

#### Child Care and Development Fund (CCDF) Plan

For

State/Territory: Mississippi

FFY 2014-2015

This Plan describes the CCDF program to be administered by the State/Territory for the period 10/1/2013 - 9/30/2015. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

For purposes of simplicity and clarity, the specific provisions printed herein of applicable laws and regulations are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to them regardless of these modifications.

Public reporting burden for this collection of information is estimated to average 162.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Form ACF-118 Approved OMB Number 0970-0114 expires 05/31/2016

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#### PART 1

#### ADMINISTRATION

This section provides information on how the CCDF program is administered, including the designated Lead Agency, funding information, the administrative structure, program integrity and accountability policies and strategies, coordination efforts, and emergency preparedness plans and procedures.

#### 1.1 Contact Information

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E)

## 1.1.1 Who is the Lead Agency designated to administer the CCDF program?

Identify the Lead Agency and Lead Agency's Chief Executive Officer designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals and disallowance notifications to the designated contact identified here. (658D(a), §98.10)

Name of Lead Agency: <u>Mississippi Department of Human Services</u>
Address of Lead Agency: <u>750 North State Street, Jackson, Mississippi 39202</u>
Name and Title of the Lead Agency's Chief Executive Officer: <u>Mr. Richard</u>

Berry, Exectutive Director Phone Number: <u>601-359-4480</u> Fax Number: <u>601-359-4910</u>

E-Mail Address: Richard.Berry@mdhs.ms.gov

Web Address for Lead Agency (if any): www.MDHS.ms.gov

#### 1.1.2. Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information. (§§98.16(a) and (c)(1))

#### a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Jill Dent

Title of CCDF Administrator: <u>Director, MDHS Division of Early</u>

Childhood Care & Development

Address of CCDF Administrator: 750 North State Street, Jackson,
Mississippi 39202
Phone Number: <u>601-359-4555</u>
Fax Number: <u>601-359-4422</u>
E-Mail Address: Jill.Dent@mdhs.ms.gov
Phone Number for CCDF program information (for the public) (if any)
1-800-877-7882
Web Address for CCDF program (for the public) (if any):
www.childcareinfo.ms
Web address for CCDF program policy manual: (if any):
www.childcareinfo.ms
Web address for CCDF program administrative rules: (if any):
www.childcareinfo.ms
b) Contact Information for CCDF Co-Administrator (if applicable):  Name of CCDF Co-Administrator: NA  Title of CCDF Co-Administrator: Address of CCDF Co-Administrator: Phone Number: Fax Number: E-Mail Address: Description of the role of the Co-Administrator:
1.2 Estimated Funding
<b>1.2.1. What is your expected level of funding for the first year of the FY 2014 – FY 2015 plan period?</b> The Lead Agency <u>estimates</u> that the following amounts will be available for child car services and related activities during the 1-year period from October 1, 2013 through September 30, 2014. (§98.13(a)).
FY 2014 Federal CCDF allocation (Discretionary, Mandatory and Matching): \$55.376,741 (estimate includes Targeted Funds) Federal TANF Transfer to CCDF: \$Amount pending budget allocation Direct Federal TANF Spending on Child Care: \$0.00 State CCDF Maintenance-of-Effort Funds: \$1,715,430 State Matching Funds: \$5,467,153
<b>Reminder</b> – Lead Agencies are reminded that not more than 5 percent of the aggregate CCDF funds, including federal funds and required State Matching funds, shall be expended on administration costs (§98.52) once all FY2014 funds have been liquidated. State Maintenance-of-Effort funds are not subject to this limitation.
<b>1.2.2.</b> Which of the following funds does the Lead Agency intend to use to meet the CCDF Matching and maintenance-of-effort (MOE) requirements described in 98.53(e) and 98.53(h)? Check all that apply. Territories not required to meet CCDF Matching and MOE requirements should mark $\square$ N/A here.

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<b>Note:</b> The Lead Agency must check at least public and/or private funds as matching even if pre-kindergarten (pre-k) funds also will be used.
□ Public funds to meet the CCDF Matching Fund requirement. Public funds may include any general revenue funds, county or other local public funds, State/Territory-specific funds (tobacco tax, lottery), or any other public funds. If checked, identify source of funds:      State General Fund and fees/funds collected by the Mississippi Department of Health for licensing and regulatory infractions. These funds collected consiste of license
<u>application and renewal fees.</u> If known, identify the estimated amount of public funds the Lead Agency will receive: \$7.6 M
☑ Private donated funds to meet the CCDF Matching Funds requirement.     Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes. (98.53(f))
If checked, are those funds:
<ul><li>☐ donated directly to the State?</li><li>☒ donated to a separate entity(ies) designated to receive private donated funds?</li></ul>
If checked, identify the number of entities designated to receive private donated funds and provide name, address
contact, and type
Children's Defense Fund
Southern Regional Office Headquarters
2659 Livingston Road, Suite 200
Jackson, MS 39213
<u>Director, Oleta Fitzgerald</u>
601-321-1966 0F': 110 1 1 1
OFitzgerald@childrensdefense.org
Non-profit Agency
If known, identify the estimated amount of private donated funds the Lead Agency will receive: \$ Exact figure depends on availability of funds, if utilized to draw down additional federal funding.
☐ State expenditures for pre-k programs to meet the CCDF Matching Funds
requirement. If checked,
Provide the estimated percentage of Matching Fund requirement that
will be met with pre-k expenditures (not to exceed 30%):
If percentage is more than 10% of the Matching fund
requirement, describe how the State will coordinate its pre-k
and child care services:
If known, identify the estimated amount of pre-k funds the Lead
Agency will receive for Matching Funds requirement: \$
Describe the Lead Agency efforts to ensure that pre-k programs meet
the needs of working parents:
☐ State expenditures for pre-k programs to meet the CCDF Maintenance of Effort (MOE) requirements. If checked,
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☐ The Lead Agency assures that its level of effort in full-day/full-year
child care services has not been reduced, pursuant to 98.53(h)(1).
Estimated percentage of MOE Fund requirement that will be met with
pre-k expenditures (not to exceed 20%):
If percentage is more than 10% of the MOE requirement,
describe how the State will coordinate its pre-k and child care
services to expand the availability of child care:
If known, identify the estimated amount of pre-k funds the Lead
Agency will receive for MOE Fund requirement: \$
Describe the Lead Agency efforts to ensure that pre-k programs meet
the needs of working parents:

1.2.3 Describe the activities for which quality funds (including targeted quality funds for infants and toddlers, school-age children, and resource and referral) will be used in FY 2014 - 2015. Note: Funding estimate is limited to FY 2014. In as much detail possible, list the activities that will be funded, the estimated amount of CCDF quality funds that will be used for each activity, and how these activities relate to the Lead Agency's overall goal of improving the quality of child care for low-income children.

Estimated	Activity (Lead	Purpose	Projected Impact
<b>Amount of</b>	Agency should		and Anticipated
CCDF	include		Results (if
Quality	description of		possible)
<b>Funds For</b>	quality activities		
FY 2014	that cover FY		
	2014 and also		
	information		
	about activities		
	for FY 2015, if		
	available)		

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
Infant/Toddler Targeted Funds \$1,500,000	Activities funded with Infant/Toddler Targeted funds include A) the provision of child care at job centers for parents seeking employment; B) a portion of child care licensure activities; C) on-site training and technical assistance to unlicensed family child care providers; and D) a pilot QRIS program for unlicensed family child care providers.	A) This program provides child care services for individuals engaged in job search activities at a local WIN Job Center. B) A portion of the Division of Child Care Licensure, MS Department of Health is funded with these targeted funds C) This program provides educational training and technical assistance to unlicensed inhome and family daycare childcare providers that offer fullday, full-year child care services to eligible families. D) This program assesses the level of quality of participating unlicensed family child care homes.	A) The Lead Agency anticipates that this program will support parents in gaining employment, thereby increasing family stability and self-sufficiency.  B) The Lead Agency anticipates that the application of rules and regulations governing child care centers will support the provision of safe care environments for all children enrolled.  C) The Lead Agency anticipates that this program will result in higher quality care in unlicensed family child care homes.  D) The Lead Agency anticipates that this program will evaluate the level of care offered in unlicensed family child care homes, and support increases in program quality.

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
School- Age/Child Care Resource and Referral Targeted Funds \$273,000	Activities funded with School Age Targeted Funds include a pilot Out- of-school QRIS program.	This program assesses the level of quality of participating programs serving school-aged children.	The Lead Agency anticipates that this program will evaluate the leve of care offered in programs serving school-aged children, and support increases in program quality.
Quality Expansion Targeted Funds \$2,600,000	Activities funded with Quality Expansion Targeted Funds include A) on-site training and technical assistance; and B) project-based programming for school-aged children.	A) These programs offer on-site training and technical assistance to all staff in licensed childcare centers in the areas of classroom/instructio nal quality, nutrition & physical activity, administration and leadership skills.  B) This program offers quality programming for school-aged children with a community-based approach.	A) The Lead Agency anticipates that these programs will support lasting changes leading to adoption of best practices and increased quality of care.  B) The Lead Agency anticipates that this program will offer a rich educational program that expands children's knowledge and increases their skills in a variety of areas.

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
Quality Funds (not including Targeted Funds)	Activities funded with Quality Funds include A) professional development; B) training and technical assistance for children with special needs; and C) a portion of child care licensure activities.	A) These programs offer professional development opportunities for child care program staff and directors including CDA and other professional credentials and professional conferences.  B) This program offers training and technical assistance, including a professional credential for child care staff regarding inclusion of children with special needs.  C) A portion of the Division of Child Care Licensure, MS Department of Health is funded with these targeted funds.	A) The Lead Agency anticipates that these programs will increase the educational level of child care staff, and overall professional development. In addition, a series of professional development conferences designed to support continued education.  B) The Lead Agency anticipates that this program will increase competency of child care providers in addressing the needs of children with special needs.  C) The Lead Agency anticipates that the application of rules and regulations governing child care centers will support the provision of safe care environments for all children enrolled.

### 1.2.4 Will the Lead Agency distribute quality funds to counties or local entities?

Note: This question is to obtain information on whether the Lead Agency retains decision making responsibilities regarding the quality dollars at the State/Territory level or if funds are distributed to local entities.

Does the State maintain decisions at the State level, or are funds distributed to locals that have some decisions on how funds are spent.

No, the Lead Agency will not distribute any quality funds directly to local
entities
Yes, all quality funds will be distributed to local entities
Yes, the Lead Agency will distribute a portion of quality funds directly to
local entities. Estimated amount or percentage to be distributed to
localities
Other. Describe.

#### 1.3. CCDF Program Integrity and Accountability

Program integrity is defined to include efforts that ensure effective internal controls over the administration of CCDF funds. The Lead Agency is responsible for monitoring programs and services, ensuring compliance with the rules of the program, promulgating rules and regulations to govern the overall administration of the plan and oversee the expenditure of funds by sub-grantees and contractors. (§ 98.11(b)) Accountability measures should address administrative error, which includes unintentional agency error, **as well as address** program violations, both unintentional and intentional, that may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

## 1.3.1. Describe the strategies the Lead Agency will utilize to ensure effective internal controls are in place.

The **description** of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities.

Over the last four years, the Lead Agency has been dedicated to reducing errors in reporting, administrative processes, and payment for services. Strategies adopted under this plan will reflect a continuation of this ongoing effort. Strategies identified to ensure effective internal controls include, but are not limited to:

- 1. Developing Case Review Assessment tool for use in monitoring case files.
- 2. Conducting quarterly reviews of case files using the Case Review Assessment to ensure accuracy in adherence to administrative policies.
- 3. Holding targeted staff training to address errors identified by the Case Review Assessment process.
- 4. Conducting quarterly reviews of cases for Improper Payment Review.

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- <u>5. Utilizing reports from CCIS to monitor program activity including additions, terminations, expenditures, and obligations.</u>
- 6. Monthly training offered to staff on policies and procedures.
- 7. Continued use of electronic systems to calculate face values for authorizations and payments to providers.

The State's Office of the State Auditor engages all divisions of the Mississippi Department of Human Services in ongoing audits. These audits include reviews of casefiles to ensure proper expenditure of funds. Upon compeletion of an audit, a meeting is held to discuss findings and plan to address any weaknesses in program operation before initiating the next audit.

### 1.3.2 Describe the processes the Lead Agency will use to monitor all subrecipients.

Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements (98.11 (a) (3))

**Definition**: A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. <a href="OMB Circular A-133">OMB Circular A-133</a> Section 210 provides additional information on the characteristics of a **sub-recipient** and **vendor**.

The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments.

The Lead Agency has in place subconracts with various entities to provide child care slots. These subcontractors are monitored by the Mississippi Department of Human Services Division of Program Integrity in accordance with the regulations established for all entities engaged in contract services for the Lead Agency. These regulations can be found in the MDHS Subgrant/Contract Manual located at, http://www.mdhs.state.ms.us/pdfs/dpimanual/dpi\_submanual.pdf.

Annual monitoring of subcontractors by the MDHS Division of Program Integrity includes a review of eligibility processes and requests for payment to ensure adherence to state and federal policies. Any findings as a result of the monitoring are settled in accordance with the established policies in the MDHS Subgrant/Contract Manual.

## 1.3.3. Describe the activities the Lead Agency will have in place to identify program violations and administrative error to ensure program integrity using the chart below.

Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to **areas identified through the Error Rate Review** process (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

Type of Activity	Identify Program Violations	Identify Administrative Error
Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid))		
Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))		
Errors that would be identified through these reports include, but are not limited to children who have aged out of eligibility, authorizations attached to a provider left incomplete, authorizations that have expired but were not terminated, incomplete provider profiles, and fraud reports.		
Review of attendance or billing records		
Audit provider records		
Conduct quality control or quality assurance reviews	$\boxtimes$	
Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents		
Conduct supervisory staff reviews		
Conduct data mining to identify trends		
Train staff on policy and/or audits		
Other. Describe		
None		

### For any option the Lead Agency checked in the chart above other than none, please describe

The Lead Agency will utilze the Child Care Information System (CCIS) to produce reports querried to help identify trends in the data, staff performance, and error rates. CCIS allows for case management and fiscal monitoring.

The Lead Agency's CCIS interfaces daily with the information system housing TANF data to collect referrals and terminations of child care subsidy. This interface helps ensure timely and accurate access to subsidy services.

If the Lead Agency checked none, please describe what measures the Lead Agency has or plans to put in place to address program integrity:

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1.3.4. What strategies will the Lead Agency use to investigate and collect improper payments due to program violations or administrative error? Check and describe in the chart below which strategies, if any, the Lead Agency will use for each of the following areas: Unintentional program violations (UPV), intentional program violations (IPV) and/or fraud, and administrative error as defined in your State/Territory. The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud (98.60(i)).

Strategy	UPV	IPV and/or Fraud	Administrative Error
Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount \$100	$\boxtimes$	$\boxtimes$	
Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe			
Recover through repayment plans		$\boxtimes$	
Reduce payments in subsequent months			
Recover through State/Territory tax intercepts			
Recover through other means. Describe			
Establish a unit to investigate and collect improper payments. Describe composition of unit  The MS Department of Human Services,  Division of Program Integrity investigates improper payments.			
Other. Describe			
None			

### For any option the Lead Agency checked in the chart above other than none, please describe

Through the development and implementation of the Child Care Information System (CCIS), transactional child care activity can easily be monitored and analyzed to determine the possible misuse of funds, the existence of fraudulent behavior, and the reduction and/or prevention of improper payments. The database system contains several parameters and edit checks designed to reduce the possible occurrence of improper payments.

The Lead Agency has also developed various internal control fiscal management reports that allow the CCA to obtain a "bird's eye" view of child care transactions across the State of Mississippi. The reports are structured by federal regulatory guidelines. Subgrantees prepare and submit a monthly report to the Lead Agency,

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which are used in the development of monthly internal reports. In addition, the MDHS Department of Budgets and Accounting prepare reports quarterly. Thus, any significant irregularities in child care activity can easily be spotted and appropriate disciplinary actions immediately taken. Once possible improper payments have been identified, the Lead Agency will enact one of the following procedures:

- 1. If the improper payment is the result of Administrative Error, the CCA is notified and corrective measures are taken to recoup funds. Recoupments are made in 100% of findings related to administrative errors.
- 2. If the improper payment is the result of either intentional or inintentional program violations, the CCA is notified and the case is forwarded to the MDHS Division of Program Integrity for investigation. Recoupment efforts are made if it is determined that improper payments exceeding \$100.00 exist.

## 1.3.5. What type of sanction, if any, will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

	None
X	Disqualify client. If checked, please describe, including a description of the
ap	peal process for clients who are disqualified

Any dispute concerning a question of fact under application/agreement which is not disposed of by agreement of the parties hereto shall be decided by the DECCD Director. In the review by the DECCD Director, the parent/provider shall be afforded an opportunity to be heard and offer evidence in support of the questioned decision under review. This decision shall be reduced to writing and a copy thereof mailed or furnished to the parent/provider and shall be final and conclusive, unless, within thirty (30) days from the date of the decision, the parent/provider mails or furnishes the Executive Director of the Mississippi Department of Human Services a written request for review. Pending final decision of the Executive Director or his designee, the Lead Agency Staff will proceed in accordance with the decision of the DECCD Director.

 $\boxtimes$  Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified

Any dispute concerning a question of fact under application/agreement which is not disposed of by agreement of the parties hereto shall be decided by the DECCD Director. In the review by the DECCD Director, the parent/provider shall be afforded an opportunity to be heard and offer evidence in support of the questioned decision under review. This decision shall be reduced to writing and a copy thereof mailed or furnished to the parent/provider and shall be final and conclusive, unless, within thirty (30) days from the date of the decision, the parent/provider mails or furnishes the Executive Director of

the Mississippi Department of Human Services a written request for review. Pending final decision of the Executive Director or his designee, the Lead Agency Staff will proceed in accordance with the decision of the DECCD Director.

$\boxtimes$	Prosecute criminally
	Other. Describe.

## 1.3.6. Based on responses provided from Question 14 in the most recent ACF-402 report, please describe those actions the Lead Agency has taken or plans to take to reduce identified errors in the table below.

Territories not required to complete the Error Rate Review should mark  $\square$  N/A here.

Activities identified in ACF- 402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
The Lead Agency will perform internal reviews of the child care subsidy applications and all related supporting documentation, prior to the issuance of a child care certificate, to ensure accuracy and completeness. In addition, subgrantee training will be conducted on the MDHS Child Care Policy Manual, including but not limited to compliance with federal/state policies and regulation related to the subsidy program, procedures for issuing child care certificates, using CCIS and updated policies/regulations/procedures.	Unknown	1. The Lead Agency will utilize CCIS to review staff workflow and ensure proper implementation according to established program policies.  2. Lead Agency staff is engaged in policy training each month at staff meetings.  3. CCIS prevents program staff from advancing through the eligibility process until all required documentation	<ol> <li>CCIS updates were completed in January 2013.</li> <li>This process is ongoing.</li> <li>CCIS updates were completed in January 2013.</li> </ol>

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Activities identified in ACF- 402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
		has been received and entered.	

#### 1.4. Consultation in the Development of the CCDF Plan

Lead Agencies are required to *consult* with appropriate agencies in the development of its CCDF Plan (§98.12, §98.14(a),(b), §98.16(d)).

**Definition**: Consultation involves the meeting with or otherwise obtaining input from an appropriate agency in the <u>development of the State or Territory CCDF Plan</u>. At a minimum, Lead Agencies must consult with representatives of general purpose local governments. (§§98.12(b), 98.14(a)(1))

## **1.4.1.** Identify and describe in the table below who the Lead Agency consulted with in the development of the CCDF Plan (658D(b)(2), §§98.12(b), 98.14(b)).

Age	ency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	Representatives of general purpose local government (required)  This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies.	MDHS DECCD consulted with representatives from the County Board of Supervisors, Cities, towns, and municipalities. Some examples are the City of Jackson, Hancock County Board of Supervisors and the City of Starkville to obtain input on the development of the Mississippi State Plan and other policies and procedures relating to child care. Coordination involves child care and early childhood development services, utilizing certified spending offered by local or county government, state agencies, and municipalities as match for CCDF funds.
For	the remaining agencies, check and describe (opti	
	chosen to consult with in the development of its (	
$\boxtimes$	State/Territory agency responsible for public	Representatives are members of

Agency/Entity		Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	education  This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education.	the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations.
	State/Territory agency responsible for programs for children with special needs  This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs	Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations.
$\boxtimes$	State/Territory agency responsible for licensing (if separate from the Lead Agency)	Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations.
	State/Territory agency with the Head Start Collaboration grant	Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations.
$\boxtimes$	Statewide Advisory Council authorized by the Head Start Act	All members of the Council were provided with the link to the draft State Plan in order to collect feedback and input on finalizing its development.
$\boxtimes$	Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services	Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations.
	State/Territory agency responsible for the Child and Adult Care Food Program (CACFP) State/Territory agency responsible for implementing	(The Lead Agency is the
	the Maternal and Early Childhood Home Visitation programs grant	recipient of these funds.)

