



Tomorrow's Doctors, Tomorrow's Cures®

# GBAnalytic #11: Childcare Offerings During COVID-19

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Lead

GBA/GWIMS

August 2020



Association of  
American Medical Colleges

# Introduction

The GBA is collaborating with the Group on Women in Medicine and Science (GWIMS) to better understand various aspects of the **gendered impact of COVID-19 on the academic medicine workforce**.

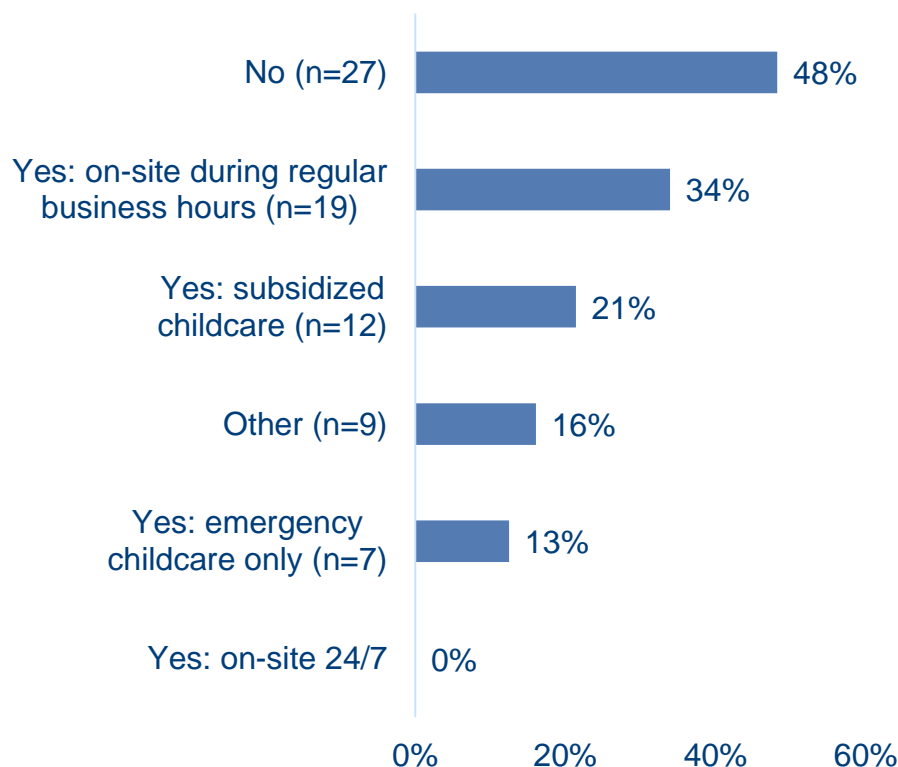
Working remotely during COVID-19 has presented new challenges related to childcare which is showing to have a disproportionate impact on women. To better understand how institutions are addressing these challenges, this GBAnalytic Survey aims to understand more about the **impact of COVID-19 on childcare services provided by your institution, both prior to and after the pandemic**.

We are gathering information on new policies and procedures institutions have taken on to provide and/or support childcare services, who receives support, and to what extent.

The survey opened on August 14, 2020 and was sent to 152 schools. In total, **59 schools responded**. Below is a general summary of the results.

