



Child Care and Development Fund (CCDF) Plan

For

North Carolina

State/Territory:

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 expires

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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:

North Carolina Department of Health and Human Services

Address of Lead Agency:

2001 Mail Service Center Raleigh, NC 27699-2001

Name and Title of the Lead Agency's Chief Executive Officer:

Secretary Aldona Wos

Phone Number: 919 855-4800

Fax Number: 919 715-4645

E-Mail Address: Aldona.Wos@dhhs.nc.gov

Web Address for Lead Agency (if any): **www.dhhs.state.nc.us**

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: **Janice Fain**

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Title of CCDF Administrator: **Section Chief, NC Division of Child Development and Early Education (DCDEE)**

Address of CCDF Administrator: **2201 Mail Service Center, Raleigh, NC 27699-2201**

Phone Number: **919 662-8499**

Fax Number: **919 662-4568**

E-Mail Address: Janice.Fain@dhhs.nc.gov

Phone Number for CCDF program information (for the public) (if any): **(919) 662-4499**

Web Address for CCDF program (for the public) (if any): www.ncchildcare.net

Web address for CCDF program policy manual: (if any):

<http://info.dhhs.state.nc.us/olm/manuals/dcd/scc/man/index.htm>

Web address for CCDF program administrative rules: (if any):

<http://nrckids.org/STATES/NC/northcarolina.htm>

b) Contact Information for CCDF Co-Administrator (if applicable):

Name of CCDF Co-Administrator: **N/A**

Title of CCDF Co-Administrator: N/A

Address of CCDF Co-Administrator: N/A

Phone Number: N/A

Fax Number: N/A

E-Mail Address: N/A

Description of the role of the Co-Administrator: N/A

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 2012 Federal CCDF allocation (Discretionary, Mandatory and Matching):

\$198,342,198

Federal TANF Transfer to CCDF: **\$71,73,001.00**

Direct Federal TANF Spending on Child Care: **\$65,998,306**

State CCDF Maintenance-of-Effort Funds: **\$37,927,282**

State Matching Funds: **\$27,596,936.00**

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 N/A here.

Note: 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 Funds & Lottery Funds**

If known, identify the estimated amount of public funds the Lead Agency will receive: **\$52,212,877.00 Match \$37,927,282.00**

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:

donated directly to the State?

donated to a separate entity(ies) designated to receive private donated funds?

If checked, identify the number of entities designated to receive private donated funds and provide name, address, contact, and type _____

If known, identify the estimated amount of private donated funds the Lead Agency will receive: \$ _____

State expenditures for pre-k programs to meet the CCDF Matching Funds requirement. If checked, **\$8,331,025.00**

Provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%): **16%**

If percentage is more than 10% of the Matching fund requirement, describe how the State will coordinate its pre-k and child care services:

DCDEE is the administrator of the state pre-kindergarten program(NC Pre-K). Pre-k and child care services will be well coordinated and streamlined by ensuring blended funding so that integrated services are available through Pre-K, subsidized child care and Smart Start.

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for Matching Funds requirement:

\$ 8,331.025.00

Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents: **To ensure parents have access to pre-k programs, subsidy funds provide wrap-around care to accommodate parents needing full day child care services.**

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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%): **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:

The Pre-K program (NC Pre-K) has been developed to meet the needs of working families, so programs' hours are at least 6.5 hours per day; wrap around services are provided for families who need additional child care hours; and parental choice information is given to families as they determine how to meet their child care needs.

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for MOE Fund requirement:

\$ 7,585,456.00

Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents:

To ensure parents have access to Pre-K programs, subsidy funds provide wrap-around care to accommodate parents who need full-day child care services.

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.

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.