Agency/Entity		Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health)	Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations.
$\boxtimes$	State/Territory agency responsible for child welfare	Copies of the draft were provided to the Director of MDHS Division of Family & Children's Services for comments and recommendations.
	State/Territory liaison for military child care programs or other military child care representatives	
	State/Territory agency responsible for employment services/workforce development	
$\boxtimes$	State/Territory agency responsible for Temporary Assistance for Needy Families (TANF)	Copies of the draft were provided to the Director of MDHS Division of Field Operations for comments and recommendations.
	Indian Tribes/Tribal Organizations  N/A: No such entities exist within the	
	boundaries of the State  Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide Afterschool Networks, Ready by 21	The State Administrator attended two meetings hosted by BUILD in which various policy initiatives were discussed.
	Provider groups, associations or labor organizations	Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations.
	Parent groups or organizations	
	Local community organizations and institutions(child care resource and referral, Red Cross)	Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations.
	Other	

## 1.4.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. $(658D(b)(1)(C), \S98.14(c))$

At a minimum, the description should include:

- a) Date(s) of notice of public hearing: <u>05/21/2013</u>

  <u>Reminder Must be at least 20 days prior to the date of the public hearing.</u>
- b) How was the public notified about the public hearing?

  The notice was placed on the Lead Agency's website on 05/21/2013. An email notice was sent to SECAC members on 05/22/2013. An ad ran in 12 newspapers across the state on 05/28/2013 and 06/04/2013
- c) Date(s) of public hearing(s): <u>06/17/2013</u>

  <u>Reminder Must be no earlier than 9 months before effective date of Plan (October 1, 2013).</u>
- d) Hearing site(s): <u>Mississippi Public Broadcasting</u>

<u>Auditorium</u> 3825 Ridgewood Road Jackson, MS 39211

- e) How was the content of the Plan made available to the public in advance of the public hearing(s)?
   A draft of the Plan was made available to all parties throught the Lead Agency's website.
- f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan?

  All comments received from the public will be compiled and reviewed by the State Administrator. Any comments that can support the strengthening of the Plan will be incorporated where possible.

## 1.4.3. Describe any strategies used by the Lead Agency to increase public consultation on the Plan or access to the public hearing.

For example, translating the public hearing notice into multiple languages, using a variety of sites or technology (e.g., video) for the public hearing, holding the hearing at times to accommodate parent and provider work schedules.

Based on the Lead Agency's experience with holding public hearings, those meetings held in the afternoon have produced the greatest turnout. The public hearing to collect comments from interested parties is scheduled from 1:00-4:00 PM in order to offer adequate time for response. The Lead Agency also solicited comments on the Plan from interested parties through email. This address was posted on the Lead Agency's website and in newspapers.

<u>In accordance with the Mississippi Secretary of State's Office, the Lead Agency will hold an additional hearing on the State Plan, as per usual filing procedures. At the time of Plan submission, this meeting is scheduled for September 23, 2013 from</u>

12:00 PM to 2:00 PM at the Hinds County Extension Service Office in Jackson, Mississippi.

### 1.5. Coordination Activities to Support the Implementation of CCDF Services

Lead Agencies are required to *coordinate* with other Federal, State, local, Tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)).

**Definition -** *Coordination* involves <u>child care and early childhood and</u> <u>school-age development services</u> efforts to work across multiple entities, both public and private (such as in connection with a State Early Childhood Comprehensive System (SECCS) grant or the State Advisory Council funded under the Head Start Act of 2007). (658D(b)(1)(D), §§98.12(a), 98.14(a)(1))

Note: Descriptions of <u>how governments are organized for each State</u> are provided at census.gov.

**1.5.1.** Identify and describe in the table below with whom the Lead Agency coordinates in the delivery of child care and early childhood and school-age services (§98.14(a)(1)).

ency/Entity eck all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination  Examples might include increased supply of full- day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
Representatives of general purpose local government  This may include, but is not limited to: representatives from counties and municipalities, local education representatives, or local public health agencies.	The Lead Agency is the recipient of the Maternal, Infant and Child Health home visiting funds. Through the implementation of this program, coordination with LEAs, county health departments, county DHS offices, local law enforcement and local government	The Lead Agency will coordinate with these entities to increase access to community resources such as TANF, SNAP, WIC, Medicaid, child care subsidy, CHiP, immunizations, child support, GED and alternative education options.

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Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination  Examples might include increased supply of full- day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
		imperative.	
$\boxtimes$	State/Territory agency responsible for public education ( <b>required</b> )  This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education;	The Lead Agency funds the Out-of-School Project which works with public and private school age care providers to offer mentoring and quality evaluation.	The Lead Agency's support of this program will result in increased support for and quality of existing school age care services.
$\boxtimes$	Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth- serving developmental services ( <b>required</b> )	Coordination will be achieved through the Lead Agency's participation in the Mississippi Department of Health's Expanding Opportunities Initiative.	Through participation, the Lead Agency is working to increase the number of quality inclusive learning environments for children with special needs.
$\boxtimes$	State/Territory agency responsible for public health ( <b>required</b> )  This may include, but is not limited to, the agency responsible for immunizations and programs that promote children's emotional and mental health	Coordination will be achieved through the previously mentioned home visiting program and the Lead Agency's funding of the MS Child Care Resource and Referral Network's (MSCCR&R) child care provider training surrounding healthy development.	The Lead Agency's goals, in addition to the previously mentioned goals related to the home visiting program are to provide support to care givers in healthy social and emotional development of young children.
$\boxtimes$	State/Territory agency responsible for	Coordination will	The Lead Agency

Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination  Examples might include increased supply of full- day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
	employment services / workforce development (required)	include the MSCCR&R's child care provider professional development registry, CDA mentoring and scholarship program, child care director's credentialing program and the Mississippi Longitudinal Data System.	expects to examine data across these programs to determine how assistance in workforce development can be provided.
	State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies( <b>required</b> )	Currently, the Lead Agency is coordinating with the MDHS Division of Field Operations (formerly Economic Assistance) on the development of a centralized application for child care subsidy and TANF. Additionally, the Lead Agency has created a data interface with TANF in order to receive referrals and terminations for subsidy on a daily basis.	The Lead Agency expects the use of a centralized application to decrease the enrollment period and allow for expedited service delivery. The Lead Agency has seen reduced wait time for new TANF client in receipt of subsidy services through this interface.
$\boxtimes$	Indian Tribes/Tribal Organizations (required)  N/A: No such entities exist within the boundaries of the State	Coordination is achieved by working with Tribal Organization representatives serving on the Mississippi Early Childhood Advisory Council.	The Lead Agency's goal is to ensure all populations' needs are represented through the work of the Council.

Agency/Entity (check all that apply)  For the remaining agencies, c		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	
	ivery	ordinate early childhood an	
	State/Territory agency with the Head Start Collaboration grant	The Lead Agency Coordinates with the Head Start Collaboration Office and the Mississippi Head Start Association.	The Lead Agency's goal is to create a crosswalk comparison of Head Start standards with licensing regulations to identify any differences. The Lead Agency believes this will allow for targeted training and technical assistance and increased participation of HS programs in QRIS.
	State/Territory agency responsible for Race to the Top – Early Learning Challenge (RTT-ELC)  N/A: State/Territory does not participate in RTT-ELC		
	State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)		
	State/Territory agency responsible for programs for children with special needs  This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act	The Lead Agency Coordinates with the Mississippi Department of Health, Part C Coordinator and funds the Project PREPARE program.	The Lead Agency's goal is to improve the number of and access to appropriate inclusive learning environments for children with special needs.

ency/Entity eck all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination  Examples might include increased supply of full- day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
(Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs State/Territory agency responsible for	(The Lead Agency is the recipient of these	
implementing the Maternal and Early Childhood Home Visitation programs grant	funds.)	
State/Territory agency responsible for child welfare	The Lead Agency Coordinates with the MDHS Division of Child and Family Services	The Lead Agency's goal is to provide subsidy to all children in protective and preventive care and foster children.
State/Territory liaison for military child care programs or other military child care representatives		
Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide Afterschool Networks, Ready by 21		
Local community organizations (child care resource and referral, Red Cross)		
Provider groups, associations or labor organizations Parent groups or		
organizations Other		

## **1.5.2.** Does the State/Territory have a formal early childhood and/or school-age coordination plan?

Lead Agencies are not required to have an early childhood nor a school-age coordination plan, but the State/Territory may have such plans for other purposes, including fulfilling requirements of other programs.
<ul> <li>Yes. If yes,</li> <li>a) Provide the name of the entity responsible for the coordination plan(s):</li> <li>b) Describe the age groups addressed by the plan(s):</li> </ul>
c) Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):  Yes No
d) Provide a web address for the plan(s), if available: ⊠ No
1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs? (658D(b)(1)(D), §98.14(a)(1)) Check which entity(ies), if any, the State/Territory has chosen to designate.
☐ State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.  If yes, describe entity, age groups and the role of the Lead Agency
State Advisory Council (as described under the Head Start Act of 2007). If yes, describe entity, age groups and the role of the Lead Agency
In 2008, Governor Haley Barbour established the State Early Childhood Advisory Council of Mississippi to develop a strategic plan to coordinate efforts, programs, and resources supporting children birth to five years and to identify opportunities for and barriers to collaboration and coordination among programs and agencies.
The State Child Care Administrator was appointed by former Governor Barbour to serve on this Council. The State Child Care Administrator's appointment was renewed by Governor Phil Bryant, the state's current governor.
☐ Local Coordination/Council If yes, describe entity, age groups and the role of the Lead Agency
Other.  Describe
∐None

## 1.5.4. Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private sector involvement in meeting child care needs? (§98.16(d))

Yes. If yes, **describe** these activities or planned activities, including the tangible results expected from the public-private partnership The Lead Agency plans to continue its non-competitive Child Care Partnership Program. The Child Care Partnership Program is a special initiative developed by DECCD to encourage partnerships in addressing employee/community child care needs. This is a federal matching grant program to encourage local commitment to child care through community-generated financial resources that can be matched with federal funds. Applicants eligible for consideration for a direct subgrant include local or county government, state agencies and municipalities, industries, consortiums and foundations. Some examples of current partnerships include:

- <u>City of Jackson public/public partnerships</u>
- City of Starkville has a public/private partnership
- Hancock County Human Resources Agency public/public partnership
- Hinds Community College public/public partnership
- <u>City of Vicksburg has a public/private partnership</u>

<b>These</b>	programs served 736 children last year and projections indicate service
to the	same number for the upcoming year.
	No.

#### 1.6. Child Care Emergency Preparedness and Response Plan

It is recommended, but not required, that each Lead Agency develop a plan to address preparedness, response, and recovery efforts specific to child care services and programs. Plans should cover the following areas: 1) planning for continuation of services to CCDF families; 2) coordination with other State/Territory agencies and key partners; 3) emergency preparedness regulatory requirements for child care providers; 4) provision of temporary child care services after a disaster; and 5) rebuilding child care after a disaster. For further guidance on developing Child Care Emergency Preparedness and Response Plans see the Information Memorandum (CCDF-ACF-IM-2011-01) located on the Office of Child Care website.

## **1.6.1.** Indicate which of the following best describes the current status of your efforts in this area. <u>Check only ONE</u>.

Planning. Indicate whether steps are under way to develop a plan. If so,
describe the time frames for completion and/or implementation, the steps
anticipated and how the plan will be coordinated with other emergency
planning efforts within the State/Territory.

	<b>Developed.</b> A plan has been developed as of 03/01/2009 and put into operation as of 03/01/2009, if available. Provide a web address for this plan, if available: <a href="https://www.mdhs.state.ms.us/eccd">www.mdhs.state.ms.us/eccd</a> providers1
	Other. Describe:
Memorai emergen	licate which of the core elements identified in the Information and are or will be covered in the Lead Agency child care cy preparedness and response plan.
	ch elements, if any, the Lead Agency includes in the plan.
	Planning for continuation of services to CCDF families
	Coordination with other State/Territory agencies and key partners
<b>⊠</b> ]	Emergency preparedness regulatory requirements for child care providers
∑ ]	Provision of temporary child care services after a disaster
]	Restoring or rebuilding child care facilities and infrastructure after a
	disaster
	None

#### PART 2

#### CCDF SUBSIDY PROGRAM ADMINISTRATION

This section focuses on the child care assistance program. Lead Agencies are asked to describe their efforts to inform parents about the CCDF subsidy program and application policies and procedures, eligibility criteria, sliding fee scale, payment rate policies and procedures, and how Lead Agencies ensure continuity of care and parental choice of high quality settings for families.

#### 2.1. Administration of the Program

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b), §98.11(a))

2.1.1. Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?

Identify the level at which the following CCDF program rules and policies are established.

⊠ Eligibility rules and policies (e.g., income limits) are set by the:
State/Territory
Local entity. If checked, identify the type of policies the local
entity(ies) can set
Other. Describe:
⊠ Sliding fee scale is set by the:
⊠ State/Territory
Local entity. If checked, identify the type of policies the local
entity(ies) can set
Other. Describe:
Payment rates are set by the:
State/Territory
Local entity. If checked, identify the type of policies the local
entity(ies) can set
Other. Describe:
How is the CCDF program operated in your State/Territory?

Implementation of CCDF
Services/Activities

Who determines eligibility?

| CCDF Lead Agency | TANF agency | Other State/Territory agency. Describe. | Local government agencies such as county welfare

In the table below, identify which agency(ies) performs these CCDF services and

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2.1.2.

activities.

Implementation of CCDF	Agency (Check all that apply)
Services/Activities	
<b>Note:</b> If different for families receiving	or social services departments
TANF benefits and families not receiving	☐ Child care resource and referral agencies
TANF benefits, please describe:	Community-based organizations
	Other. Describe
Who assists parents in locating child	CCDF Lead Agency
care (consumer education)?	☐ TANF agency
	Other State/Territory agency. Describe.
	The Mississippi Department of Health, Division of
	<u>Child Care Licensure</u>
	Local government agencies such as county welfare
	or social services departments
	Child care resource and referral agencies
	Community-based organizations
	Other. Describe
Who issues payments?	CCDF Lead Agency
	☐ TANF agency
	Other State/Territory agency. Describe
	Local government agencies such as county welfare
	or social services departments
	Child care resource and referral agencies
	Community-based organizations
	Other. Describe. The Lead Agency contracts with
	Xerox for electronic child care attendance systems.
	Based on attendance recorded by the MS eChildcare
	system, the Lead Agency approves payment that is
	issued by direct deposit to providers from Xerox.
Describe to whom is the payment	
issued (e.g., parent or provider) and	Payments are issued by direct deposit to providers
how are payments distributed (e.g.,	twice monthly.
electronically, cash, etc)	·
Other. List and describe:	
2.2. Family Outreach and Applic	ation Process
z.z. ranny outreach and applic	utivii i i vector

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a)-(e). **Note -** For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

**2.2.1.** By whom and how are parents informed of the availability of child care assistance services under CCDF?  $(658E(c)(2)(A), \S98.30(a))$ 

Check all agencies and strategies that will be used in your State/Territory.

$\times$	CCDF Lead Agency
$\times$	TANF offices
	Other government offices
$\times$	Child care resource and referral agencies
	] Contractors
	Community-based organizations
	Public schools

☐ Internet (provide website): <u>www.childcareinfo.ms</u>
□ Promotional materials
☐ Community outreach meetings, workshops or other in-person meetings
Radio and/or television
□ Print media
Other. Describe:
2.2.2. How can parents apply for CCDF services?
Check all application methods that your State/Territory has chosen to implement.
In person interview or orientation
By mail     ■
⊠ By mail ⊠ By Phone/Fax
By Phone/Fax
By Phone/Fax Through the Internet (provide website)
<ul> <li>☑ By Phone/Fax</li> <li>☐ Through the Internet (provide website)</li> <li>☑ By Email</li> </ul>
<ul> <li>☑ By Phone/Fax</li> <li>☐ Through the Internet (provide website)</li> <li>☑ By Email</li> <li>☐ Through a State/Territory Agency</li> </ul>

# 2.2.3. Describe how the Lead Agency provides consumer education to parents applying for CCDF assistance to promote informed choices. about the quality of care provided by various providers in their communities.

Lead Agencies must certify that the State/Territory will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices(658E (c)(2)(G), §98.33).

For example, memorandums of understanding with resource and referral agencies to provide consumer education to families applying for CCDF assistance, providing parents with provider lists showing licensing history and/or Quality Rating and Improvement System (QRIS) ratings, or informational brochures that address importance of quality and different care options available.

The Lead Agency provides informational brochures that demonstrate high quality child care. In addition, the Lead Agency funds the MSCCR&R which provides parent education and referral services for selecting child care options. The Lead Agency provides parents a way to search for providers on their website. This information display's a provider's quality rating.

## 2.2.4. Describe how the Lead Agency will support child care programs to increase the likelihood that CCDF-served children receive higher quality care as defined in your State/Territory.

For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to participate in the subsidy program such as tiered reimbursement, or incentives used to support high quality programs in rural, suburban, urban, and low-income communities.

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The Lead Agency works to increase the likelihood that children receiving child care subsidies have access to higher quality care by providing quality bonuses for every child receiving subsidy to child care providers participating in the Mississippi Child Care Quality Step System (QRIS). The QRIS is a five star system providing 7% (two star), 17% (three star), 22% (four star) and 25% (five star) increases in total monthly subsidies. In an effort to support the provider's success in the QRIS, the Lead Agency conducts an annual Child Care Facility Needs Assessment and responds with resources, identified by providers and designed to increase star ratings. In addition, the Lead Agency funds professional development and training and technical assistance programs at no cost to participants.

**2.2.5. Describe how the Lead Agency promotes access to the CCDF subsidy program?** Check the strategies implemented by your State/Territory.

□ Provide access to program office/workers such as:
☐ Providing extended office hours
☐ Accepting applications at multiple office locations
□ Providing a toll-free number for clients
Other. Describe:
$\boxtimes$ Using a simplified eligibility determination process such as:
Simplifying the application form (such as eliminating unnecessary
questions, lowering the reading level)
Developing a single application for multiple programs
Developing web-based and/or phone-based application procedures
Coordinating eligibility policies across programs. List the program
<u>names</u>
Streamlining verification procedures, such as linking to other
<u>pr</u> ogram data systems
Providing information multi-lingually
☐ Including temporary periods of unemployment in eligibility criteria
(job search, seasonal unemployment). Length of time <u>60 days</u> (Note:
this period of unemployment should be included in the Lead Agency's
definition of working, or job training/educational program at 2.3.3).
Other. Describe:
Other. Describe:
None
2.2.6. Describe the Lead Agency's policies to promote continuity of care
for children and stability for families.
Check the strategies, if any, that your State/Territory has chosen to implement.
Provide CCDF assistance during periods of job search. Length of time 60
days
Establish two-tiered income eligibility to allow families to continue to
receive child care subsidies if they experience an increase in income but
still remain below 85% of State median income (SMI)
Synchronize review date across programs. List programs:
Synchronize review date across programs. List programs

