



Citywide Parent Policy Committee (CPPC)
Hybrid Full Council Meeting - Tuesday, October 28, 2025

Meeting Location: King Center 4314 South Cottage Grove

Microsoft Teams Link: https://teams.microsoft.com/l/meetup-join/19%3ameeting_YzlmY2ZiY2MtNjFkZC00N2E4LWJiZDQ0YzA1YzgwYThlNjEw%40thread.v2/0?content=%7b%22id%22%3a%227036cda9-062d-4151-8144-97ddc56e7027%22%2c%22oid%22%3a%22cbafbe73-338f-42b8-8a69-aada3a64fd16%22%7d

10:30 am-12:30 pm

Meeting Minutes

- Call to Order – Jasmine Jordan calls the meeting to order at 10:42 A.M
- Roll Call/Establish Quorum – Quorum has been established for this meeting.

DFSS staff

[x] Mara Martinez
[x] Craig Zemke
[x] Martuice Brooks
[x] Sharron Davis
[x] Berenice Vargas
[x] Soung San
[x] Jocelyn Buchanan
[x] Raven Whitehead
[x] Raven Jackson
[] Jacinta Passament
[x] Delilah Bedolla
[x] Charles Hall
[x] Cerathel Burnett
[x] Tasia Evans
[] Frederick Stewart
[x] Catherine Soto
[x] Sharay Johnson
[] Cathy Wiggins
[x] Angel Dotson
[] Kimberly Nothdurf
[x] Kiersten Smith
[x] Camille Franklin

Delegates/Guests

[x] Desiree Patterson- Kenedy King (P)	[x] Christina Alonso (P)
[] Melissa Moore – (SGA – guest)	[] Sara Ortega- Diversey Daycare
[x] Jasmine Jordan – Trinity Childcare (P)	[] Tracy McAfee - YMCA
[] Tianna Reid – CYC (P)	[] Fanita Robins – YMCA – (P)
[] Kebede Mereba – Chris House (P)	[] Shakira Rius
[] Jada Mendez – El Valor - (P)	[x] Victoria Marinez SGA- (P)
[x] Nicholena Moore – El Valor (P)	[] Yulieth Perez – (Kimball Day Care)
[x] Brenda Romero – Kimball Daycare (P)	[] Nicole Allen
[] Tierra Muhammad – Montessori (P)	[] Allison N.
[x] Consuelo Cancino –Erie House (Admin)	[] Angeliqu S
[] Timmy Adegunju - Mary Crane (P)	[] Carla Johnson (Alt. P)
[] Chardina Burks – ITAV	[] Brandi Spruell–Family Focus(P)
[] Litecia Casteneda – Northstar	[x] Shannon Moten-Rogers–CNH(P)
[x] Sharon Kirkconnell – El Valor (P)	[] Angela Obaseki –Chris House(Alt. P)
[x] Veronica Bautista	[x] Christopher Peragallo
[] Tracy Rayner – NUSH (P)	[x] Calzada Estela – SGA (Admin)
[x] Tiara Rodriguez – Gads Hill (P)	[] Felena Boston -Ada S. (P)
[] Janelle Davis – YMCA (P)	[] Brittney Brooks – Allison Inf/Tod (P)
[] Kiara Johnson – CCC (P)	[] Anastacia Jackson – ITAV (P)
[] Charles Frazier – CNH (P)	[x] Siliece Wiggins -CNH (Admin)
[x] Angie Fells – ADA. S. (Admin)	[x] Autumm Caldwell – Allison
[x] Najak Kakow - N&K Corp.	[x] Eva Espana – Gads Hill (Admin)
[x] Cara Conin - AITC	[] Samantha Ricardo - AITC
[x] Zakeria Flake – Serendipity (Alt.P)	[x] Iris Aguilar – Diversey (Admin)
[x] Feera Robinsion -Ada S. (P)	[x] Mathew Royster –Seren. (Admin)
[x] Brandy Teaque -Rebecca Crn (Alt.P)	[x] Nayeli Perez (Admin)
[x] Nadia Santiago -El Valor (...)	[x] LaDonna McWilliams -CNH (Admin)
[x] Coco Smith - (.....)	[x] Joshua Krasne – Presenter (UIC)
[x] Magda Godinez - (.....)	[] Maria Gonzalez - (....)