# 1. Did your institution provide childcare options for employees prior to COVID-19? Check all that apply.\*

Of the 59 survey responses, 49% (n=29/59) selected Yes and/or Other



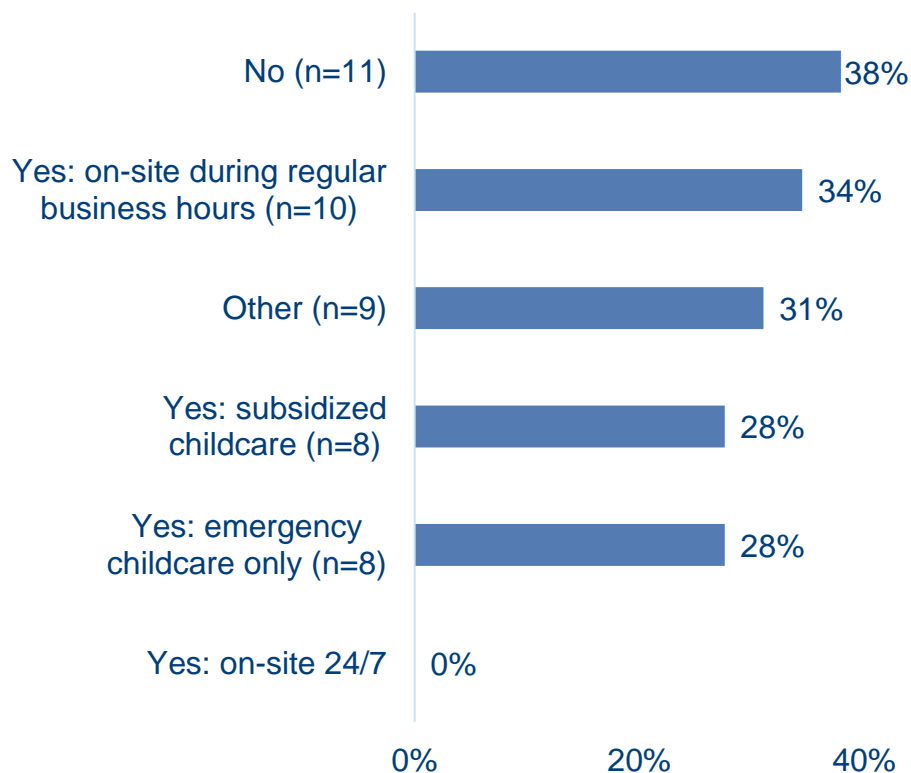
## Other comments/themes:

- Vouchers to offset cost based on employee salary tier
- Time off benefit of 3 days to resolve child care issues
- Priority admission at some off-site locations
- Access to care.com, university childcare center; student helpers/babysitters
- Small subsidy to prioritize employees
- Free subscription to Sittercity, on-site resources and referrals, student support

\*There were 3 blank responses

## 2. Has your institution publicly announced expanded childcare options for employees since COVID-19? Check all that apply.\*

Of the 29 institutions that provided childcare *prior to* COVID-19, 62% (n=18/29) publicly announced expanded childcare options



### Other comments:

- Expansion of the reimbursement level, employee salary tiers eligible for reimbursement
- Time off benefit; one-time subsidy paid for by philanthropic funds; discounted care services
- Care.com (1 month free for healthcare workers)
- The clinical practice expanded emergency child care services beyond previous maximum uses
- Match childcare providers with employees
- Option to reimburse \$100/day using your own caregivers
- New on-site childcare option

### 3. Which employees receive childcare options and/or benefits, infrastructure, and support as it relates to the period before and since the start of COVID-19?

Role	Received Before COVID	Expanded to include since COVID	Does not receive childcare benefits
Faculty	78%	18%	4%
Staff	86%	14%	0%
Residents	66%	19%	15%
Post-Docs	74%	11%	15%

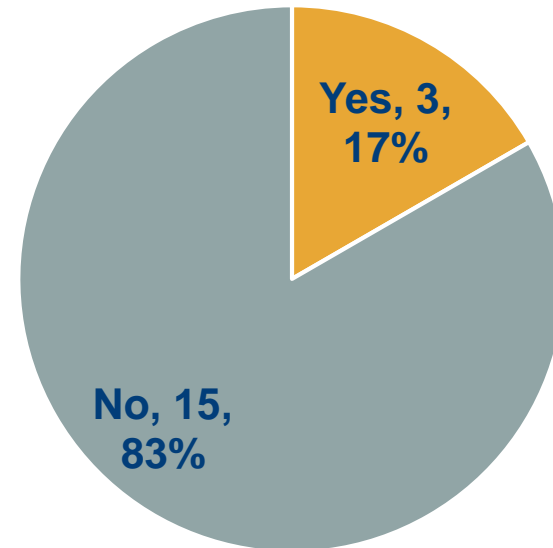
\*There were 28 responses for both the Faculty and Staff roles, with for example 86% (n=24/28) of staff receiving services before COVID; 27 schools responded within the Post-Doc role and 26 responded within the Resident role.

## 4. How has your institute funded these expanded options (e.g., financial reserves, govt. relief funds, postponed capital expenditures etc.)?