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Activity	Estimated Amount of CCDF Quality Funds (check which targeted funds will be used, if any)	Purpose	Projected Impact and Anticipated Results (if possible)
<p>Child Care Resource and Referral</p>	<p>Check if targeted funds for this activity: <input checked="" type="checkbox"/> Child Care Resource and Referral</p>	<p>This project funds a network of CCR&R agencies across the state. The CCR&R System ensures equity of access and consistency of quality across the state in the delivery of Child Care Resource & Referral CORE services: Parent Education and Referrals; Technical Assistance; Professional Development; Data Collection; & Public Awareness.</p>	<p>Consumer Education: Consumer education and referrals tailored to individual family needs; parent education about the star rating system, quality criteria, and encouragement to use quality indicators when selecting care; information on state licensing requirements, availability of child care subsidy and other family supports, parenting resources, and community supports. Professional Development: Provide access to contact hours and credit-bearing courses and professional development supports to the child care workforce. Technical Assistance: On-site consultation to child care programs to improve quality of care. Data Collection: Data collection, evaluation, and analysis of critical services.</p>
<p>Infant Toddler Quality Enhancement Project</p>	<p>Check if targeted funds for this activity: <input checked="" type="checkbox"/> <u>Infant/Toddler</u></p>	<p>The Infant Toddler (IT) Quality Enhancement Project provides technical assistance and training to IT teachers to improve the quality of care they provide in their classrooms. The project features a highly trained team of regional infant toddler specialists who work with child care programs and community agencies in all 100 North Carolina counties.</p>	<p>In 2013-2014, the Infant Toddler project is scheduled to deliver 3,700 on-site technical assistance consultations; provide 590 contact hours of training; Develop CEU'S modules on infant toddler topics.</p>

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<p><u>School Age Care Quality Improvement Project</u></p>	<p>Check if targeted funds for this activity <input checked="" type="checkbox"/> School-Age/Child Care</p>	<p>The School Age Care Quality Improvement Project is designed to improve outcomes for the state’s school age children by improving the quality and availability of out-of-school time care for that population. A team of highly trained specialists work in all 100 counties in North Carolina to provide technical assistance to improve quality in licensed programs and to support successful licensure of unlicensed programs.</p>	<p>In 2013-2014 School Age Care Quality Improvement Project the project is scheduled to provide 2,385 on-site technical assistance consultations; and develop CEU bearing modules on school age topics.</p>
<p><u>Promoting Healthy Social Behaviors in Child Care Centers Project</u></p>	<p>Check if targeted funds for this activity: <input type="checkbox"/> Infant/Toddler Targeted Funds <input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds <input type="checkbox"/> Quality</p>	<p>The Promoting Healthy Social Behaviors in Child Care Centers project (HSB), improves program quality. The highly trained HSB specialists who work in all 100 counties across the state provide training and technical assistance to aid teachers in modifying their own behavior and early childhood environments to promote social emotional competencies and prevent challenging behavior in the classroom.</p>	<p>In 2013-14, Promoting Healthy Social Behavior is scheduled to deliver 3,680 on-site technical assistance consultations; provide 590 contact hours of training; develop CEU’S modules on topics related to social-emotional health of young children.</p>
<p><u>T.E.A.C.H. Infant Toddler Scholarships</u></p>	<p>Check if targeted funds for this activity: <input type="checkbox"/> Infant/Toddler Targeted Funds <input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds <input type="checkbox"/> Quality <input type="checkbox"/> Expansion <input type="checkbox"/> Expansion</p>	<p>The goal of the T.E.A.C.H. Infant Toddler scholarships is to support increased participation in educational activities among teachers working with infants and toddlers. T.E.A.C.H. Early Childhood® Infant Toddler Scholarships offers enhanced release time support through associate and bachelor degree scholarships as a strategy to attract, educate, compensate and retain child care professionals caring for children ages 0-2.</p>	<p>T.E.A.C.H. Infant Toddler Scholarships- estimated 2,000 child care professionals working directly with infants and toddlers will access higher education through the TEACH Infant Toddler Scholarship project.</p>