periods are one year in length for working parents.	ty
Extend periods of eligibility for families who are also enrolled in either	
Early Head Start or Head Start and pre-k programs. Describe	
Extend periods of eligibility for school-age children under age 13 to cover	
the school year. Describe	
☐ Minimize reporting requirements for changes in family's circumstances	
that do not impact families' eligibility, such as changes in income below a	
certain threshold or change in employment	
☐ Individualized case management to help families find and keep stable chi	ld
care arrangements. Describe	
☐ Using non-CCDF Funds to continue subsidy for families who no longer	
meet eligibility, such as for children who turn 13 years of age during the	
middle of a program year	
Other. Describe	
.2.7. How will the Lead Agency provide outreach and services to eligible	e
amilies with limited English proficiency?	
heck the strategies, if any, that your State/Territory has chosen to implement.	
☐ Application in other languages (application document, brochures, provide	er
notices)	<b>J1</b>
☐ Informational materials in non-English languages	
Training and technical assistance in non-English languages	
Website in non-English languages	
Lead Agency accepts applications at local community-based locations	
<ul><li>Lead Agency accepts applications at local community-based locations</li><li>Bilingual caseworkers or translators available</li></ul>	
<ul> <li>Lead Agency accepts applications at local community-based locations</li> <li>Bilingual caseworkers or translators available</li> <li>Outreach Worker</li> </ul>	
☐ Lead Agency accepts applications at local community-based locations ☐ Bilingual caseworkers or translators available ☐ Outreach Worker ☑ Other:	
<ul> <li>☐ Lead Agency accepts applications at local community-based locations</li> <li>☐ Bilingual caseworkers or translators available</li> <li>☐ Outreach Worker</li> <li>☐ Other:</li> <li>The Lead Agency has requested translation assistance from an internal</li> </ul>	<b>).</b>
<ul> <li>□ Lead Agency accepts applications at local community-based locations</li> <li>□ Bilingual caseworkers or translators available</li> <li>□ Outreach Worker</li> <li>☑ Other:</li> <li>The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time</li> </ul>	<u>).</u>
<ul> <li>□ Lead Agency accepts applications at local community-based locations</li> <li>□ Bilingual caseworkers or translators available</li> <li>□ Outreach Worker</li> <li>☑ Other:</li> <li>The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time Additionally, the Lead Agency has developed brochures for non-English</li> </ul>	<u> </u>
<ul> <li>□ Lead Agency accepts applications at local community-based locations</li> <li>□ Bilingual caseworkers or translators available</li> <li>□ Outreach Worker</li> <li>☑ Other:</li> <li>The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time Additionally, the Lead Agency has developed brochures for non-English and low-literacy individuals to assist them with identifying quality child</li> </ul>	<u>).</u>
<ul> <li>□ Lead Agency accepts applications at local community-based locations</li> <li>□ Bilingual caseworkers or translators available</li> <li>□ Outreach Worker</li> <li>☑ Other:</li> <li>The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time Additionally, the Lead Agency has developed brochures for non-English and low-literacy individuals to assist them with identifying quality child care environments. These can be viewed at:</li> </ul>	<u>&gt;-</u>
<ul> <li>□ Lead Agency accepts applications at local community-based locations</li> <li>□ Bilingual caseworkers or translators available</li> <li>□ Outreach Worker</li> <li>☑ Other:</li> <li>The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time Additionally, the Lead Agency has developed brochures for non-English and low-literacy individuals to assist them with identifying quality child care environments. These can be viewed at:</li> <li>http://www.mdhs.state.ms.us/pdfs/eccd_oto2yrs_brochure.pdf</li> </ul>	<u>&gt;</u>
<ul> <li>□ Lead Agency accepts applications at local community-based locations</li> <li>□ Bilingual caseworkers or translators available</li> <li>□ Outreach Worker</li> <li>☑ Other:</li> <li>The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time Additionally, the Lead Agency has developed brochures for non-English and low-literacy individuals to assist them with identifying quality child care environments. These can be viewed at:</li> </ul>	<u>)</u>
□ Lead Agency accepts applications at local community-based locations □ Bilingual caseworkers or translators available □ Outreach Worker □ Other:  The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time Additionally, the Lead Agency has developed brochures for non-English and low-literacy individuals to assist them with identifying quality child care environments. These can be viewed at:  http://www.mdhs.state.ms.us/pdfs/eccd_oto2yrs_brochure.pdf http://www.mdhs.state.ms.us/pdfs/eccd_3to5yrs_brochure.pdf	<u>3</u>
□ Lead Agency accepts applications at local community-based locations □ Bilingual caseworkers or translators available □ Outreach Worker □ Other:  The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time Additionally, the Lead Agency has developed brochures for non-English and low-literacy individuals to assist them with identifying quality child care environments. These can be viewed at:  http://www.mdhs.state.ms.us/pdfs/eccd_oto2yrs_brochure.pdf http://www.mdhs.state.ms.us/pdfs/eccd_3to5yrs_brochure.pdf □ None  If the Lead Agency checked any option above related to providing	
□ Lead Agency accepts applications at local community-based locations □ Bilingual caseworkers or translators available □ Outreach Worker □ Other:  The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time Additionally, the Lead Agency has developed brochures for non-English and low-literacy individuals to assist them with identifying quality child care environments. These can be viewed at:  http://www.mdhs.state.ms.us/pdfs/eccd_oto2yrs_brochure.pdf http://www.mdhs.state.ms.us/pdfs/eccd_3to5yrs_brochure.pdf None  If the Lead Agency checked any option above related to providing information or services in other non-English languages, please lise	
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Training and technical assistance in non-English languages
CCDF health and safety requirements in non-English languages
Provider contracts or agreements in non-English languages
Bilingual caseworkers or translators available
Collect information to evaluate on-going need, recruit, or train a culturally
or linguistically diverse workforce
Other:
None
If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered
The Lead Agency has some information available in Vietnamese and Spanish
Addition materials such as Provider Agreements and website information are
currently being translated into Spanish.
2.2.9. Describe how the Lead Agency documents and verifies applicant
information using the table below. (§98.20(a))
Check the strategies that will be implemented by your State/Territory. <b>Attach</b> a
copy of your parent application for the child care subsidy program(s) as
<b>Attachment 2.2.9</b> or provide a web address, if available

**Reminder** – Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, <u>only the citizenship and immigration status of the child</u>, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes. (ACYF-PI-CC-98-08) States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing *in loco parentis*, or other household members have not provided information regarding their immigration status.

The Lead Agency requires documentation of:	Describe how the Lead Agency documents and verifies applicant information:
Applicant identity	Current driver's license or state issued ID, birth certificate
☐ Household composition	
Applicant's relationship to the child	Birth certificate, open child support case
☐ Child's information for determining eligibility (e.g., identity, age, etc.)	Birth certificate
Work, Job Training or Educational Program	Employment: check stubs, or letter from employer if newly hired or paid in cash Education: verification of full-time enrollment from educational institution.
⊠ Income	Pay check stubs, and verification of receipt of other income such as child support.
Other. Describe Child Support	Verification from the MDHS, Division of Child

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The Lead Agency requires	Describe how the Lead Agency documents		
documentation of:	and verifies applicant information:		
	Support Enforcement that client is		
	cooperating.		
2.2.10. Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?			
☐ Time limit for making eligi	bility determinations. Describe length of time		
☐ Track and monitor the eligil☐ Other. Describe☐ None	bility determination process		
<b>2.2.11.</b> Are the policies, strategies or processes provided in questions <b>2.2.1.</b> through <b>2.2.10</b> different for families receiving TANF? $(658E(c)(2)(H) \& (3)(D), \S\S98.16(g)(4), 98.33(b), 98.50(e))$			
Yes. If yes, describe: No.			
2.2.12. Informing parents who receive TANF benefits about the exception			

## to the individual penalties associated with the TANF work requirement

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE**: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a) Identify the TANF agency that established these criteria or definitions: State/Territory TANF Agency Mississippi Department of Human Services, Division of Field Operations.

b) Provide the following definitions established by the TANF agency. "appropriate child care":

Appropriate child care is defined as a licensed child care center or a family day care (home or an individual) chosen by the parent/caretaker relative to care for the child. The child care provider must be 18 years old or older.

"reasonable distance":

Appropriate child care must be within a reasonable distance (within a 20-mile radius) of the parent/caretaker relative's home or worksite.

"unsuitability of informal child care":

Unavailable or unsuitable child care shall be defined as a situation involving child abuse, neglect or an unsafe environment. If the parent/caretaker relative refuses to take the child to a particular day care center, he/she must inform the case manager of the reason for the refusal. The case manager must investigate to verify and substantiate the parent's claim of unsuitable child care. Complaints involving child abuse, neglect or an unsafe environment will be reported to the MS State Health Department, Division of Child Care Facilities Licensure. The case manager must contact the Office of Children and Youth's Designated Agent (now the Division of Early Childhood Care and Development) to discuss the problem and determine what other child care services are available in the area. The case manager will determine good cause for non-participation based on the investigation and information gathered.

"affordable child care arrangements":

Affordable formal child care is child care that is equal to or less than the established rates for the type of care according to the OCY Child Care Policy Manual (now Mississippi Child Care Payment Program Policy Manual).

c) How are parents who receive TANF benefits	informed about the exception
to individual penalties associated with the TAN	IF work requirements?

X	In writing	
$\boxtimes$	Verbally	
	Other:	

#### 2.3. Eligibility Criteria for Child Care

In order to be eligible for services, children must (1) be under the age of 13, or under the age of 19 if the child is physically or mentally disabled or under court supervision; (2) reside with a family whose income is less than 85 percent of the State's median income for a family of the same size; and (3) reside with a parent or parents who is working or attending job training or an educational program; or (4) be receiving or needs to receive protective services. (658P(3), §98.20(a))

#### 2.3.1. How does the Lead Agency define the following eligibility terms?

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- residing with <u>living with</u>, including taking meals and sleeping in the same house.
- in loco parentis in place of parent, for example, a guardian or a relative or friend with whom the child resides if the child's parent is unable to act as the parent or has delegated his or her authority to someone else. The term describes someone who provides care and supervision like a parent but without going through the formalities of legal adoption or guardianship.

#### 2.3.2. Eligibility Criteria Based Upon Age

- a) The Lead Agency serves children from <u>six</u> weeks to <u>12</u> years <u>11 mo.</u> (may not equal or exceed age 13).
- b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care? (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

$\times$ Yes, and the upper age is <u>18 years</u> , <u>11 mo</u> . (may not equal or exceed age 19).
Provide the Lead Agency definition of <i>physical or mental incapacity</i> – <u>a child under</u>
age 19 who meets the SSI definition of disability by having medically proven physical
or mental condition(s) that cause marked and severe functional limitations expected
to last at least 12 months in duration.
$\square$ No.
c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))
Yes, and the upper age is (may not equal or exceed age 19) No.

## 2.3.3. Eligibility Criteria Based Upon Work, Job Training or Educational Program

a) How does the Lead Agency define "working" for the purposes of eligibility? Provide a narrative description below, including allowable activities and if a minimum number of hours is required.

**Reminder** – Lead Agencies have the flexibility to include any work-related activities in its definition of working including periods of job search and travel time. (§§98.16(f)(3), 98.20(b))

working – Performing duties to earn a wage (for a minimum of 25 hours per week) or complete educational/job training such as practicums or internships (must be enrolled full time). Out of work parents, or parents who lose their job are allowed 60 days of job search time during which they are eligible for services.

	e Lead Agency provide CCDF child care assistance to parents who ing job training or an educational program? (§§98.16(g)(5),
⊠ Yes.	If yes, how does the Lead Agency define "attending job training or educational program" for the purposes of eligibility? Provide a narrative description below.
	<b>Reminder</b> – Lead Agencies have the flexibility to include any training or education-related activities in its definition of job training or education, including study time and travel time.
	attending job training or educational program — Full time enrollment of any applicant in an education and/or training program resulting in any degree, diploma, or certificate designed to promote job skills and employability. Full time status is determined by the educational institution.
☐ No.	
2.3.4. Eligibilit Protective Serv	y Criteria Based Upon Receiving or Needing to Receive vices
	e Lead Agency provide child care to children in protective services? (7), 98.20(a)(3)(ii)(A) & (B))
	Yes. If yes, how does the Lead Agency define "protective services" for the purposes of eligibility? Provide a narrative description below.
	<b>Reminder</b> – Lead Agencies have the flexibility to define protective services beyond formal child welfare or foster care cases. Lead Agencies may elect to include homeless children and other vulnerable populations in the definition of protective services.
	<ul> <li>Note – If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities for CCDF purposes these children are considered to be in protective services and should be included in this definition.</li> <li>protective services – Services provided to families in which abuse or neglect or children has occurred and a finding of substantiated abuse or neglect has been determined. The purpose of service provision is to protect children within the context of the family from further abuse or neglect.</li> </ul>
	No.

	b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))
	<ul><li>Yes.</li><li>No.</li></ul>
2.3.5.	Income Eligibility Criteria
	a) How does the Lead Agency define "income" for the purposes of eligibility? Provide the Lead Agency's definition of "income" for purposes of eligibility determination. (§§98.16(g)(5), 98.20(b))
	income – funds received by all applicable individuals as described in policy which are not supplemented by any public assistance other than food stamps or medical assistance, and does not exceed 85 percent of the State Median Income (SMI).
	b) Which of the following sources of income, if any, will the Lead Agency exclude or deduct from calculations of total family income for the purposes of eligibility determination? Check any income the Lead Agency chooses to exclude or deduct, if any.
	<ul> <li>Adoption subsidies</li> <li>Foster care payments</li> <li>Alimony received or paid</li> <li>Child support received</li> <li>Child support paid</li> <li>Federal nutrition programs</li> <li>Federal tax credits</li> <li>State/Territory tax credits</li> <li>Housing allotments, Low-Income Energy Assistance Program (LIHEAP) or energy assistance</li> <li>Medical expenses or health insurance related expenses</li> <li>Military housing or other allotment/bonuses</li> <li>Scholarships, education loans, grants, income from work study</li> <li>Social Security Income</li> <li>Supplemental Security Income (SSI)</li> <li>Veteran's benefits</li> <li>Unemployment Insurance</li> <li>Temporary Assistance for Needy Families (TANF)</li> <li>Worker Compensation</li> <li>Other types of income not listed above</li> <li>None</li> </ul>
	c) Whose income will be excluded, if any, for purposes of eligibility determination? Check anyone the Lead Agency chooses to exclude, if any.

	Children under age 18
	Children age 18 and over – still attending school
X	Teen parents
	Unrelated members of household
X	All members of household except for parents/legal guardians
X	Other Any parent/guardian who is over the age of 65.
	None

d) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

Family	(a) 100% of State Median Income (SMI)	e Median   85% of State Median		PPLICABLE evel if lower than 85% SMI
Size	(\$/month)	(\$/month) [Multiply (a) by 0.85]	(c) \$/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1		0		
2	3745	2333		
3	3431	2916		
4	4020	3417		
5	4706	4000		

**Reminder** - Income limits must be provided in terms of State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. (§98.20(a)(2)). FY 2013 poverty guidelines are available at hhs.gov.

e) Will the Lead Agency have "tiered eligibility" (i.e., a separat	e income limit
at re-determination to remain eligible for the CCDF program)	?

Yes	. If yes, <b>provide</b> the requested information from the table in
	2.3.5d and <b>describe</b>
	Note: This information can be included in a separate table, or
	by placing a "/" between the entry and exit levels in the above
	table.
N 3.7	

 $\square$  No.

- f) SMI Year 2004 and SMI Source <u>U.S. Census Bureau</u>
- g) These eligibility limits in column (c) became or will become effective on: October 2004

#### 2.3.6. Eligibility Re-determination

a)	Does the State/Territory follow OCC's 12 month re-determination recommendation? (See <a href="Program Instruction on Continuity of Care">Program Instruction on Continuity of Care</a> .) <a href="Yes">Yes</a> <a href="Instruction">Instruction on Continuity of Care</a> .) <a href="Instruction">Instruction on Continuity on Care</a> .) <a href="Instruction">Instruction on Continuity on Care</a> .) <a href="Instruction">Instruction on Continuity on Care</a> .)
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Memorandum on Continuity of Care for examples). The Lead Agency has adopted the following family-friendly policies to support continuity of care:

- o <u>12 month eligibility period</u>
- Any out of work parent has 60 days to engage in job search activities before losing eligibility. During that time, parent co-payments are reduced to the lowest allowable amount.
- o Income is averaged over the last two check stubs to obtain an average income. Overtime pay and bonus payments are considered irregular income and are also averaged to obtain an accurate income.
- Children with court-ordered visitation are flagged in CCIS and remain eligible during visitation periods, even extended visitation periods.
- o <u>The Lead Agency pays licensed providers for 15 child</u> <u>absences during the program year.</u>

f) Does the I	Lead Agency use a simplified process at re-determination?  Yes. If yes, describe No.
2.3.7. Waiting Li	sts
<b>Describe th</b> options.	ne Lead Agency's waiting list status. Select ONE of these
∑ Le	ad Agency currently does not have a waiting list and:  All eligible families who apply will be served under State/Territory eligibility rules  Not all eligible families who apply will be served under State/Territory eligibility rules ad Agency has an active waiting list for:  Any eligible family who applies when they cannot be served at the time of application  Only certain eligible families. Describe those families:  atting lists are a county/local decision. Describe  her. Describe

#### 2.3.8. Appeal Process for Eligibility Determinations

Describe the process for families to appeal eligibility determinations

<u>Families</u> who wish to have their eligibility determination reviewed, must contact the <u>Lead Agency. Upon receipt of request for review, the Lead Agency reviews family</u> information and responds with a final determination.

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#### 2.4. Sliding Fee Scale and Family Contribution

The statute and regulations require Lead Agencies to establish a sliding fee scale that varies based on <u>income and the size of the family</u> to be used in determining each family's contribution (i.e., co-payment) to the cost of child care (658E(c)(3)(B) §98.42).

2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1.
Will the attached sliding fee scale be used in <u>all</u> parts of the State/Territory?
<ul> <li>✓ Yes. Effective Date October 2004</li> <li>✓ No. If no, attach other sliding fee scales and their effective date(s) as Attachment 2.4.1a, 2.4.1b, etc.</li> </ul>
2.4.2. What income source and year will be used in creating the sliding fee scale? $(658E(c)(3)(B))$ Check only one option.
<ul> <li>State Median Income, Year: 2004</li> <li>☐ Federal Poverty Level, Year:</li> <li>☐ Income source and year varies by geographic region. Describe income source and year:</li> <li>☐ Other. Describe income source and year:</li> </ul>
2.4.3. How will the family's contribution be calculated and to whom will it be applied? Check all that the Lead Agency has chosen to use. (§98.42(b))
☐ Fee is a dollar amount and ☐ Fee is per child with the same fee for each child ☐ Fee is per child and discounted fee for two or more children ☐ Fee is per child up to a maximum per family ☐ No additional fee charged after certain number of children ☐ Fee is per family ☐ Fee is a percent of income and ☐ Fee is per child with the same percentage applied for each child ☐ Fee is per child and discounted percentage applied for two or more children ☐ No additional percentage applied charged after certain number of children ☐ Fee is per family ☐ Contribution schedule varies by geographic area. Describe: ☐ Other. Describe Referred clients identified as TCC, Foster/Protective Service, and Healthy Homes Mississippi are assessed a \$10 monthly co-payment which is applied to the family.
If the Lead Agency checked more than one of the options above, describe

family size	the Lead Agency use other factors in addition to income and to determine each family's contribution to the cost of child E(c)(3)(B), §98.42(b))
	Yes, and describe those additional factors: <u>Clients who are referred for service by TANF, DFCS, and HHM receive a zero (TANF) or reduced co-payment amount (DFCS &amp; HHM).</u>
	No.
incomes at (§98.42(c)).	Lead Agency may waive contributions from families whose re at or below the poverty level for a family of the same size.  of these options.
only two circ	<ul> <li>Lead Agencies are reminded that the co-payments may be waived for cumstances - for families at or below the poverty level or on a case-by- r children falling under the definition of "protective services" (as defined</li> </ul>
	ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.  NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee. The poverty level used by the Lead Agency for a family of 3 is: \$
	SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The Lead Agency waives the fee for the following families: Clients participating in an approved TANF activity.
<b>2.5.</b> Priorit	tizing Services for Eligible Children and Families
to children v CCDF assista establishmen served). Lead payment rate	m, CCDF requires Lead Agencies to give priority for child care assistance with special needs, or in families with very low incomes. Prioritization of ance services is not limited to eligibility determination (i.e., at of a waiting list or ranking of eligible families in priority order to be d Agencies may fulfill priority requirements in other ways such as higher es for providers caring for children with special needs or waiving corfamilies with very low incomes (at or below the federal poverty level).

# **2.5.1.** How will the Lead Agency prioritize child care services to children with special needs or in families with very low incomes? (658E(c)(3)(B), §98.44)

Lead Agencies have the discretion to define *children with special needs* and *children in families with very low incomes*. Lead Agencies are not limited in defining *children with special needs* to only those children with physical or mental disabilities (e.g., with a formal Individual Education Plan (IEP) required under the Individuals

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(658E(c)(3)(B), §98.44)

with Disabilities Education Act (IDEA)). Lead Agencies could consider children in the child welfare system, children of teen parents, or homeless children as examples of *children with special needs*.

How will the Lead Agency prioritize CCDF services for:	Eligibility Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules
Provide the Lead Agency definition of Children with Special Needs Special Needs rates may be applied for children through the age of 18 who meet the SSI definition of disability by having medically proven physical or mental condition(s) that cause marked and severe functional limitations expected to last at least 12 months in duration and render the child(ren) incapable of self- care. The condition(s) must be documented by a physician. In the absence of SSI benefits, medical documentation should attest to the degree of functional limitation(s) and prescribe the special care needed.	□ Priority     over other     CCDF-eligible     families     □ Same     priority as     other CCDF- eligible     families     □     Guaranteed     subsidy     eligibility     □ Other.     Describe     □	Yes. The time limit is:	□ Different eligibility thresholds. Describe □ □ Higher rates for providers caring for children with special needs requiring additional care □ Prioritizes quality funds for providers serving these children □ Other. Describe □
Children in families with very low incomes  Provide the Lead Agency definition of Children in Families with Very Low Incomes Income at or below the 50 percent of the State Median Income (SMI).	□ Priority     over other     CCDF-eligible     families     □ Same     priority as     other CCDF- eligible     families     □     Guaranteed     subsidy     eligibility     □ Other.     Describe     □	☐ Yes. The time limit is:	☐ Different eligibility thresholds. Describe

2.5.2. How will CCDF funds be used to provide child care assistance to meet the needs of families receiving Temporary Assistance for Needy

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Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF? (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4)) **Reminder** - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF. Use priority rules to meet the needs of TANF families (describe in 2.5.1 or Waive fees (co-payments) for some or all TANF families who are below poverty level Coordinate with other entities (i.e. TANF office, other State/Territory agencies, and contractors) Other: 2.5.3. List and define any other eligibility conditions, priority rules and definitions that will be established by the Lead Agency. (658E(c)(3)(B), §98.16(g)(5), §98.20(b)) **Reminder** – Lead Agencies are reminded that any eligibility criteria and terms provided below must comply with the eligibility requirements of §98.20 and provided in section 2.2. Any priority rules provided must comply with the priority requirements of §98.44 and provided in section 2.4.1. Term(s) **Definition(s)** 2.6. Parental Choice In Relation to Certificates, Grants or Contracts The parent(s) of each eligible child who receives or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A), §98.15(a)). 2.6.1. Child Care Certificates a) When is the child care certificate (also referred to as youcher or authorization) issued to parents? (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2)) Before parent has selected a provider After parent has selected a provider Other, Describe

All referred clients are supported in selecting an approved provider at the time of referral. This supports the Lead Agency in providing the

fastest service possible for the state's most vulnerable populations. Non-referred clients who are determined eligible are mailed a certificate and asked to return it with provider information.

b) How does the Lead Agency inform parents that the child care certificate permits them to choose from a variety of child care categories, including child care centers, child care group homes, family child care homes, and in-home providers? (§98.30(e)(2))  Certificate form provides information about choice of providers  Certificate is not linked to a specific provider so parents can choose provider of choice  Consumer education materials (flyers, forms, brochures)  Referral to child care resource and referral agencies  Verbal communication at the time of application  Public Services Announcement  Agency Website: <a href="www.childcareinfo.ms">www.childcareinfo.ms</a> Community outreach meetings, workshops, other in person activities  Multiple points of communication throughout the eligibility and renew process  Other. Describe
c) What information is included on the child care certificate? <b>Attach a copy of the child care certificate as Attachment 2.6.1.</b> (658E(c)(2)(A)(iii))
<ul> <li>Authorized provider(s)</li> <li>Authorized payment rate(s)</li> <li>Authorized hours</li> <li>Co-payment amount</li> <li>Authorization period</li> <li>Other. Describe Parent and child identifying information. See attachment.</li> </ul>
d) What is the estimated proportion of services that will be available for child care services through certificates?
Approximately 75% of subsidy funds are dispersed through certificates.