- Presenter: Resource Center for Autism & Developmental Delays (RCADD)- Joshua Krasne. Autism is called a “spectrum” disorder because it affects people differently, with a wide range of symptoms, challenges, and strengths. Many people on the spectrum (young/adults) have unique experiences, and their support needs can vary from one person to the next. Autistic individuals can have non-verbal, high verbal, and intellectual skills. Such a spectrum includes difficulties with social communication and interaction, as well as restricted or repetitive behaviors; however, the severity and manifestation of these traits vary greatly among individuals.

Autism is a neurodevelopmental disorder affecting a child’s cognitive development, involving the brain and body communication. Children reach developmental milestones based on age, but neurodevelopmental disorders like autism involve a disconnect between actual and expected milestones, such as an adolescent acting like an infant. ASD occurs across all racial, religious, ethnic, cultural, and socio-economic groups.

A wide range of abilities: some individuals living with autism spectrum need significant support in daily life, while others with the same conditions can live independently (almost). Many live in a community integrated living arrangement (group home) need around-the-clock care for the rest of their lives. However, on the other end of the spectrum, a person with the same conditions is very intelligent. For example, another sibling is a college graduate with a library science degree. This person works in the library setting. This kind of setting makes him comfortable. An autistic child who turns into an adult will never become an independent adult. These adults need our support to promote their independence, and that means our love and care.

Individuals with autism can have a wide range of symptoms, like Asperger’s syndrome. In years past, people called a high-functioning autism Asperger’s syndrome, but not nowadays. It is considered to have negative connotations, suggesting that one person is more highly functioning than others. Today, we have learned to accept ASD.

Individuals on the spectrum have a unique combination of strengths and weaknesses. Some children will develop very formal and articulate speech, while others will not develop speech at all. In fact, these children will remain nonverbal. This does not mean the child is not communicating; it is just a matter of us coming to understand.

The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) uses a three-level severity scale to indicate the amount of support an individual may need for their symptoms. This manual is used by clinicians nationwide to identify the criteria for assigning a specific diagnosis, such as social-emotional reciprocity, nonverbal, and communicative behaviors. Once we identify a child who has autism, he can have a level 1, 2, or 3 autism. Level 3 = most severe/profound (requires one-on-one care;

extremely difficult to cope with change), Level 2 = (mild) difficulty coping with change. Level 1 = (less severe), a child requires minimal support.

Social and communication difficulties include difficulty with social-emotional reciprocity, relationship development, and nonverbal cues such as eye contact. For children, reciprocity involves reciprocal relationships and initiating or responding to social interactions. Social-emotional reciprocity is the “give and take.” Early childhood professionals promote assessment for deficits like a lack of facial expression or understanding facial cues, which are common in autism. During IEP meetings, care plans should be shared. Focus areas include joint attention, vital for language development, and understanding others' thoughts and feelings. Autism communication varies from highly verbal to nonverbal, with nonverbal children using gestures, facial expressions, or pictures. Verbal children often have rich vocabularies but struggle with social language.

Behavior involves restricted, repetitive patterns like movements, object attachment, routines, and sensory sensitivities such as being overly or under-reactive to smells, tastes, textures, or sounds. To be considered autism, at least two of these four criteria must be met: 1. Repetitive movements or speech, like lining up toys or echolalia, with extreme responses if disrupted. 2. Insistence on sameness and inflexibility, with children thriving on routine; for example, a child reacting intensely when others play with their toys or heightened reactions to sensory input, like covering ears or not feeling pain from hot food. 3. Restricted or fixated interests. 4. Abnormal sensory reactions. These behaviors help identify autism.

Unique strengths: individuals on the spectrum may have talents like music or math, often mimicking these skills. For example, Temple Grandin, who wrote 'Thinking in Pictures,' described her childhood experience and how she saw objects as parts. Despite her autism diagnosis, she earned a Ph.D. but initially struggled with facial recognition, seeing faces as constructed of individual features, causing her stress. (We see one face as a single image of a face.)