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<p>T.E.A.C.H. Health Insurance</p>	<p>Check if targeted funds for this activity: Infant/Toddler Targeted Funds School-Age/Child Care Resource and Referral Targeted Funds Quality Expansion</p>	<p>T.E.A.C.H. Early Childhood® Health Insurance Program : Provides partial reimbursement of health insurance costs to qualifying child care programs as a strategy to incentivize and reward teacher education and retention.</p>	<p>T.E.A.C.H. Health Insurance Scholarships in 2013-2014 estimated to will reach 200 child care programs and 1870 child care staff will receive and have access to health insurance.</p>
<p>Child Care The Child Care WAGE\$ Project</p>	<p>Check if targeted funds for this activity: Infant/Toddler Targeted Funds School-Age/Child Care Resource and Referral Targeted Funds Quality Expansion</p>	<p>The Child Care WAGE\$® Project provides child care professionals with education-based salary supplements. To encourage consistency, installments based on half of the annual award are issued after each six month period the participant completes in the same child care program. Because these supplements reward education and continuity of care, children benefit from more stable relationships with better educated teachers. The consistent care of an educated provider is fundamental to quality, and quality child care leads to future success in school and life.</p>	<p>Approximately 4,400 applicants will receive or be eligible to receive WAGE\$ payments WAGE\$ will offer five different funding options (tiers), four county-specific eligibility/cut options and implement tier changes, percentage cuts and/or increases as requested.</p>
<p>Healthy Safety Calendar/Bulletin for Child Care Providers</p>	<p>Check if targeted funds for this activity: Infant/Toddler Targeted Funds School-Age/Child Care Resource and Referral Targeted Funds Quality Expansion</p>	<p>Healthy Safety Calendar/Bulletin for Child Care Providers-The Health and Safety Bulletin keeps early childhood educators abreast of changes to both the North Carolina Child Care Laws and Rules and the North Carolina Department of Environment and Natural Resources, Sanitation of Child Care Rules and covers up-to-date health and safety information</p>	<p>The North Carolina Child Care Health and Safety Bulletin will be produced three times and in English only. 4000 copies will be printed and mailed to all regulated family child care homes, licensing consultants, child care health consultants, community colleges, and other early childhood professionals. The NC Child Care Health and Safety Bulletin will provide timely, in-depth information on health and safety topics relevant to child care staff members and families with children in child care.</p>

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<p>NC Rated License Assessment Project (NCRLAP)</p>	<p>Check if targeted funds for this activity: Infant/Toddler Targeted Funds School-Age/Child Care Resource and Referral Targeted Funds Quality Expansion</p>	<p>The North Carolina Rated License Assessment Project's (NCRLAP) purpose is to conduct voluntary assessments for child care centers and family child care homes attempting to earn a higher star rating in the North Carolina star rated license system. NCRLAP is responsible for conducting assessments in the NCPK classrooms and public school prekindergarten and school age classrooms, since licensing is a requirement.</p>	<p>The North Carolina Rated License Assessment Project provides environment rating scale assessments for North Carolina's Star Rated License. Results from these assessments are used by providers to improve the quality of child care programs and to achieve higher license star ratings. Quality rating assessments are conducted by trained assessors and voluntarily requested by early care and education providers. The ITERS-R, the ECERS-R, the FCCERS, and the SACERS are used.</p>
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1.2.4 Will the Lead Agency distribute quality funds to counties or local entities?

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

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

- No, the Lead Agency will not distribute any quality funds directly to local entities
- Yes, all quality funds will be distributed to local entities
- Yes, the Lead Agency will distribute a portion of quality funds directly to local entities.

Estimated amount or percentage to be distributed to localities

\$4 M (Child Care Resource & Referral management and core services)

\$1.4 M (Promoting Healthy Social Behaviors in Child Care Centers Project)

\$1.4 M (Infant Toddler Quality Enhancement Project)

\$1 M (School Age Care Quality Improvement Project)

- Other. Describe. _____

1.3. CCDF Program Integrity and Accountability

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

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

The **description** of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities. Child Care Resource and Referral: Child care resource and referral (CCR&R) services, funded through the Division of Child Development and Early Education’s quality initiatives, link families, early care and education providers, and community partners. This linkage allows families to have a single point of access when requesting and receiving assistance in identifying child care options in their area, making informed decisions about child care choices,

and matching needs to available resources. CCR&R services are available in all of North Carolina's 100 counties and delivered by local agencies.

The Division of Child Development and Early Education requires performance-based outcomes in its contracts with the CCR&R Council, which is responsible for ensuring the outcomes of regional CCR&R's. Division of Child Development and Early Education staff frequently perform financial monitoring with the three CCR&R Council agencies to ensure that contract outcomes are met and that CCDF quality funds are spent appropriately.

Quality Activities: For activities funded with CCDF quality dollars, the Division of Child Development and Early Education's Center of Excellence reviews and evaluates proposals. Its members ensure that all funded programs reflect the goals of the Division of Child Development and Early Education, comply with all CCDF regulations, and have measurable, performance-based outcomes.