#### 2.6.2. Child Care Services Available through Grants or Contracts

Remaining subsidy funds are dispersed through slots.

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b)). **Note**: Do not check "yes" if every provider is simply required to sign an agreement in order to be paid in the certificate program.

Yes. If yes, <b>describe</b> the type(s) of child care services available			
through grants or contracts, the process for accessing grants or			
contracts, and the range of providers that will be available through			
grants or contracts: The Lead Agency has non-competitive subgrants			
with various entities to provide child care slots to children and families.			
These subgrants are administered by the City of Jackson, City of			
Starkville, City of Vicksburg, Hancock County Human Resources			
Agency, Hinds Community College, (Sanderson Farms, Inc., - Business			
Sponsored), Midtown Partners and the United Way of the Capital Area.			
No. If no, skip to 2.6.3.			
b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following? Check the strategies, if any, that your State/Territory chooses to implement.			
☐ Increase the supply of specific types of care			
Programs to serve children with special needs			
Wrap-around or integrated child care in Head Start, Early			
Head Start, pre-k, summer or other programs			
Programs to serve infant/toddler			
School-age programs			
Center-based providers			
Family child care providers			
Group-home providers			
Programs that serve specific geographic areas			
∐ Urban			
L Rural			
Other. Describe			
Support programs in providing higher quality services			
Support programs in providing comprehensive services			
Serve underserved families. Specify:			
Other. Describe			
c) Are child care services provided through grants or contracts offered throughout the State/Territory? (658E(a), §98.16(g)(3))			
⊠ Yes.			
No, and <b>identify</b> the localities (political subdivisions) and services that are not offered:			
d) How are payment rates for child care services provided through grants/contracts determined?			
All rates are based on rates published by the Lead Agency.			
e) What is the estimated proportion of direct services that will be available for child care services through grants/contracts?			

Approximately 25% of subsidy funds are dispersed through grants/contracts.

#### 2.7.3. Market Rate Survey

Lead Agencies must complete a local Market Rate Survey (MRS) no earlier than two years prior to the effective date of the Plan (no earlier than October 1, 2011). The MRS must be completed prior to the submission of the CCDF Plan (see <a href="Program Instruction CCDF-ACF-PI-2009-02">Program Instruction CCDF-ACF-PI-2009-02</a> for more information on the MRS deadline).

- a) Provide the month and year when the local Market Rate Survey(s) was completed (§98.43(b)(2)): March 2013.
- b) Provide a <u>summary of the results</u> of the survey. The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

The Mississippi State Department of Health (MSDH), Bureau of Licensure and Regulations, periodically provided a list of licensed child care facilities in Mississippi. The most recent populated list indicated 1,640 facilities. A list of family/in-home providers was developed using records from the Nurturing Homes Initiative (NHI) project and other MSU School of Human Sciences resources. A total of 419 family/in-home providers were identified. All 1,640 licensed centers and 419 family/in-home providers were selected for inclusion in the survey. Selected findings are provided below using frequencies, percentages, means and standard deviations. Where appropriate, comparisons are made between licensed centers and family/in-home providers.

#### **CCDF Certificates**

Overall, 3,739 licensed and family/in-home centers accept CCDF certificates. Of these 3,739 centers, 1,236 are licensed centers and 2,504 are family/in-home providers. Of the licensed centers, 747 (60.4%) are in Tier 1, 482 (39.0%) are in Tier 2, and seven (0.01%) are Tier 3. Of the family/in-home providers, 2,461 (98.2%) are in Tier 3, and 20 (0.01%) are in each Tiers 1 and 2.

#### **Vacancies**

The current MSDH licensed center list indicates there are 35,762 total vacancies of a total maximum capacity of 132,512. The NACCRRAware database shows there are 255 vacancies in family/in-home care facilities.

#### **Weekly and Monthly Childcare Rates**

Child care rates reported by licensed centers were generally higher than those reported by family/in-home providers. However, these differences were minimal across all categories of time and age. Rates reported for weekly part-time for children age five to 12 and monthly part-time for two-, three- and four-year-old children were the same for licensed centers and family/in-home providers. The 75<sup>th</sup> percentile by center type, time, and age are provided in Table 2.

### 2.7.4. Describe the payment rate ceilings in relation to the current MRS using the tables below.

Because of the flexibility that Lead Agencies have in setting payment rate ceilings, the following tables have been developed to simplify Lead Agency reporting on how their payment rate ceilings compare to their most recent MRS. These tables are not meant to collect comprehensive payment rate ceilings within a State/Territory and ACF recognizes that Lead Agencies are not required to set their payment rate ceilings at the 75<sup>th</sup> percentile. These tables allow Lead Agencies to use a common metric – the 75<sup>th</sup> percentile – as a reference point against which the Lead Agency can report their percentiles for three selected age groups in two geographic areas for licensed child care centers and licensed family child care homes.

In table 2.7.4a and 2.7.4b, *highest rate area* refers to the State or Territory's area or geographic region with the highest maximum payment rate ceiling for child care centers (2.7.4a) and the lowest maximum payment rate ceiling for child care centers (2.7.4b). Identify the highest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75<sup>th</sup> percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75<sup>th</sup> percentile of the most recent MRS.

**Note** - Report the "base" maximum reimbursement rate ceiling, not including any rate add-ons or tiered reimbursements. For example, if maximum reimbursement rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower "base" rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly

maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

2.7.4a – Highest Rate Area (Centers)	(a) Monthly Payment Rate at the 75 <sup>th</sup> percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75 <sup>th</sup> percentile of most recent survey
Full-Time Licensed Center Infants (11 months)	<u>\$563</u>	<u>\$346</u>	<del>70%</del>
Full-Time Licensed Center Preschool (59 months)	<u>\$476</u>	<u>\$313</u>	<u>66%</u>
Full-Time Licensed Center School-Age (84 months)	<u>\$433</u>	<u>\$304</u>	<u>70%</u>

2.7.4b – Lowest Rate Area (Centers)	(a) Monthly Payment Rate at the 75 <sup>th</sup> percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75 <sup>th</sup> percentile of most recent survey
Full-Time Licensed Center Infants (11 months)	<u>\$368</u>	<u>\$346</u>	94%
Full-Time Licensed Center Preschool (59 months)	<u>\$325</u>	<u>\$313</u>	<u>96%</u>
Full-Time Licensed Center School-Age (84 months)	<u>\$217</u>	\$304	140%

In table 2.7.4c and 2.7.4d, *highest rate area* refers to the State or Territory's area or geographic region with the highest maximum payment rate ceiling for family child care homes (2.7.4c) and the lowest maximum payment rate ceiling for family child care homes (2.7.4d). Identify the lowest rate area in the box provided. In column (a),

provide the full-time monthly rate at the 75<sup>th</sup> percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75<sup>th</sup> percentile of the most recent MRS.

**Note** - Report the "base" maximum reimbursement rate ceilings, not including any rate add-ons or tiered reimbursement. For example, if maximum reimbursement rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower "base" rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

2.7.4c – Highest Rate Area (FCC)	(a) Monthly Payment Rate at the 75 <sup>th</sup> percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75 <sup>th</sup> percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	<u>\$476</u>	<u>\$251</u>	<u>53%</u>
Full-Time Licensed FCC Preschool (59 months)	<u>\$325</u>	\$227	70%
Full-Time Licensed FCC School-Age (84 months)	<u>\$368</u>	<u>\$222</u>	<u>60%</u>

2.7.4d – Lowest Rate Area (FCC)	(a) Monthly Payment Rate at the 75 <sup>th</sup> percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75 <sup>th</sup> percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	<u>\$238</u>	<u>\$251</u>	<u>105%</u>
Full-Time Licensed FCC Preschool (59 months)	<u>\$173</u>	<u>\$227</u>	<u>131%</u>
Full-Time Licensed FCC	<u>\$195</u>	<u>\$222</u>	<u>114%</u>

2.7.4d – Lowest Rate	(a)	(b)	<b>(c)</b>
Area (FCC)	<b>Monthly Payment</b>	Monthly	Percentile if
	Rate at the 75 <sup>th</sup>	Maximum	lower than 75 <sup>th</sup>
	percentile of the	Payment	percentile of
	most recent MRS	<b>Rate Ceiling</b>	most recent
			survey
School-Age (84 months)			

#### 2.7.5. How are payment rate ceilings for license-exempt providers set?

- a) Describe how license-exempt center payment rates are set: <u>The Lead</u>
  <u>Agency makes no distinction between license-exempt centers and those centers that are required to have a license.</u>
- b) Describe how license-exempt family child care home payment rates are set: Payment rates for all providers are set based on availability of funding. Consideration is given to raising rates vs. fewer certificates.
- c) Describe how license-exempt group family child care home payment rates are set: <u>Payment rates for all providers are set based on availability of funding.</u> Consideration is given to raising rates vs. fewer certificates.
- d) Describe how in-home care payment rates are set: <u>Payment rates for all providers are set based on availability of funding.</u> <u>Consideration is given to raising rates vs. fewer certificates.</u>

## 2.7.6 Will the Lead Agency provide any type of tiered reimbursement or differential rates on top of its base reimbursement rates for providing care for children receiving CCDF subsidies?

Check which types of tiered reimbursement, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates and amount and also indicate if the rates were set based on the MRS or another process.

Differential rate for nontraditional hours. Describe
Differential rate for children with special needs as defined by the
State/Territory. Describe Providers are paid higher rates for children with
special needs, if a higher rate for care of these children in charged to non-
CCDF clients.
☐ Differential rate for infants and toddlers. Describe
☐ Differential rate for school-age programs. Describe
Differential rate for higher quality as defined by the State/Territory.
Describe
Other differential rate. Describe
☐ None.

**Reminder -** CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. In the next three questions, Lead Agencies are asked to describe how their payment policies reflect the affordable copayments for families' provision of equal access (i.e., minimizing additional fees to parents), how payment practices are implemented consistent with the general child care market to be fair to providers (see <a href="Information Memorandum on Continuity of Care">Information Memorandum on Continuity of Care</a> for examples), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

2.7.7. What policies does the Lead Agency have regarding any additional
fees that providers may charge CCDF parents? The Lead Agency
Allows providers to charge the difference between the maximum
reimbursement rate and their private pay rate
Pays for provider fees (e.g., registration, meals, and supplies). Describe
Policies vary across region, counties and or geographic areas. Describe
Other. Describe
2.7.8 What specific policies and practices does the Lead Agency have regarding the following:

- a) Number of absent days allowed. Describe <u>The Lead Agency pays for 15</u> <u>absence days per program year, per child. The Lead Agency has no policy regarding the maximum number of allowable absences within a program year.</u>
- b) Paying based on enrollment. Describe <u>The Lead Agency pays for the care</u> type (full time vs part time) that is assigned to the certificate, even if the child attends fewer hours than is required to determine care type on a given day. <u>School-aged children and children attending Head Start programs are paid full time rates when full time care is needed during holidays, school breaks, and school closings.</u>
- c) Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly). Describe <u>The Lead Agency pays all providers a daily rate</u>, regardless of their established private pay schedule.
- d) Using electronic tools (automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe <u>The Lead agency makes payments twice monthly to providers using a direct deposit system. Providers can elect to have their payments deposited to a pre-paid card instead of a traditional bank account.</u>

### 2.7.9. Describe how payment rates are adequate to ensure equal access to the full range of providers based on the Market Rate Survey.

CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. To demonstrate equal access, the Lead Agency shall provide at a minimum a summary of facts describing: (§98.43(a))

a) How a choice of the full range of providers, e.g., child care centers, family child care homes, group child care homes and in-home care, is made available (§98.43(a)(1))

The Lead Agency approves a range of care environments including licensed/unlicensed and home/center-based. The approval of the range of care environments allows for parental choice. Parents are provided with a list of providers participating in the subsidy program in a given area upon request.

b) How payment rates are adequate based on the most recent local MRS (§98.43(a)(2))

Based on the Mississippi Child Care Market Rate Survey, which supplies information about tuition rates at licensed child care facilities in the state, MDHS DECCD adjusts payment of tier rates accordingly. The Lead Agency makes every effort to balance reimbursement rates with the number of applicants for assistance. Tier rates are evaluated every two years as a result of the Mississippi Child Care Market Rate Survey. In addition, the Mississippi Child Care Quality Step System (MCCQSS) facilitates an increase in the provider's current tier rate based upon steps attained in the MCCQSS. The increase in the tiered reimbursement is referred to as an "On-Going Quality Bonus" and the increase in tiered reimbursement does not have to be passed on to the general public.

c) How family co-payments based on a sliding fee scale are affordable (§98.43(a)(3))

Co-payments for families whose income is at or below 50% of the SMI does not exceed 6.5% of the total family income per child. Co-payments for families whose income is between 50 and below 85% of the SMI does not exceed 8% of the total family income per child.

d) Any additional facts the Lead Agency considered to determine that its payment rates ensure equal access, including how the quality of child care providers is taken into account when setting rates and whether any other methodologies (e.g., cost estimation models) are used in setting payment rates

#### No additional facts.

#### 2.8 Goals for the next Biennium

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency's goals for the administration of the CCDF subsidy program in the coming Biennium? For example, what progress does the State/Territory expect to make on continuing improved services to parents and providers, continuity of care for children, improving outreach to parents and providers, building or expanding information technology systems, or revising rate setting policies or practices).

**Note** – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 – Review provider reimbursement rates and co-payments to determine if changes are possible that allow the Lead Agency to increase certificate distribution.

Goal 2 – Build a website that will provide information to parents regarding services and provider selection, including those needing information in languages other than English.

Goal 3 – Expand the automation of administrative processes to streamline workflow processes and allow for additional focus on customer service.

Goal 4 – Build an online application for service that aligns with other agency services to reduce the burden on applicants.

Goal 5 – Increase reports from CCIS to ensure subsidies are reaching clients as quickly and accurately as possible.

### PART 3 HEALTH AND SAFETY AND QUALITY IMPROVEMENT ACTIVITIES

In this section, Lead Agencies are asked to describe their goals and plans for implementation of child care quality improvement activities. Under the Child Care and Development Block Grant Act, Lead Agencies have significant responsibility for ensuring the health and safety of children in child care through the State/Territory's child care licensing system and establishing health and safety standards for children who receive CCDF funds. Health and safety is the foundation of quality, but is not adequate to ensure that programs and staff are competent in supporting all areas of child development and promoting school success.

Quality investments and support systems to promote continuous quality improvement of both programs and the staff who work in them are a core element of CCDF. Lead Agencies have been reporting on their efforts to support program quality improvement and professional development since their initial Plans in 1999. This section allows Lead Agencies to continue to describe the steps that they are taking toward continuous quality improvement with a goal of having high quality child care options across settings for all families. While one of the key goals for CCDF is helping more low-income children access higher quality care, the Lead Agency has the flexibility to consider its goals and strategic plans for a child care quality improvement system for all families, not just those receiving assistance under CCDF.

Part 3 is organized around a template of four key components of quality which encompass most of the quality investments and initiatives undertaken by Lead Agencies over the past decade:

- Ensuring health and safety of children through licensing and health and safety standards
- 2. Establishing early learning guidelines
- 3. Creating pathways to excellence for child care programs through **program quality improvement activities**
- 4. Creating pathways to an effective, well-supported child care workforce through **professional development systems and workforce** initiatives.

For each component, Lead Agencies are asked to conduct a three-step process. First, in this section, Lead Agencies will conduct a self-assessment of their programs by responding to the questions in Part 3 that describe the current status of their efforts, using common practices and best practices to list characteristics that build off those that have been reported in previous plans. Second, Lead Agencies then are asked to identify goals for making progress during the FY 2014-2015 biennium and describe their data, performance measure and evaluation capacity for each component. Third, Lead Agencies will report progress on their goals using the Quality Performance Report which is included and described in Appendix 1. The QPR will not be submitted until December 31, 2014.

Based on information reported in past plans, it is expected that the Lead Agency will describe in these first two steps how they will continue to make systematic investments towards child care quality improvement across its early childhood and school-age spectrum – including all settings, geographic coverage and age range – that will help show progress toward these outcomes and goals. Ultimately, these child care quality improvement elements should be fully implemented and integrated. Each State/Territory is expected to fall on a continuum of progress as a result of these first two steps. Lead Agency's individual progress will reported using the Quality Performance Report.

### 3.1. Activities to Ensure the Health and Safety of Children in Child Care (Component #1)

This section is intended to collect information on how Lead Agencies meet the statutory and regulatory provisions related to licensing and health and safety requirements. The CCDBG statute and the CCDF regulations address health and safety primarily in two ways.

First, Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced. Questions related to licensing requirements are in sections 3.1.1 and 3.1.2. Second, Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Questions related to CCDF Health and Safety requirements are in sections 3.1.3 and 3.1.4.

### 3.1.1. Compliance with Applicable State/Territory and Local Regulatory Requirements on Licensing

Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced.

**Definition**: Licensing requirements are defined as regulatory requirements, including registration or certification requirements established under State, local, or tribal law, necessary for a provider to legally operate and provide child care services in a State or locality (§98.2). This does not include registration or certification requirements solely for child care providers to be eligible to participate in the CCDF program. Those requirements will be addressed in 3.1.2.

The relationship between licensing requirements and health and safety requirements varies by State/Territory depending on how comprehensive the licensing system is. In some States and Territories, licensing may apply to the majority of CCDF-eligible providers and the licensing standards cover the three CCDF health and safety requirements so the State/Territory has few, if any, providers for whom they need to establish additional CCDF health and safety requirements. In other cases, States and Territories have elected to exempt large numbers of providers from licensing which means that those exempted providers who care for children receiving assistance from CCDF will have to meet to the CCDF health and safety requirements through an alternative process outside of licensing as defined by the State/Territory. The State/Territory may also elect to impose more stringent standards and licensing or regulatory requirements on child care providers of services for which assistance is provided under the CCDF than the standards or requirements imposed on other child care providers. (§98.40(b)(1)) (658E(c)(2)(F), §98.41).

	led under the CCDF than the standards or requirements imposed on other care providers. (§98.40(b)(1)) (658E(c)(2)(F), §98.41).							
a) ]	Is the Lead	Agency respo	onsible for child c	eare licensing? (§9	8.11(a))			
b)	<ul> <li>Yes.</li> <li>No. Please identify the State or local (if applicable) entity/agency responsible for licensing The Mississippi Department of Health, Division of Child Care Licensure</li> <li>b) Provide a brief overview of the relationship between the licensing</li> </ul>							
	requireme State/Terr		F health and safet	ty requirements in	your			
	Licensed Centers participating in the CCDF program must remain in compliance at all times with the Mississippi State Department of Health's "Regulations Governing Licensure of Child Care Facilities." Unlicensed child care providers are required to sign a statement of agreement to comply with policy conditions related to: Basic Health, Safety, and Nutrition Assurances for Unlicensed Child Care Providers.							
c) Do the State/Territory's licensing requirements serve as the CCDF health and safety requirements?								
	Center-Based Child Care Child Care Child Care Child Care Child Care □ N/A. Check if your State/Territory does not have group home child care. □ In-Home Care □ N/A. Check if in-home care is not subject to licensing in your State/Territory.							
Yes	Yes, for all							

CCDF Plan Effective Date: October 1, 2013 Amended Effective:

providers in | |

this

State/Territory does not have group home child care.	
Describe  those providers. The Lead Agency's regulations regarding health and safety apply to providers who are unregulated and are caring for fewer than 6 children not related to the provider by the third degree.	Describe
NoImage: Describe of the control of the c	Describe

d) CCDF identifies and defines four categories of care: child care centers, family child care homes, group child care homes and in-home child care providers (§98.2). The CCDF definition for each category is listed below. For

each CCDF category of care, please identify which types of providers are subject to licensing and which providers are exempt from licensing in your State/Territory in the chart below. Note: OCC recognizes that each State/Territory identifies and defines its own categories of care. OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care but consistent with your reported 801 data.

