Title 18: Human Services

Part 5: Division of Early Child Care and Development

Part 5 Chapter 1: Child Care and Development Fund (CCDF) Plan for Mississippi

## 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

CCDF Plan Effective Date: October 1, 2013

Amended Effective: \_\_\_\_\_

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

Berry, Exectutive Director Phone Number: 601-359-4480 Fax Number: 601-359-4910

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: Director, MDHS Division of Early

Childhood Care & Development

| Address of CCDF Administrator: 750 North State Street, Jackson, Mississippi 39202   |
|---|
| Phone Number: 601-359-4555  |
| Fax Number: 601-359-4422  |
| 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): <a href="https://www.childcareinfo.ms">www.childcareinfo.ms</a>  |
| www.cmidcarenno.ms  |
| <b>b) Contact Information for CCDF Co-Administrator (if applicable):</b> Name of CCDF Co-Administrator: <u>NA</u>   |
| 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   |
| 1.2.1. What is your expected level of funding for the first year of the FY 2014 – FY 2015 plan period?  The Lead Agency estimates that the following amounts will be available for child care   |
| 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   |

**Reminder** – 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.

1.2.2. 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 application and renewal fees. If known, identify the estimated amount of public funds the Lead |
| Agency will receive: \$7.6 M  |
| $oxed{oxed}$ 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</li></ul>  |
| donated funds?  |
| 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<br>Jackson, MS 39213  |
| Director, Oleta Fitzgerald  |
| 601-321-1966  |
| OFitzgerald@childrensdefense.org  |
| Non-profit Agency   |
| If known, identify the estimated amount of private donated funds the Lead Agency will receive: S_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,  |

| ☐ 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 | <b>Projected Impact</b> |
|------------------|--------------------|---------|-------------------------|
| <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<br>and Anticipated<br>Results (if<br>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 | 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<br>and Anticipated<br>Results (if<br>possible)  |
|---|--|---|--|
| School-<br>Age/Child<br>Care Resource<br>and Referral<br>Targeted<br>Funds<br>\$273,000 | Activities funded<br>with School Age<br>Targeted Funds<br>include a pilot Out-<br>of-school QRIS<br>program.   | This program assesses the level of quality of participating programs serving school-aged children.  | The Lead Agency<br>anticipates that this<br>program will evaluate<br>the leve of care offered<br>in programs serving<br>school-aged children,<br>and support increases<br>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<br>and Anticipated<br>Results (if<br>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.

| $oxed{oxed}$ 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. Describ          | e. The Lead Agency does have slot contractors in place that    |
| receive subsidy funds in  | reimbursement of care provided as a function of their          |
| contract.                 | •  |

## 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.

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- 4. Conducting quarterly reviews of cases for Improper Payment Review.
- 5. Utilizing reports from CCIS to monitor program activity including additions, terminations, expenditures, and obligations.
- 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 subcontracts 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, <a href="http://www.mdhs.state.ms.us/pdfs/dpimanual/dpi\_submanual.pdf">http://www.mdhs.state.ms.us/pdfs/dpimanual/dpi\_submanual.pdf</a>.

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<br>Program<br>Violations | Identify<br>Administrative<br>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))  |                                   |                                     |
| Run system reports that flag errors  |                                   |                                     |
| 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   |                                   |                                     |
| Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents   | $\boxtimes$                       |                                     |
| 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<br>and/or<br>Fraud | Administrative<br>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  |             |                        |                         |
| Reduce payments in subsequent months   |             | $\boxtimes$            |                         |
| 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?

|               | Ione   |
|---------------|--|
| $\boxtimes$ I | bisqualify client. If checked, please describe, including a description of the |
| app           | eal 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.

| Prosecute criminally | y |
|----------------------|---|
| 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<br>of Error<br>(if known) | Actions Taken<br>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 | 1. CCIS updates were completed in January 2013.  2. This process is ongoing.  3. CCIS updates were completed in January 2013. |

| Activities identified in ACF-402 | Cause/Type<br>of Error<br>(if known) | Actions Taken<br>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 <u>local governments</u>. (§§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 $(658D(b)(2), \S 98.12(b), 98.14(b))$ .

| Age | ency/Entity   | Describe how the Lead Agency<br>consulted with this Agency/entity<br>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 (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan.   |  |  |  |
|     | State/Territory agency responsible for public   | Representatives are members of   |  |  |

| Age         | ency/Entity   | Describe how the Lead Agency<br>consulted with this Agency/entity<br>in developing the CCDF Plan   |
|-------------|---|--|
|             | education   | the Mississippi Early Childhood<br>Advisory Council. All Council   |
|             | 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.  | 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   | Representatives are members of the Mississippi Early Childhood   |
|             | 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 | 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<br>the Mississippi Early Childhood<br>Advisory Council. All Council<br>members were provided with<br>copies of the draft State Plan for<br>their comments and<br>recommendations. |
| $\boxtimes$ | State/Territory agency with the Head Start<br>Collaboration grant   | Representatives are members of<br>the Mississippi Early Childhood<br>Advisory Council. All Council<br>members were provided with<br>copies of the draft State Plan for<br>their comments and<br>recommendations. |
| $\boxtimes$ | Statewide Advisory Council authorized by the Head<br>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.   |
|             | 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<br>the Mississippi Early Childhood<br>Advisory Council. All Council<br>members were provided with<br>copies of the draft State Plan for<br>their comments and<br>recommendations. |
|             | State/Territory agency responsible for the Child and<br>Adult Care Food Program (CACFP)   |  |
| $\boxtimes$ | State/Territory agency responsible for implementing<br>the Maternal and Early Childhood Home Visitation<br>programs grant   | The Lead Agency is the recipient of these funds.   |

| Age         | ency/Entity   | Describe how the Lead Agency<br>consulted with this Agency/entity<br>in developing the CCDF Plan   |
|-------------|---|--|
| $\boxtimes$ | 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<br>the Mississippi Early Childhood<br>Advisory Council. All Council<br>members were provided with<br>copies of the draft State Plan for<br>their comments and<br>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  | Copies of the draft State Plan were provided to the Tribla Organization for comments and recommendations. The Lead Agency met with representatives of the Tribe to discuss changes and requirement of State Plan submission. |
|             | 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.  |
| $\boxtimes$ | Provider groups, associations or labor organizations  | Representatives are members of<br>the Mississippi Early Childhood<br>Advisory Council. All Council<br>members were provided with<br>copies of the draft State Plan for<br>their comments and<br>recommendations.             |
|             | Parent groups or organizations  Local community organizations and institutions(child care resource and referral, Red Cross)   | Representatives are members of<br>the Mississippi Early Childhood<br>Advisory Council. All Council   |

| Agency/Entity |       | Describe how the Lead Agency<br>consulted with this Agency/entity<br>in developing the CCDF Plan  |  |
|---------------|-------|---|--|
|               |       | 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: 05/21/2013 **Reminder** Must be at least 20 days prior to the date of the public hearing.
- 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): 06/17/2013 **Reminder** Must be no earlier than 9 months before effective date of Plan (October 1, 2013).
- d) Hearing site(s): Mississippi Public Broadcasting Auditorium 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

| CCDF Plan I | riiective r | date: Oci | lober 1, | 2U1 |
|-------------|-------------|-----------|----------|-----|
| Amended Ef  | fective:    |           |          |     |

Plan from interested parties through email. This address was posted on the Lead Agency's website and in newspapers.

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 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 child care and early childhood and school-age development services 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 ( $\S98.14(a)(1)$ ).

| Agency/Entity<br>(check all that apply) |   | Describe how the<br>Lead Agency will<br>coordinate with this<br>Agency/entity in<br>delivering child care<br>and early childhood<br>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   | The Lead Agency is the recipient of the  | The Lead Agency will coordinate with these   |
|   | This may include, but is not limited to: representatives from counties and municipalities, local education representatives, | Maternal, Infant and<br>Child Health home<br>visiting funds. Through<br>the implementation of<br>this program,                               | entities to increase<br>access to community<br>resources such as<br>TANF, SNAP, WIC,<br>Medicaid, child care   |

| Agency/Entity<br>(check all that apply) |   | Describe how the<br>Lead Agency will<br>coordinate with this<br>Agency/entity in<br>delivering child care<br>and early childhood<br>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. |
|---|---|---|--|
|   | or local public health agencies.  | coordination with LEAs, county health departments, county DHS offices, local law enforcement and local government representatives will be imperative.                         | subsidy, CHiP, immunizations, child support, GED and alternative education options.  |
| $\boxtimes$                             | 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<br>the Out-of-School<br>Project which works<br>with public and private<br>school age care<br>providers to<br>offer mentoring and<br>quality evaluation. | The Lead Agency's support of this program will result in increased support for and quality of existing school age care services.   |
|   | Other Federal, State, local,<br>Tribal (if applicable),<br>and/or private agencies<br>providing early childhood<br>and school-age/youth-<br>serving developmental<br>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.   |

|             | ency/Entity<br>eck all that apply)   | Describe how the<br>Lead Agency will<br>coordinate with this<br>Agency/entity in<br>delivering child care<br>and early childhood<br>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. |
|-------------|--|--|--|
|             | 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 is achieved through participation on the MS Department of Health, Division of Child Care Licensure Baord and through partnership on the Maternal, Infant, and Child Health Home Visitation Grant. All licensed providers are required by MS Dept. of Health licensure regulations to have copies of immunizations for staff and children. This group monitors the presence of these records for the Lead Agency during onsite visits with these programs. | Through this collaboration, the Lead Agency is working to strengthen the health and safety of home and child care environments for children across the state.  |
| $\boxtimes$ | State/Territory agency<br>responsible for<br>employment services /<br>workforce development<br>( <b>required</b> )   | Coordination will 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. Currently, an  | The Lead Agency expects to examine data across these programs to determine how assistance in workforce development can be provided.  |

| Agency/Entity<br>(check all that apply) |  | Describe how the<br>Lead Agency will<br>coordinate with this<br>Agency/entity in<br>delivering child care<br>and early childhood<br>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.   |
|---|--|---|--|
|   |  | agreement is in place for students who have earned a CDA that includes an alignment of CDA credentials and requirements for an AA in state community colleges.  |  |
|   | State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies(required) | 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 the implementation of inter-divisional system interfaces. |
|   | Indian Tribes/Tribal Organizations (required)  N/A: No such entities exist within the boundaries of the State                                    | Coordination is achieved<br>by working with Tribal<br>Organization<br>representatives serving<br>on the Mississippi Early<br>Childhood Advisory<br>Council and through<br>meetings.   | The Lead Agency's goal is to ensure all populations' needs are represented through the work of the Council.  |

| (ch |  | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services                         |  |
|-----|--|--|--|
|     | nch the Lead Agency h<br>d school-age service d  | as chosen to coordinat<br>eliverv  | е сагту сппинооп   |
|     | State/Territory agency with<br>the Head Start<br>Collaboration grant   | The Lead Agency<br>Coordinates with the<br>Head Start<br>Collaboration Office and<br>the Mississippi Head<br>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<br>responsible for the Child<br>and Adult Care Food<br>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<br>Coordinates with the<br>Mississippi Department<br>of Health, Part C<br>Coordinator and funds<br>the Project PREPARE<br>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<br>eck all that apply)  | Describe how the<br>Lead Agency will<br>coordinate with this<br>Agency/entity in<br>delivering child care<br>and early childhood<br>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<br>toddlers and Section 619<br>for preschool), or other<br>State/Territory agencies<br>that support children with<br>special needs                                |  |  |
| $\boxtimes$ | State/Territory agency<br>responsible for<br>implementing the Maternal<br>and Early Childhood Home<br>Visitation programs grant   | The Lead Agency is the recipient of these funds.   |  |
|             | State/Territory agency<br>responsible for child<br>welfare  | The Lead Agency Coordinates with the MDHS Division of Child and Family Services to serve children in foster/protective/preven tive care.     | The Lead Agency's goal is to provide subsidy to all children in protective and preventive care and foster children.  |
|             | State/Territory liaison for<br>military child care<br>programs or other military<br>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<br>organizations (child care<br>resource and referral, Red<br>Cross)  |  |  |
|             | Provider groups,<br>associations or labor<br>organizations  |  |  |
|             | Parent groups or organizations  |  |  |

| Agency/Entity<br>(check all that apply) | Describe how the<br>Lead Agency will<br>coordinate with this<br>Agency/entity in<br>delivering child care<br>and early childhood<br>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. |
|---|--|--|
| 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.

| ☐ Yes. If                        | yes,  |
|----------------------------------|---|
| a)                               | Provide the name of the entity responsible for the coordination plan(s):  |
| b)                               | Describe the age groups addressed by the plan(s):   |
|                                  | 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                             |   |
| for coordination (658D(b)(1)(D), | State/Territory have a designated entity(ies) responsible on across early childhood and school-age programs? §98.14(a)(1)) ity(ies), if any, the State/Territory has chosen to designate. |
| Check which end                  | ity (les), if any, the State/Territory has chosen to designate.   |
| council/ta                       | Ferritory-wide early childhood and/or school-age cabinet/advisory<br>isk force/commission.  |
| If y                             | es, describe entity, age groups and the role of the Lead Agency   |
|                                  | dvisory Council (as described under the Head Start Act of 2007). es, describe entity, age groups and the role of the Lead Agency  |
| In <sup>c</sup>                  | 2008. Covernor Haley Barbour established the State Farly  |

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.