Of the 18 schools that publicly announced expanded childcare options *since* COVID-19, 72% (n=13/18) provided a written response to this open-ended question:

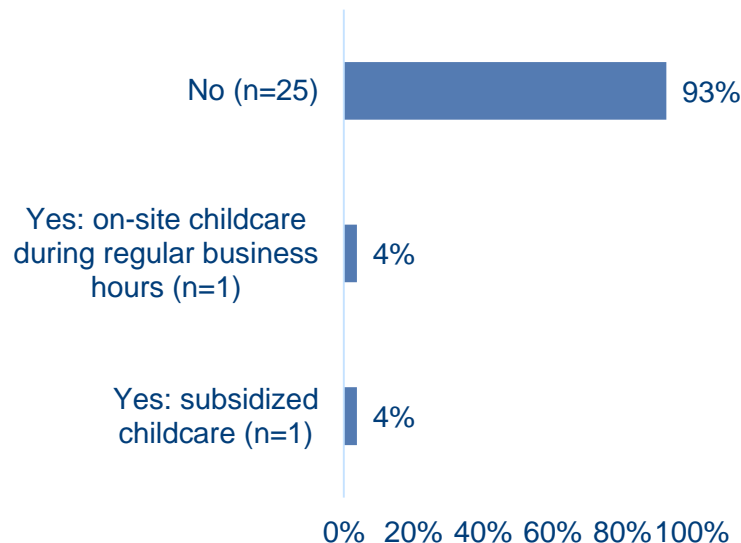
- 8 indicated a mix of financial reserves and hardship funds, government relief funds and philanthropy dollars, and salary freezes and postponed capital expenditures.
- 2 negotiated reduced rates for local day care centers or memberships, offered time-off benefits or expanded FTEs to cover staffing needs for onsite daycare.
- 1 indicated donations from their foundation to provide scholarships for low-wage employees to enroll children in school-based summer camp and a one-time subsidy to assist with childcare expenses.
- 1 partnered with their school district to offer free childcare to healthcare workers. When school resumed, and the program ended, private options provided discounted services.
- 1 created a COVID-specific fund for tracking all centrally funded initiatives.

## 5. Has your institution publicly announced continuing these expanded options after the pandemic ends?

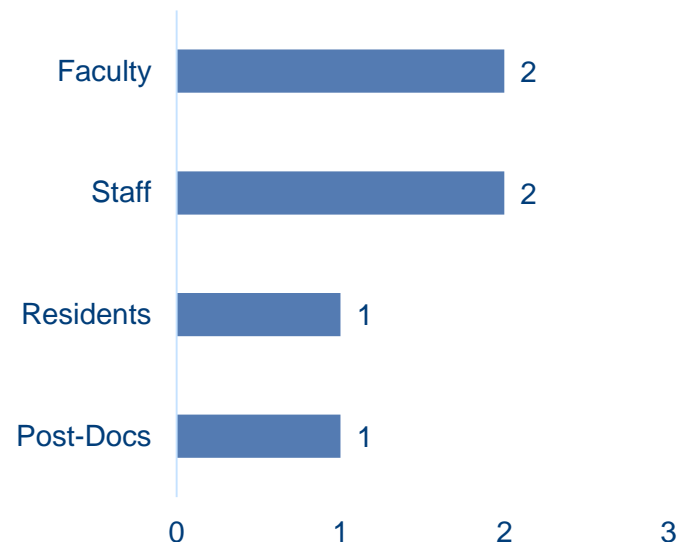


# For those institutions who did not previously provide childcare options... (n=27)

**Q6: Has your institution publicly announced expanded childcare options for employees in response to COVID-19?**



**Q7: Which employees receive childcare options and/or benefits, infrastructure and support? Check all that apply.\***



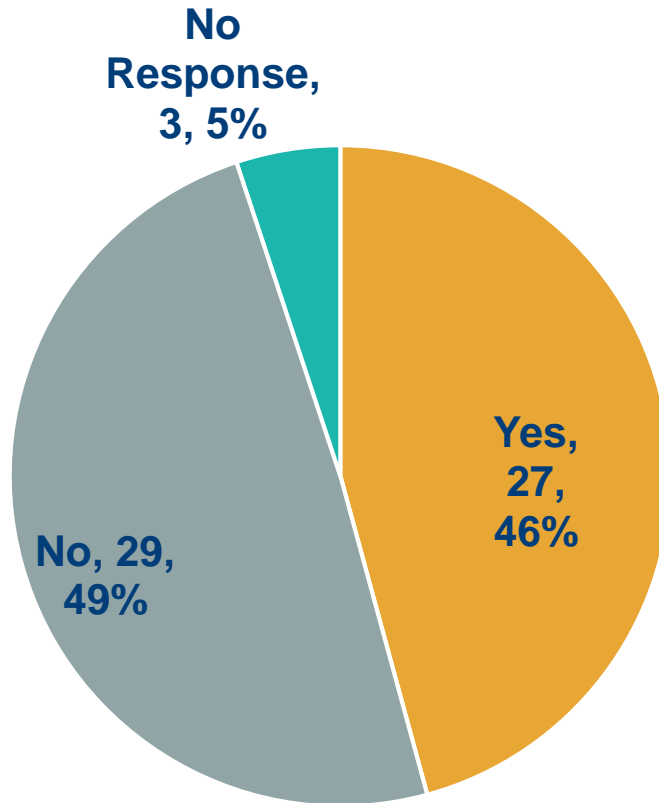
\*There were 2 responses to this question