Formal contracts stipulate the services to be rendered by the contractor; outline specific budget line items; and require assurances/certifications that funding will be used for approved purposes. All contracts are performance-based to ensure that each has specifically defined program outcomes and measures. Once contracts are approved and initiated, the Division of Child Development and Early Education follows a comprehensive monitoring plan to assess contractor compliance with all fiscal and programmatic requirements. Contractors typically submit monthly financial status reports to receive contract funding based on actual expenses incurred.

Subsidy Activities: The subsidy services section of the Division of Child Development and Early Education conducts on-going monitoring and technical assistance visits to each local agency administering the program. Technical Assistance is provided to each agency each year. During these visits a defined number of records are reviewed for accuracy utilizing a checklist containing nineteen items reflecting activities of the local agency from the application through payment for the service.

1.3.2 Describe the processes the Lead Agency will use to monitor all sub-recipients.

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))

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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. OMB Circular A-133 Section 210 provides additional information on the characteristics of a **sub-recipient** and **vendor**

(http://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2010).

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 description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, required annual fiscal audit, 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. Quality Activities: The Division of Child Development and Early Education conducts comprehensive program monitoring that includes varying activities depending on the (sub) contractors and situation. Sub recipients are required to submit their audits to DCDEE and to the Attorney General. Each approved contract has a designated contract administrator who is employed by DCDEE, and who reviews the contract's activities, approves monthly financial expenditures, and ensures that reports are completed as required by the terms of the contract. An annual desk audit, performed by the contract administrator, is used to assess the risk (high, moderate, or low) of each contract. The risk level guides the evaluation and monitoring process, and determines monitoring priorities. An internal control questionnaire is completed by the contractor to report staffing patterns, programmatic supervision, service delivery and management control systems. Once the desk audit and internal control questionnaire are completed and reviewed, the risk level of the contract is determined. Contracts that are strictly financial assistance contracts and any contract determined to be "high risk, "are automatically selected for an on-site monitoring visit, which is conducted by the DCDEE's monitoring team. The on-site monitoring team conducts programmatic and fiscal reviews per the requirements of OMB Circular A-133 and NCGS 143C-6.23. The results of the monitoring visit are presented in a formal written report, which is sent to the contractor to resolve and correct any noncompliance issues.

Subsidy: The subsidy services section of the Division of Child Development and Early Education conducts on-going monitoring and technical assistance visits to each local agency administering the

program. Monitoring is completed on a three-year cycle. Technical Assistance is provided to each agency each year. In these visits a defined number of records are reviewed for accuracy utilizing a checklist containing nineteen items reflecting activities of the local agency from the application through payment for the service. In addition to monitoring by the Division, each local agency has the option to complete internal reviews. Many agencies utilize the DCDEE checklist to complete internal reviews. When errors are found in monitoring or agency internal reviews, those errors are corrected from the point of discovery to the point of origin. When errors are discovered in Technical Assistance reviews, errors are corrected from the point of discovery forward and targeted training is provided as needed to address the reason for the error's occurrence.

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

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

Type of Activity	Identify Program Violations	Identify Administrative Error
Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid)	<input type="checkbox"/>	<input type="checkbox"/>
Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))	<input type="checkbox"/>	<input type="checkbox"/>
Run system reports that flag errors (include types)	<input type="checkbox"/>	<input type="checkbox"/>
Review of attendance or billing records	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Audit provider records	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct quality control or quality assurance reviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct supervisory staff reviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct data mining to identify trends	<input type="checkbox"/>	<input type="checkbox"/>
Train staff on policy and/or audits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other. Describe _____	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>

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

The North Carolina process to reduce errors and maintain errors at a minimal level is the implementation of an ongoing monitoring program. All local purchasing agencies are officially monitored every three years on a rotating cycle. The sample selected is 6% of the cases receiving a payment with a floor of 5 and a ceiling of 150. Additionally, technical assistance staff read a sample of records each year with the goal of identifying training needs. The technical assistance staff sample 2% of the cases receiving a payment, with a floor of 10 and a ceiling of 60. These processes have been in place for more than 5 years. These processes are implemented using excel spreadsheets that maximize the time that can be spent face to face with local purchasing agency staff in training and technical assistance. Child support policies are currently under evaluation by DCDEE’s policy unit and this may streamline the calculation of child support and reduce errors. Technical Assistance staff will be asked to provide targeted training to address the errors noted. This targeted training will be completed with all local purchasing agencies, not just the ones where errors were noted. Additional training named “Calculating with Accuracy” is under development in the DCDEE subsidy policy unit as well. This training will provide some techniques for reducing human errors associated with management of child care records.