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  $\Box$  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)) X 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 communitygenerated 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: City of Jackson public/public partnerships • City of Starkville has a public/private partnership • Hancock County Human Resources Agency public/public partnership • Hinds Community College public/public partnership City of Vicksburg has a public/private partnership These 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)

The State Child Care Administrator was appointed by former Governor Barbour to serve on this Council. The State Child Care Administrator's

rebuilding child care after a disaster. For further guidance on developing Child Care Emergency Preparedness and Response Plans see the <u>Information Memorandum</u> (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 your efforts in this area. <u>Check only ONE</u> .  | of  |
|--|-----|
| <ul> <li>□ Planning. Indicate whether steps are under way to develop a plan. If so describe the time frames for completion and/or implementation, the step anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.</li> <li>□ Developed. 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: www.mdhs.state.ms.us/eccd_providers1</li> <li>□ Other. Describe:</li> </ul> | eps |
| 1.6.2. Indicate which of the core elements identified in the Information Memorandum are or will be covered in the Lead Agency child care emergency preparedness and response plan.  Check which elements, if any, the Lead Agency includes in the plan.  | 1   |
| <ul> <li>☑ Planning for continuation of services to CCDF families</li> <li>☑ Coordination with other State/Territory agencies and key partners</li> <li>☑ Emergency preparedness regulatory requirements for child care provide</li> <li>☑ Provision of temporary child care services after a disaster</li> <li>☐ Restoring or rebuilding child care facilities and infrastructure after a disaster</li> <li>☐ None</li> </ul>   | rs  |

#### 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, nongovernmental, 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:                             | <u>-</u>                                |
| $\boxtimes$ Sliding fee scale is set by the: |   |
| State/Territory                              |   |
| Local entity. If checked,                    | identify the type of policies the local |
| entity(ies) can set                          | V VI I                                  |
| Other. Describe:                             | _                                       |
| $\boxtimes$ Payment rates are set by the:    |   |
| State/Territory                              |   |
| Local entity. If checked,                    | identify the type of policies the local |
| entity(ies) can set                          | V VI I                                  |
| Other. Describe:                             | _                                       |
|  |   |
| 2.1.2. How is the CCDF program op            | erated in your State/Territory?         |
| In the table below, identify which agency    | (ies) performs these CCDF services and  |
| activities.                                  |   |
| Implementation of CCDF                       | Agency (Check all that apply)           |
| Services/Activities                          |   |
| Who determines eligibility?                  | CCDF Lead Agency                        |

☐ TANF agency

☐ Other State/Territory agency. Describe.

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| Implementation of CCDF  | Agency (Check all that apply)  |  |
|---|--|--|
| Services/Activities   |  |  |
| <b>Note:</b> If different for families receiving TANF                                   | Local government agencies such as county                               |  |
| benefits and families not receiving TANF benefits,                                      | welfare or social services departments                                 |  |
| please describe:  | ☐ Child care resource and referral agencies                            |  |
|   | Community-based organizations  |  |
|   | Other. Describe. Slot contractors use                                  |  |
|   | eligibility guidelines established by the Lead                         |  |
|   | Agency to determine the eligibility of families for                    |  |
|   | a child care slot in their program.                                    |  |
| Who assists parents in locating child care  | CCDF Lead Agency   |  |
| (consumer education)?   | TANF agency  |  |
| (consumer education):   | ☐ TAIVI agency ☐ Other State/Territory agency. Describe.               |  |
|   |  |  |
|   | The Mississippi Department of Health, Division of Child Care Licensure |  |
|   |  |  |
|   | 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.   |  |
| Describe to whom is the payment issued  |  |  |
| (e.g., parent or provider) and how are  | Payments are issued by paper check once per                            |  |
| payments distributed (e.g., electronically,   | month to providers.  |  |
| cash, etc)  |  |  |
| Other. List and describe:   |  |  |
|   |  |  |
| 2.2. Family Outreach and Application  | Process  |  |
|   |  |  |
| 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). <b>Note</b> - For any |  |  |
| information in questions 2.2.1 through 2.2  |  |  |

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), §98.30(a)) Check all agencies and strategies that will be used in your State/Territory.

CCDF Lead Agency TANF offices Other government offices **◯** Child care resource and referral agencies Contractors **⊠** Community-based organizations

| ☐ Public schools   |
|--|
|  |
| □ 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.   |
| <del></del>  |
| In person interview or orientation   |
| <ul><li>☐ In person interview or orientation</li><li>☐ By mail</li></ul>   |
| •  |
| By mail  |
| ⊠ By mail<br>⊠ By Phone/Fax  |
| <ul> <li>☑ By mail</li> <li>☑ By Phone/Fax</li> <li>☑ Through the Internet (provide website) www.childcareinfo.ms</li> </ul>   |
| <ul> <li>☒ By mail</li> <li>☒ By Phone/Fax</li> <li>☒ Through the Internet (provide website) www.childcareinfo.ms</li> <li>☒ By Email</li> </ul>   |
| <ul> <li>☑ By mail</li> <li>☑ By Phone/Fax</li> <li>☑ Through the Internet (provide website) www.childcareinfo.ms</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  $(658E\ (c)\ (2)\ (G),\ \S98.33)$ .

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

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to support high quality programs in rural, suburban, urban, and low-income communities.

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 hove | v 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   |
| Email/online communication   |
| Other. Describe:   |
| ☐ 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              |
| names  |
| Streamlining verification procedures, such as linking to other                   |
| program data systems   |
| Providing information multi-lingually  |
| ☑ Including temporary periods of unemployment in eligibility criteria            |
| (job search, seasonal unemployment). Length of time 60 days (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:  |
| Longer eligibility re-determination periods (e.g., 1 year). Describe Eligibility   |
| periods are one year in length for working parents.  |
| 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 child   |
| 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  |
| None   |
|  |
| 2.2.7. How will the Lead Agency provide outreach and services to eligible  |
| families with limited English proficiency? Check the strategies, if any, that your State/Territory has chosen to implement.  |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider  |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  Informational materials in non-English languages   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  Informational materials in non-English languages  Training and technical assistance in non-English languages   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  Informational materials in non-English languages  Training and technical assistance in non-English languages  Website in non-English languages   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  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  |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  Informational materials in non-English languages  Training and technical assistance in non-English languages  Website in non-English languages   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  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  Bilingual caseworkers or translators available  Outreach Worker   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  ☐ Application in other languages (application document, brochures, provider notices) ☐ 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 ☐ Bilingual caseworkers or translators available ☐ Outreach Worker ☐ Other:  |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  ☐ Application in other languages (application document, brochures, provider notices) ☐ 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 ☐ Bilingual caseworkers or translators available ☐ Outreach Worker ☐ Other: ☐ The Lead Agency has requested translation assistance from an internal  |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  ☐ Application in other languages (application document, brochures, provider notices)  ☐ 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  ☐ 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.   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  ☐ Application in other languages (application document, brochures, provider notices) ☐ 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 ☐ 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   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  ☐ Application in other languages (application document, brochures, provider notices)  ☐ 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  ☐ 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.   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  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  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:   |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  ☐ Application in other languages (application document, brochures, provider notices)  ☐ 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  ☐ 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  |
| families with limited English proficiency?  Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  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  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:   |
| Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  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  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_0to2yrs_brochure.pdf http://www.mdhs.state.ms.us/pdfs/eccd_3to5yrs_brochure.pdf   |
| Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  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  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_0to2yrs_brochure.pdf http://www.mdhs.state.ms.us/pdfs/eccd_3to5yrs_brochure.pdf   |
| Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  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 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 Educational materials regarding the QRIS are printed in Spanish. Training materials for MS eChildcare are available in Spanish and |
| Check the strategies, if any, that your State/Territory has chosen to implement.  Application in other languages (application document, brochures, provider notices)  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  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_0to2yrs_brochure.pdf http://www.mdhs.state.ms.us/pdfs/eccd_3to5yrs_brochure.pdf   |

| None  |  |
|---|--|
| If the Lead Agency checked any option a information or services in other non-Enthe languages offered  |  |
| <b>2.2.8. How will the Lead Agency overcome lan providers?</b> Check the strategies, if any, that your State/Territory  |  |
| ☐ Informational materials in non-English lang ☐ Training and technical assistance in non-English lang ☐ CCDF health and safety requirements in non-English languages ☐ Website in non-English languages ☐ Bilingual caseworkers or translators availab ☐ Collect information to evaluate on-going neor linguistically diverse workforce ☐ Other: ☐ None | guages<br>nglish languages<br>n-English languages<br>nglish languages<br>le                      |
| If the Lead Agency checked any option a information or services in other non-Enthe languages offered  |  |
| The Lead Agency has some information available Addition materials such as Provider Agreemen currently being translated into Spanish.  |  |
| 2.2.9. Describe how the Lead Agency document 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 subs<br><b>Attachment 2.2.9</b> or provide a web address, if avail   | able   |
| http://www.mdhs.state.ms.us/pdfs/eccd_A_Electror<br>http://www.mdhs.state.ms.us/pdfs/eccd_B_Electror<br>http://www.mdhs.state.ms.us/pdfs/eccd_C_Eligibili<br>http://www.mdhs.state.ms.us/pdfs/eccd_D_Electror<br>http://www.mdhs.state.ms.us/pdfs/eccd_E_Electror   | nicApplicationForm.pdf,<br>nicParentSOAForm.pdf,<br>tyChecklist.pdf,<br>nicGuardianshipForm.pdf, |
| m.pdf,<br>http://www.mdhs.state.ms.us/pdfs/eccd_parentsrigl   | nts.pdf  |

**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                     | Describe how the Lead Agency documents          |
|--|---|
| documentation of:                            | 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      |
| <b>◯</b> Child's information for determining | Birth certificate                               |
| eligibility (e.g., identity, age, etc.)      |   |
| <b>◯</b> Work, Job Training or Educational   | Employment: check stubs, or letter from         |
| Program                                      | 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.             |
| <b>◯</b> Other. Describe Verification of     | Verification from the MDHS, Division of         |
| cooperation with Child Support.              | Child 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 eligibility determinations. Describe length of time Track and monitor the eligibility determination process Other. Describe \_\_\_\_\_ None 2.2.11. Are the policies, strategies or processes provided in questions 2.2.1. through 2.2.10 different for families receiving TANF? (658E(c)(2)(H) & (3)(D), §§98.16(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.

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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 TANF work requirements?

| <ul><li>☑ In writing</li><li>☐ Verbally</li><li>☐ Other:</li></ul>   |
|--|
| 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?  |
| <ul> <li>residing with - living with, including taking meals and sleeping in the same house.</li> <li>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.</li> </ul>    |
| 2.3.2. Eligibility Criteria Based Upon Age   |
| a) The Lead Agency serves children from six weeks to 12 years 11 mo. (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))  |
| <ul> <li>✓ Yes, and the upper age is 18 years, 11 mo. (may not equal or exceed age 19).</li> <li>Provide the Lead Agency definition of physical or mental incapacity — a child under 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.</li> <li>No.</li> </ul>   |
| 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),

Yes, and the upper age is \_\_\_\_\_ (may not equal or exceed age 19)

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658E(c)(3)(B), §98.20(a)(1)(ii))

## 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.

- b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program? (§§98.16(g)(5), 98.20(b))
  - 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.

**Reminder** – 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. Eligibility Criteria Based Upon Receiving or Needing to Receive Protective Services

- a) Does the Lead Agency provide child care to children in protective services? (§§98.16(f)(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.

**Reminder** – 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.

**Note** — If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are <u>not</u> working, or who are <u>not</u> in education/training activities for CCDF purposes these children are considered to be in <u>protective</u> services and should be included in this definition.

 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.

|               | context of the family from further abuse or neglect.  |
|---------------|---|
|               | No.   |
| income eligil | Lead Agency waive, on a case-by-case basis, the co-payment and bility requirements for cases in which children receive, or need to ective services? $(658E(c)(3)(B), 658P(3)(C)(ii), 0(ii)(A))$ |
|               | Yes.  |
|               | No.   |

#### 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.

| $\boxtimes$ | Adoption subsidies          |
|-------------|-----------------------------|
| $\boxtimes$ | Foster care payments        |
|             | Alimony received or paid    |
|             | Child support received      |
|             | Child support paid          |
| X           | Federal nutrition programs  |
| X           | Federal tax credits         |
| X           | State/Territory tax credits |

| ☐ Housing allotments, Low-Income Energy Assistance Program                         |
|--|
| (LIHEAP) or energy assistance  |
| ☐ Medical expenses or health insurance related expenses                            |
| Military housing or other allotment/bonuses  |
| Scholarships, education loans, grants, income from work study                      |
| Social Security Income   |
| Supplemental Security Income (SSI)   |
| ☐ Veteran's benefits   |
| ☐ Unemployment Insurance   |
| Temporary Assistance for Needy Families (TANF)                                     |
| ☐ Worker Compensation  |
| Other types of income not listed above   |
| None   |
|  |
| 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                                |
| Teen parents   |
| Unrelated members of household   |
| $\overline{\boxtimes}$ All members of household except for parents/legal guardians |
| $\square$ 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.

|                | (a)                        | (b)                        |                                       | PPLICABLE                               |
|----------------|----------------------------|----------------------------|---------------------------------------|---|
|                | 100% of State Median       | 85% of State Median        | Income Level if lower than<br>85% SMI |   |
| Family<br>Size | Income (SMI)<br>(\$/month) | Income (SMI)<br>(\$/month) | (c)                                   | (d)                                     |
|                | (4. =====,                 | [Multiply (a) by 0.85]     | \$/month                              | % of SMI                                |
|                |                            |                            |                                       | [Divide (c) by (a),<br>multiply by 100] |
| 1              |                            | 0                          |                                       | <b>2 V</b>                              |
| 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 separate income limit at re-determination to remain eligible for the CCDF program)?   |
|--|
| <ul> <li>Yes. If yes, <b>provide</b> the requested information from the table in 2.3.5d and <b>describe</b></li> <li>Note: This information can be included in a separate table, or by placing a "/" between the entry and exit levels in the above table.</li> <li>No.</li> </ul>   |
| f) SMI Year 2004 and SMI Source U. S. Census Bureau  |
| g) These eligibility limits in column (c) became or will become effective on: October 2004   |
| 2.3.6. Eligibility Re-determination  |
| <ul> <li>a) Does the State/Territory follow OCC's 12 month re-determination recommendation? (See <u>Program Instruction on Continuity of Care</u>.)</li> <li>☑ Yes</li> <li>☑ No. If no, what is the re-determination period in place for most families?</li> </ul>  |
| <ul> <li>☐ 6 months</li> <li>☐ 24 months</li> <li>☐ Other. Describe</li> <li>☐ Length of eligibility varies by county or other jurisdiction. Describe</li> </ul>   |
| b) <b>Does the Lead Agency coordinate or align re-determination periods with other programs?</b>   |
| <ul> <li>Yes. If yes, check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.</li> <li>☐ Head Start and/or Early Head Start Programs. Re-determination period</li> <li>☐ Pre-kindergarten programs. Re-determination period</li> <li>☐ TANF. Re-determination period</li> <li>☐ SNAP. Re-determination period</li> <li>☐ Medicaid. Re-determination period</li> <li>☐ SCHIP. Re-determination period</li> <li>☐ Other. Describe</li> </ul> |
| $\boxtimes$ No.  |

- c) Describe under what circumstances, if any, a family's eligibility would be reviewed prior to redetermination. For example, regularly scheduled interim assessments, or a requirement for families to report changes.
  - Parents who are eligible because they are enrolled full time in an educational program must be redetermined eligible each semester/quarter. Clients who were referred from TANF, DFCS, and the home visiting program (HHM) are subject to eligibility based on the policies of the referring program.
- d) Describe any action(s) the State/Territory would take in response to any change in a family's eligibility circumstances prior to re-determination
  - Parents and other clients as described in the previous response would be terminated. A two-week notice of termination is provided when children are enrolled in licensed child care programs.
- e) Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See <u>Information Memorandum on Continuity of Care</u> for examples).