**Q8: How has your institute funded these new options?**

- Services available to all employees within the system.

**Q9: Neither institution representing the two responses to this question has publicly announced continuing these new options after the pandemic ends.**

**10. Has your institution publicly announced other benefits, infrastructure to help employees care for dependents in the home during the pandemic and still remain productive during remote or on-site work? (ALL RESPONDENTS)**

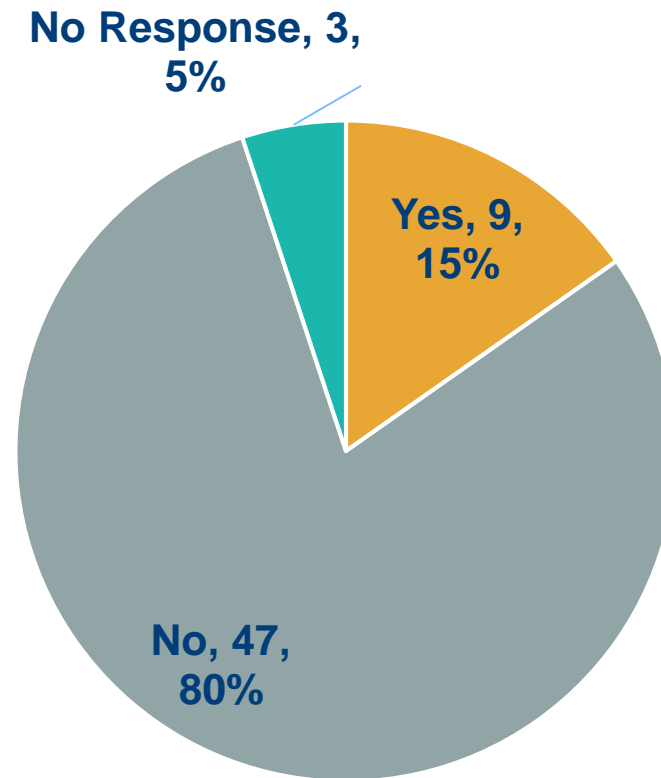


**If yes, what is being provided?**

- Supplies (monitors, laptops)
- Enhanced IT; VPN
- Admin support; Manager Toolkit with a COVID-19 section on managing remote teams
- Flex schedules; reduced work-hours; telecommuting;
- Up to 80-hours of non-work pandemic leave after use of personal vacation for "micro-closures" at child's school
- additional 60hrs paid time "Caregiving Pay"
- emergency leave policies for those who have exhausted leave based on condition of school closures or taking care of someone ill with COVID
- Expanded online wellness resources
- Virtual homework help; in-home nanny and tutoring; student babysitting services



# 11. Is your institution tracking metrics related to availability of childcare and employee turnover? (ALL RESPONDENTS)



## 12. What types of solutions has your medical school implemented to support employees in balancing professional obligations with childcare and homeschooling, if your local schools are not opening or moving to a hybrid model for the fall semester ? (*ALL RESPONDENTS*)?

- Telemedicine to allow clinicians to work off-site
- Flexible schedules; telework and remote work agreements; leave assistance
- Tutoring assistance (virtual or in-person); local childcare partners (YMCA) at subsidized rates for those required to be onsite; virtual drop-in learning hub for K-8; resource pages and assistance with finding daycare services; childcare matching programs
- "New interim voluntary furlough or reduction in hours policy. This allows employees to voluntarily reduce their hours or stop working for a limited time (between two weeks and three months, with extensions possible with approval). Employees would not be paid for time they are not working but can elect to maintain their current benefits elections. The institution would also pay for the medical premium (both the institutional contribution and the employee's premium payment)."



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