Children's autism symptoms vary; girls mask better than boys. ASD is 3X more common in boys, with symptoms often behavioral and not physically visible. Previously, autism was thought to be unaffectionate, but these children often struggle to express or receive affection, leading to stress and social withdrawal. About one in six children aged 3-17 has a developmental disability, according to parents.

- Action items: Ms. Jordan calls for approval of the meeting minutes. Do any parents have any questions about those meeting minutes? Both meeting minutes were approved.
 - o Approval of **August 26, 2025** - Full Council Meeting Minutes: 1st motion: Sharon Kirkconnell; 2nd motion: Nicholena Moore
 - o Approval of **September 23, 2025** – Full Council Meeting Minutes: 1st motion: Nicholena Moore; 2nd motion: Sharon Kirkconnell

- DFSS Executive Updates: Cerathel Burnett is absent. Sharay Johnson gives a brief overview of the OHS memorandum.
 - OHS Memorandum
 - ♣ ACF -OHS-IM-25-06 - Vacant Slots: will clarify policy guidance on vacant slots in HS programs due to chronic absenteeism. It offers strategies and programs to enhance access and participation for children and families. The OHS requires a program to report a slot as vacant as soon as the family informs the program that the child is not returning. After 30 days of unattended use, the slot is vacant. A temporary suspension may be used only as a last resort when a serious safety threat has not been eliminated. A program needs time to put appropriate services in place. In this case, considerations for exceptions are recognized. HS programs must report on the monthly enrollment in the HSES. HS programs are encouraged to implement strategies to promote attendance.
 1. Building relationships with families to improve communication. Staff can build trusting relationships with families
 2. Programs can engage in community partnerships that support child and family well-being and promote child attendance.
 - ♣ ACF-OHS-IM-25-05 - Fiscal Monitoring: will focus on monitoring process for the fiscal year (updating review formats and when the review takes place).
 1. FA1 reviews foundational systems to ensure strong operations, fiscal integrity, and child safety across all sites.
 2. FA2 reviews the quality of education, health, and family services to strengthen child and family outcomes and implementation of ERSEA.
 3. CLASS Assessment is on-site reviews are available upon request.
 4. Follow-up reviews are both virtual and on-site formats aligned to the nature of the findings. Risk Assessment Notification (RAN) is available in both virtual and on-site formats, aligned to the nature of the findings.
 5. Special Reviews conducted on-site with/without notice. This is true for Tribal Programs. Each year, programs must submit a calendar showing when programs are open and when children are in session. Programs scheduled for a monitoring review will receive a notification letter 45 days before the review starts.
- CPPC Updates: Martuice Brooks gives an overview of the CPPC elections for the 25-26 program year.
 - Elections for 25-26: Program year 24-25 has ended. Your agencies have elected new delegates and alternates at your sites. We will have full council elections for the DFSS CPPC election on November 25th. We would like to see full in-person participation at the King Center. There is no online option. Kindly come out to cast your vote.
- Program Reports: Craig Zemke provides an overview. There are several parts to the reports: meal count, attendance reports, and enrollment reports.
 - Enrollment/attendance for September. This is our September enrollment report:

Head Start – 1461 EHS – 1128 EHSCCP – 742
 EHS Expansion – 190 PFA – 3637 Preventive Initiative –
 3646

- Attendance Report – September 2025
 HS – 85.15% EHS – 82.97%
 EHSCCP – 84.76% EHS Expansion – 88.36%

- Meals Report – September 2025 report:

	Head Start	EHS	EHS-CCP	EHS-Expansion
Breakfast	17287	11859	8765	1457
Lunch	18212	12225	9112	1489
Snacks	16937	11267	8874	1415

- Sharron Davis – summarizes financial expenditure for the September report. We encourage the delegate agencies to submit their invoices. We want the federal \$ used.