The Lead Agency has adopted the following family-friendly policies to support continuity of care:

- o 12 month eligibility period
- 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.
- 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.
- The Lead Agency pays licensed providers for 15 child absences during the program year.

| f) Does the | Lead Agency use a simplified process at re-determination?   |
|-------------|---|
| enro        | Yes. If yes, describe During redtermination, parents are asked to verify profile information and submit income/school llment verification.  No. |

### 2.3.7. Waiting Lists

| <b>Describe the Lead Agency's waiting list status.</b> Select <b>ONE</b> of these options.  |
|---|
| <ul> <li>□ Lead Agency currently does not have a waiting list and:</li> <li>□ All eligible families who apply will be served under State/Territory eligibility rules</li> <li>□ Not all eligible families who apply will be served under State/Territory eligibility rules</li> <li>□ Lead Agency has an active waiting list for:</li> <li>□ Any eligible family who applies when they cannot be served at the time of application</li> <li>□ Only certain eligible families. Describe those families:</li> <li>□ Waiting lists are a county/local decision. Describe</li> <li>□ Other. Describe</li> </ul> |
| 2.3.8. Appeal Process for Eligibility Determinations  |
| Describe the process for families to appeal eligibility determinations  |
| Families who wish to have their eligibility determination reviewed, must contact the Lead Agency. Upon receipt of request for review, the Lead Agency reviews family information and responds with a final determination.   |
| 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 income and the size of the family 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).   |
| <b>2.4.1.</b> Attach a copy of the sliding fee scale as Attachment <b>2.4.1.</b> 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 $\square$ 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 If the Lead Agency checked more than one of the options above, describe 2.4.4. Will the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child **care?** $(658E(c)(3)(B), \S98.42(b))$ Yes, and describe those additional factors: Clients who are referred for service by TANF, DFCS, and HHM receive a zero (TANF) or reduced co-payment amount (DFCS & HHM). No. 2.4.5. The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size. (§98.42(c)). Select **ONE** of these options. **Reminder** – Lead Agencies are reminded that the co-payments may be waived for only two circumstances - for families at or below the poverty level or on a case-bycase basis for children falling under the definition of "protective services" (as defined in 2.3.4.a). 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 <u>at or below the poverty level</u> 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.

#### 2.5. Prioritizing Services for Eligible Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving copayments for families with very low incomes (at or below the federal poverty level).  $(658E(c)(3)(B), \S98.44)$ 

# **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 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<br>Priority<br>(Check only<br>one) | Is there a time limit on the eligibility priority or guarantee? | Other Priority<br>Rules |
|--|--|---|-------------------------|
| Children with special needs                            | <b>⊠</b> Priority                              | Yes. The time   | Different               |
|  | over other                                     | limit is:   | eligibility             |
| Provide the Lead Agency                                | CCDF-eligible                                  |   | thresholds.             |
| <b>definition of</b> Children with Special             | <u>fa</u> milies                               | ⊠ No  | Describe                |
| Needs Special Needs rates may be                       | ☐ Same   |   | ⊠ Higher rates          |
| applied for children through the                       | priority as                                    |   | for providers           |
| age of 18 who meet the SSI                             | other CCDF-                                    |   | caring for              |
| definition of disability by having                     | eligible                                       |   | children with           |
| medically proven physical or                           | families                                       |   | special needs           |
| mental condition(s) that cause                         |  |   | requiring               |
| marked and severe functional                           | Guaranteed                                     |   | additional care         |
|  | subsidy  |   | ☐ Prioritizes           |
| limitations expected to last at least                  | eligibility                                    |   | quality funds for       |
| 12 months in duration and render                       | Other.   |   | providers               |
| the child(ren) incapable of self-                      | Describe                                       |   | serving these           |
| care. The condition(s) must be                         |  |   | <u>ch</u> ildren        |
| documented by a physician. In the                      |  |   | Other.                  |

| How will the Lead Agency prioritize CCDF services for:  | Eligibility<br>Priority<br>(Check only<br>one)   | Is there a time limit on the eligibility priority or guarantee? | Other Priority<br>Rules  |
|---|--|---|--|
| absence of SSI benefits, medical documentation should attest to the degree of functional limitation(s) and prescribe the special care needed.   |  |   | 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 ☐ Waiving co- payments for families with incomes at or below the Federal Poverty Level ☐ Other. Describe None |
| 2.5.2. How will CCDF funds be meet the needs of families reconstructions (TANF), those attempactivities, and those at risk of (658E(c)(2)(H), Section 418(b)(2) of (558E(c)(2)(H), Section 418(b)(2)(H), Section 418(b)(E)(H), Section 418(b)(E)(E)(E)(E)(E)(E)(E)(E)(E)(E)(E)(E)(E) | eiving Tempor<br>oting to transi<br>becoming dep   | rary Assistance<br>tion off TANF t<br>endent on TAN             | for Needy<br>hrough work<br>F?   |
| <b>Reminder</b> - CCDF requires that no Matching funds be used to provide Temporary Assistance for Needy Fa TANF through work activities, and   | child care assist<br>amilies (TANF),   | ance for families those attempting                              | receiving<br>to transition off   |
| <ul> <li>☑ Use priority rules to meet the 2.5.3.)</li> <li>☑ Waive fees (co-payments) for poverty level</li> <li>☐ Coordinate with other entitie agencies, and contractors)</li> <li>☐ Other:</li> </ul>  | r some or all TA   | NF families who a   | are below  |

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 voucher or authorization) issued to parents? $(658E(c)(2)(A)(iii), 658P(2), \S98.2, \S98.30(c)(4) \& (e)(1) \& (2))$  |
| <ul><li>☐ Before parent has selected a provider</li><li>☐ After parent has selected a provider</li><li>☐ Other. Describe</li></ul>   |
| 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: www.childcareinfo.ms |

| <ul> <li>Community outreach meetings, workshops, other in person activities</li> <li>Multiple points of communication throughout the eligibility and renew process</li> <li>Other. Describe</li> </ul>  |
|---|
| 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. Remaining subsidy funds are dispersed through slots.   |
| 2.6.2. Child Care Services Available through Grants or Contracts  |
| 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)). <b>Note</b> : 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<br>achieve any of the following? Check the strategies, if any, that your<br>State/Territory chooses to implement.  |
| <ul><li>☑ Increase the supply of specific types of care</li><li>☑ Programs to serve children with special needs</li></ul>   |

| ☐ 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<br>⊠ Center-based providers  |
| Family child care providers  |
| Group-home providers   |
| Programs that serve specific geographic areas  |
| Urban  |
| Rural  |
| Other. Describe  |
| <ul><li>Support programs in providing higher quality services</li><li>Support programs in providing comprehensive services</li></ul>   |
| Support programs in providing comprehensive services  Services  Services   |
| Other. Describe  |
|  |
| <ul><li>c) Are child care services provided through grants or contracts offered<br/>throughout the State/Territory? (658E(a), §98.16(g)(3))</li></ul>  |
| ⊠ 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<br>grants/contracts determined?  |
| All rates are based on rates published by the Lead Agency and are determined based on total budget allotment and cost of care.   |
| 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.   |
| 2.6.3. How will the Lead Agency inform parents and providers of policies and procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds? $(658E(c)(2)(B), \S 98.31))$ |
| Check the strategies that will be implemented by your State/Territory.   |
| ☐ Signed declaration   |
| Parent Application   |
| Parent Orientation   |
| $\overline{oxtime}$ Provider Agreement   |
| Provider Orientation   |
| Other. Describe:   |

| <b>2.6.4.</b> The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. (§§98.16(g)(2), 98.30(e)(1)(iv)) Will the Lead Agency limit the use of in-home care in any way?   |
|--|
| <ul> <li>No</li> <li>Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all limits the Lead Agency will establish.</li> <li>☐ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act</li> <li>☐ Restricted based on provider meeting a minimum age requirement</li> <li>☐ Restricted based on hours of care (certain number of hours, non-traditional work hours)</li> <li>☐ Restricted to care by relatives</li> <li>☐ Restricted to care for children with special needs or medical condition</li> <li>☐ Restricted to in-home providers that meet some basic health and safety requirements</li> <li>☐ Other. Describe</li> </ul> |
| 2.6.5. Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. $(658E(c)(2)(C), \S 98.32)$  |
| The Lead Agency maintains records of provider complaints. Substaniated reports are available upon request to the Lead Agency.  |
| 2.7. Payment Rates for Child Care Services   |
| The statute at $658E(c)(4)$ and the regulations at $§98.43(b)(1)$ require the Lead Agency to establish adequate payment rates for child care services that ensure eligible children equal access to comparable care.   |
| <b>2.7.1 Attach a copy of your payment rates as Attachment 2.7.1.</b> Will the attached payment rates be used in <u>all</u> parts of the State/Territory?  |
| Yes. Effective Date: October 2007  No. If no, attach other payment rates and their effective date(s) as <b>Attachment 2.7.1a, 2.7.1b</b> , etc.  |
| 2.7.2. Which strategies, if any, will the Lead Agency use to ensure the timeliness of payments?  |
| $\square$ Policy on length of time for making payments. Describe length of time  |
| <ul> <li>☐ Track and monitor the payment process</li> <li>☐ Other. Describe</li> <li>☐ None</li> </ul>   |

#### 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 75th percentile. These tables allow Lead Agencies to use a common metric — the 75th 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    | (a)                     | (b)          | (c)             |
|---------------------|-------------------------|--------------|-----------------|
| Rate Area (Centers) | Monthly                 | Monthly      | Percentile if   |
|                     | Payment Rate            | Maximum      | lower than 75th |
|                     | at the 75 <sup>th</sup> | Payment Rate | percentile of   |
|                     | percentile from         | Ceiling      | most recent     |
|                     | the most recent         |              | survey          |
|                     | MRS                     |              | •               |

| 2.7.4a — Highest<br>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<br>Center Infants (11<br>months)    | \$563  | \$346                                    | 70%  |
| Full-Time Licensed<br>Center Preschool (59<br>months)  | \$476  | \$313                                    | 66%  |
| Full-Time Licensed<br>Center School-Age (84<br>months) | \$433  | \$304                                    | 70%  |

| 2.7.4b – Lowest Rate<br>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<br>Center Infants (11<br>months)    | \$368  | \$346                                    | 94%  |
| Full-Time Licensed<br>Center Preschool (59<br>months)  | \$325  | \$313                                    | 96%  |
| Full-Time Licensed<br>Center School-Age (84<br>months) | \$217  | \$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<br>Rate Area (FCC)             | (a) Monthly Payment Rate at the 75 <sup>th</sup> percentile of the most recent MRS | (b)<br>Monthly<br>Maximum<br>Payment<br>Rate Ceiling | (c) Percentile if lower than 75 <sup>th</sup> percentile of most recent survey |
|---|--|--|--|
| Full-Time Licensed FCC Infants (11 months)      | \$476  | \$251  | 53%  |
| Full-Time Licensed FCC<br>Preschool (59 months) | \$325  | \$227  | 70%  |
| Full-Time Licensed FCC School-Age (84 months)   | \$368  | \$222  | 60%  |

| 2.7.4d – Lowest Rate<br>Area (FCC)               | (a) Monthly Payment Rate at the 75 <sup>th</sup> percentile of the most recent MRS | (b)<br>Monthly<br>Maximum<br>Payment<br>Rate Ceiling | (c) Percentile if lower than 75 <sup>th</sup> percentile of most recent survey |
|--|--|--|--|
| Full-Time Licensed FCC Infants (11 months)       | \$238  | \$251  | 105%   |
| Full-Time Licensed FCC<br>Preschool (59 months)  | \$173  | \$227  | 131%   |
| Full-Time Licensed FCC<br>School-Age (84 months) | \$195  | \$222  | 114%   |

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

a) Describe how license-exempt center payment rates are set: The Lead Agency makes no distinction between license-exempt centers and those centers that are required to have a license.