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

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

Strategy	UPV	IPV and/or Fraud	Administrative Error
Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recover through repayment plans	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Reduce payments in subsequent months	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recover through State/Territory tax	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Strategy	UPV	IPV and/or Fraud	Administrative Error
intercepts			
Recover through other means. Describe _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Establish a unit to investigate and collect improper payments. Describe composition of unit _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other. Describe _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For any option the Lead Agency checked in the chart above other than none, please describe North Carolina has ongoing monitoring activities. In those activities, errors are corrected not only from the point of discovery, but to the point of origin.

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

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

After the first incidence of fraudulent misrepresentation by a recipient, the recipient shall be ineligible to receive subsidized child care services for 12 months; and after the second incidence of fraudulent misrepresentation by a recipient, the recipient shall be permanently ineligible to participate in the subsidized child care program. A recipient may appeal any sanction imposed for fraudulent misrepresentation by following the appeals procedures used by the Division as codified in 10A NCAC 09 .2004 - .2007.

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

After the first incidence of fraudulent misrepresentation by a provider, the provider shall not be reimbursed with subsidized child care funds for any new children that enroll in the provider's program for twelve months; and after the second incidence of fraudulent misrepresentation by a provider, the provider shall be permanently ineligible to participate in the subsidized child care program. A child care provider may appeal any sanction imposed for fraudulent misrepresentation by following the appeals procedures used by the Division pursuant to G.S. 150B-23.

- Prosecute criminally
- Other. Describe. _____

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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 N/A here.

Activities identified in ACF-402	Cause/ Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
<p><u>North Carolina Families Accessing Services through Technology (NC FAST) is in development. The implementation of NC FAST will streamline the processes used by the local purchasing agencies in the determination of eligibility. There is a feature in the case management module for income calculation. In this module, income is entered into the system and the conversion to monthly income and calculation of parental fee is done automatically. We believe this will reduce errors in calculation.</u></p>		<p><u>DCDEE has contracted with Affiliated Computer Services (ACS) State & Local Solutions, Inc. to develop and implement a statewide system for subsidized child care attendance reporting and payment delivery. The system is called Subsidized Early Education for Kids (SEEK). SEEK will provide more efficient attendance reporting and a payment system. SEEK is still in the phase I implementation stage.</u></p>	<p><u>The Subsidized Child Care Program is slated to be included into NC FAST by the end of 2014..</u></p>

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 development of the State or Territory CCDF Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments. (§§98.12(b), 98.14(a)(1))

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

	Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
<input checked="" type="checkbox"/>	<p>Representatives of general purpose local government (required)</p> <p>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.</p>	<p><u>The CCDF Plan was sent for review by the Directors of the Division of Social Services and Local Purchasing Agencies; Local Smart Start Partnerships; Regional Child Care Resource & Referral Agencies, etc.</u></p>
<p>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.</p>		
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for public education</p> <p>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.</p>	<p><u>The Division of Child Development administers the NC Pre-K program.</u></p> <p><u>The CCDF Plan was sent to the Birth-Kindergarten Higher Education Consortium for review and feedback.</u></p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for programs for children with special needs</p> <p>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</p>	<p><u>The CCDF Plan was sent for review by the Director of the Office of Early Intervention (Part C) and the Office of Early Learning (Part B).</u></p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for licensing (if separate from the Lead Agency)</p>	<p>N/A</p>
<input checked="" type="checkbox"/>	<p>State/Territory agency with the Head Start Collaboration grant</p>	<p><u>The CCDF Plan was sent for review to the Head Start Collaboration Office Director.</u></p>
<input checked="" type="checkbox"/>	<p>Statewide Advisory Council authorized by the Head Start Act</p>	<p><u>The CCDF Plan was sent for review to the Early Childhood Advisory (ECAC).</u></p>
<input checked="" type="checkbox"/>	<p>Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services</p>	<p><u>The CCDF Plan was sent for review by the Director of the North Carolina Partnership for Children (Smart Start Administrative Agency).</u></p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)</p>	<p><u>The CCDF Plan was sent for review by the Director of the Division of Public Health.</u></p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant</p>	<p><u>The CCDF Plan was sent for review by the Director of the Division of Public Health.</u></p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for public health (including the agency responsible for immunizations</p>	<p><u>The CCDF Plan was sent for review by the Director of the</u></p>

