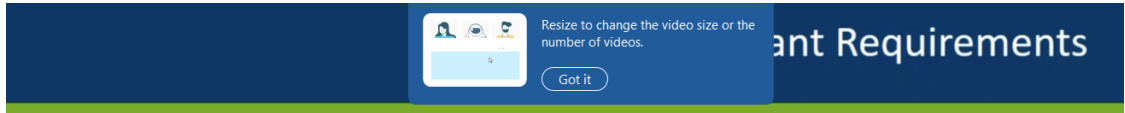
Base Grant funds may be used for the following purposes:

- Personnel costs, benefits, premium pay, and employee recruitment and retention for an employee (someone who owns their own business, like a sole proprietor or an independent contractor, can count themselves as an employee)
- Rent or mortgage payments, utilities, facilities maintenance and improvements, or insurance
- Personal protective equipment, cleaning and sanitation supplies and services, or training
- Professional development related to health and safety practices
- Purchases of or updates to equipment and supplies to respond to COVID-19
- Goods and services necessary to maintain or resume child care services
- Mental health supports for children and employees
- Relief from tuition and/or copayments for families enrolled



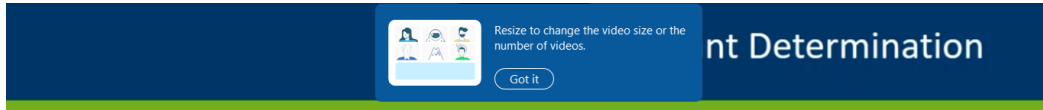
Base Grants have both Federal & State requirements that must be met

- Pay staff at least the same amount in weekly wages and maintain the same benefits
- Implement policies based on guidance and orders from state, tribal, and local authorities and, in line with guidance from the Centers for Disease Control and Prevention
- To the extent possible, provide relief from copayments and tuition payments for the families enrolled in their program
- Use at least 70% of the Base Grant to provide increased compensation, benefits, or premium pay to all paid employees, sole proprietors, or independent contractors who regularly care for children



Base Grant recipients must agree to NOT:

- Furlough or lay off employees
- Use these funds to pay taxes
- Use these funds for items that have already been paid for by other federal, state, tribal or local public funds



State statute requires Base Grant payments be determined based on:

- The number of full-time equivalent staff who regularly care for children in the program, including sole proprietors (i.e. family child care providers) or independent contractors.
- "Regularly cares for children" is defined as a paid staff person whose job description or responsibilities include interacting with, caring for and supervising children enrolled in the program.

Base Grants will provide \$430 per “full time equivalent” staff who regularly care for children.

- Providers who have recently received payments through the Child Care Assistance Program, Early Learning Scholarships, or both will be eligible for one 10% increase to their Base Grant per funding period.

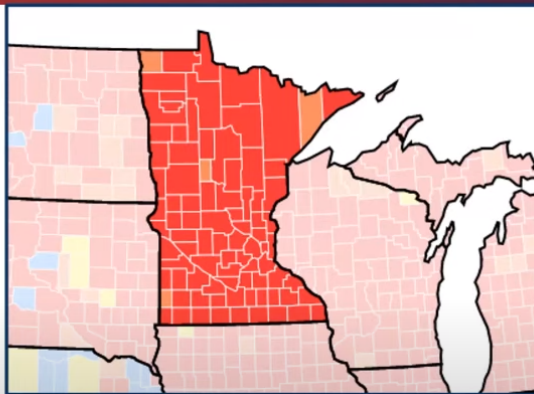
Covid

Started the school year with 3 students in quarantine, so they started after day 1. We had our first in school positive case confirmation Tuesday evening, which was traced and communicated to the appropriate families and staff on Wednesday morning.

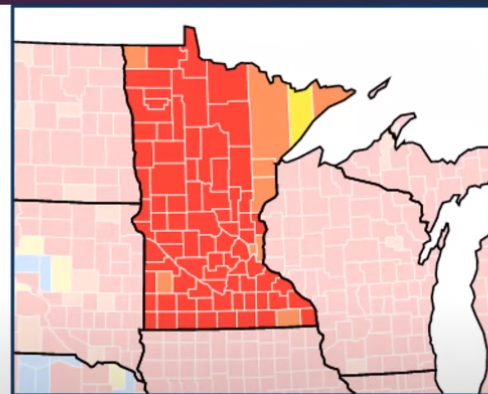
Via Cisco Webex **Weekly Testing and Positivity by Age Band**
9/10/2021

Week of:	Positivity Rates		Tests/10,000	
	8/22/2021	8/29/2021	8/22/2021	8/29/2021
0-9	7.72%	7.38%	222.2	245.7
10-19	8.34%	8.94%	233.7	248.8
20-29	6.71%	7.10%	404.3	444.3
30-39	6.47%	6.98%	418.7	442.6
40-49	6.79%	7.02%	350.2	359.9
50-59	5.73%	5.97%	299.5	315.4
60-69	4.83%	5.18%	338.7	361.2
70-79	4.14%	4.38%	407.6	427.0
80+	1.73%	2.05%	769.4	838.9

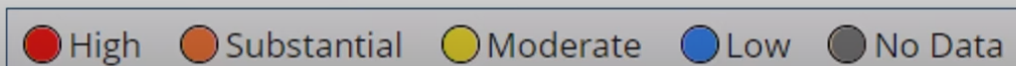
Via Cisco Webex **COVID-19 Integrated County View Comparison:**
<https://covid.cdc.gov/covid-data-tracker/#county-view>



8/24/21 – 8/30/21



9/1/21 – 9/7/21



vaccine Breakthrough Cases and Data as of 9/13/21

COVID-19 Vaccine Breakthrough Weekly Update:
<https://www.health.state.mn.us/diseases/coronavirus/stats/vbt.html>
 (updated every Monday)

- COVID-19 vaccines are effective especially severe illness and death.
- Some people who are fully vaccinated will still get a COVID-19 infection if they are exposed to the virus that causes it.
- COVID-19 vaccine breakthrough cases remain uncommon.