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- 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: Payment rates for all providers are set based on availability of funding. Consideration is given to raising rates vs. fewer certificates.
- d) Describe how in-home care 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.

# 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<br>☑ 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 do | es the Lead Ag | ency have ro | egarding any a | additional |
|--------|--------------------|----------------|--------------|----------------|------------|
| fees t | that providers may | y charge CCDF  | parents? Tl  | he Lead Agend  | c <b>y</b> |

Allows providers to charge the difference between the maximum reimbursement rate and their private pay rate

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| $\square$ Pays for provider fees (e.g., registration, meals, and supplies). Des        | cribe |
|--|-------|
| $\overline{\ \ \ }$ Policies vary across region, counties and or geographic areas. Des | cribe |
| 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 The Lead Agency pays for 15 absence days per program year, per child. Absence days can be used for any reason deemed necessary by the family. The Lead Agency has no policy regarding the maximum number of allowable absences within a program year.
- b) Paying based on enrollment. Describe The Lead Agency pays for the care 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. 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.
- c) Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly). Describe The Lead Agency pays all providers a daily rate, regardless of their established private pay schedule.
- d) Using electronic tools (automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe 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.

### 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:

- 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**
- 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 ( $\S98.40(a)(1)$ ). 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).

| tate/'<br>egula<br>rovid | Territory may<br>tory requirem<br>led under the (                | also elect to in<br>ents on child o<br>CCDF than the                     | mpose more strir<br>care providers of  | by the State/Territ<br>ngent standards ar<br>services for which<br>quirements impos<br>, §98.41).                             | nd licensing or<br>assistance is  |
|--------------------------|--|--|--|---|---|
|                          | a) Is the Lead   | Agency respo   | onsible for child c  | are licensing? (§9  | 8.11(a))  |
|                          | respon   | Please identif   | sing The Mississi  | cal (if applicable) e<br>ippi Department o  |   |
|                          | •  | ents and CCDI  |  | nip between the lic<br>ty requirements in   | O   |
|                          | compliand<br>"Regulation<br>child care<br>comply wi<br>Nutrition | te at all times ons Governing providers are th policy cond Assurances fo | with the Mississi<br>Licensure of Chi<br>required to sign<br>litions related to:<br>r Unlicensed Chi | DF program must<br>ppi State Departm<br>ild Care Facilities.<br>a statement of agr<br>Basic Health, Saf<br>ld Care Providers. | nent of Health's<br>" Unlicensed<br>reement to<br>Tety, and                                     |
|                          | and safety   | requirements   | s?   |   |   |
|                          |  | Center-<br>Based<br>Child Care   | Group Home Child Care  N/A. Check if your State/Territory does not have group home child care.       | Family Child<br>Care  | In-Home Care  ☐ N/A. Check if in-home care is not subject to licensing in your State/Territory. |
|                          | Yes, for all   |  |  |   |   |

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providers in | |

this

| catagomy                                 | Center-<br>Based<br>Child Care | Group Home Child Care  N/A. Check if your State/Territory does not have group home child care. | Family Child<br>Care  | In-Home Care  ☐ N/A. Check if in-home care is not subject to licensing in your State/Territory. |
|--|--------------------------------|--|---|---|
| Yes, for some providers in this category | Describe                       | Describe   | Describe The licensing authority requires that Group Home Providers caring for 6 or fewer than 12 children be licensed. Licensing regulations surrounding health and safety apply to those providers. These providers received a minimum of 2 unannounced visits per year by the licensing agency. 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 | Describe  |

|       | Center-    | Group Home             | Family Child  | In-Home Care      |
|-------|------------|------------------------|---------------|-------------------|
|       | Based      | Child Care             | Care          |                   |
|       | Child Care |                        |               | ☐ N/A. Check if   |
|       |            | ☐ N/A. Check if        |               | in-home care is   |
|       |            | your                   |               | not subject to    |
|       |            | State/Territory        |               | licensing in your |
|       |            | does not have          |               | State/Territory.  |
|       |            | group home child care. |               |                   |
|       |            | ciliu care.            | third dograe  |                   |
|       |            |                        | third degree. |                   |
|       |            |                        | These         |                   |
|       |            |                        | providers are |                   |
|       |            |                        | subject to    |                   |
|       |            |                        | regular       |                   |
|       |            |                        | unannounced   |                   |
|       |            |                        | visits by the |                   |
|       |            |                        | Lead Agency.  |                   |
| No    |            | $\boxtimes$            |               |                   |
| Other | Describe   | Describe               | Describe      | 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.

| CCDF Category of Care  Center- Based Child Care  Conter- Based Child Care  Center- Based Child Care  Conter- Based Child Care  Center- Based Child Care  Conter- Based Child care  State/Territory are subject to  Iccnsing:  Conter- Based Settings are  subject to licensing in your  State/Territory Center-  based child care  provider licensed or  otherwise authorized to  provide child care  sa provider licensed or  otherwise authorized to  provide child care  sa provider licensed or  otherwise authorized to  provide child care  sa provider licensed or  otherwise authorized to  provide child care  sa provider licensed or  otherwise authorized to  provide child care  sa provider licensed or  otherwise authorized to  provide child care  sa provider licensed or  otherwise authorized to  provide child care  sa provider licensed or  otherwise authorized to  provider licensure  (2) days a week and whose  primary purpose is to |
|--|
| Category of Care  Center-Based Child Care  Center-Based Child Care  Center-Based Child Care  Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  State/Territory are subject to licensing under this CCDF category exempt from licensing?  Describe which types of center-based settings are subject to licensing in your State/Territory Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  State/Territory are subject to licensing under this CCDF category exempt from licensing?  Describe which types of center-based settings are subject to licensing in your State/Territory Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  State/Territory or the subject to licensing in your State/Territory Center-based settings are exempt from licensing?  Describe which types of center-based settings are subject to licensing in your State/Territory Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  State/Territory Methods or exempt from licensing?  Describe which types of center-based settings are exempt from licensing:  Describe which types of center-based settings are subject to licensing in your state/Territory or exempt from licensing:  Describe which types o |
| Center-Based Child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  Intersing and the No Copy (category?  Category?  Describe which types of center-based settings are subject to licensing in your State/Territory The Licensing authority exempt from licensing?  Describe which types of center-based settings are subject to licensing in your State/Territory The Licensing authority exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing in your state/Territory The Lic |
| Center-Based providers are defined as Child Care  Center-Based Child care provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  Center-based child care providers are defined as a provider licensed or otherwise authorized to provider licensed or otherwise authorized to provide child care services for fewer than 24 hours is due to the nature of the parent(s)' work.  Center-based child care subject to licensing in your State/Territory Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  Center-based child care subject to licensing in your State/Territory The Licensing authority exempt the following providers from licensing?  Describe which types of center-based settings are exempt from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing?  A. Child Care facilities which types of center-based settings are exempt from licensing?  Describe which types of center-based settings are exempt from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers for no more than two (2) days a week and whose prim |
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| Child Care  a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  Subject to licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensing in your State/Territory The Licensing authority exempt the following providers from licensures.  |
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| based child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  Licensing authority exempt the following providers from licensure:  A. Child Care facilities which operate for no more than two (2) days a week and whose primary purpose is to provide the caregiver or temporary care during othe scheduled or related activities.  B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation bibli schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16  |
| services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  The following providers from the providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  The following providers from the fo |
| 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.    Dicensure: A. Child Care facilities which operate for no more than to (2) days a week and whose primary purpose is to provide child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.    Dicensure: A. Child Care facilities which operate for no more than to (2) days a week and whose primary purpose is to provide child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  |
| child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s) work.  a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  A. Child Care facilities which operate for no more than to (2) days a week and whose primary purpose is to provide child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation bible schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16  |
| residential setting, unless care in excess of 24 hours is due to the nature of the parent(s) work.  otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  operate for no more than two (2) days a week and whose primary purpose is to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation biblioschools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16  |
| unless care in excess of 24 hours is due to the nature of the parent(s)' work.  per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  (2) days a week and whose primary purpose is to provious respite for the caregiver or temporary care during othe scheduled or related activities.  B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation biblischools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16   |
| 24 hours is due to the nature of the parent(s)' work.  Services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation bible schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16  |
| nature of the parent(s)' work.  for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  respite for the caregiver or temporary care during othe scheduled or related activities.  B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation bible schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16   |
| per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation bible schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16  |
| nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation bible schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16   |
| setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.  B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation bible schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16  |
| excess of 24 hours is due to the nature of the parent(s)' work.  operate for three (3) or less weeks per year such as but not limited to vacation bible schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16   |
| to the nature of the parent(s)' work.  weeks per year such as but not limited to vacation bible schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16   |
| not limited to vacation bible schools and scout day camp C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16   |
| parent(s)' work.    Description of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and scout day camp of the limited to vacation bible schools and schools are schools and schools are schools and schools are schools and schools are schools are schools are schools and schools are s |
| C. Any child residential hor as defined in and in compliance with the provisions of Section 43-16  |
| as defined in and in compliance with the provisions of Section 43-16   |
| compliance with the provisions of Section 43-16  |
| provisions of Section 43-16  |
|  |
| (b) et seq., Mississippi Code  |
| of 1972.   |
| D. Any program in an   |
| elementary (including  |
| kindergarten) and/or   |
| secondary school system  |
| accredited by the Mississip  |
| State Department of  |
| Education, the Southern  |
| Association of Colleges and  |
| Schools, The Mississippi   |
| Private School Association,  |
| the American Association o   |
| Christian Schools, the   |
| Association of Christian   |
| Schools International, or a school affiliated with   |
| Accelerated Christian  |
| Education, Inc. This include   |
| accredited pre-K3 and pre-   |
| Programs. Programs servin  |
| children less than three (3)   |
| years of age must be license   |
| E. Any Head Start program  |
|  |
| operating in conjunction w   |
| operating in conjunction wi<br>an elementary school system   |
|  |

| CCDE        |                 | Which providers in your        | Are any providers in your         |
|-------------|-----------------|--------------------------------|-----------------------------------|
| CCDF        | CCDF Definition | State/Territory are subject to | State/Territory which fall        |
| Category of | (§98.2)         | licensing under this CCDF      | under this CCDF category          |
| Care        |                 | category?                      | exempt from licensing?            |
|             |                 |                                | 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              |
|             | <u> </u>        | 1                              | camps, or ricad start             |

| CCDF<br>Category of<br>Care   | CCDF Definition (§98.2)   | Which providers in your<br>State/Territory are subject to<br>licensing under this CCDF<br>category?   | Are any providers in your<br>State/Territory which fall<br>under this CCDF category<br>exempt from licensing?   |
|---|---|---|---|
| C   | C 1 111   | D 1 1 1 1   | programs.   |
| 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)' work.   | Describe which types of group homes are subject to licensing  | Describe which types of group homes are exempt from licensing   |
| Family<br>Child Care  | 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 | Describe which types of family child care home providers are subject to licensing Providers caring for 6 or fewer than 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<br>Category of<br>Care | CCDF Definition (§98.2)  | Which providers in your<br>State/Territory are subject to<br>licensing under this CCDF<br>category?  | Are any providers in your<br>State/Territory which fall<br>under this CCDF category<br>exempt from licensing? |
|-----------------------------|--|--|---|
| In-Home<br>Care             | In-home child care provider is defined as an individual who provides child care services in the child's own home. <b>Reminder</b> - 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 <a href="NCRKid's website">NCRKid's website</a>.

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

|  | For each indicate  | or check all requirem                                      | nents for <b>licensing</b> th   | nat annly if any  |
|--|--|--|---|---|
|  | 1 of cach marcate  | Group Home   | iona ioi neensing ti  |   |
|  |  | Child Care   |   | In-Home Care  |
| Indicator                                    | Center-Based<br>Child Care                                   |  | Family Child<br>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:<br><1 yr=4:1  | age group:  |
| If yes, provide the ratio for age specified. | Toddler ratio (35 months): 14:1                              | Toddler ratio (35 months):  Preschool ratio                | 1 yr =8:1<br>2 yr =12:1<br>3 yr =12:1<br>4 yr =12:1<br>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.  New Yes, Group size requirement. List                                | ☐ No group size requirements.   |
|  | <ul><li></li></ul>   | Yes, Group size requirement Infant group size (11 months): | ratio requirement<br>by age group See<br>above<br>information, not<br>to exceed 12. |   |
|  | months): 10 w/<br>2 caregivers                               | Toddler group size (35 months):                            | ☐ No group size requirements.   |   |
|  | Toddler group<br>size (35<br>months): 14                     | Preschool group<br>size (59 months):                       |   |   |
|  | Preschool<br>group size (59<br>months): 20 w<br>2 caregivers | No group size requirements.                                |   |   |
|  | ☐ No group<br>size<br>requirements.                          |  |   |   |

|  | For each indicate  | or, check all requirem   | nents for <b>licensing</b> th  | hat apply, if any.   |
|--|--|--|--|--|
| Indicator  | Center-Based<br>Child Care   | Group Home Child Care  | Family Child<br>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   |