	HS	EHS	EHSCCP	EHSexpansion	ECBG	Childcare
Expenditure	15307662	18058654	8945449	2484716	6369709	576116
Balance	10099495	15562339	10217075	1737107	94754730	10239884
% Utilization	60.25%	53.71%	46.68%	58.85%	6.30%	5.33%

- Craig Zemke gives a talk about the Content Area Reports.
 - a. *ERSEA* continues to receive applications from families interested in enrolling their children in CBO. CEL application for the 25-26 school year launched on April 8, 2025. A hotline at 312-229-1690 is available for parents who need assistance. The average enrollment in September is 87%. Currently, 6,000 returning children have applied for the upcoming school year. The One-System Initiative is underway. Collaborative efforts between CHS and the Homeless Division have created additional recruitment opportunities for children (0-5 y/o) within the homeless shelter sites. All CBOs are encouraged to continue their recruitment efforts among current residents of Chicago. (b) *Health/Nutrition/Mental Health/Disabilities* – Ongoing meetings with/ CPS and HS. Start Early's RFP will solicit a training entity to offer disability-related training to early learning agency staff, with awards in November 2025. HS and CPS held a meeting to discuss dual enrollment concerns specific to transporting children with IEPs. The UIC nutrition extension project gave a presentation to agency directors at the September meeting. CSD selected a new health vendor, ACCESS Community Health Network, to serve as subject matter experts. For Claridigm (Health/Safety Module Status) for 2025, the total number of users is 2,679. 1,850 users have completed the module (3 CWPPC). 1,898 users have completed 50% of the module. 4 users completed the Spanish version of the module. All users can register at <https://www.earlychilddedu.info/> or <https://zfrmz.com/f6CK73IIHWGYxKIhtf>. DFSS requires all funded staff to attend the Health/Safety Module to obtain a certificate. (c) *Education/Training* – Teaching Strategies: 9/8 – 30 (Admin Beginning of

the Year...), Disabilities: 9/18-30 (Early Screening inventory ...), UIC: 9/9-16(Smart goals. Teachstone: 9/9 -24 (CLASS Literacy). Erikson:9/17-24 (Administering/Interpreting ASQ) (d) *Parent Family and Community Engagement (PFCE)* – UIC provides training to support family service workers in connecting families with community resources. Other services include FAST literacy. DFSS staff continue to reach out to agencies to secure a 5-minute slot on the parent policy agenda (emphasizing the significance of parental involvement). Parent interviews – want to hear from parents of CPPC meetings. Scholarships – can apply for the workforce scholarships program via the CEL website. (e). *Fiscal* – the practice sessions convene on the 3rd Friday of each month (1 PM) to discuss best practices, approaches, and challenges for the programs. A drop-in session provides peer networking opportunities. DFSS is engaging with delegates who need assistance. (f) *CPPC updates* – LOC are due on October 15th. Elections of CPPC parents will be on November 25th in person at the King Center. Once the elections are over, the parents will be receiving training for their roles/ responsibilities. The full council meetings will be in person on the 4th of each month.

b. Schedule of the CPPC meeting Calendar:

Executive Council Meeting		Full Council Meeting	
Date	Time	Date	Time
August 5 th	11-12	August 26 th	10:30 - 12:30
September 2 nd	11-12	September 23 rd	10:30 – 12:30
October 7 th	11-12	October 28 th	10:30 - 12:30
November 4 th	11-12	November 25 th	10:30 – 12:30

c. Deputy Commissioner’s Corner – Cerathel Burgess Burnett summarizes the updates. All three grant applications were submitted on August 29, 2025. The allowable criteria for HS/EHS – 101% - 130% of the poverty level. We have two IMs. 1. Addressing the vacant slots due to chronic absenteeism, 2. FY 2026 monitoring process for HS recipients. Last, know your Rights to protect yourself and your family.

- Open Discussion: DFSS Martuice Brooks, Sharay Johnson, Craig Zemke) Thanks to everyone, the parents of the committees. Parents appreciate the opportunities. Some state that they would like to take this experience and apply it for future gains/knowledge. Some express their return to the committee in different roles.
- Adjournment – Jasmine Jordan adjourns the meeting at 12:27 PM. 1st motion: Nicholena Moore; 2nd motion: Sharon Kirkconnell