		T	
CCDF		Which providers in your	Are any providers in your
Category of	CCDF Definition	State/Territory are subject to	State/Territory which fall
Care	(§98.2)	licensing under this CCDF	under this CCDF category
Curc		category?	exempt from licensing?
Center-	Center-based child care	Describe which types of	Describe which types of
Based	providers are defined as	center-based settings are	center-based settings are
Child Care	a provider licensed or	subject to licensing in your	exempt from licensing in
	otherwise authorized to	State/Territory Center-	your State/Territory The
	provide child care	based child care	Licensing authority exempts
	services for fewer than	providers are defined as	the following providers from
	24 hours per day per	_	licensure:
	child in a non-	a provider licensed or	A. Child Care facilities which
	residential setting,	<u>otherwise authorized to</u>	operate for no more than two
	unless care in excess of	provide child care	(2) days a week and whose
	24 hours is due to the	services	<u>primary purpose is to provide</u>
	nature of the parent(s)'	for fewer than 24 hours	respite for the caregiver or
	work.		temporary care during other
		per day per child in a	scheduled or related
		<u>nonresidential</u>	activities.
		setting, unless care in	B. Organized programs that
		excess of 24 hours is due	operate for three (3) or less
		to the nature of the	weeks per year such as but
			not limited to vacation bible
		parent(s)' work.	schools and scout day camps.
			C. Any child residential home
			as defined in and in
			compliance with the
			provisions of Section 43-16-3
			(b) et seq., Mississippi Code
			of 1972.
			D. Any program in an
			elementary (including
			kindergarten) and/or
			secondary school system
			accredited by the Mississippi
			State Department of
			Education, the Southern
			Association of Colleges and
			Schools, The Mississippi
			Private School Association,
			the American Association of
			Christian Schools, the
			Association of Christian
			Schools International, or a
			school affiliated with
			Accelerated Christian
			Education, Inc. This includes
			accredited pre-K3 and pre-K4
			Programs. Programs serving
			children less than three (3)
			years of age must be licensed.
			E. Any Head Start program
			operating in conjunction with
			an elementary school system,
			whether it is public, private,
			or parochial, whose primary
	<u> </u>	l	or parocinal, whose primary

CCDF	CCDF Definition	Which providers in your State/Territory are subject to	Are any providers in your State/Territory which fall
Category of Care	(§98.2)	licensing under this CCDF category?	under this CCDF category exempt from licensing?
		category:	purpose is a structured
			school or school readiness program. This includes Head
			Start pre-K3 and pre-K4
			programs. Head Start programs serving children
			less than three (3) years of
			age must be licensed. F. Any family child care home
			defined in Mississippi Code
			Section 43-20-53 (a) et seq.
			To wit: An occupied residence in which shelter
			and personal care is regularly
			provided for five (5) or fewer children who are not related
			within the third degree
			computed according to the civil law to the provider and
			who are under 13 years of age
			and are provided care for any
			part of the twenty-four hour day. These homes may be
			voluntarily registered with
			the Mississippi State Department of Health.
			G. Any membership
			organization affiliated with a
			national organization which charges only a nominal
			annual membership fee, does
			not receive monthly, weekly, or daily payments for
			services, and is certified by its
			national association as complying with the
			association's minimum
			standards and procedures,
			including, but not limited to, the Boys and Girls Club of
			America, and the YMCA. A
			nominal fee is defined as \$300 or less per calendar
			year.
			For example, some
			jurisdictions exempt school-
			based centers, centers operated by religious
			organizations, summer
			camps, or Head Start

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
Group Home Child Care  N/A. Check if your State/Terri tory does not have group home child	Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'	Describe which types of group homes are subject to licensing	programs.  Describe which types of group homes are exempt from licensing
Family Child Care	work.  Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work.  Reminder - Do not respond if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	Describe which types of family child care home providers are subject to licensing Providers caring for 12 or fewer children in the provider's home are subject to licensing requirements.	Describe which types of family child care home providers are exempt from licensing Providers caring for fewer than 6 children in their home are exempt from licensing requirements.

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
In-Home Care	In-home child care provider is defined as an individual who provides child care services in the child's own home. Reminder - Do not respond if inhome child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	<ul> <li>☒ N/A. Check if in-home care is not subject to licensing in your State/Territory.</li> <li>Describe which in-home providers are subject to licensing</li> </ul>	Describe which types of inhome child care providers are exempt from licensing

**Note**: In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the <u>NRCKid's website</u> to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's**. ⊠

- e) **Indicate** whether your State/Territory licensing requirements include any of the following four indicators for each category of care\*.
- \* American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011) Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd Edition. Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association. Available online at the NCRKid's website.

	For each indicator, check all requirements for <b>licensing</b> that apply, if any.			
	Group Home Child Care			In-Home Care
Indicator	Center-Based Child Care	N/A. Check if your State/Territory does not have group home child care.	Family Child Care	☑ N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
Do the licensing requirements include <b>child</b> :	☐ Yes, Child: staff ratio requirement	☐ Yes, Child: staff ratio requirement	☐ Yes, Child: staff ratio requirement. List ratio requirement	Yes, Child: staff ratio requirement. List ratio requirement by

	For each indicator, check all requirements for <b>licensing</b> that apply, if any.				
	101 cacii ilialcate		Croup Home		
		Child Care		In-Home Care	
Indicator	Center-Based Child Care	N/A. Check if your State/Territory does not have group home child care.	Family Child Care	N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)	
staff ratios and group sizes?	Infant ratio (11 months): 5:1	Infant ratio (11 months):	by age group: <1 yr=4:1	age group:	
If yes, provide the ratio for age specified.	Toddler ratio (35 months):	Toddler ratio (35 months):  Preschool ratio	1 yr =8:1 2 yr =12:1 3 yr =12:1 4 yr =12:1 5-9 yrs = 12:1	☐ No ratio requirements.  ☐ Yes, Group size requirement. List	
	Preschool ratio (59 months): 16:1	(59 months):	10-12 yrs = 12:1  No ratio	ratio requirement by age group	
	☐ No ratio requirements.	⊠ No ratio requirements.	requirements.  Note: Yes, Group size requirement. List	☐ No group size requirements.	
	∑ Yes, Group size requirement Infant group size (11	Yes, Group size requirement Infant group size (11 months):	ratio requirement by age group See above information, not to exceed 12.		
	months): 10 w/ 2 caregivers	Toddler group size (35 months):	☐ No group size requirements.		
	Toddler group size (35 months): 14	Preschool group size (59 months):			
	Preschool group size (59 months): 20 w 2 caregivers	☑ No group size requirements.			
	☐ No group size requirements.				

For each indicator, check all requirements for <b>licensing</b> that apply, if any.					
Indicator	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care  ⊠ N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)	
Do the licensing requirements identify specific educational credentials for child care directors?	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☑ Associate's degree ☐ Bachelor's degree ☐ No credential required for licensing ☐ Other:	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☐ Associate's degree ☐ Bachelor's degree ☐ No credential required for licensing ☐ Other:	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☑ Associate's degree ☐ Bachelor's degree ☐ No credential required for licensing ☐ Other:	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☐ Associate's degree ☐ Bachelor's degree ☐ No credential required for licensing ☐ Other:	
Do the licensing requirements identify specific educational credentials for child care teachers?	□ High school/GED     □ Child Development     Associate     (CDA)     □ State/     Territory     Credential     □ Associate's degree     □ Bachelor's degree     □ No credential required for licensing     □ Other:	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☐ Associate's degree ☐ Bachelor's degree ☐ No credential required for licensing ☐ Other:		☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☐ Associate's degree ☐ Bachelor's degree ☐ No credential required for licensing ☐ Other:	
Do the licensing requirements specify that directors and caregivers must attain a specific number of	☐ At least 30 training hours required in first year ☐ At least 24 training hours per year after first year	☐ At least 30 training hours required in first year ☐ At least 24 training hours per year after first year	☐ At least 30 training hours required in first year ☐ At least 24 training hours per year after first year	☐ At least 30 training hours required in first year ☐ At least 24 training hours per year after first year	

		For each indicate	r, check all requirem	ants for <b>licensing</b> t	hat apply if any	
		For each mulcato	<b>Group Home</b>	ento for neclising (	In-Home Care	
Indica	ator	Center-Based Child Care	MyA. Check if your State/Territory does not have group home child care.	Family Child Care	N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)	
traini per ye	ng hours ear?	☐ No training requirement ☐ Other: 15 Hours annually	☐ No training requirement ☐ Other:	☐ No training requirement ☐ Other: 15 hours annually	☐ No training requirement ☐ Other:	
	f) Do you ex in FY2014-2	-	ng requirements	for child care pro	oviders to change	
	☐ Y ⊠ N	es. Describe				
State/Territory's licensing requirements and how its licensing requirements are effectively enforced. (658E(c)(2)(E), §98.40(a)(2)) The Lead Agency is also required to certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with the applicable health and safety requirements. (658E(c)(2)(G), §98.41(d))  Describe the State/Territory's policies for effective enforcement of the licensing requirements using questions 3.1.2a through 3.1.2e below. This description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.						
<ul> <li>a) Does your State/Territory include announced and/or unannounced visits in its policies as a way to effectively enforce the licensing requirements?</li> <li>         ∑ Yes. If "Yes" please refer to the chart below and check all that apply.         ☐ No     </li> </ul>						
	CCDF Cate	gories of Care	Frequency Routine Announced Visits	Unanno	ncy of Routine ounced Visits	
	⊠ Center-Ba	ased Child Care	☐ Once a Ye ☐ More that a Year ☐ Once Eve Years ☐ Other. De	n Once	a Year than Once a Year Every Two Years Describe Once a as needed to te complaints.	

CCDF Categories of Care	CCDF Categories of Care    CCDF Categories of Care		Frequency of Routine Unannounced Visits	
☐ Group Home Child Care  ☐ N/A. Check if your State/Territory does not have group home child care.	Once a Year More than Once a Year Once Every Two Years Other. Describe		☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe	
☐ Family Child Care Home	☐ More a Year ☐ Once Years	a Year than Once Every Two r. Describe	☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe Once a year, or as needed to investigate complaints.	
☐ In-Home Child Care  ☐ N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b)			☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe	
b) Does your State/Territory have any of the following procedures in place effective enforcement of the licensing requirements? If procedures differ based on the category of care, please indicate how in the "Describe" box.  Yes. If "Yes" please refer to the chart below and check all that ap No				
Licensing Procedures		<b>Describe</b> which procedures are used by the State/Territory for enforcement of the licensing requirements.		
The State/Territory requires providers to or participate in training relating to openichild care facility prior to issuing a license	ng a	<ul><li></li></ul>	ribe Mandatory trainings  Safety r Orientation egulations Governing Child	
The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license.		⊠ An on-site ☐ Programs	inspection is conducted. self-certify. Describe ures in place.	
Licensing staff has procedures in place to violations found in an inspection.	address	Providers are required to submit plans to correct violations cited during inspections.		

	Dogariha which procedures are used be-	
Linamain a Dun on James	<b>Describe</b> which procedures are used by	
Licensing Procedures	the State/Territory for enforcement of	
	the licensing requirements.	
	☐ Licensing staff approve the plans of	
	correction submitted by providers.	
	☐ Licensing staff verify correction of	
	violation.	
	☐ Licensing staff provide technical	
	assistance regarding how to comply with	
	a regulation.	
	No procedures in place.	
	Other. Describe	
Licensing staff has procedures in place to issue a	Provisional or probationary license	
sanction to a noncompliant facility.	☐ License revocation or non-renewal	
	☐ Injunctions through court	
	Emergency or immediate closure not	
	through court action	
	☐ Fines for regulatory violations	
	☐ No procedures in place.	
	Other. Describe	
The State/Territory has procedures in place to	Cease and desist action	
respond to illegally operating child care facilities.	☐ Injunction	
	Emergency or immediate closure not	
	through court action	
	Fines	
	☐ No procedures in place.	
	Other. Describe	
The State/Territory has procedures in place for	☐ Yes. Describe	
providers to appeal licensing enforcement	Any operator who disagrees with or is	
actions.	aggrieved by a decision of the licensing	
	agency concerning the suspension,	
	revocation, or restriction of a license	
	may appeal to the Chancery Court of the	
	county in which the child care facility is	
	located. The appeal shall be filed no later	
	than 30 calendar days after the operator	
	receives written notice of the final	
	administrative action by the licensing	
	agency as to the suspension, revocation,	
	or restriction of the license. The operator	
	shall have the burden of proving that the	
	decision of the licensing agency was not	
	in accordance with applicable law and	
	these regulations. If a facility is allowed	
	to continue to operate during the appeal	
	process, it will remain under the	
	regulation of the licensing agency and	
	will be subject to all current licensure	
	will be subject to all current licensure	

	<b>Describe</b> which procedures are used by
Licensing Procedures	the State/Territory for enforcement of
	the licensing requirements.
	regulations to include, but not limited to,
	inspection of the facility, review of
	facility and children's records,
	submission of all required or requested
	documents, and payment of all
	applicable fees and/or monetary
	penalties.
	$\square$ No.
	Other. Describe

## c ) Does your State/Territory use ${\bf background\ checks\ as\ a\ way\ to\ effectively\ enforce\ the\ licensing\ requirements?}$

🖂 Yes. If "Yes" please refer to the chart below to identify who is required to have background checks, what types of checks, and with what frequency.

☐ No

CCDF Categories of	Types of	Frequency	Who is Subject
Care	Background		to Background
Care	Check		Checks?
<b>⊠</b> Center-Based	⊠ Child Abuse		⊠ Director
Child Care	Registry	Entrance into	⊠ Teaching staff
		the System	⊠ Non-teaching
		☐ Checks	staff
		Conducted	☐ Volunteers
		Annually	⊠ Other
		$\boxtimes$ Other.	<u>Volunteers with</u>
		Describe	over 120 hours
		Repeated every	on site.
		<u>5 years</u>	
	☐ State/Territory	☐ Initial	☐ Director
	Criminal	Entrance into	☐ Teaching staff
	Background	the System	☐ Non-teaching
	Check if	☐ Checks	staff
	State/Territory	Conducted	☐ Volunteers
	background check	Annually	Other
	includes fingerprints	Other.	
		Describe	
	⊠ FBI Criminal		☐ Director
	Background (e.g.,	Entrance into	☐ Teaching staff
	fingerprint)	the System	☐ Non-teaching
	_	Checks	staff
		Conducted	□ Volunteers

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
		Annually  Other. Describe Repeated every 5 years.	Other
	Sex Offender Registry	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Director ☐ Teaching staff ☐ Non-teaching staff ☐ Volunteers ☐ Other
☐ Group Child Care Homes  ☐ N/A. Check if your State/Territory does not have group home child care.	☐ Child Abuse Registry	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Provider ☐ Non-provider residents of the home
	☐ State/Territory Criminal Background ☐ Check if the State/Territory background check includes fingerprints	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Provider ☐ Non-provider residents of the home
	☐ FBI Criminal Background (e.g., fingerprint)	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Provider ☐ Non-provider residents of the home
	Sex Offender Registry	☐ Initial Entrance into the System ☐ Checks Conducted	☐ Provider ☐ Non-provider residents of the home

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
		Annually Other. Describe	
☐ Family Child Care Homes	⊠ Child Abuse Registry	<ul> <li>☑ Initial</li> <li>Entrance into</li> <li>the System</li> <li>☐ Checks</li> <li>Conducted</li> <li>Annually</li> <li>☑ Other.</li> <li>Describe</li> <li>Repeated every</li> <li>5 years.</li> </ul>	⊠ Provider □Non-provider residents of the home
	☐ State/Territory Criminal Background ☐ Check if the State/Territory background check includes fingerprints	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Provider ☐ Non-provider residents of the home
	⊠ FBI Criminal Background (e.g., fingerprint)	<ul> <li>☑ Initial</li> <li>Entrance into</li> <li>the System</li> <li>☐ Checks</li> <li>Conducted</li> <li>Annually</li> <li>☑ Other.</li> <li>Describe</li> <li>Repeated every</li> <li>5 years</li> </ul>	⊠ Provider □Non-provider residents of the home
	Sex Offender Registry	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Provider ☐ Non-provider residents of the home
☐ In-Home Child Care Providers  ☑ N/A. Check if In-	Child Abuse Registry	☐ Initial Entrance into the System ☐ Checks	☐ Provider ☐ Non-provider residents of the home

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2e)		Conducted Annually Other. Describe	
	☐ State/Territory Criminal Background ☐ Check if the State/Territory background check includes fingerprints	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Provider ☐ Non-provider residents of the home
	☐ FBI Criminal Background (e.g., fingerprint)	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Provider ☐ Non-provider residents of the home
	Sex Offender Registry	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Provider ☐ Non-provider residents of the home

- d) Please **provide a brief overview** of the State/Territory's process for conducting background checks for child care. In this brief overview, include the following:
  - d -1) The cost associated with each type of background check conducted The licensing authority charges a fee of \$50 for each individual, for each background check.
  - d-2) Who pays for background checks Individuals/Providers
  - d-3) What types of violations would make providers ineligible for CCDF? Describe Violations concerning child abuse and/or neglect.

d-4) The process for providers to appeal the Lead Agency's decision based on the background check findings. Those unlicensed providers excluded from CCDF participation due to information found on the Child Abuse and Neglect Central Registry can appeal by mailing a letter requesting a Fair Hearing. The provider will remain excluded or allowed to participate in CCDF pending the results of that hearing. of performing visits (announced or unannounced) or background, describe how the State/Territory will ensure that its licensing ements are effectively enforced per the CCDF regulations? Describe (658E(c)(2)(E), §98.40(a)(2))

e) If not performing visits (announced or unannounced) or background checks, describe how the State/Territory will ensure that its licensing requirements are effectively enforced per the CCDF regulations? Describe (658E(c)(2)(E), §98.40(a)(2))
f) Does the State/Territory disseminate information to parents and the public including the use of on-line tools or other "search tools," about child care program licensing status and compliance records?
☐ Yes. Describe ☐ No

# 3.1.3. Compliance with Applicable State/Territory and Local Regulatory Requirements on Health and Safety

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Such requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)

Check if the Lead Agency certifies that there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))

a) **Describe** the Lead Agency's health and safety requirements for prevention and control of infectious disease in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(i), §98.41(a)(1))

The Lead Agency	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
requires:	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
☐ Physical exam or health statement for providers				
☐ Physical exam or health statement for children				
☑ Tuberculosis check for providers				
☐ Tuberculosis check for children				
<ul><li>☑ Provider immunizations</li><li>☑ Child immunizations</li></ul>				
Hand-washing policy for providers and children				
☑ Diapering policy and procedures				
☐ Providers to submit a self-certification or complete health and safety checklist		$\boxtimes$		$\boxtimes$
Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements				
Other. Describe				

b) **Describe** the Lead Agency's health and safety requirements for building and physical premises safety, including policies and practices to protect from environmental hazards, in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(ii), §98.41(a)(2))

The Lead Agency	identify which	th and safety re n providers und e requirement.	der the CCDF c	ategory
The Lead Agency requires:	Center- based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
⊠ Building inspection				
☐ Health inspection				
☐ Inaccessibility of toxic substances policy		$\boxtimes$		
Safe sleep policy				

CCDF Plan Effective Date: October 1, 2013
Amended Effective:

The Lead Agency	identify which	or each health and safety requirement checked, dentify which providers under the CCDF category nust meet the requirement. Check all that apply.			
requires:	Center- based child care providers	Family child care home providers	Group home child care providers	In-home child care providers	
☐ Tobacco exposure reduction	$\boxtimes$	$\boxtimes$		$\boxtimes$	
☐ Transportation policy					
☐ Providers to submit a self-certification or complete health and safety checklist					
☐ Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements					
Other. Describe					

c) **Describe** the Lead Agency's health and safety requirements for health and safety training in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(iii), §98.41(a)(3)). Note: While Lead Agencies have the flexibility to define these terms, for this question, pre-service refers to any training that happens prior to a person starting or shortly thereafter (first week, etc). "On-going" would be some type of routine occurrence (e.g., maintain qualifications each year).

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
Child Care Centers	First Aid	Per the licensing authority, a minimum of one adult in each classroom mus be First Aid certified upon hire.	Per the licensing authority, a minimum of one adult in each classroom must maintain First Aid certification at all times.
	CPR	Per the licensing authority, a minimum of one adult in each classroom mus be CPR certified upon hire.	Per the licensing authority, a minimum of one adult in each classroom must maintain CPR certification at all times.
	Medication Administration Policies and Practices	Suggested by licensing authority.	Suggested by licensing authority.

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
of Care	Poison Prevention and Safety	Suggested by licensing authority.	Suggested by licensing authority.
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	Suggested by licensing authority.	Suggested by licensing authority.
	Shaken Baby Syndrome and abusive head trauma prevention	Suggested by licensing authority.	Suggested by licensing authority.
	Age appropriate nutrition, feeding, including support for breastfeeding	Suggested by licensing authority.	Suggested by licensing authority.
	Physical Activities	Suggested by licensing authority.	Suggested by licensing authority.
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	The licensing authority requires that personnel who prepare food be ServeSafe/TummySafe certified upon hire.	The licensing authority requires that personnel who prepare food maintain ServeSafe/TummySafe certification.
	Recognition and mandatory reporting of suspected child abuse and neglect	Suggested by licensing authority.	Suggested by licensing authority.
	Emergency preparedness and planning response procedures	Suggested by licensing authority.	Suggested by licensing authority.
	Management of common childhood illnesses, including food	Suggested by licensing authority.	Suggested by licensing authority.