|  |  | Group Home   |   | g that apply, if any.  In-Home Care  |
|--|--|--|---|--|
| Indicator  | Center-Based<br>Child Care   | M/A. Check if your State/Territory does not have group home child care.  | Family Child<br>Care  | N/A if the State/Territory does not license in-home care (i.e. care in the child's own home)   |
| training hours<br>per year?  | ☐ 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 e<br>in FY2014-  |  | ing requirements   | for child care p  | providers to change  |
| <u> </u>   | Yes. Describe<br>No  |  |   |  |
| to certify that pro  | licensing require<br>ed. (658E(c)(2)(<br>cedures are in e  | ements and how i<br>E), §98.40(a)(2))<br>ffect to ensure that  | its licensing req<br>The Lead Age<br>at child care pro  | uirements are<br>ncy is also required<br>oviders caring for  |
| State/Territory's leffectively enforce to certify that prochildren receiving requirements. (65  Describe the St licensing requirements and unannounced practices for the life  | licensing required. (658E(c)(2)(cedures are in east of the color of th | ements and how in E), §98.40(a)(2)) iffect to ensure the comply with the electric ensure the electric ensure the electric ensure ensure the electric ensure  | its licensing req<br>The Lead Age<br>at child care pro<br>applicable healt<br>ffective enfor<br>2a through 3<br>erritory uses vis<br>ther enforceme   | uirements are ncy is also required by its also required by its and safety reement of the 1.2e below. This sits (announced nt policies and                                  |
| State/Territory's leffectively enforce to certify that prochildren receiving requirements. (65  Describe the Sticensing requirements description included and unannounced practices for the life a) Does you visits in its   | licensing required. (658E(c)(2)(cedures are in edge CCDF services (8E(c)(2)(G), §9)  ate/Territory'rements using les whether and look ground coicensing required ur State/Territory policies as a warm of the services are a warm of the service | ements and how in E), §98.40(a)(2)) iffect to ensure the comply with the selections 3.1. If the selection is a selection in the selection is a selection in the selection is a selection in the selection in the selection in the selection is a selection in the sel | Its licensing req<br>The Lead Age<br>at child care pro<br>applicable healt<br>ffective enfor<br>2a through 3<br>erritory uses vis<br>ther enforcement<br>unced and/or unforce the licens  | uirements are ncy is also required by its also required by its and safety reement of the 1.2e below. This sits (announced nt policies and                                  |
| State/Territory's leffectively enforce to certify that prochildren receiving requirements. (65  Describe the St licensing requirements description include and unannounced practices for the limit a) Does you visits in its | licensing required to the decision of the deci | ements and how in E), §98.40(a)(2)) iffect to ensure the comply with the selections 3.1. If the selection is a selection in the selection is a selection in the selection is a selection in the selection in the selection in the selection is a selection in the sel | The Lead Age at child care properties at child care properties applicable health applicable health applicable health applicable health applicable health applicable health applicable and applicable applicable and applicable and applicable and applicable applicable and applicable applicable and applicable | uirements are ney is also required by its also required by its and safety reement of the .1.2e below. This sits (announced and policies and anannounced sing requirements? |

| CCDF Categories of Care   | Freque<br>Routin<br>Annou<br>Visits  | e  | Frequency of Routine<br>Unannounced Visits   |  |
|---|--|--|--|--|
| ☐ Group Home Child Care  ☐ N/A. Check if your State/Territory does not have group home child care.  | ☐ Once<br>☐ More<br>a Year<br>☐ Once<br>Years                                  | a Year<br>e than Once<br>Every Two<br>r. Describe  | ☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe   |  |
| <b>⊠</b> Family Child Care Home   | ☐ More<br>a Year<br>☐ Once<br>Years  | a Year<br>e than Once<br>Every Two<br>r. Describe  | ☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe Twice 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 |  | ☐ 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 for 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 apply.  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 attend or participate in training relating to opening a child care facility prior to issuing a license.   |  | the licensing requirements.  Yes. Describe Mandatory trainings include: Playground Safety New Director Orientation Rules and Regulations Governing Child Care  No. Other. Describe |  |  |
| The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license.  |  |  |  |  |
| icensing staff has procedures in place to address iolations found in an inspection.   |  | □ Providers are required to submit<br>plans to correct violations cited during<br>inspections.   |  |  |

|   | December and the management and the   |  |  |
|---|---|--|--|
| Linewain a Dun on drawer                              | <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        | <b>◯</b> 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  |  |  |

| Licensing Procedures | <b>Describe</b> which procedures are used by the State/Territory for enforcement of |
|----------------------|---|
| Licensing Frocedures | 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.  |
|                      | □ No.   |
|                      | <b>◯</b> Other. Describe Per the licensing  |
|                      | authority, there is also an internal  |
|                      | appeal process for provider which   |
|                      | contains two levels. One is at the Public   |
|                      | Health District level and the other is at   |
|                      | the State Level.  |

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

| X Yes.   | If "Yes"  | please refer to the c | hart below to ide | entify who is   |
|----------|-----------|-----------------------|-------------------|-----------------|
| require  | d to have | background checks     | , what types of c | hecks, and with |
| what fre | equency.  |                       |                   |                 |

☐ No

| CCDF Categories of Care      | Types of<br>Background<br>Check   | Frequency  | Who is Subject<br>to Background<br>Checks?   |
|------------------------------|---|--|--|
| ⊠ Center-Based<br>Child Care | ⊠ Child Abuse<br>Registry   | <ul><li>☑ Initial Entrance</li><li>into the System</li><li>☐ Checks</li><li>Conducted</li></ul>  | <ul><li>☑ Director</li><li>☑ Teaching staff</li><li>☑ Non-teaching staff</li></ul>   |
|                              |   | Annually  ☑ Other. Describe  Repeated every 5  years   | ☐ Volunteers ☐ Other Volunteers with over 120 hours on site.   |
|                              | State/Territory Criminal Background Sheck if State/Territory background check includes fingerprints | <ul> <li>☑ Initial Entrance into the System</li> <li>☐ Checks</li> <li>Conducted</li> <li>Annually</li> <li>☑ Other. Describe</li> <li>Repeated every 5</li> <li>years.</li> </ul> | <ul> <li>☑ Director</li> <li>☑ Teaching staff</li> <li>☐ Non-teaching staff</li> <li>☐ Volunteers</li> <li>☑ Other</li> <li>Volunteers with over 120 hours on site.</li> </ul> |

| CCDF Categories of Care   | Types of<br>Background<br>Check   | Frequency  | Who is Subject to Background Checks?   |
|---|---|--|--|
|   | ⊠ FBI Criminal<br>Background (e.g.,<br>fingerprint)   | <ul> <li>☑ Initial Entrance into the System</li> <li>☐ Checks</li> <li>Conducted</li> <li>Annually</li> <li>☑ Other. Describe</li> <li>Repeated every 5</li> <li>years.</li> </ul> | <ul> <li>☑ Director</li> <li>☑ Teaching staff</li> <li>☐ Non-teaching staff</li> <li>☐ Volunteers</li> <li>☑ Other</li> <li>Volunteers with over 120 hours on site.</li> </ul> |
|   | ⊠ Sex Offender<br>Registry  | <ul> <li>☑ Initial Entrance into the System</li> <li>☐ Checks</li> <li>Conducted</li> <li>Annually</li> <li>☑ Other. Describe</li> <li>Repeated every</li> <li>5 years.</li> </ul> | <ul> <li>☑ Director</li> <li>☑ Teaching staff</li> <li>☐ Non-teaching staff</li> <li>☐ Volunteers</li> <li>☑ Other</li> <li>Volunteers with over 120 hours on site.</li> </ul> |
| ☐ Group Child Care Homes  N/A. Check if your State/Territory does not have group home child care. | ☐ Child Abuse<br>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<br>Registry  | ☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe   | ☐ Provider ☐ Non-provider residents of the home  |

| CCDF Categories of Care      | Types of<br>Background<br>Check  | Frequency   | Who is Subject<br>to Background<br>Checks?  |
|------------------------------|--|---|---|
| ⊠ Family Child<br>Care Homes | ⊠ Child Abuse<br>Registry  | <ul> <li>☑ Initial Entrance into the System</li> <li>☐ Checks</li> <li>Conducted</li> <li>Annually</li> <li>☑ Other. Describe</li> <li>Repeated every 5</li> <li>years, except for those providers</li> <li>who do not move, relocate, or have</li> </ul> | <ul> <li>☑ Provider</li> <li>☑ Non-provider</li> <li>residents of the</li> <li>home All adults</li> <li>over the age of 18</li> <li>years.</li> </ul> |
|                              | State/Territory Criminal Background Scheck if the State/Territory background check includes fingerprints | any gaps in service.  Initial Entrance into the System Checks Conducted Annually Other. Describe Repeated every 5 years, except for those providers who do not move, relocate, or have any gaps in service.   | <ul> <li>☑ Provider</li> <li>☑ Non-provider</li> <li>residents of the</li> <li>home All adults</li> <li>over the age of 18</li> <li>years.</li> </ul> |
|                              | ⊠ FBI Criminal<br>Background (e.g.,<br>fingerprint)  | ☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe Repeated every 5 years, except for those providers who do not move, relocate, or have any gaps in service.   | ⊠ Provider ⊠Non-provider residents of the home All adults over the age of 18 years.   |
|                              | ⊠ Sex Offender<br>Registry   | <ul> <li>☑ Initial Entrance into the System</li> <li>☐ Checks</li> <li>Conducted</li> <li>Annually</li> <li>☑ Other. Describe</li> <li>Repeated every</li> <li>5 years, except for those</li> <li>providers who do not move, relocate, or</li> </ul>      | <ul> <li>☑ Provider</li> <li>☑ Non-provider</li> <li>residents of the</li> <li>home All adults</li> <li>over the age of 18</li> <li>years.</li> </ul> |

| CCDF Categories of Care  Types of Background Check                                      |   | Frequency  | Who is Subject<br>to Background<br>Checks?      |  |
|---|---|--|---|--|
| ☐ In-Home Child   | ☐ Child Abuse   | have any gaps in service.  Initial Entrance                                      | ☐ Provider                                      |  |
| Care Providers  ⊠ N/A. Check if In- Home Child Care is not subject to licensing in your | Registry  | into the System Checks Conducted Annually Other. Describe                        | Non-provider residents of the home              |  |
| State/Territory (skip to 3.1.2e)  | ☐ 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 conductedThe licensing authority charges a fee of \$50 for each individual, for each background check.
  - d-2) Who pays for background checks **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.
- 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 The Lead Agency performs announced and unannounced visits with programs covered under the licensing authority to ensure proper compliance with program policies and requirements. (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 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.  $(658E(c)(2)(F), \S98.41)$ 

☐ 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.  $(658E(c)(2)(F)(i), \S98.41(a)(1))$ 

| 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<br>child care<br>providers   | Family child care home providers | Group home child care providers | In-home<br>child care<br>providers |
| ☐ Physical exam or health statement for providers   |   |                                  |                                 |                                    |
| ☐ Physical exam or health statement for children  |   |                                  |                                 |                                    |
| □ Tuberculosis check for providers  | $\boxtimes$   |                                  |                                 |                                    |
| Tuberculosis check for children   |   |                                  |                                 |                                    |
| <ul><li>✓ Provider immunizations</li><li>✓ Child immunizations</li></ul>  |   |                                  |                                 |                                    |
| Hand-washing policy for providers and children  | $\boxtimes$   | $\boxtimes$                      |                                 | $\boxtimes$                        |
| Diapering policy and procedures   | $\boxtimes$   |                                  |                                 |                                    |
| <ul><li>☑ Providers to submit a<br/>self-certification or<br/>complete health and safety<br/>checklist</li></ul>      |   | $\boxtimes$                      |                                 |                                    |
| □ 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.  $(658E(c)(2)(F)(ii), \S98.41(a)(2))$ 

| The Lead Agency                              | th and safety re<br>n providers und<br>e requirement. | der the CCDF o                   | category                                 |                                    |
|--|---|----------------------------------|--|------------------------------------|
| The Lead Agency requires:                    | Center-<br>based child<br>care<br>providers           | Family child care home providers | Group<br>home child<br>care<br>providers | In-home<br>child care<br>providers |
| <b>⊠</b> Fire inspection                     |   |                                  |  |                                    |
| <b>⊠</b> Building inspection                 | $\square$   |                                  |  |                                    |
| <b>⋈</b> Health inspection                   | $\boxtimes$   |                                  |  |                                    |
| ☐ Inaccessibility of toxic substances policy |   | $\boxtimes$                      |  |                                    |
| <b>⊠</b> Safe sleep policy                   |   |                                  |  |                                    |

| CCDF Plan Effective Date: October 1, 2 | 013 |
|--|-----|
| Amended Effective:                     |     |

| 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. |                                  |  |                                    |  |
|---|---|----------------------------------|--|------------------------------------|--|
| The Lead Agency requires:   | Center-<br>based child<br>care<br>providers   | Family child care home providers | Group<br>home child<br>care<br>providers | In-home<br>child care<br>providers |  |
| ☐ Tobacco exposure reduction  |   |                                  |  | $\boxtimes$                        |  |
| ☐ 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<br>Categories<br>of Care | Health and safety training requirements | Pre-Service   | On-Going   |
|-------------------------------|---|---|--|
| Child Care<br>Centers         | First Aid                               | Per the licensing authority, a minimum of one adult who is First Aid certified must be present on or off site where children are presents at all times. | Per the licensing authority, a minimum of one adult who is First Aid certified must be present on or off site where children are present at all times. |
|                               | CPR                                     | Per the licensing authority, a minimum of one adult who is CPR certified must be present on or off site where children are present at all times.        | Per the licensing authority, a minimum of one adult who is CPR certified must be present on or off site where children are present at all times.       |
|                               | Medication<br>Administration            | The Lead Agency has no requirements in addition   | The Lead Agency has no requirements in addition  |