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	Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	and programs that promote children’s emotional and mental health)	<u>Division of Public Health.</u>
<input checked="" type="checkbox"/>	State/Territory agency responsible for child welfare	<u>The CCDF Plan was sent for review by the Director of the Division of Social Services.</u>
<input checked="" type="checkbox"/>	State/Territory liaison for military child care programs or other military child care representatives	<u>The CCDF Plan was sent for review by the North Carolina Military Liaison for the Department of Defense</u>
<input checked="" type="checkbox"/>	State/Territory agency responsible for employment services/workforce development	<u>The CCDF Plan was sent for review by the Director of the Division of Social Services</u>
<input checked="" type="checkbox"/>	State/Territory agency responsible for Temporary Assistance for Needy Families (TANF)	<u>The CCDF Plan was sent for review by the Director of the Division of Social Services</u>
<input checked="" type="checkbox"/>	Indian Tribes/Tribal Organizations <input type="checkbox"/> N/A: No such entities exist within the boundaries of the State	<u>The CCDF Plan was sent for review by the Director of the Division of Social Services.</u>
<input checked="" type="checkbox"/>	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	<u>The CCDF Plan was sent to the Director of the QRIS National Learning Network (BUILD funded).</u>
<input checked="" type="checkbox"/>	Provider groups, associations or labor organizations	<u>The CCDF Plan was sent for review to the NC Association for the Education of Young Children, the NC Institute for Child Development Professionals, the NC Licensed Child Care Association, the Wake County Family Child Care Association and the NC Early Childhood Association.</u>
<input checked="" type="checkbox"/>	Parent groups or organizations	<u>The CCDF Plan was sent for review by the Momsrising organization.</u>
<input checked="" type="checkbox"/>	Local community organizations (child care resource and referral, Red Cross)	<u>The CCDF Plan was sent for review by the Directors of the Regional Child Care Resource & Referral Agencies.</u>
<input type="checkbox"/>	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), §98.14(c))

At a minimum, the description should include:

- a) Date(s) of notice of public hearing: **April 5, 2013 Reminder - Must be at least 20 days prior to the date of the public hearing.**

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- b) How was the public notified about the public hearing?
The public hearing notice was posted on the DCDEE website, sent as an email to all agency partners, sent as an email to child care providers approximately 65% of providers have email addresses registered with DCDEE) and posted on the Dept. of Health & Human Services website.
- c) Date(s) of public hearing(s): **April 25, 2013 Reminder - Must be no earlier than 9 months before effective date of Plan (October 1, 2013).**
- d) Hearing site(s): **The Division of Child Development and Early Education and virtually through a conference call system.**
- e) How was the content of the Plan made available to the public in advance of the public hearing(s)? **The plan was posted to the DCDEE website on April 5, 2013 and the website where the plan could be accessed was included in the public notice.**
- 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 have been compiled and reviewed by CCDF lead agency and incorporated to the extent possible by management and section contacts before the plan is finalized.**

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.

The public hearing notice was posted on the DCDEE website, sent as an email to all agency partners, sent as an email to child care providers approximately 65% of providers have email addresses registered with DCDEE) and posted on the Dept. of Health & Human Services website.

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 how governments are organized for each State are provided at: http://www2.census.gov/govs/cog/all_ind_st_descr.pdf.