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	intolerances and		
	allergies	0	C
	Transportation and child	Suggested by licensing authority.	Suggested by licensing authority.
	passenger safety	authority.	authority.
	(if applicable)		
	Caring for	Suggested by licensing	Suggested by licensing
	children with special health	authority.	authority.
	care needs,		
	mental health		
	needs, and		
	developmental		
	disabilities in compliance with		
	the Americans		
	with Disabilities		
	(ADA) Act		
	Child	Suggested by licensing	Suggested by licensing
	development including	authority.	authority.
	knowledge of		
	developmental		
	stages and		
	milestones		
	appropriate for the ages of		
	children		
	receiving		
	services.		
	Supervision of children	Suggested by licensing	Suggested by licensing
		authority.	authority.
	Behavior management	Suggested by licensing authority.	Suggested by licensing authority.
	Other. Describe	Suggested by licensing	Suggested by licensing
	Cilici. Describe	authority.	authority.
Group	First Aid	The State does not have	The State does not have
Home		Group Home Child Care.	Group Home Child Care.
Child Care	CPR	The State does not have	The State does not have
		Group Home Child Care.	Group Home Child Care.
	Medication	The State does not have	The State does not have
	Administration Policies and	Group Home Child Care.	Group Home Child Care.
	Practices and Practices		
	Poison	The State does not have	The State does not have
	Prevention and	Group Home Child Care.	Group Home Child Care.
	Safety	<u> </u>	

CCDF	Health and		
Categories	safety training	Pre-Service	On-Going
of Care	requirements		<b>8</b>
	Safe Sleep	The State does not have	The State does not have
	Practices	Group Home Child Care.	Group Home Child Care.
	including		
	Sudden Infant		
	Death Syndrome		
	(SIDS)		
	Prevention		
	Shaken Baby	The State does not have	The State does not have
	Syndrome and	Group Home Child Care.	Group Home Child Care.
	abusive head		
	trauma		
	prevention Age appropriate	The State does not have	The State does not have
	nutrition,		
	feeding,	Group Home Child Care.	Group Home Child Care.
	including		
	support for		
	breastfeeding		
	Physical	The State does not have	The State does not have
	Activities	Group Home Child Care.	Group Home Child Care.
	Procedures for	The State does not have	The State does not have
	preventing the	Group Home Child Care.	Group Home Child Care.
	spread of		
	infectious		
	disease,		
	including		
	sanitary methods and safe		
	handling of foods		
	Recognition and	The State does not have	The State does not have
	mandatory	Group Home Child Care.	Group Home Child Care.
	reporting of	Group Home Cinia Care.	Group Home Child Care.
	suspected child		
	abuse and		
	neglect		
	Emergency	The State does not have	The State does not have
	preparedness	Group Home Child Care.	Group Home Child Care.
	and planning		
	response		
	procedures	mi ou i i	m out 1
	Management of	The State does not have	The State does not have
	common childhood	Group Home Child Care.	Group Home Child Care.
	illnesses, including food		
	intolerances and		
	allergies		
	Transportation	The State does not have	The State does not have
	Transportation	The State does not have	The State does not have

CCDF	Health and		
Categories	safety training	Pre-Service	On-Going
of Care	requirements		_
	and child	Group Home Child Care.	Group Home Child Care.
	passenger safety		
	(if applicable)		
	Caring for	The State does not have	The State does not have
	children with	Group Home Child Care.	Group Home Child Care.
	special health		
	care needs, mental health		
	needs, and		
	developmental		
	disabilities in		
	compliance with		
	the Americans		
	with Disabilities		
	(ADA) Act		
	Child	The State does not have	The State does not have
	development	Group Home Child Care.	Group Home Child Care.
	including		
	knowledge of		
	developmental		
	stages and		
	milestones		
	appropriate for the ages of		
	children		
	receiving		
	services.		
	Supervision of	The State does not have	The State does not have
	children	Group Home Child Care.	Group Home Child Care.
	Behavior	The State does not have	The State does not have
	management	Group Home Child Care.	Group Home Child Care.
	Other. Describe		
Family	First Aid	All licensed facilities,	Teachers/care providers
Child Care		homes and unregulated	in licensed
Providers		providers are required to	facilities/homes and
		have at least one adult	unregulated providers
		who is First Aid certified	are required to maintain
		in each classroom/home	First Aid certification at
		at all times. All licensed	all times. All licensed
		facilities/homes are	families/homes are
		monitored for	monitored for
		compliance by the	compliance by the
		licensing authority. All	licensing authority. All
		unregulated care	unregulated care
		providres are monitored	providres are monitored
		provide de differente de	provided are monitored

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
or care	requirements	for compliance by the	for compliance by the
		Lead Agency.	Lead Agency.
	CPR	All licensed facilities, homes and unregulated providers are required to have at least one adult who is CPR certified in each classroom/home at all times. All licensed facilities/homes are monitored for compliance by the licensing authority. All	Teachers/care providers in licensed facilities/homes and unregulated providers are required to maintain CPR certification at all times. All licensed families/homes are monitored for compliance by the licensing authority. All
		unregulated care providres are monitored for compliance by the Lead Agency.	unregulated care providres are monitored for compliance by the Lead Agency.
	Medication Administration Policies and Practices	Suggested by licensing authority.	Suggested by licensing authority.
	Poison Prevention and Safety	Suggested by licensing authority.	Suggested by licensing authority.
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	Suggested by licensing authority.	Suggested by licensing authority.
	Shaken Baby Syndrome and abusive head trauma prevention	Suggested by licensing authority.	Suggested by licensing authority.
	Age appropriate nutrition, feeding, including support for breastfeeding	Suggested by licensing authority.	Suggested by licensing authority.
	Physical Activities	Suggested by licensing authority.	Suggested by licensing authority.
	Procedures for preventing the	The licensing authority requires licensed	The licensing authority requires licensed

CCDF	Health and safety training	Pre-Service	On Coing
Categories of Care	requirements	Pre-service	On-Going
or care	spread of infectious disease, including sanitary methods and safe	facilities/homes ensure personnel preparing food are ServeSafe/TummySafe certified.	facilities/homes ensure personnel preparing food maintain ServeSafe/TummySafe certification at all times.
	Recognition and mandatory reporting of suspected child abuse and neglect	Suggested by licensing authority.	Suggested by licensing authority.
	Emergency preparedness and planning response procedures	Suggested by licensing authority.	Suggested by licensing authority.
	Management of common childhood illnesses, including food intolerances and allergies	Suggested by licensing authority.	Suggested by licensing authority.
	Transportation and child passenger safety (if applicable)	Suggested by licensing authority.	Suggested by licensing authority.
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	Suggested by licensing authority.	Suggested by licensing authority.
	Child development including knowledge of developmental stages and milestones	Suggested by licensing authority.	Suggested by licensing authority.

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	appropriate for the ages of children receiving		
	services. Supervision of children Behavior management Other. Describe	Suggested by licensing authority. Suggested by licensing authority.	Suggested by licensing authority Suggested by licensing authority
In-Home Child Care Providers	First Aid	Per the Lead Agency, all unregulated care providers are required to be First Aid certified upon approval.	Per the Lead Agency, all unregulated care providers are required to maintain First Aid certification.
	CPR	Per the Lead Agency, all unregulated care providers are required to be First Aid certified upon approval.	Per the Lead Agency, all unregulated care providers are required to maintain First Aid certification.
	Medication Administration Policies and Practices	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.
	Poison Prevention and Safety	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.
	Shaken Baby Syndrome and abusive head trauma prevention	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.
	Age appropriate nutrition, feeding, including support for	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.

CCDF	Health and safety training	Pre-Service	On-Going
Categories of Care	requirements	Pre-service	On-Going
or care	breastfeeding		
	Physical	The Lead Agency has no	The Lead Agency has no
	Activities	training requirements for	training requirements for
	110011100	In-Home Providers on	In-Home Providers on
	Procedures for	this topic at this time.	this topic at this time.
	preventing the	The Lead Agency has no	The Lead Agency has no
	spread of	training requirements for	training requirements for
	infectious	In-Home Providers on	In-Home Providers on
	disease,	this topic at this time.	this topic at this time.
	including		
	sanitary methods		
	and safe		
	handling of foods		
	Recognition and	The Lead Agency has no	The Lead Agency has no
	mandatory	training requirements for	training requirements for
	reporting of	In-Home Providers on	In-Home Providers on
	suspected child	this topic at this time.	this topic at this time.
	abuse and	this topic at this time.	this topic at this time.
	neglect		
	Emergency	The Lead Agency has no	The Lead Agency has no
	preparedness	training requirements for	training requirements for
	and planning	In-Home Providers on	In-Home Providers on
	response	this topic at this time.	this topic at this time.
	procedures	_	-
	Management of	The Lead Agency has no	The Lead Agency has no
	common	training requirements for	training requirements for
	childhood	In-Home Providers on	In-Home Providers on
	illnesses,	this topic at this time.	this topic at this time.
	including food intolerances and		
	allergies		
	Transportation	The Lead Agency has no	The Lead Agency has no
	and child	training requirements for	training requirements for
	passenger safety	In-Home Providers on	In-Home Providers on
	(if applicable)		
		this topic at this time.	this topic at this time.
	Caring for children with	The Lead Agency has no	The Lead Agency has no
	special health	training requirements for	training requirements for
	care needs,	In-Home Providers on	In-Home Providers on
	mental health	this topic at this time.	this topic at this time.
	needs, and		
	developmental		
	disabilities in		
	compliance with		
	the Americans		
	with Disabilities		

CCDF	Health and		
Categories	safety training	Pre-Service	On-Going
of Care	requirements		
	(ADA) Act Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.
	Supervision of children	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.
	Behavior management  Other. Describe	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.	The Lead Agency has no training requirements for In-Home Providers on this topic at this time.
	Other, Describe		

d) CCDF allows Lead Agencies to exempt relative providers (grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles) from these health and safety requirements. What are the Lead Agency's requirements for relative providers? (§98.41(A)(ii))(A))

All relative providers are subject to the same health and safety
requirements as described in 3.1.2a-c, as appropriate; there are no
exceptions for relatives.
Relative providers are NOT required to meet <u>any</u> health and safety
requirements as described in 3.1.2a-c, as appropriate.
Relative providers are subject to certain requirements. Describe the
different requirements Relative providers are exempt from obtaining
Immunization Forms when they only care for their relatives.

e) Provide a web address for the State/Territory's health and safety requirements, if available: <u>Please refer to the Mississippi Child Care Payment Program Policy Manual link found at, http://www.mdhs.state.ms.us/eccd\_mschildcare.html</u>

**3.1.4** Effective enforcement of the CCDF health and safety requirements. For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described in 3.1.2 for licensed providers,

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_	ribe how the Lead Agency enforces the CCDF health and safety at requirements
and <u>Th</u>	escribe whether and how the Lead Agency uses on-site visits (announced unannounced)  e Lead Agency makes annual unannounced visits to unlicensed providers ensure compliance with required elements.
The	escribe whether the Lead Agency uses background checks e Lead Agency requires that providers and anyone in the home over the e of 18 submit to a Child Abuse and Neglect Criminal Background Check.
	es the Lead Agency permit providers to self-certify compliance with plicable health and safety standards?
<u>The</u> cor car	Yes. If yes, what documentation, if any, is required? Describe e Lead Agency requires that all unlicensed providers submit a checklist training various statements related to health and safety issues related to reing for children.  No
•	escribe whether the Lead Agency uses any other enforcement policies and actices for the health and safety requirements <u>NA</u>
child care p and Develo	If the Lead Agency certifies that procedures are in effect to ensure that providers of services for which assistance is provided under the Child Care pment Fund comply with all applicable State or local health and safety its. $(658E(c)(2)(G))$
to conduc	s the State/Territory encourage or require child care programs t developmental screening and referral for children
Lead Agence are encoura of physical	ing in child care programs? ites are not required to conduct developmental screenings of children, but aged to work with child care providers to promote screening in the areas health (including vision and hearing), mental health, oral health, and intal disabilities.
	Yes. Describe No
	a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?
	☐ Yes. Describe ☐ No ☐ Other. Describe ☐
	b) If yes, are resources and supports provided to programs to help

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them understand how families are referred to indicated services how to work with the health, mental health, and developmental disabilities agencies to support children when follow-up to screen needed?	
Yes. Describe No Other. Describe	
c) Does_the State/Territory use developmental screening and retools?  Yes. If Yes, provide the name of the tool(s)  No Other. Describe	eferral
3.1.6 Data & Performance Measures on Licensing and Health and S	Safety
Compliance — What data elements, if any, does the State/Territory currently have access to to licensing compliance? What, if any, performance measures does the Lead Ause for ensuring health and safety? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, no require Lead Agencies to collect or report this information. For any data elemented in (a) below, Lead Agencies may provide an optional description about at they have access to (e.g., the Lead Agency may have data for only license programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain agency (e.g., infants and toddlers or school-age children).	Agency I t to ents ut the
<b>a) Data on licensing and health and safety</b> . Indicate if the Lead or another agency has access to data on:	Agency
<ul> <li>Number of licensed programs. Describe (optional) The Missipperature of Health, Division of Child Care Licensure managed data. They report the number of licensed programs as 1,636.</li> <li>Numbers of programs operating that are legally exempt from licensing. Describe (optional)</li> <li>Number of programs whose licenses were suspended or revolute to non-compliance. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure managed data. They reported that o program licenses were suspended/reduring the last fiscal year.</li> <li>Number of injuries in child care as defined by the State/Terr Describe (optional) The Mississippi Department of Health, Divi Child Care Licensure manages this data. They report 6 incidence injuries during the last fiscal year.</li> <li>Number of fatalities in child care as defined by the State/Terr Describe (optional) The Mississippi Department of Health, Divi Child Care Licensure manages this data.</li> </ul>	es this  oked  es this  evoked  ritory.  sion of  es of  rritory.

⊠ Number of monitoring visits received by programs. Describe
(optional) The Mississippi Department of Health, Division of Child
Care Licensure manages this data. They report at least two visits to all
programs that were licensed during the last fiscal year.
Caseload of licensing staff. Describe (optional) The Mississippi
Department of Health, Division of Child Care Licensure manages this
data.
Number of programs revoked from CCDF due to non-compliance
with health and safety requirements. Describe (optional) The Lead
Agency would manage this data.
Other. Describe
None

- b) **Performance measurement**. What, if any, performance measures does the State/Territory use in its licensing system to monitor compliance with CCDF health and safety requirements? The licensing authority does not check for provider compliance with CCDF health and safety requirements.
- c) **Evaluation**. What, if any, are the State/Territory's plans for evaluation related to licensing and health and safety? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. The Lead Agency would like to evaluate the health and safety requirements of both the subsidy program and the licensing authority to compare to national health and safety standards.

### 3.1.7 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section of 3.1. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency's goals for the licensing and health and safety system in the coming biennium? What progress does the State/Territory expect to make on core areas (e.g. licensing standards, monitoring visits or other effective enforcement, improved technical assistance, or fewer serious non-compliances?)

**Note** – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 – Increase health and safety requirements for unlicensed providers participating in CCDF to align with proposed ACF requirements.
participating in CCDF to angir with proposed ACF requirements.
Goal 2 – Increase public knowledge of licensed providers including license effective
dates and any infractions.
Goal 3 – Build an interface between licensing and subsidy data systems to ensure consistency of data.
Goal 4 -
Goal 5 -



CCDF has a number of performance measures that are used to track progress for key aspects of the program at the national level. These performance measures are included in budget materials submitted to Congress and other documents. Please see the <a href="CCDF">CCDF</a> performance measures. A number of these performance measures rely on information reported in the State and Territorial Plans as a data source. We have

added a ruler icon in Section 3.2 through 3.4 in order to identify the specific questions used in the performance measures. When answering these questions, Lead Agencies should ensure that their answers are accurate and complete in order to promote the usefulness and integrity of the performance measures.

#### 3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

For purposes of this section, voluntary early learning guidelines (also referred to as early learning and development standards) include the expectations for what children should know (content) and be able to do (skills) at different levels of development. These standards provide guidelines, articulate developmental milestones, and set expectations for the healthy growth and development of young children. The term *early learning guidelines* (ELGs) refers to age-appropriate developmental learning guidelines for infants and toddlers and school-age children. These early learning guidelines are voluntary because States/Territories are not required to develop such guidelines or implement them in a specified manner.

3.2.1 Has the State/Territory developed voluntary early learning guidelines for children? Check any early learning guidelines the State/Territory has developed.

∑ Birtn-to-three
∑ Three-to-five
☐ Five years and older
☐ None. <b>Skip to 3.2.6.</b>
If yes, insert web addresses, where possible:
Birth to Three: www.earlychildhood.msstate.edu
Three to Five: www.mde.k12.ms.us

□ n' 11 . . . 1

Which State/Territory agency is the lead for the early learning guidelines? Birth to Three: Mississippi Office of Head Start Collaboration; Three to Five: Mississippi Department of Education

3.2.2 Do the early learning guidelines cover a range of domains across physical, cognitive, and social and emotional development? Check all that apply for each age group as applicable in the chart below. Because States vary in their domain names and which domains to include, we have used the domains identified in the Head Start Child Development and Early Learning Framework for reference purposes.

Domains	Birth-to-	Three-to-Five	Five and
	Three ELGs	ELGs	Older ELGs
Physical development and health			
Social and emotional development			
Approaches to learning			
Logic and reasoning (e.g., problem-			
solving)			
Language development		$\boxtimes$	
Literacy knowledge and skills			
Mathematics knowledge and skills			
Science knowledge and skills		$\boxtimes$	
Creative arts expression (e.g.,			
music, art, drama)			
Social studies knowledge and skills			
English language development (for			
dual language learners)			
List any domains not covered in the			
above			
Other. Describe			

# 3.2.3 To whom are the early learning guidelines disseminated and in what manner?

Check all audiences and methods that your State/Territory has chosen to use in the chart below.

	Information Dissemination	Voluntary Training	Mandatory Training
Parents in the child care subsidy system	$\boxtimes$		
Parents using child care more broadly	$\boxtimes$		
Practitioners in child care centers	$\boxtimes$	$\boxtimes$	
Providers in family child care homes	$\boxtimes$	$\boxtimes$	
Practitioners in Head Start			
Practitioners in Early	$\boxtimes$		

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	Information Dissemination	Voluntary Training	Mandatory Training
Head Start		. 8	. 8
Practitioners in public Pre-K program		$\boxtimes$	
Practitioners in elementary schools	$\boxtimes$		
Other. List		П	П
☐ To define the comprovement stand ☐ To define the comprofessional creder ☐ To require progractivities based on ☐ To require progractivities for the comprosed on ☐ To require progractivities for the comprosed on ☐ To require programmel ☐ To require Domination ☐ To requ	s of the child care syste ontent of training require ontent of training required dards (e.g., QRIS stand ontent of training require	m.  red to meet licens red for program q ards) red for the career ards to develop c ement standards te voluntary ELGs	ing requirements quality lattice or urriculum/learning to develop
3.2.5 Are voluntary standards aligned with Check the standards, if an guidelines.		the child care	system?
Learning Framewo	o align with Head Start ork o align with K-12 conter	-	nt and Early

# 3.2.6 Describe how your State/Territory uses ongoing assessments and measures of school readiness assessment using the following series of questions.

Cross-walked to align with State/Territory pre-k standards

Cross-walked with accreditation standards

In this section, assessment is framed with two distinct purposes/tools -1) ongoing assessment of children's progress within the classroom to improve and individualize instruction (this corresponds to 3.2.6a) and 2) assessments conducted within pre-

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Other. List

None.

kindergarten and/or at kindergarten entry to inform policymakers about the school readiness of children across the State on a broad range of domains, used to guide program initiatives (this corresponds to 3.2.6b).

In the description for each Yes response, please include a) who administers, and b) how often assessments are conducted, and c) what assessment tools are used.

a)	Are programs required to conduct ongoing assessments of children's progress of children using valid, reliable and age-appropriate tools aligned with the early learning guidelines or other child standards?
	Yes. Describe
	a-1) If yes, are programs encouraged to use information from ongoing assessments to improve practice and individual children's needs?
	Yes. Describe No Other. Describe
	a-2) If yes, is information on child's progress reported to parents?
	☐ Yes. Describe ☐ No ☐ Other. Describe ☐ No
	Other. Describe
b)	Does the State/Territory use tools that are valid, reliable and age-appropriate to track the readiness of children within pre-kindergarten and/or as they enter kindergarten?
	Yes. Describe
	b-1) If yes, do the tools cover the developmental domains identified in 3.2.2?
	Yes. Describe No Other. Describe
	b-2) If yes, are the tools used on all children or samples of children?
	☐ All children. Describe ☐ Samples of children. Describe ☐ Other. Describe ☐ Other.
	b-3) If yes, is the information from the school readiness measures used to target program quality improvement activities?
	Yes. Describe

☐ No ☐ Other. Describe
<ul><li>No</li><li>□ Other. Describe</li></ul>
c) Is school readiness information linked to the statewide longitudinal data system (SLDS, program of the Department of Education)?
<ul> <li>☐ Yes. Describe</li> <li>☑ No</li> <li>☐ Not applicable. State does not have an SLDS.</li> </ul>
3.2.7 Data & Performance Measures on Voluntary Early Learning
Guidelines — What data elements, if any, does the State/Territory have access to on the dissemination of, implementation of, or children's attainment of the early learning guidelines? What, if any, performance measures does the State/Territory use for dissemination and implementation of the early learning guidelines? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).
<ul> <li>a) Data on voluntary early learning guidelines. Indicate if the Lead Agency or another agency has access to data on:</li> </ul>
<ul> <li>Number/percentage of child care providers trained on ELG's for preschool aged children. Describe (optional) The Mississippi Child Care Resource &amp; Referral Network reports 2,823 providers were trained on preschool ELGs in the last program year.</li> <li>Number/percentage of child care providers trained on ELG's for infants and toddlers. Describe (optional) The Mississippi Child Care Resource &amp; Referral Network reports 3,231 providers were trained on infant/toddler ELGs in the last program year.</li> <li>Number of programs using ELG's in planning for their work.</li> <li>Describe (optional) The Mississippi Child Care Resource &amp; Referral Network reports 564 providers are using the ELGs in their work.</li> <li>Number of parents trained on or served in family support programs that use ELG's. Describe (optional)</li> <li>Other. Describe</li> <li>None</li> </ul>
b) <b>Performance measurement</b> . What, if any, are the Lead Agency's performance measures related to dissemination and implementation of the early learning guidelines?