| CCDF<br>Categories<br>of Care | Health and safety training requirements | Pre-Service              | On-Going                 |
|-------------------------------|---|--------------------------|--------------------------|
| 01 0410                       | Policies and                            | to those issued by the   | to those issued by the   |
|                               | Practices                               | Licensing Authority.     | Licensing Authority.     |
|                               | Poison                                  | The Lead Agency has no   | The Lead Agency has no   |
|                               | Prevention and                          | requirements in addition | requirements in addition |
|                               | Safety                                  | to those issued by the   | to those issued by the   |
|                               | J                                       | Licensing Authority.     | Licensing Authority.     |
|                               | Safe Sleep                              | The Lead Agency has no   | The Lead Agency has no   |
|                               | Practices                               | requirements in addition | requirements in addition |
|                               | including                               | to those issued by the   | to those issued by the   |
|                               | Sudden Infant                           | •                        | •                        |
|                               | Death Syndrome                          | Licensing Authority.     | Licensing Authority.     |
|                               | (SIDS)                                  |                          |                          |
|                               | Prevention                              |                          |                          |
|                               | Shaken Baby                             | The Lead Agency has no   | The Lead Agency has no   |
|                               | Syndrome and                            | requirements in addition | requirements in addition |
|                               | abusive head                            | to those issued by the   | to those issued by the   |
|                               | trauma                                  | Licensing Authority.     | Licensing Authority.     |
|                               | prevention                              | TDI T IA. I              | 701 T 1A . 1             |
|                               | Age appropriate nutrition,              | The Lead Agency has no   | The Lead Agency has no   |
|                               | feeding,                                | requirements in addition | requirements in addition |
|                               | including                               | to those issued by the   | to those issued by the   |
|                               | support for                             | Licensing Authority.     | Licensing Authority.     |
|                               | breastfeeding                           |                          |                          |
|                               | Physical                                | The Lead Agency has no   | The Lead Agency has no   |
|                               | Activities                              | requirements in addition | requirements in addition |
|                               |   | to those issued by the   | to those issued by the   |
|                               |   | Licensing Authority.     | Licensing Authority.     |
|                               | Procedures for                          | The licensing authority  | The licensing authority  |
|                               | preventing the                          | requires that personnel  | requires that personnel  |
|                               | spread of                               | who prepare food be      | who prepare food         |
|                               | infectious                              | ServeSafe/TummySafe      | maintain                 |
|                               | disease,                                | certified.               | ServeSafe/TummySafe      |
|                               | including                               |                          | certified.               |
|                               | sanitary methods                        |                          |                          |
|                               | and safe handling of foods              |                          |                          |
|                               | Recognition and                         | The Lead Agency has no   | The Lead Agency has no   |
|                               | mandatory                               | The Lead Agency has no   | The Lead Agency has no   |
|                               | reporting of                            | requirements in addition | requirements in addition |
|                               | suspected child                         | to those issued by the   | to those issued by the   |
|                               | abuse and                               | Licensing Authority.     | Licensing Authority.     |
|                               | neglect                                 |                          |                          |
|                               | Emergency                               | The Lead Agency has no   | The Lead Agency has no   |
|                               | preparedness                            | requirements in addition | requirements in addition |
|                               | and planning                            | to those issued by the   | to those issued by the   |
|                               | response                                | Licensing Authority.     | Licensing Authority.     |

| CCDF<br>Categories<br>of Care | Health and safety training requirements  | Pre-Service   | On-Going  |
|-------------------------------|--|---|---|
|                               | procedures   |   |   |
|                               | Management of common childhood illnesses, including food intolerances and allergies  | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
|                               | Transportation<br>and child<br>passenger safety<br>(if applicable)   | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the 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 | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
|                               | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.                                | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
|                               | Supervision of children  | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
|                               | Behavior<br>management   | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
|                               | Other. Describe  |   |   |
| Group                         | First Aid  | The State does not have   | The State does not have   |

| CCDF       | Health and                   |                         |                               |
|------------|------------------------------|-------------------------|-------------------------------|
| Categories | safety training              | Pre-Service             | On-Going                      |
| of Care    | requirements                 |                         |                               |
| 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               | Group Home Child Care.  | Group Home Child Care.        |
|            | Policies and                 | •                       | -                             |
|            | Practices                    |                         |                               |
|            | Poison                       | The State does not have | The State does not have       |
|            | Prevention and               | Group Home Child Care.  | Group Home Child Care.        |
|            | Safety                       |                         |                               |
|            | 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                 | Group frome Clina Care. | Group Home Cinia Care.        |
|            | trauma                       |                         |                               |
|            | prevention                   |                         |                               |
|            | Age appropriate              | The State does not have | The State does not have       |
|            | nutrition,                   | Group Home Child Care.  | Group Home Child Care.        |
|            | feeding,                     | •                       | 1                             |
|            | 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<br>and safe |                         |                               |
|            | handling of foods            |                         |                               |
|            | Recognition and              | The State does not have | The State does not have       |
|            | mandatory                    | Group Home Child Care.  |                               |
|            | reporting of                 | Group Home Cinia Care.  | <b>Group Home Child Care.</b> |
|            | 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.        |

| CCDF       | Health and                         |                           |                         |
|------------|------------------------------------|---------------------------|-------------------------|
| Categories | safety training                    | Pre-Service               | On-Going                |
| of Care    | requirements                       |                           | 8                       |
|            | and planning                       |                           |                         |
|            | response                           |                           |                         |
|            | procedures                         |                           |                         |
|            | Management of                      | The State does not have   | The State does not have |
|            | common                             | Group Home Child Care.    | Group Home Child Care.  |
|            | childhood                          |                           |                         |
|            | illnesses,                         |                           |                         |
|            | including food<br>intolerances and |                           |                         |
|            | allergies                          |                           |                         |
|            | Transportation                     | The State does not have   | The State does not have |
|            | and child                          | Group Home Child Care.    | Group Home Child Care.  |
|            | passenger safety                   | Group frome Cinia Care.   | Group frome Clind Care. |
|            | (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                          | are up are seen a seen a  |                         |
|            | knowledge of                       |                           |                         |
|            | developmental                      |                           |                         |
|            | stages and                         |                           |                         |
|            | milestones                         |                           |                         |
|            | appropriate for                    |                           |                         |
|            | the ages of<br>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    |

| CCDF<br>Categories<br>of Care | Health and safety training requirements                                       | Pre-Service  | On-Going   |
|-------------------------------|---|--|--|
|                               | CPR   | have at least one adult who is First Aid certified in each classroom/home at all times. All licensed facilities/homes are monitored for compliance by the licensing authority. All unregulated care providres are monitored for compliance by the Lead Agency.  All licensed facilities,                 | unregulated providers are required to maintain First Aid 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.  Teachers/care providers in licensed |
|                               |   | 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 unregulated care providres are monitored for compliance by the Lead Agency. | 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.           |
|                               | Medication Administration Policies and Practices Poison                       | The Lead Agency has no requirements in addition to those issued by the licensing authority.  The Lead Agency has no  | The Lead Agency has no requirements in addition to those issued by the licensing authority.  The Lead Agency has no  |
|                               | Prevention and<br>Safety  | requirements in addition to those issued by the licensing authority.   | requirements in addition to those issued by the licensing authority.   |
|                               | Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention | The Lead Agency has no requirements in addition to those issued by the licensing authority.  | The Lead Agency has no requirements in addition to those issued by the licensing authority.  |
|                               | Shaken Baby<br>Syndrome and<br>abusive head                                   | The Lead Agency has no requirements in addition to those issued by the   | The Lead Agency has no requirements in addition to those issued by the   |

| CCDF<br>Categories<br>of Care | Health and safety training requirements   | Pre-Service   | On-Going  |
|-------------------------------|---|---|---|
|                               | trauma<br>prevention  | licensing authority.  | licensing authority.  |
|                               | Age appropriate nutrition, feeding, including support for breastfeeding   | The Lead Agency has no requirements in addition to those issued by the licensing authority.                                   | The Lead Agency has no requirements in addition to those issued by the licensing authority.   |
|                               | Physical<br>Activities  | The Lead Agency has no requirements in addition to those issued by the licensing authority.                                   | The Lead Agency has no requirements in addition to those issued by the licensing authority.   |
|                               | Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | The licensing authority requires licensed facilities/homes ensure personnel preparing food are ServeSafe/TummySafe certified. | The licensing authority requires licensed facilities/homes ensure personnel preparing food maintain ServeSafe/TummySafe certification at all times. |
|                               | Recognition and<br>mandatory<br>reporting of<br>suspected child<br>abuse and<br>neglect                           | The Lead Agency has no requirements in addition to those issued by the licensing authority.                                   | The Lead Agency has no requirements in addition to those issued by the licensing authority.   |
|                               | Emergency<br>preparedness<br>and planning<br>response<br>procedures   | The Lead Agency has no requirements in addition to those issued by the licensing authority.                                   | The Lead Agency has no requirements in addition to those issued by the licensing authority.   |
|                               | Management of common childhood illnesses, including food intolerances and allergies                               | The Lead Agency has no requirements in addition to those issued by the licensing authority.                                   | The Lead Agency has no requirements in addition to those issued by the licensing authority.   |
|                               | Transportation<br>and child<br>passenger safety<br>(if applicable)  | The Lead Agency has no requirements in addition to those issued by the licensing authority.                                   | The Lead Agency has no requirements in addition to those issued by the licensing authority.   |
|                               | Caring for children with special health care needs,   | The Lead Agency has no requirements in addition to those issued by the licensing authority.                                   | The Lead Agency has no requirements in addition to those issued by the licensing authority.   |

| CCDF       | Health and                       |                           |                           |
|------------|----------------------------------|---------------------------|---------------------------|
| Categories | safety training                  | Pre-Service               | On-Going                  |
| of Care    | requirements                     |                           |                           |
|            | mental health                    |                           |                           |
|            | needs, and                       |                           |                           |
|            | developmental<br>disabilities in |                           |                           |
|            |                                  |                           |                           |
|            | compliance with the Americans    |                           |                           |
|            | with Disabilities                |                           |                           |
|            | (ADA) Act                        |                           |                           |
|            | Child                            | The Lead Agency has no    | The Lead Agency has no    |
|            | development                      |                           |                           |
|            | including                        | requirements in addition  | requirements in addition  |
|            | knowledge of                     | to those issued by the    | to those issued by the    |
|            | developmental                    | licensing authority.      | licensing authority.      |
|            | stages and                       |                           |                           |
|            | milestones                       |                           |                           |
|            | appropriate for                  |                           |                           |
|            | the ages of                      |                           |                           |
|            | children                         |                           |                           |
|            | receiving                        |                           |                           |
|            | services.                        |                           |                           |
|            | Supervision of                   | The Lead Agency has no    | The Lead Agency has no    |
|            | children                         | requirements in addition  | requirements in addition  |
|            |                                  | to those issued by the    | to those issued by the    |
|            |                                  | licensing authority.      | licensing authority.      |
|            | Behavior                         | The Lead Agency has no    | The Lead Agency has no    |
|            | management                       | requirements in addition  | requirements in addition  |
|            |                                  | to those issued by the    | to those issued by the    |
|            |                                  | licensing authority.      | licensing authority.      |
|            | Other. Describe                  | incoming additionary.     | neerising additioney.     |
|            | Other: Describe                  |                           |                           |
| In-Home    | First Aid                        | Per the Lead Agency, all  | Per the Lead Agency, all  |
| Child Care |                                  | unregulated care          | unregulated care          |
| Providers  |                                  | providers are required to | providers are required to |
|            |                                  | be First Aid certified.   | maintain First Aid        |
|            |                                  | be First Ald Certified.   | certification.            |
|            | CPR                              | Por the Lead Agency all   |                           |
|            |                                  | Per the Lead Agency, all  | Per the Lead Agency, all  |
|            |                                  | unregulated care          | unregulated care          |
|            |                                  | providers are required to | providers are required to |
|            |                                  | be First Aid certified.   | maintain First Aid        |
|            | Madiation                        | TPL - T J A 3             | certification.            |
|            | Medication                       | The Lead Agency has no    | The Lead Agency has no    |
|            | Administration                   | training requirements for | training requirements for |
|            | Practices                        | In-Home Providers on      | In-Home Providers on      |
|            | Practices                        | this topic at this time.  | this topic at this time.  |
|            | Poison                           | The Lead Agency has no    | The Lead Agency has no    |
|            | Prevention and                   | training requirements for | training requirements for |

| CCDF<br>Categories<br>of Care | Health and safety training requirements | Pre-Service                                    | On-Going   |
|-------------------------------|---|--|--|
|                               | Safety                                  | In-Home Providers on                           | In-Home Providers on                             |
|                               |   | this topic at this time.                       | this topic at this time.                         |
|                               | Safe Sleep                              | The Lead Agency has no                         | The Lead Agency has no                           |
|                               | Practices                               | training requirements for                      | training requirements for                        |
|                               | including                               | In-Home Providers on                           | In-Home Providers on                             |
|                               | Sudden Infant                           | this topic at this time.                       | this topic at this time.                         |
|                               | Death Syndrome (SIDS)                   | P  |  |
|                               | Prevention                              |  |  |
|                               | Shaken Baby                             | The Lead Agency has no                         | The Lead Agency has no                           |
|                               | Syndrome and                            | training requirements for                      | training requirements for                        |
|                               | abusive head                            | In-Home Providers on                           | In-Home Providers on                             |
|                               | trauma                                  | this topic at this time.                       | this topic at this time.                         |
|                               | prevention                              | _  | -  |
|                               | Age appropriate                         | The Lead Agency has no                         | The Lead Agency has no                           |
|                               | nutrition,                              | training requirements for                      | training requirements for                        |
|                               | feeding,                                | In-Home Providers on                           | In-Home Providers on                             |
|                               | including support for                   | this topic at this time.                       | this topic at this time.                         |
|                               | breastfeeding                           |  |  |
|                               | Physical                                | The Lead Agency has no                         | The Lead Agency has no                           |
|                               | Activities                              |  | The Lead Agency has no training requirements for |
|                               | rectivities                             | training requirements for In-Home Providers on | In-Home Providers on                             |
|                               |   |  |  |
|                               | Procedures for                          | this topic at this time.                       | this topic at this time.                         |
|                               |   | The Lead Agency has no                         | The Lead Agency has no                           |
|                               | preventing the 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                               | tins topic at tins 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<br>procedures                  | this topic at this time.                       | this topic at this time.                         |
|                               | 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                             |