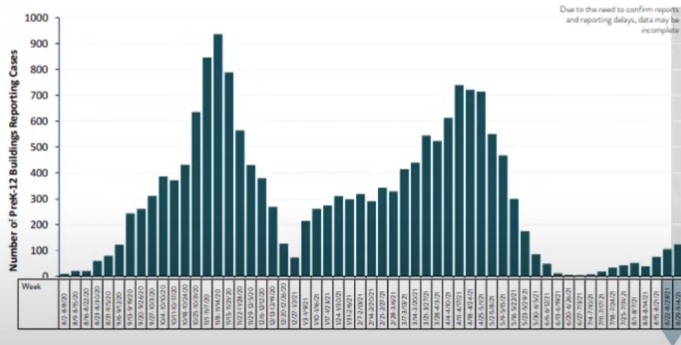
Total number of fully vaccinated Minnesotans (as of 8/15/21)*	3,080,074	
	Number of vaccine breakthrough cases	Percent of fully vaccinated people
Total cases	18,790	0.610%
Total cases hospitalized**	1,095	0.036%
Total deaths***	108	0.004%

PreK-12 School Buildings Reporting Cases

PreK-12 School Buildings Reporting Cases

Schools included are public, non-public, and tribal schools. Number of school buildings reporting cases by week are by specimen collection date. Numbers listed are cumulative total as of Aug 1, 2020. Numbers include unconfirmed and probable cases.

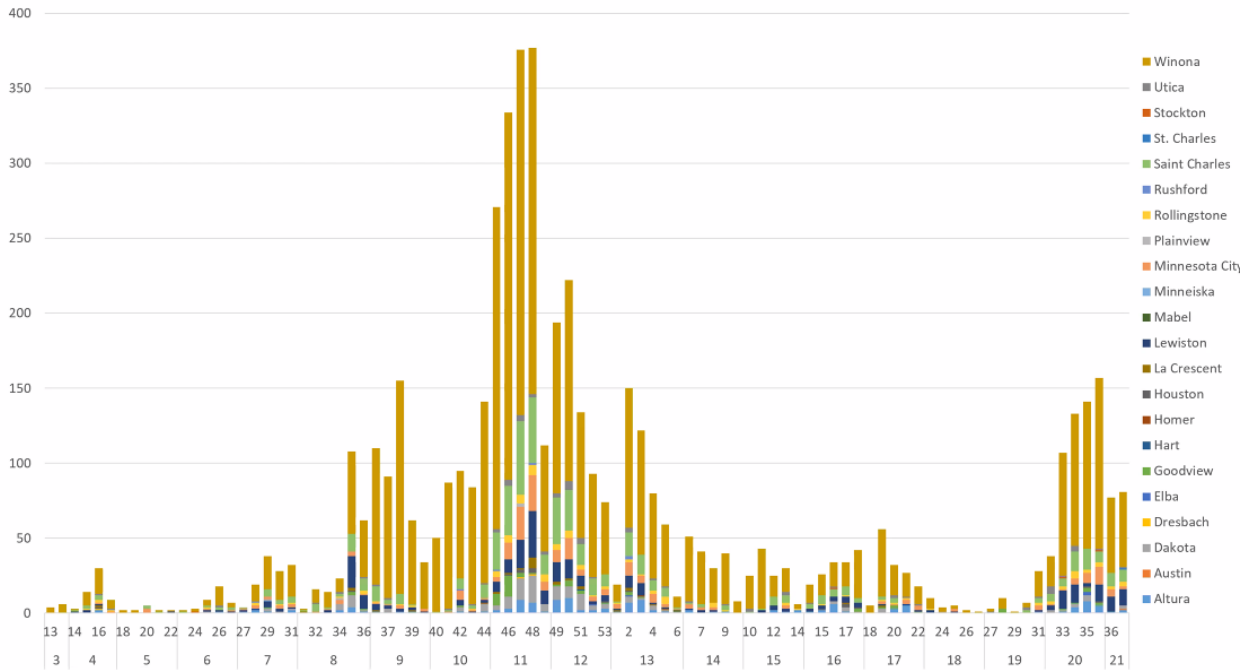
2,476
 Total PreK-12 School Buildings Reporting Cases (cumulative)



Cases per building	Number of buildings reporting cases 8/22-9/4/21
1 case	163
2-4 cases	44
≥5 cases	3
Total	210

*note the 210 on the slide above-there were over 600 redcap submissions Friday, over 500 submissions Monday. They anticipate this will jump significantly the next 2 weeks.

Winona County COVID-19 Epidemiology Curve as of 9/13/21



Cities	Un-Official 14-day Case Rate 8/31/21-9/13/21	Case growth per 100,000 (cumulative weekly rate) 9/7/21-9/13/21
Lewiston-Altura	17.71 COVID-19 cases per 1,000 Lewiston and Altura residents	10 cases 489.48 cases per 100,000
Saint Charles and Utica	7.165 COVID-19 cases per 1,000 Saint Charles and Utica residents.	12 cases 296.52 cases per 100,000
Winona, Goodview, Dakota, and Rollingstone	4.671 COVID-19 cases per 1,000 Winona, Goodview, Dakota, and Rollingstone residents.	45 cases 141.08 cases per 100,000

Winona County 7-Day Case Growth Rate Per 100,000

■ Positivity Rate ■ 7-day case growth per 100,000