CCDF Plan Effective Date: October 1, 2013 Amended Effective: \_\_\_\_\_ The Lead Agency funds the MSCCR&R Network. The scope of services for this contract requires that regular ongoing trainings related to each component of the ELGs are offered across the state in person and through distance learning.

c) **Evaluation**. What are the State/Territory's plans, if any, for evaluation related to early learning guidelines and the progress of children in child care? Evaluation can include efforts related to monitoring implementation of an initiative validation of standards or program assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The Lead Agency plans to use the SLDS to determine the number of providers currently working in childcare that have received the ELG trainings. Additionally, the Lead Agency is working with the MSCCR&R to add advanced trainings on the ELGs for those providers who have mastered the introductory level trainings.

#### 3.2.8 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). What are the Lead Agency's goals for using voluntary early learning guidelines in the coming biennium? What progress does the Lead Agency expect to make related to early learning guidelines?

Goal 1: Expand provider knowledge of the application of ELG principles by advanced training.

Goal 2: Assess the feasibility of assessing children using the developmental checklists included in the ELGs for all children in programs where they are being implemented.

# 3.3 Creating Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)

Many States have chosen to use targeted quality funds and other resources to develop a systematic framework for evaluating, improving, and communicating the level of quality in early childhood programs (i.e. QRIS). States and Territories will provide a self-assessment on current program quality improvement activities by responding to questions in this section and then describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to a Quality Rating and Improvement System (QRIS) framework. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

- 1. Program standards
- 2. Supports to programs to improve quality
- 3. Financial incentives and supports
- 4. Quality assurance and monitoring
- 5. Outreach and consumer education

While not all States and Territories have developed or implemented a formal QRIS, all are pursuing quality improvement strategies that can be described within this framework (based upon previous CCDF Plans). Using this framework to organize this section allows States/Territories to report on their quality improvement activities systematically whether they have a QRIS or not. Over time, States and Territories are encouraged to work on linking their quality improvement initiatives and strategies across all of these elements, culminating in a comprehensive Quality Rating and Improvement System with adequate support for providers to attain higher levels of quality and transparency for parents and the community regarding the quality of child care.

a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities.

The Mississippi Child Care Quality Step System is a star-based QRIS system currently funded by state funds and CCDF Quality funds. The Mississippi State University Early Childhood Institute implements this program. The Lead Agency and MSU ECI collaborate on best practices related to this program's administration and implementation.

#### 3.3.1 Element 1 – Program Standards

**Definition** – For purposes of this section, program standards refers to the expectations for quality, or quality indicators, which identify different levels of and pathways to improved quality. Minimum licensing standards and health and safety requirements provided in section 3.1 are also program standards but in this section, we focus on those standards that build upon and go beyond those minimum requirements.

a) Does your State/Territory's have quality improvement standards that

include indicators covering the following areas beyond what is required for licensing? Check any indicators, if any, that your State/Territory has chosen establish.	
<ul> <li>□ Ratios and group size</li> <li>□ Health, nutrition and safety</li> <li>⋈ Learning environment and curriculum</li> <li>⋈ Staff/Provider qualifications and professional development</li> <li>⋈ Teacher/providers-child relationships</li> </ul>	
☐ Teacher/provider instructional practices	

<ul> <li>☐ Family partnerships and family strengthening</li> <li>☐ Community relationships</li> <li>☐ Administration and management</li> <li>☐ Developmental screenings</li> <li>☐ Child assessment for the purposes of individualizing instruction and/or targeting program improvement</li> <li>☐ Cultural competence</li> <li>☐ Other. Describe</li> <li>☐ None. If checked, skip to 3.3.2.</li> </ul>
b) Does your State/Territory have quality improvement standards with provisions about the care of any of these groups of children? Check any provisions your State/Territory has chosen to establish.
<ul> <li>☐ Children with special needs as defined by your State/Territory</li> <li>☐ Infants and toddlers</li> <li>☐ School-age children</li> <li>☐ Children who are dual language learners</li> <li>☐ None</li> </ul>
c) How do your State/Territory's quality standards link to State/Territory licensing requirements? Check any links between your State/Territory's quality standards and licensing requirements.
<ul> <li>☐ Licensing is a pre-requisite for participation</li> <li>☐ Licensing is the first tier of the quality levels</li> <li>☐ State/Territory license is a "rated" license.</li> <li>☐ Other. Describe</li> <li>☐ Not linked.</li> </ul>
d) Do your State/Territory's quality improvement standards align with or have reciprocity with any of the following standards? Check any alignment, if any, between your State/Territory's quality standards and other standards.
☐ Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system) ☐ Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)
Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)  Other. Describe  None

## 3.3.2 Element 2 - Supports to Programs to Improve Quality

**Definition** – For purposes of this section, supports to programs to improve quality refers to such activities as technical assistance and consultation services for programs to assist in meeting child care quality improvement standards.

a) Check which types of and for what purposes the State/Territory uses supports to child care programs, if any, in the following chart. If none, skip to 3.3.3.

Types and Purposes of Support	Information or Written Materials	Training	On-Site Consultation
Attaining and maintaining licensing compliance			
<ul><li></li></ul>	$\boxtimes$		$\boxtimes$
Attaining and maintaining accreditation			
□ Providing targeted technical assistance in specialized content areas:			
Health and safety			
Infant/toddler care			
School-age care			
Inclusion			
Teaching dual language learners			
Mental health			
Business management practices			
Other. Describe			
☐ None. Skip to 3.3.3.			

	used to customize quality improvement supports to the needs of
individual p	orograms include:
$\overline{\boxtimes}$ T	rogram improvement plans echnical assistance on the use of program assessment tools other. Describe
c) Is technical assi forward on QRIS?	stance linked to entering the QRIS or targeted to help programs
	es. Describe <u>The MS Child Care Resource and Referral Network</u> , ners for Quality Care, and the Allies for Quality Care program

Other. Describe	I			
3.3.3 Element 3 – Financial Incentives and Supports				
<b>Definition</b> – For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and QRIS or other child care quality improvement standards for programs.				
a) Identify which types of financial incentives are offered and to which providers in the following chart. Check which incentives and supports, if any, the State/Territory chooses to offer. If none, skip to 3.3.4.				
Types of Financial Incentives and Supports for Programs	Child Care Centers	Child Care Homes	License- Exempt Providers	
Grants to programs to meet or maintain licensing				
Grants to programs to meet QRIS or similar quality level				
One-time awards or bonuses on completion of quality standard attainment				
☑ Tiered reimbursement tied to quality for children receiving subsidy				
On-going, periodic grants or stipends ied to improving/maintaining quality				
☐ Tax credits tied to meeting program quality standards				
Other. Describe				
None. Skip to 3.3.4.				
3.3.4 – Element 4 - Quality Assurance and Monitoring  Definition – For purposes of this section, quality assurance and monitoring refers to the ways that the State/Territory measures program quality for the purposes of its QRIS or other quality improvement system and the methods for measuring that the child care quality improvement standards for programs are met initially and maintained over time.  a) What tools, if any, does the State/Territory use to measure and monitor the quality of programs? Check all that apply and briefly describe using the chart below, including which programs are required to participate and the frequency of assessments. If none, skip to 3.3.5.				

provide onsite technical assistance desigened to improve a licensed program's rating in the QRIS.

No

Types of Program Quality Assessment Tools	Child Care Centers	Child Care Homes	License- Exempt Providers
<ul> <li>☑ Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS)</li> <li>Describe, including frequency of assessments.</li> <li>Pre/Post</li> </ul>	☐ Infant/Toddler☐ Preschool☐ School-Age		
☐ Classroom Assessment Scoring System (CLASS)  Describe, including frequency of assessments.		N/A	
Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes  Describe, including frequency of assessments.			
Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21st Century Learning Center programs  Describe, including frequency of assessments.			
Other. Describe			
None. Skip to 3.3.5.			
b) What steps, if any, has the State/Tand monitoring across funding streaduplication?    Have a mechanism to track assessments/monitoring active   Include QRIS or other quatenforcement   Have compliance monitoring Head Start, State/Territory provided in the provided in	ms and sectors in a different quality vities to avoid duplity reviews as parties in one sector re-k) serve as valitiem (e.g., QRIS) and accreditation in quality improve	order to many plication art of licensition (e.g., Head addition for a without fur standards s	ninimize  ng Start/Early compliance ther review serve as

# 3.3.5 – Element 5 - Outreach and Consumer Education

<b>Definition</b> – For purposes of this section, outreach and consumer education refers to the strategies used to promote the child care quality improvement standards to parents, programs and the general public.
a) Does the State/Territory use symbols or simple icons to communicate levels of quality for child care programs beyond what may communicated to parents about licensing status and licensing compliance as reported in 3.1.3? (e.g. stars, or gold/silver/bronze levels).
<ul> <li>☐ Yes. If yes, how is it used?</li> <li>☐ Resource and referral/consumer education services use with parents seeking care</li> <li>☐ Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting</li> <li>☐ Searchable database on the web</li> <li>☐ Voluntarily, visibly posted in programs</li> <li>☐ Mandatory to post visibly in programs</li> <li>☐ Used in marketing and public awareness campaigns</li> <li>☐ Other. Describe</li> <li>☐ No. If no, skip to 3.3.6.</li> <li>b) Does the State/Territory use any forms of media to reach parents and the public to communicate about levels of quality for child care programs? Check</li> </ul>
which forms, if any, the State/Territory uses to communicate levels of quality for child care programs.
<ul> <li>☑ Print</li> <li>☐ Radio</li> <li>☐ Television</li> <li>☑ Web</li> <li>☐ Telephone</li> <li>☐ Social Marketing</li> <li>☐ Other. Describe</li> <li>☐ None</li> </ul>
c) Describe any targeted outreach for culturally and linguistically diverse families.

The Lead Agency has developed print media to illustrate what a quality child care environment looks like through photographs and very few words. This is

designed for non-English speaking parents and low literacy parents.

3.3.6. Quality Rating and Improvement System (QRIS)

a) Based on the five key elements of a QRIS described above in 3.3.1 through 3.3.5, does your State/Territory have a quality rating and improvement system (QRIS) or similar quality improvement system in place?  \[ \times \text{Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating \text{State/Territory-wide.} \[ \times \text{Participation is voluntary for All licensed child care providers.} \]
☐ Participation is mandatory for ☐ Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating as a pilot or in a few localities but not State/Territory-wide. ☐ No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements. ☐ State/Territory is in the development phase ☐ State/Territory has no plans for development ☐ Other. Describe
b) If yes to 3.3.6a, <b>CHECK</b> the types of providers eligible to participate in the QRIS:
<ul> <li>☐ Child care centers</li> <li>☐ Group child care homes</li> <li>☐ Family child care homes</li> <li>☐ In-home child care</li> <li>☐ License exempt providers</li> <li>☐ Early Head Start programs</li> <li>☐ Head Start programs</li> <li>☐ Pre-kindergarten programs</li> <li>☐ School-age programs</li> <li>☐ Other. Describe</li> </ul>
3.3.7. If the State/Territory has or will have any quality improvement strategies for targeted groups of providers (e.g., relative caregivers or caregivers who are legally exempt from licensing) that are not described in your responses to any question in section 3.3 above, please describe  At this time, the Lead Agency is working with the Mississippi State University  Extension Service to pilot a QRIS program for out-of-school programs and for family child care providers.
<b>3.3.8 Data &amp; Performance Measures on Program Quality</b> — What data elements, if any, does the State/Territory currently have access to related to the quality of programs? What, if any, does the State/Territory use for performance measures on program quality improvement? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide

information, not to require Lead Agencies to collect or report this information. For

any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on program quality**. Indicate if the Lead Agency or another agency has access to data on: \times Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory. Describe (optional) ERS software currently tracks all QRIS program activity. This data is housed at the Mississippi State University Early Childhood Institute. Number of programs that move program quality levels annually (up or down). Describe (optional) Program scores on program assessment instruments. List instruments: \_\_\_\_\_ Describe (optional) Classroom scores on program assessment instruments. List instruments: ITERS-R & ECERS-R Describe (optional) Qualifications for teachers or caregivers within each program. Describe (optional) This information is maintained by the Professional Development registry housed at the MS Child Care Resource & Referral Network Number/Percentage of children receiving CCDF assistance in licensed care. Describe (optional) The Lead Agency houses this information in CCIS. Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory The Lead Agency houses this information in CCIS. Number/Percentage of programs receiving financial assistance to meet higher program standards. Describe (optional) The Lead Agency houses this information in CCPS. Other. Describe None b) **Performance measurement**. What, if any, are the Lead Agency's performance measures on program quality? The Lead Agency supports providers in their efforts to improve program quality. The Lead Agency considers a score of 3.0 on either the ITERS-r or ECERS-R to indicate basic/minimal levels of quality. c) **Evaluation**. What, if any, are the State/Territory's plans for evaluation related to program quality? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. The Lead Agency is funding the evaluation and validation of the QRIS in the upcoming year. The resulting information will be made to identify

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#### strategies to improve QRIS implementation and increase program quality.

#### 3.3.9 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub-section in 3.3. What are the State/Territory's goals for the program quality improvement system in the coming biennium? What progress does the State/Territory expect to make across the five key elements for quality improvement systems?

Goal 1: Assess the overall functioning of the QRIS.

Goal 2: Increase parental knowledge about provider quality ratings.

## 3.4 Pathways to Excellence for the Workforce – Professional Development Systems and Workforce Initiatives (Component #4)

Pathways to excellence for the workforce builds on the significant investments States and Territories have made in the area of professional development systems to ensure a well-qualified workforce with opportunities for growth from entry level through master teacher, with an increasing emphasis on the many additional roles in the child care system (e.g. adult educators such as consultants, technical assistance providers, trainers, and higher education faculty). In this section, States and Territories provide a self-assessment on current professional development and workforce activities and describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to five key elements for workforce systems:

- 1) Core Knowledge and Competencies
- 2) Career Pathways (or Career Lattice)
- 3) Professional Development Capacity
- 4) Access to Professional Development
- 5) Compensation, Benefits and Workforce Conditions
- a) Describe which entities are involved in planning and administering the activities in Section 3.4, including State/Territory entities and local or community level entities.

Mississippi is beginning to engage in discussions surrounding these activities through the work of the Mississippi Early Childhood Advisory Council. At this time the Lead Agency supports access to professional development by funding the Mississippi Child Care Resource and Referral Network and other programs to offer professional development training offered at no cost to participants.

## 3.4.1 Workforce Element 1 - Core Knowledge and Competencies

**Definition** – For purposes of this section, core knowledge and competencies

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(CKCs) refers to the expectations for what the workforce should know (content) and be able to do (skills) in their role working with and/or on behalf of children and their families. These CKCs provide a foundation for professional development design (including instructional practices) and other quality improvement efforts.

	d) Are the CKCs aligned with other State/Territory or national standards? Check which ways, if any, the State/Territory aligns its CKCs with other standards.
	☐ Cross-walked with the Child Development Associate (CDA) competencies ☐ Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, National Council for Accreditation of Teacher Education/Council for the Accreditation of Educator Preparation, Head Start SOLAR staff skills indicators) ☐ Cross-walked with apprenticeship competencies ☐ Other. Describe ☐ None
	e) Check for which roles, if any, the State/Territory developed supplemental or specialized competencies.
	☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe ☐ Providers working directly with children in family child care homes, including aides and assistants. Describe ☐ Administrators in centers (including educational coordinators, directors). Describe ☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe ☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe ☐ Other. Describe ☐ None
	f) Check if the State/Territory has developed any supplemental or specialized competencies for practitioners/providers working with the following ages.
	☐ Birth-to-three ☐ Three-to-five ☐ Five and older ☐ Other. Describe ☐ None
2	<b>Workforce Element 2 - Career Pathways</b>

## 3.4.2

**Definition** – For purposes of this section, career pathways (or career lattice) defines the options and sequence of qualifications and ongoing professional development to work with children. Career pathways assist professionals in understanding their career options and identify steps for advancement for the workforce recognizing and rewarding higher levels of preparation and mastery of practice to promote higher quality services for children.

sequence of qualifications r	ritory have a career pathway which defines the related to professional development (education, stance) and experience required to work with
Yes. Describe No, the State/Terquestion 3.4.3.	ritory has not developed a career pathway. Skip to
Insert web addresses	s, where possible:
b) Check for which roles, if specializations or credentia	any, the career pathways include qualifications, lls.
assistants, teachers,  Providers workin including aides and Administrators ir directors). Describe Technical assistate consultants, home v	ectly with children in centers, including aides, master teachers. Describe g directly with children in family child care homes, assistants. Describe necenters (including educational coordinators, nece providers (including mentors, coaches, isitors, etc.). Describe aining staff (such as trainers, CCR&R staff,
c) Does the career pathway if any, for working with any	s (or lattice) include specializations or credentials, of the following children?
☐ Infants and toddl ☐ Preschoolers ☐ School-age childr ☐ Dual language lea ☐ Children with dis children with oth ☐ Other. Describe ☐ None	ren arners abilities, children with developmental delays, and
d) In what ways, if any, is the Voluntary guide a Required placem programs that are lie children birth to 13 Required placem receive public funds	he career pathway (or lattice) used? and planning resource ent for all practitioners and providers working in censed or regulated in the State/Territory to serve ent for all practitioners working in programs that to serve children birth to 13 ent for adult educators (i.e., those that provide

training, education and/or technical assistance)  Required placement for participation in scholarship and/or other incentive and support programs  Required placement for participation in the QRIS or other quality improvement system  Other. Describe  None
e) Are individuals' qualifications, professional development, and work experience verified prior to placement on the career pathway (or lattice?)?
☐ Yes. If yes, describe ☐ No
3.4.3 Workforce Element 3 – Professional Development Capacity
<b>Definition</b> – For purposes of this section, professional development incorporates higher education, training and technical assistance. Higher education capacity refers to capability of the higher education system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Training and technical assistance capacity refers to capability of the training and technical assistance system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Early childhood includes infants, toddlers and preschoolers.
a) Has the State/Territory assessed the availability of degree programs in early-childhood education, school-age care or youth development, and related fields in the State/Territory (e.g., both physical location and distance-based, accessibility to practitioners, etc.)?
☐ Yes. If yes, describe ☐ No
b) Has the State/Territory assessed the availability of early-childhood and school-age and related training and technical assistance programs in the State/Territory (e.g., both physical location and distance-based, degree level, etc.)?  Yes. If yes, describe No
c) What quality assurance mechanisms, if any, are in place for the degree programs and courses offered by the State/Territory institutions?
<ul><li></li></ul>

<ul> <li>Standards set by State/Territory departments of education</li> <li>Standards set by national teacher preparation accrediting agencies</li> <li>Other. Describe</li> <li>None</li> </ul>
d) What quality assurance mechanisms, if any, are in place for the training and technical assistance programs offered by the State/Territory?
<ul> <li>☐ Training approval process. Describe</li> <li>☐ Trainer approval process. Describe All T&amp;TA staff are evaluated by supervisors monthly.</li> <li>☐ Training and/or technical assistance evaluations. Describe</li> <li>☐ Other. Describe</li> <li>☐ None</li> </ul>
e) Does the State/Territory have articulation agreements in place across and within institutions of higher education?
☐ Yes. If yes, describe ☐ No
f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?
☐ Yes. If yes, describe ☐ No
3.4.4 Workforce Element 4 – Access to Professional Development
Definition – For purposes of this section, access to professional development (training, education and technical assistance) refers to the degree to which practitioners are made aware of, and receive supports and assistance to utilize, professional development opportunities.
a) Does the State/Territory have professional development opportunities accessible for professionals in various or all sectors of the early childhood and school-age field?
<ul> <li>✓ Yes. If yes, for which sectors?</li> <li>✓ Child care</li> <li>✓ Head Start/Early Head Start</li> <li>✓ Pre-Kindergarten</li> <li>✓ Public schools</li> <li>✓ Early intervention/special education</li> <li>✓ Other. Describe</li> </ul>

b) Does the State/Territory have a State/Territory-wide, coordinated and easily accessible clearinghouse of information about professional development opportunities available to all members of the early childhood and school-age workforce? Lead Agencies are not required to have a professional development system, but States/Territories may develop such clearinghouses to promote access to professional development opportunities.
<ul> <li>✓ Yes. If yes, describe</li> <li>This information is disseminated through the Mississippi Child Care</li> <li>Resource and Referral Network.</li> <li>☐ No</li> </ul>
Insert web addresses, where possible: www.msucares.com/childcare
c) What supports, if any, does the State/Territory provide to promote access to training and education activities?
<ul> <li>Scholarships. Describe Scholarships are offered to providers in order to attain a CDA</li> <li>Free training and education. Describe All training and technical assistance is offered free of charge to all participants.</li> <li>□ Reimbursement for training and education expenses. Describe</li> </ul>
Grants. Describe Loans. Describe Loan forgiveness programs. Describe Substitute pools. Describe Release time. Describe Other. Describe None
d) Does the State/Territory have career advisors for early childhood and school-age practitioners?
☐ Yes. If yes, describe ☐ No
e) Does the State/Territory have mentors, coaches, consultants, and/or other specialists available to provide technical assistance to the workforce?
<ul> <li>∑ Yes. If yes, describe</li> <li>The Lead Agency funds several programs that provide mentoring and coaching to the workforce. Programs include the MS Child Care</li> <li>Resource and Referral Network, Allies for Quality Care, CDA</li> <li>Scholarship Program, Nurturing Homes Initiative, Partners for Quality Care and Project PREPARE.</li> <li>☐ No</li> </ul>