| CCDF<br>Categories<br>of Care | Health and safety training requirements  | Pre-Service  | On-Going   |
|-------------------------------|--|--|--|
|                               | illnesses,<br>including food<br>intolerances and<br>allergies  | this topic at this time.   | this topic at this time.   |
|                               | Transportation<br>and child<br>passenger safety<br>(if applicable)   | 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. |
|                               | Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act | 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. |
|                               | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.                                | 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<br>management   | 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

|   | ncles) from these health and safety requirements. What are the Lead gency's requirements for relative providers? (§98.41(A)(ii))(A))   |
|---|--|
|   | <ul> <li>☐ 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.</li> <li>☐ Relative providers are NOT required to meet any health and safety requirements as described in 3.1.2a-c, as appropriate.</li> <li>☐ 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.</li> </ul> |
| r<br>I  | Provide a web address for the State/Territory's health and safety requirements, if available: Please refer to the Mississippi Child Care Payment Program Policy Manual link found at, http://www.mdhs.state.ms.us/eccd_mschildcare.html  |
| For prov<br>subject to<br>please d            | ffective enforcement of the CCDF health and safety requirements. Viders who care for children receiving CCDF assistance and who are NOT to the enforcement procedures described in 3.1.2 for licensed providers, escribe how the Lead Agency enforces the CCDF health and safety ment requirements.  |
| The Lead program by Lead During to claims, or | d Agency makes unnannounced visits to monitor compliance with all requirements throughout the program year. These visits may be conducted Agency subisdy staff, or by the MDHS Division of Program Integrity staff. these visits, staff monitor the presence of all elements related to payment operation, enrollment of children, and health and safety practices as required itial provider approval.  |
| a)  | Describe whether and how the Lead Agency uses on-site visits (announced and unannounced) The Lead Agency makes annual unannounced visits to unlicensed providers to ensure compliance with required elements.  |
| b)  | <u>Describe whether the Lead Agency uses background checks</u> The Lead Agency requires that providers and anyone in the home over the age of 18 submit to a Child Abuse and Neglect Criminal Background Check.  |
| c)  | Does the Lead Agency permit providers to self-certify compliance with applicable health and safety standards?  |
|   | <ul> <li>✓Yes. If yes, what documentation, if any, is required? Describe</li> <li>The Lead Agency requires that all unlicensed providers submit a checklist containing various statements related to health and safety issues related to caring for children.</li> <li>No</li> </ul>   |

| <ul> <li>d) Describe whether the Lead Agency uses any other enforcement policies and<br/>practices for the health and safety requirements NA</li> </ul>   |
|---|
| $\square$ Check if the Lead Agency certifies that procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Card and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))   |
| 3.1.5. Does the State/Territory encourage or require child care programs to conduct developmental screening and referral for children participating in child care programs?  Lead Agencies are not required to conduct developmental screenings of children, bu are encouraged to work with child care providers to promote screening in the areas of physical health (including vision and hearing), mental health, oral health, and developmental disabilities. |
| <ul><li>☐ Yes. Describe</li><li>☐ No</li></ul>  |
| a) If yes, are training, resources and supports offered to programs to<br>assist them in ensuring that children receive appropriate<br>developmental screenings?  |
| Yes. Describe No Other. Describe  |
| b) If yes, are resources and supports provided to programs to help<br>them understand how families are referred to indicated services and<br>how to work with the health, mental health, and developmental<br>disabilities agencies to support children when follow-up to screening is<br>needed?   |
| Yes. Describe No Other. Describe  |
| c) Does_the State/Territory use developmental screening and referral tools?  Yes. If Yes, provide the name of the tool(s)  No Other. Describe   |
| 3.1.6 Data & Performance Measures on Licensing and Health and Safety  |

# 3.1.6 Data & Performance Measures on Licensing and Health and Safety Compliance –

What data elements, if any, does the State/Territory currently have access to related to licensing compliance? What, if any, performance measures does the Lead Agency use for ensuring health and safety? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to

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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 licensing and health and safety. Indicate if the Lead Agency or another agency has access to data on: Number of licensed programs. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They report the number of licensed programs as 1,636. Numbers of programs operating that are legally exempt from licensing. Describe (optional) Number of programs whose licenses were suspended or revoked due to non-compliance. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They reported that 0 program licenses were suspended/revoked during the last fiscal year. Number of injuries in child care as defined by the State/Territory. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They report 6 incidences of injuries during the last fiscal year. Number of fatalities in child care as defined by the State/Territory. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. 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 Number of programs revoked from CCDF due to non-compliance with health and safety requirements. Describe (optional) The Lead Agency would manage this data. Zero (0) programs were revoked during the las fiscal year due to non-combiance with health and safety requirements. 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. This comparison would be used to evaluate those changes that are needed to increase health and safety of care environments and inform policy/regulation changes.

#### 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.

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.

| Hilling . | 3.2.1 Has the State/Territory developed voluntary early learning |
|-----------|--|
| •         | lelines for children? Check any early learning guidelines the    |
| Stat      | e/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 | <u>):</u> |

Birth to Three: www.earlychildhood.msstate.edu;

Three to Five: www.mde.k12.ms.us

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-<br>Three ELGs | Three-to-Five ELGs | Five and<br>Older ELGs |
|-------------------------------------|-------------------------|--------------------|------------------------|
| Physical development and health     |                         |                    |                        |
| Social and emotional development    |                         |                    |                        |
| Approaches to learning              |                         |                    |                        |
| Logic and reasoning (e.g., problem- |                         |                    |                        |

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| Domains                             | Birth-to-<br>Three ELGs | Three-to-Five<br>ELGs | Five and<br>Older ELGs |
|-------------------------------------|-------------------------|-----------------------|------------------------|
| solving)                            |                         |                       |                        |
| Language development                |                         | $\boxtimes$           |                        |
| Literacy knowledge and skills       |                         | $\boxtimes$           |                        |
| Mathematics knowledge and skills    | $\boxtimes$             | $\boxtimes$           |                        |
| 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<br>Dissemination | Voluntary<br>Training | Mandatory<br>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<br>Head Start     | $\boxtimes$                  |                       |                       |
| Practitioners in public<br>Pre-K program | $\boxtimes$                  |                       |                       |
| Practitioners in elementary schools      | $\boxtimes$                  |                       |                       |
| Other. List                              |                              |                       |                       |

| 3.2.4 Are voluntary early learning guidelines incorporated into  |
|--|
| other parts of the child care system?  |
| Check which ways, if any, the State/Territory incorporates its early learning guidelines into other parts of the child care system.                            |
| $\square$ To define the content of training required to meet licensing requirements $\boxtimes$ To define the content of training required for program quality |

| improvement standards (e.g., QRIS standards)  To define the content of training required for the career lattice or professional credential  To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs  To require programs in quality improvement standards to develop curriculum/learning activities based on the voluntary ELGs  To develop State-/Territory –approved curricula  Other. List  None.                                      |
|--|
| 3.2.5 Are voluntary early learning guidelines and development standards aligned with into other parts of the child care system? Check the standards, if any, with which the State/Territory aligns its early learning guidelines.  |
| <ul> <li>☐ Cross-walked to align with Head Start Child Development and Early Learning Framework</li> <li>☐ Cross-walked to align with K-12 content standards</li> <li>☐ Cross-walked to align with State/Territory pre-k standards</li> <li>☐ Cross-walked with accreditation standards</li> <li>☐ Other. List</li> <li>☐ None.</li> </ul>   |
| 3.2.6 Describe how your State/Territory uses ongoing assessments and measures of school readiness assessment using the following series of   |
| <b>questions.</b> 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-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 ☐ Other. Describe ☐ Other. Describe ☐ Other. Describe ☐ Other.   |
| 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 ☐   |
| b-3) If yes, is the information from the school readiness measures used to target program quality improvement activities?  |
| Yes. Describe No Other. Describe   |
| No □ Other. Describe   |
| 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>  |
| 2.7 Data & Performance Measures on Voluntary Early Learning  |

## 3.2

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

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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) <b>Data on voluntary early learning guidelines</b> . Indicate if the Lead Agency or another agency has access to data on:  |
|---|
| <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. 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?  |
| 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) <b>Evaluation</b> . 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. Additionaly, 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.

| None  |  |  |             |  |  |
|---|--|--|-------------|--|--|
| 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) |  |  |             |  |  |
| <ul> <li>□ 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)</li> <li>□ Other. Describe</li> <li>□ None</li> </ul>   |  |  |             |  |  |
| 3.3.2 Element 2 –Supports to Programs to Improve Quality  |  |  |             |  |  |
| <b>Definition</b> — 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 supports to child care programs, i  |  |  |             |  |  |
| Types and Purposes of<br>Support  | ·· · · · · · · · · · · · · · · · · · · |  |             |  |  |
| Attaining and maintaining licensing compliance  |  |  |             |  |  |
| Attaining and maintaining quality improvement standards   | $\boxtimes$                            |  | $\boxtimes$ |  |  |
| beyond licensing  |  |  |             |  |  |

| Types and Purposes of Support   | Information or Written Materials | Training    | On-Site<br>Consultation |
|---|----------------------------------|-------------|-------------------------|
| Attaining and maintaining   |                                  |             | П                       |
| accreditation   |                                  |             |                         |
| igtherapsi Providing targeted technical   |                                  |             |                         |
| assistance in specialized content   |                                  |             |                         |
| areas:  |                                  | <u> </u>    | N 7                     |
| Health and safety   |                                  |             | X                       |
| Infant/toddler care   |                                  |             |                         |
| School-age care   |                                  |             | X                       |
| Inclusion   |                                  | $\boxtimes$ |                         |
| Teaching dual language  |                                  |             |                         |
| learners  |                                  |             |                         |
| Mental health   |                                  |             |                         |
| Business management   |                                  |             |                         |
| practices   |                                  |             |                         |
| Other. Describe   |                                  |             |                         |
| None. Skip to 3.3.3.  |                                  |             |                         |
| individual programs include:  ☐ Program improvement plans ☐ Technical assistance on the use of program assessment tools ☐ Other. Describe ☐  c) Is technical assistance linked to entering the QRIS or targeted to help programs forward on QRIS?  ☐ Yes. Describe The MS Child Care Resource and Referral Network, Partners for Quality Care, and the Allies for Quality Care program provide onsite technical assistance desigened to improve a licensed program's rating in the QRIS. ☐ No ☐ Other. Describe ☐ |                                  |             |                         |
| <ul> <li>3.3.3 Element 3 – Financial Incentives and Supports</li> <li>Definition – For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and</li> </ul>   |                                  |             |                         |
| 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.   |                                  |             | ed and to which         |

| Types of Financial Incentives and Supports for Programs                       | Child Care<br>Centers | Child Care<br>Homes | License-<br>Exempt<br>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         | $\boxtimes$           |                     |                                 |
| ☐ On-going, periodic grants or stipends tied 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.** 

| Types of Program Quality Assessment<br>Tools   | Child Care<br>Centers                     | Child<br>Care<br>Homes | License-<br>Exempt<br>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                                 |   |                        |                                 |

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| Types of Program Quality Assessment<br>Tools   | Child Care<br>Centers  | Child<br>Care<br>Homes   | License-<br>Exempt<br>Providers                       |
|--|--|--|---|
| 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   | ubmission of written documentation, eveloped for State/Territory quality mprovement system. This may include nstruments developed for quality mprovements in 21st Century Learning |  |   |
| Describe, including frequency of assessments.  |  |  |   |
| Other. Describe  |  |  |   |
| None. Skip to 3.3.5.   |  |  |   |
| duplication?  Have a mechanism to trace assessments/monitoring active. Include QRIS or other qual enforcement.  Have compliance monitors. Head Start, State/Territory powith quality improvement system. Have monitoring for meet validation for compliance with QRIS) without further review.  Other. Describe. | vities to avoid du<br>lity reviews as pa<br>ing in one sector<br>re-k) serve as val<br>stem (e.g., QRIS)<br>ing accreditation<br>h quality improve                                 | plication<br>art of licens<br>(e.g., Head<br>idation for<br>without fur<br>standards | Start/Early<br>compliance<br>other review<br>serve as |
| 3.3.5 – Element 5 - Outreach and Con   | sumer Educati  | ion  |   |
| <b>Definition</b> – For purposes of this section, to the strategies used to promote the child parents, programs and the general public.  |  |  |   |
| a) Does the State/Territory use<br>levels of quality for child care progra<br>parents about licensing status and li<br>(e.g. stars, or gold/silver/bronze leve   | ıms beyond what<br>censing compliar  | may comm   | unicated to   |
| ∑ Yes. If yes, how is it used?   |  |  |   |

| <ul> <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> </ul> |
|--|
| 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 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?  Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating State/Territory-wide.  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.   |

| <ul> <li>No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.</li> <li>☐ State/Territory is in the development phase</li> <li>☐ State/Territory has no plans for development</li> <li>☐ Other. Describe</li> </ul> |
|--|
|  |
| b) If yes to 3.3.6a, <b>CHECK</b> the types of providers eligible to participate   |
| in the QRIS:   |
| Child care centers   |
| Group child care homes   |
| Family child care homes  |
| In-home child care   |
| License exempt providers   |
| Early Head Start programs  |
| ☐ Early Head Start programs ☐ Head Start programs  |
|  |
| Pre-kindergarten programs  |
| School-age programs  |
| Other. Describe  |
|  |

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.

### 3.3.8 Data & Performance Measures on Program Quality –

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).

| • | <b>Ita on program quality</b> . Indicate if the Lead Agency or another agency ccess to data on:                               |
|---|---|
|   | □ 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)   |
| $oxed{oxed}$ 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</b> . 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.   |
| Location to to marcate busic, minimal reversion quality.   |
| <b>Evaluation</b> . What, if any, are the State/Territory's plans for evaluation related to program quality? Evaluation can include efforts related to |

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

The Lead Agency is funding the evaluation and validation of the QRIS in the upcoming year. The resulting information will be made to identify strategies to improve QRIS implementation and increase program quality.

#### 3.3.9 Goals for the next Biennium -

b)

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 (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.

|            | tate/Territory developed core knowledge and com<br>ioners working with and/or on behalf of children? |     |
|------------|--|-----|
| competenci | State/Territory has not developed core knowledge ies. Skip to question 3.4.2. Describe               | and |

| If yes, insert web addresses, where possible:   |
|---|
| b) Check which of the following teaching and learning topics, if any, are covered in the CKCs.  |
| Child growth, development and learning Health, nutrition, and safety Learning environment and curriculum Interactions with children Family and community relationships Professionalism and leadership Observation and assessment Program planning and management Diversity Other. Describe  |
| c) Are the CKCs incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its CKCs into other parts of the child care system.  |
| ☐ To define the content of training required to meet licensing requirements ☐ To define the content of training required for program quality improvement standards (as reported in section 3.3) ☐ To define the content of training required for the career lattice or credential ☐ To correspond to the early learning guidelines ☐ To define curriculum and degree requirements at institutions of higher education ☐ Other. Describe ☐ None  |
| 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  |
| 3.4.2 Workforce Element 2 - Career Pathways   |
| <b>Definition</b> — 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.  |
| a) Does the State/Territory have a career pathway which defines the sequence of qualifications related to professional development (education, training and technical assistance) and experience required to work with children?  |
| <ul> <li>Yes. Describe</li> <li>No, the State/Territory has not developed a career pathway. Skip to question 3.4.3.</li> </ul>  |
| Insert web addresses, where possible:   |
| b) Check for which roles, if any, the career pathways include qualifications, specializations or credentials.   |

| <ul> <li>Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe</li> <li>Providers working directly with children in family child care homes, including aides and assistants. Describe</li> <li>Administrators in centers (including educational coordinators, directors). Describe</li> <li>Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe</li> <li>Education and training staff (such as trainers, CCR&amp;R staff, faculty). Describe</li> <li>Other. Describe</li> <li>None</li> </ul>  |
|---|
| c) Does the career pathways (or lattice) include specializations or credentials, if any, for working with any of the following children?  |
| ☐ Infants and toddlers ☐ Preschoolers ☐ School-age children ☐ Dual language learners ☐ Children with disabilities, children with developmental delays, and children with other special needs ☐ Other. Describe ☐ None   |
| d) In what ways, if any, is the career pathway (or lattice) used?  Voluntary guide and planning resource Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13 Required placement for all practitioners working in programs that receive public funds to serve children birth to 13 Required placement 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 |
| 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

**Definition** – 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>Standards set by the institution</li> <li>Standards set by the State/Territory higher education board</li> <li>Standards set by program accreditors</li> <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?  |
|--|
| <ul><li>☐ Yes. If yes, describe</li><li>☐ No</li></ul>   |
| f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?   |
| <ul><li>Yes. If yes, describe</li><li>No</li></ul>   |
| 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</li> <li>Care and Project PREPARE.</li> <li>No</li> </ul> |
| 3.4.5 Workforce Element 5- Compensation, Benefits and Workforce Conditions  |
| <b>Definition</b> — 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?   |
| <ul><li>☐ Yes. If yes, describe</li><li>☐ No</li></ul>  |
| d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?   |
| <ul><li>☐ Yes. If yes, describe</li><li>☐ No</li></ul>  |
| <b>3.4.6 Data &amp; Performance Measures on the Child Care Workforce</b> — 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) <b>Data on the child care workforce</b> . Indicate if the Lead Agency or another agency has access to data on:   |
| 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  |

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| which they teach. Describe (optional)  |  |  |
|--|--|--|
| Number of scholarships awarded . Describe (optional)   |  |  |
| Number of individuals receiving bonuses or other financial rewards   |  |  |
| or incentives. Describe (optional)   |  |  |
| ☐ 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.<br>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   |  |  |
| 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?             |
| $\bowtie$ No | 1   |

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 the | hat |
|--|-----|
| 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.

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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.

#### **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 amendments</u> 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.

| SECTION<br>AMENDED | EFFECTIVE/<br>PROPOSED | DATE<br>SUBMITTED TO | DATE APPROVED<br>BY ACF |
|--------------------|------------------------|----------------------|-------------------------|
|                    | EFFECTIVE DATE         | ACF                  |                         |
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# 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<br>Plan | Describe Progress – Include<br>Examples and Numeric<br>Targets where Possible |
|--|---|
|  |   |
|  |   |

| Note: If your licensing standa | rds changed during this period, please  |
|--------------------------------|---|
| provide a brief summary of th  | e major changes and submit the updated  |
| regulations to the National Re | esource Center for Health and Safety in |
| 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

| sed center-based programs operated in the State/Territory 30, 2014?  |
|--|
| sed home-based programs operated in the State/Territory 30, 2014?  |
| erritory have data on the number of programs operating in hat are legally exempt from licensing? At a minimum, the provide the number of legally exempt providers serving CDF.   |
| (Use the Describe Box to provide the universe of the number is based)  |
| quency of Monitoring Visits  |
| conitoring visit is an onsite visit by department personnel gram with the goal of ensuring compliance with licensing de initial licensing determination visits, licensing renewal or unannounced visits, and visits made after a complaint of providers, a monitoring visit is an onsite visit to a child of ensuring compliance with health and safety standards quired for receipt of CCDF funds. Use the Describe box to ry monitoring visit requirement. |
| sed center-based programs received at least one<br>between October 1, 2013 and September 30, 2014?   |
| programs visited, how many were unannounced? programs visited, how many were triggered by a identified risk? rcentage of required visits for licensed center-based e completed?  |
|  |

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| b) How many licensed family child care programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?   |
|--|
| b-1) Of those programs visited, how many were unannounced?   |
| b-2) Of those programs visited, how many were triggered by a complaint or identified risk?   |
| b-3) What percentage of required visits for licensed family child care   |
| programs were completed?<br>\[ N/A \]  |
| Describe:  |
| c) How many legally exempt providers receiving CCDF received at least one monitoring visit between October 1, 2013 and September 30, 2014? Of those c-1) Of those programs visited, how many were unannounced? c-2) Of those programs visited, how many were triggered by a complaint or identified risk? c-3) What percentage of required visits for legally exempt providers were completed? N/A Describe: |

## **A1.2.3 Number of Licensing Suspensions, Licensing Revocations and Terminations from CCDF**

Suspension of license includes any enforcement action that requires the temporary suspension of child care services because of licensing violations. Revocation of license includes termination or non-renewal of licensure and any other enforcement action that requires the closure of a program because of licensing violations.

|                                 | 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<br>Care<br>Centers        |  |  |   |     |          |
| Group<br>Child<br>Care<br>Homes |  |  |   |     |          |

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|   | How many<br>programs had their<br>licenses suspended<br>due to licensing<br>violations as<br>defined in your<br>State/Territory<br>during the last<br>fiscal year? | How many<br>programs had their<br>licenses revoked<br>due to licensing<br>violations as<br>defined in your<br>State/Territory<br>during the last<br>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<br>Child<br>Care<br>Homes  |  |  |   |     |          |  |
| In-Home<br>Providers  |  |  |   |     |          |  |
| 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?   |  |  |   |     |          |  |
| ☐ Yes<br>☐ No   | s. Describe  |  |   |     |          |  |

# 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<br>Plan | Describe Progress – Include<br>Examples and Numeric<br>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<br>to<br>Three<br>ELG's | Three-<br>to-Five<br>ELG's | Five<br>and<br>Older<br>ELG's | N/A | Describe |
|--|-------------------------------|----------------------------|-------------------------------|-----|----------|
| How many<br>teachers/practitioners in center-<br>based programs were trained on<br>ELG's over the past year?<br>Separate by age group if possible<br>(e.g., infants and toddlers,<br>preschoolers, school-age<br>children) |                               |                            |                               |     |          |

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| Provider Categories  | Birth<br>to<br>Three<br>ELG's | Three-<br>to-Five<br>ELG's | Five<br>and<br>Older<br>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<br>to<br>Three<br>ELG's | Three-<br>to-Five<br>ELG's | Five<br>and<br>Older<br>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        |                               |                            |                               |     | <del></del> |
| possible (e.g., infants and     |                               |                            |                               |     |             |
| toddlers, preschoolers, school- |                               |                            |                               |     |             |

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| Provider Categories | Birth<br>to<br>Three<br>ELG's | Three-<br>to-Five<br>ELG's | Five<br>and<br>Older<br>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<br>2014-2015 CCDF Plan | Describe Progress – Include Examples and<br>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)?  $\square$  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 \_\_\_\_\_  $\square$  N/A Describe: Family Child Care Homes \_\_\_\_\_  $\square$  N/A Describe: b) How many programs received on-going or periodic quality stipends? Child Care Centers  $\square$  N/A Describe: Family Child Care Homes \_\_\_\_\_  $\prod N/A$ Describe:

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

# 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 QRISOR Other Quality Improvement System?N/ADescribe:   |
| c) | What is the total number of eligible license-exempt providers for QRIS  OR Other Quality Improvement System?  N/A  Describe:  |
|    | Tumber 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<br>OR Other Quality Improvement System<br>\[ \sum N/A \] 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? |   |
|---|---|
| Number of License-Exempt Providers QRIS OR Other Quality Improvement System   | r |
| Percentage of License-Exempt Providers QRISOR Other Quality Improvement System  N/A Describe:                       |   |

### A3.2.5. Number of Programs at Each Level of Quality

For each type of care, provide the total number of quality levels and the number of programs at that level of the total number of participating as reported in A3.2.4. Describe metric if other than QRIS, such as accreditation.

|                | Number of levels of quality | Number of programs at each level | N/A | Describe |
|----------------|-----------------------------|----------------------------------|-----|----------|
| Child Care     |                             |                                  |     |          |
| Centers        |                             |                                  |     |          |
| Family Child   |                             |                                  |     |          |
| Care Homes     |                             |                                  |     |          |
| License-Exempt |                             |                                  |     |          |
| Providers      |                             |                                  |     |          |

## A3.2.6 Number of Programs Who Moved Up or Down within QRIS

If quality threshold is something other than QRIS, describe the metric used, such as accreditation. These numbers ARE NOT expected to total the number of participating programs in the QRIS as reported in A3.2.4.

|                                 | How many programs<br>moved up within the QRIS<br>or achieved another<br>quality threshold<br>established by the<br>State/Territory over the<br>last fiscal year? | How many programs moved down within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year? | N/A | Describe |
|---------------------------------|--|--|-----|----------|
| Child Care<br>Centers           |  |  |     |          |
| Family<br>Child Care<br>Homes   |  |  |     |          |
| License-<br>Exempt<br>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)

### A4.1 Progress on Overall Goals

# 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<br>2014-2015 CCDF Plan | Describe Progress – Include Examples and<br>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

| b) What is the total number of family child care providers in the as of September 30, 2014?  N/A Describe:  | State         | /Territory |
|---|---------------|------------|
| Describe.   |               |            |
| c) What is the number of center teachers and family child care p<br>qualification level as of the end of the last fiscal year? Count o<br>level of education attained.  |               | •          |
| Child Care Family Child Center Care Teachers Providers  | N/A           | Describe   |
| Child Development   | $\overline{}$ |            |
| Associate (CDA)   | Ш             |            |
| State/Territory   |               |            |
| Credential  | _             |            |
| Associate's degree  |               |            |
| Bachelor's degree   |               |            |
| Graduate/Advanced   |               |            |
| degree  |               |            |
| A4.2.2 Number of Individuals Included in State/Territory's Development Registry during Last Fiscal Year (October 1, 2 September 30, 2014)  Teachers in child care centers Family child care home providers License-exempt providers N/A Describe: |               |            |
| A4.2.3 Number of Individuals Receiving Credit-Based Train Education as defined by State/Territory during the last fiscon Teachers in child care centers Family child care home providers License-exempt providers N/A Describe:                   |               |            |

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

| providers           |  |         |        |
|---------------------|--|---------|--------|
| hers/Providers Reco | Supports Provided and Number of<br>eiving as of End of Last Fiscal Yea |         |        |
| Scholarships. How   | many teachers/providers received?                                      |         |        |
| ☐ Reimbursement fo  | r Training Expenses. How many teach                                    | ers/pro | viders |
| received?           | 0 1  | •       |        |
| Loans. How many     | teachers/providers received?   |         |        |
|                     | s. How many teachers/providers receiv                                  | ed?     |        |
| Other. Describe     | J I  |         |        |
| □ 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<br>Plan | Describe Progress – Include<br>Examples and Numeric<br>Targets where Possible |
|--|---|
|  |   |
|  |   |

### **APPENDIX 2** CCDF PROGRAM ASSURANCES AND CERTIFICATIONS

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

- **(1)** 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))
- **(2)** 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))
- **(3)** 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))
- the child care certificate offered to parents shall be of a value commensurate **(4)** with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- with respect to State and local regulatory requirements, health and safety **(5)** 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))
- **(6)** 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:

**(1)** 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))

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- (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))
- 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.