## 3.4.5 Workforce Element 5- Compensation, Benefits and Workforce Conditions

**Definition** – For purposes of this section, rewards for education and training refers

to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.
a) Does the State/Territory have a salary or wage scale for various professional roles?
☐ Yes. If yes, describe ☐ No
b) Does the State/Territory provide financial rewards for participation in professional development, such as one-time salary bonuses for completing a training or education program?
<ul> <li>✓ Yes. If yes, describe One time bonuses are provided to individuals who complete their Child Development Associate certification through the use of SAC Head Start ARRA funds.</li> <li>☐ No</li> </ul>
c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?
☐ Yes. If yes, describe ☐ No
d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?
☐ Yes. If yes, describe ☐ No
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3.4.6 Data & Performance Measures on the Child Care Workforce -

What data elements, if any, does the State/Territory currently have access to related to the child care dworkforce? What, if any, does the State/Territory use for performance measures on professional development and workforce initiatives? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) Data on the child care workforce. Indicate if the Lead Agency or

☐ Data on the size of the child care workforce. Describe (optional)
☐ Data on the demographic characteristics of practitioners or providers working directly with children. Describe (optional) ☐ Records of individual teachers or caregivers and their qualifications. Describe (optional) ☐
Retention rates. Describe (optional) Records of individual professional development specialists and their qualifications. Describe (optional)
Qualifications of teachers or caregivers linked to the programs in which they teach. Describe (optional)
<ul> <li>Number of scholarships awarded . Describe (optional)</li> <li>Number of individuals receiving bonuses or other financial rewards or incentives. Describe (optional)</li> </ul>
☐ Number of credentials and degrees conferred annually. Describe (optional)
☐ Data on T/TA completion or attrition rates. Describe (optional)
Data on degree completion or attrition rates. Describe (optional)
Other. Describe None
b) Does the State/Territory have a workforce data system, such as a workforce registry, which tracks workforce demographics, compensation, and qualifications and ongoing professional development for practitioners working with children birth to age 13?
<b>Definition</b> — For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.
☐ Yes. b-1) If yes, which roles are included in the workforce data
system? For each role checked, indicate in your description whether participation is voluntary or mandatory.  Staff working directly with children in centers,
including aides, assistants, teachers, master teachers.  Describe
Providers working directly with children in family child care homes, including aides and assistants. Describe
Administrators in centers (including educational

another agency has access to data on:

coordinators, directors). Describe
☐ Technical assistance providers (including mentors,
coaches, consultants, home visitors, etc.). Describe
Education and training staff (such as trainers, CCR&R
staff, faculty). Describe
Other. Describe
None
b-2) Does the workforce data system apply to:
all practitioners working in programs that are licensed
or regulated by the State/Territory to serve children birth
to 13?
all practitioners working in programs that receive
public funds to serve children birth to age 13?
No.

c) **Performance measurement**. What, if any, performance measures does the State/Territory use related to its workforce and professional development systems?

The Lead Agency is currently participating in the work of the State Early Childhood Advisory Council. This Council has taken on workforce development as one of its priorities.

d) **Evaluation**. What, if any, are the State/Territory's plans for evaluation related to its workforce and professional development systems? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. The Lead Agency is dedicated to the continued development of a comprehensive, functional professional development system in Mississippi.

#### 3.4.7 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section in 3.4. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the State/Territory's goals for the building the professional development system and improving conditions for the workforce in the coming biennium? What progress does the State/Territory expect to make across the five key elements for the workforce and professional development system described above?

**Note** – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 – Improve functionality of a professional development tracking system that allows for greater knowledge about the workforce.

Goal 2 – Determine retention rates of professionals in the workforce with a degree.

Goal 3 – Build a single system for trainers and technical assistants in all Lead Agency funded programs to use.

Goal 4 – Initiate efforts to develop standards and competencies for trainers and technical assistants.

Goal 5 – Review data related to training and technical assistance programs to identify gaps, and opportunities for expansion of support.

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#### **AMENDMENTS LOG**

CHILD CARE AND DEVELOPMENT FUND PLAN FOR: \_\_\_\_\_\_
FOR THE PERIOD: 10/1/11 - 9/30/12

Lead Agencies are required to request approval from Administration for Children and Families (ACF) whenever a "substantial" change in the Lead Agency's approved CCDF plan occurs. Please refer to the <u>ACF Program Instruction regarding CCDF Plan</u> amendments for more information.

Plan amendments must be submitted to ACF within 60 days of the effective date of the change. Under the regulation, the plan amendment must be approved no later than the 90th day following the date on which the amendment is received by ACF unless the Lead Agency and ACF mutually agree in writing to extend the period. (§98.18 (b)).

ACF encourages Lead Agencies to contact the Child Care program staff in the appropriate ACF Regional Office to discuss any proposed amendment as early as possible.

#### **Instructions for Submitting Amendments:**

Complete the first 3 columns of the Amendment Log and send a copy of the Log (showing the latest amendment sent to ACF) <u>and</u> the amended section(s) to the ACF Regional Office contact. Lead Agency also should indicate the Effective Date of the amended section in the footer at the bottom of the amended page(s). A copy of the Log, showing the latest amendment pending in ACF, is retained as part of the Lead Agency's Plan.

ACF will complete column 4 and returns a photocopy of the Log to the grantee following its review and approval of the amendment. The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

**Note**: This process depends on repeated subsequent use of the <u>same</u> Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain "old" plan pages that are superseded by amendments in a separate appendix to its Plan. This is especially important as auditors will review CCDF Plans and examine effective date of changes.

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SECTION	EFFECTIVE/	DATE	DATE APPROVED
AMENDED	PROPOSED EFFECTIVE DATE	SUBMITTED TO ACF	BY ACF
	ETTECTIVE DITTE	1101	
			_

# APPENDIX 1 QUALITY PERFORMANCE REPORT

This annual report will be submitted to ACF no later than December 31, 2014 and will reflect the period October 1, 2013 through September 30, 2014. Lead Agencies will leave this report blank when the Plan is initially submitted.

In this report, Lead Agencies are asked about the State/Territory's progress in meetings its goals as reported in the FY 2014-2015 CCDF Plan, and provide available data on the results of those activities. At a minimum, Lead Agencies are expected to respond to the first question in each section of the Quality Performance Report (QPR) which asks for their progress toward meeting their goal(s) articulated in Part 2 and Part 3 of the CCDF Plan for this Biennium.

Because of the flexibility in administering the CCDF program, it is expected that Lead Agencies may not have information and data available to respond to all questions. A <u>Describe box</u> is provided for each question for Lead Agencies to provide descriptive context for data reported and narrative updates in each data section, including any plans for reporting data in the future, if actual data is not currently available or if specific questions are not applicable. Lead Agencies may use data collected by other agencies and entities (e.g., CCR&R agencies or other contractors) as appropriate. The term Lead Agency is used in questions when the data relate to a CCDF-specific activity, otherwise the term State/Territory is used when another entity may be responsible or involved with an activity (e.g., licensing).

The purpose of this annual report is to capture State/Territory progress on improving the quality of child care. Specifically, this report will:

- Provide a national assessment of State's and Territory's progress toward improving the quality of child care, including a focus on program quality and child care workforce quality;
- Track State's and Territory's annual progress toward meeting high quality indicators and benchmarks, including those that they set for themselves in their CCDF Plans and those that are of interest to the U.S. Department of Health and Human Services in measuring CCDF program performance;
- Assist national and State/Territory technical assistance efforts to help States/Territories make strategic use of quality funds; and Assist with program accountability

This report collects progress on the five goals identified in Part 2 and Part 3 of the Child Care and Development Fund (CCDF) Plan for FY2014-2015 along with key data in relation to the four components of child care quality used as a quality framework in Part 3 of the Child Care and Development Fund Plan for FY 2014-2015:

1. Ensuring health and safety of children through licensing and health and safety

- standards
- 2. Establishing early learning guidelines
- 3. Creating pathways to excellence for child care programs through program quality improvement activities
- 4. Creating pathways to an effective, well-supported child care workforce through professional development systems and workforce initiatives.

### **Ensuring the Health and Safety of Children (Component #1)**

In this section, Lead Agencies provide information on the minimum health and safety standards and activities in effect over the past year as of September 30, 2014.

### **A1.1 Progress on Overall Goals**

Based on the goals described in the Lead Agency's CCDF Plan at Section 3.1.7, please report your progress using the chart below.

You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., revised licensing regulation to include elements related to SIDS prevention, lowered caseload of licensing staff to 1:50, or increased monitoring visits to twice annually for child care centers). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

Note: If your licensing standards changed during this period, please
provide a brief summary of the major changes and submit the updated
regulations to the <u>National Resource Center for Health and Safety in</u>
Child Care.

#### A1.2 Key Data

OCC is collecting this information as one part of our overall effort to better understand States/Territories' activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here and that some data requested may be collected by another agency or entity other than the Lead Agency. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. For example, the number of programs with licensing violations will be

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affected by how stringent the licensing standards are. States with more stringent standards may be more likely to report more violations than those with less stringent licensing standards. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### **A1.2.1 Number of Programs**

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	w many licensed fa nitoring visit betwe				
	b-1) Of those progressions b-2) Of those progressions or ident b-3) What percents programs were cor N/A Describe:	rams visited, how r ified risk? age of required visi	nany were triggere	d by a	
	w many legally exent pring visit between c-1) Of those progrec-2) Of those progrecomplaint or ident c-3) What percentativere completed?  N/A Describe:	October 1, 2013 and cams visited, how make rams visited, how make ified risk?	d September 30, 20 nany were unannou nany were triggered	014? C inced? d by a	Of those,
	ber of Licensing ns from CCDF	Suspensions, Li	censing Revocat	ions	and
suspension of license includ	f license includes a f child care services les termination or r quires the closure o	because of licensing because of licensing the licensi	ng violations. Revo nsure and any othe	cation er enfo	of rcement
	How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year?	N/A	Describe

Child Care

Centers Group Child

Care Homes

	How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year?	N/A	Describe
Family Child Care Homes					
In-Home Providers					
A1.2.5 How many previously license-exempt providers were brought under the licensing system during the last fiscal year?  N/A  Describe:  A1.2.6 How many injuries as defined by the State/Territory occurred in child care during the last year?  Please provide your definition of injuries in the Describe box and indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers).  N/A  Describe:  A1.2.7 How many fatalities occurred in child care or as the result of a child care accident or injury as of the end of the last year?  Please indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers).  N/A  Describe:  Establishing Early Learning Guidelines (Component #2)					
A2.1 Progress on Overall Goals					
A2.1.1 Did the State/Territory make any changes to its voluntary early learning guidelines (including guidelines for school-age children) as reported in 3.2 during the last fiscal year?					
reported in	3.2 during the la	ast fiscal year?		ui cii	) as

# A2.1.2 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.2.8, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs trained on using the ELG's, Aligned the ELG's with Head Start Child Development and Early Learning Framework). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

### A2.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

# A2.2.1a How many individuals were trained on early learning guidelines (ELG's) or standards over the last fiscal year?

Responses to this question should be consistent with information provided in question 3.2.3 in the CCDF Plan.

Provider Categories	Birth to Three ELG's	Three- to-Five ELG's	Five and Older ELG's	N/A	Describe
How many teachers/practitioners in center- based programs were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)					

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Provider Categories	Birth to Three ELG's	Three- to-Five ELG's	Five and Older ELG's	N/A	Describe
How many family child care providers were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)					
How many legally exempt providers were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)					

# A2.2.1b How many children are served in programs implementing the ELG's?

Refer to question 3.2.4 in the CCDF Plan for examples of how ELG's can be implemented in programs. Program capacity can be used as an estimate of children served.

Provider Categories	Birth to Three ELG's	Three- to-Five ELG's	Five and Older ELG's	N/A	Describe
How many children are served					
in center-based programs					
implementing the ELG's?					
Separate by age group if					
possible (e.g., infants and					
toddlers, preschoolers, school-					
age children)					
How many children are served					
in family child care program					
implementing the ELG's?					
Separate by age group if					
possible (e.g., infants and					
toddlers, preschoolers, school-					
age children)					
How many children are served					
in legally exempt programs					
implementing the ELG's?					
Separate by age group if					
possible (e.g., infants and					
toddlers, preschoolers, school-					

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<b>Provider Categories</b>	Birth to Three ELG's	Three- to-Five ELG's	Five and Older ELG's	N/A	Describe
age children)					

Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)

### **A3.1 Progress on Overall Goals**

# A3.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.3.9, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs included in the QRIS, Aligned the QRIS standards with Head Start performance standards, or expanded the number of programs with access to an on-site quality consultant). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

#### A3.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### A3.2.1 Number of Program Receiving Targeted Technical Assistance

Targeted technical assistance is technical assistance (coaching, mentoring and consultation) that is designed to address a particular domain/area of quality. Responses in this section should be consistent with responses provided in question 3.3.2 in the CCDF Plan which focuses on targeted technical assistance to programs

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quality. a) How many programs received targeted technical assistance during the last fiscal year (October 1, 2013 through September 30, 2014)? N/A Describe: b) If possible, report the number of programs who received targeted technical assistance in the following areas: Health and safety \_\_ Infant and toddler care School-age care Inclusion Teaching dual language learners \_\_\_\_\_ Understanding developmental screenings and/or observational assessment tools for program improvement purposes \_\_\_\_\_ Mental health Business management practices N/A Describe: A3.2.2 Number of Programs Receiving Financial Supports Responses to this question should be consistent with responses provided in question 3.3.3 of the CCDF Plan. Financial supports must be intended to reward, improve, or sustain quality. They can include grants, cash, reimbursements, gift cards, or purchases made to benefit a program. This includes tiered reimbursements for CCDF subsidies. One-time grants, awards, or bonuses include any kind of financial support that a program can receive only once. On-going or periodic quality **stipends** include any kind of financial support intended to reward, improve, or sustain quality that a program can receive more than once. a) How many programs received one-time, grants, awards or bonuses? Child Care Centers  $\prod N/A$ Describe: Family Child Care Homes \_\_\_\_\_ N/A Describe: b) How many programs received on-going or periodic quality stipends? Child Care Centers  $\prod N/A$ Describe: Family Child Care Homes □ N/A Describe:

(rather than practitioners) that is intended for moving programs to higher levels of

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# **A3.2.3** Number of Eligible Programs for State/Territory QRIS or Other Quality Improvement System

a)	What is the total number of eligible child care centers for QRISOR Other Quality Improvement System? N/A Describe:
b)	What is the total number of eligible family child care homes for QRIS  OR Other Quality Improvement System?  N/A  Describe:
c)	What is the total number of eligible license-exempt providers for QRIS  OR Other Quality Improvement System?  N/A  Describe:
	umber and Percentage of Programs Participating in erritory QRIS or Other Quality Improvement System
a)	Of the total number eligible as reported in A3.2.3, what is the total number and percentage of child care center programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?
	Number of Child Care Centers Participating in QRIS OR Other Quality Improvement System
	Percentage of Child Care Centers Participating in QRIS OR Other Quality Improvement System N/A Describe:
b)	Of the total number eligible as reported in A3.2.3, what is the total number and percentage of family child care programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?
	Number of Family Child Care Homes QRIS OR Other Quality Improvement System
	Percentage of Family Child Care Homes QRIS OR Other Quality Improvement System   N/A Describe:
c)	Of the total number eligible as reported in A3.2.3, what is the total number

and percentage of license-exempt programs in the State/Territory that

	participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?					nent	
			ber of License-Exe ty Improvement S	_	_	O	R Other
	Percentage of License-Exempt Providers QRISOR Other Quality Improvement System  N/A Describe:					OR	
A3.2.	5. Number	of Pro	grams at Each	Level of	f Quality		
progra	ams at that le	vel of t	vide the total num he total number o nan QRIS, such as	f partici̇́ <sub>l</sub>	oating as reporte		
			Number of levels of quality		oer of programs th level	N/A	Describe
	Child Care Centers						
	Family Child Care Homes						
	License-Exe Providers	mpt					
If qua	lity threshold litation. Thes	is som	grams Who Monething other than bers ARE NOT exp the QRIS as report	QRIS, d	escribe the metri total the numbe	ic used	
		moved or achi quality establis State/7	nany programs up within the QRIS eved another threshold shed by the Ferritory over the cal year?	moved d QRIS or quality t establish	ny programs own within the achieved another hreshold hed by the erritory over the l year?	N/A	Describe
	Child Care Centers						
	Family Child Care						

Homes License-

Exempt Providers

# A3.2.7 Number of CCDF Subsidized Children Served in Programs Participating in the State/Territory Quality Improvement System

**Note**. If the State/Territory does not have a formal QRIS, the State/Territory may define another quality indicator and report it here.

a)	What percentage of CCDF children were served in participating programs during the last fiscal year?
b)	What percentage of CCDF children were served in high quality care as defined by the State/Territory? Provide the definition of high quality care in the Describe box. This may include assessment scores, accreditation, or other metric, if no QRIS.  N/A Describe:

Pathways to Excellence for the Child Care Workforce: Professional Development Systems and Workforce Initiatives (Component #4)

### <u>A4.1 Progress on Overall Goals</u>

# A4.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.4.7, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Implement a wage supplement program, Develop articulation agreements). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

### **A4.2** Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual

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information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### **A4.2.1** Number of Teachers/Caregivers and Qualification Levels

a)	What is the total number as of September 30, 201  N/A  Describe:		enter teachers in the	: State/'	Territory
b)	What is the total number as of September 30, 201  N/A  Describe:		care providers in th	ie State	/Territory
c)	What is the number of c qualification level as of level of education attain	the end of the las	2	_	•
		Child Care Center Teachers	Family Child Care Providers	N/A	Describe
	Child Development				
	Associate (CDA)			<del> </del>	
	State/Territory Credential				
	Associate's degree				
	Bachelor's degree				
	Graduate/Advanced				
	degree				
Deve	.2 Number of Individual comment Registry during the comment of the	<b>ing Last Fisca</b> l enters providers	Year (October 1		
-	3 Number of Individue ation as defined by Station as defined by S	tate/Territory of enters providers	during the last fi	•	•
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## A4.2.4 Number of Credentials and Degrees Awarded during Last Fiscal Year

If possible, list the type of credential or degree and in what type of setting the practitioner worked.

Setting	List Type of Credential and Provide Number Awarded	List Type of Degree and Provide Number Awarded	N/A	Describe
Teachers in				
child care				
centers				
Family child				<u> </u>
care home				
providers				
License-				
exempt				
providers				

# A4.2.5 Number of Individuals Receiving Technical Assistance during Last Fiscal Year

Describe any data you track on coaching, mentoring, or other specialist consultation. If possible, include in what type of setting the practitioner worked. Responses to this question should be consistent with information provided in question 3.4.4e of the CCDF Plan.

Setting	List Type of Technical Assistance and Provide Number	-	N/A	Describe
Teachers in child				
care centers				
Family child care				
home providers				
License-exempt				
providers				

providers <b>A4.2.6 Type of Financia</b>	l Supports Prov	ided and Number (	of.
Teachers/Providers Re			
Scholarships. Ho	w many teachers/p	oroviders received?	
Reimbursement f	for Training Expen	ses. How many teache	ers/providers
received?			
Loans. How man	y teachers/provide	rs received?	
☐ Wage supplemen	ts. How many teac	hers/providers receive	ed?
Other. Describe		, -	
□ N/A			
Describe:			

### **Building Subsidy Systems that Increase Access to High Quality Care**

In this section, Lead Agencies provide progress on their subsidy administration goals over the past year as of September 30, 2014.

### **A5.1 Progress on Overall Goals**

**Based on the goals described in the Lead Agency's CCDF Plan at Section 2.8, please report your progress using the chart below.** You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., established copayment policies that sustain income and sustain quality, or established eligibility policies that promote continuity of care). If applicable, describe any barriers to implementing your planned goals.

Goals Described in FY 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

# APPENDIX 2 CCDF PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures (§98.15) that:

- upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))

- (2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))
- (3) it will collect and disseminate to parents of eligible children and the general public consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

CCDF Regulations 45 CFR §98.13(b)(2)-(6) require the following certifications.

- 1. <u>Assurance of compliance with Title VI of the Civil Rights Act of</u> 1964
- 2. Certification regarding debarment
- 3. Definitions for use with certification of debarment
- 4. HHS certification regarding drug-free workplace requirements
- 5. Certification of Compliance with the Pro-Children Act of 1994
- 6. <u>Certification regarding lobbying</u>

These certifications were obtained in the 1997 Plan and need not be collected again if there has been no change in Lead Agency. If the there has been a change in Lead Agency, these certifications must be completed and submitted with the Plan.