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

<p>Agency/Entity (check all that apply)</p>	<p>Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services</p>	<p>Describe results expected from the coordination</p>
<p><input checked="" type="checkbox"/> Representatives of general purpose local government (required)</p> <p>This may include, but is not limited to: representatives from counties and municipalities, local education representatives, or local public health agencies.</p>	<p><u>DCDEE will coordinate with the state Division of Social Services and representatives from the county level DSS offices to integrate eligibility policies, and streamline services.</u></p>	<p>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.</p> <p><u>We expect to continue a coordinated system of services with local DSS agencies to provide “one-stop shops” for families that seek related services.</u></p> <p><u>Streamlined eligibility policies include families who have been deemed eligible for Food & Nutrition services are automatically deemed eligible for child care subsidy services.</u></p>
<p><input checked="" type="checkbox"/> State/Territory agency responsible for public education (required)</p> <p>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;</p>	<p><u>DCDEE coordinates with the Birth-Kindergarten Consortium and the Community College System office to ensure alignment of DCDEE goals with higher education coursework objectives. DCDEE will work with the Community College system to promote articulation of early childhood AAS degree programs with 4-year</u></p>	<p><u>A streamlined monitoring process for NC Pre-K Program classrooms in private child care settings will provide streamlined data systems and a way for child care programs to be further connected with public school systems. A Kindergarten entry assessment to be developed through a RTT-ELC activity.</u></p> <p><u>Alignment of DCDEE goals with higher education. Increased number of NC Community Colleges</u></p>

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	Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
		<u>universities.</u>	<u>with accredited early childhood degree programs. Articulation agreements in place for early childhood AAS degree programs.</u>
<input checked="" type="checkbox"/>	Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services (required)	<u>DCDEE will continue to coordinate with the Association of Developmental Day Directors and the Exceptional Children's Division of the Department of Public Instruction for input on child care rules, now that DCDEE monitors developmental day centers.</u>	<u>The Developmental Day Directors provide the developmental day perspective when making rule changes that impact this population.</u>
<input checked="" type="checkbox"/>	State/Territory agency responsible for public health (required) This may include, but is not limited to, the agency responsible for immunizations and programs that promote children's emotional and mental health	<u>DCDEE will coordinate with the Division of Public Health (DPH) to get input on child care rules related to health issues. DCDEE will coordinate with the Maternal & Child Health Section at DPH to ensure that information is shared and aligned to support the Home Visitation project</u>	<u>The Child Care Commission will explore the Public Health perspective when making rule changes that impact the health & well-being of children in child care. Information is made available to providers about the DPH Home Visitation project.</u>
<input checked="" type="checkbox"/>	State/Territory agency responsible for employment services / workforce development (required)	<u>DCDEE will coordinate with the Division of Social Services to</u>	<u>We expect to continue a coordinated system of services with local DSS agencies to provide</u>

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<p>Agency/Entity (check all that apply)</p>	<p>Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services</p>	<p>Describe results expected from the coordination</p> <p>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.</p>
	<p><u>streamline access for families involved in Work First or TANF recipients</u></p>	<p><u>“one-stop shops” for families that seek related services. Streamlined eligibility policies have already begun in that families who have been deemed eligible for Food & Nutrition services are automatically deemed eligible for child care subsidy services.</u></p>
<p><input checked="" type="checkbox"/> State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies(required)</p>	<p><u>DCDEE will coordinate with the Division of Social Services to streamline access for families involved in Work First or TANF recipients.</u></p>	<p><u>We expect to continue a coordinated system of services with local DSS agencies to provide “one-stop shops” for families that seek related services. Streamlined eligibility policies have already begun in that families who have been deemed eligible for Food & Nutrition services are automatically deemed eligible for child care subsidy services.</u></p>
<p><input checked="" type="checkbox"/> Indian Tribes/Tribal Organizations (required)</p> <p><input type="checkbox"/> N/A: No such entities exist within the boundaries of the State</p>	<p><u>DCDEE will coordinate efforts to promote culturally responsive care with representation from the Eastern Band of Cherokee Indians.</u></p>	<p><u>DCDEE licensing consultants work closely with the Eastern Band of Cherokee Indians to provide culturally responsive consultation around the QRIS.</u></p>
<p>For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery</p>		

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	Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination
<input checked="" type="checkbox"/>	State/Territory agency with the Head Start Collaboration grant		<u>Head Start programs are licensed through the DCDEE Regulatory System for coordination and alignment of services.</u>
<input checked="" type="checkbox"/>	State/Territory agency responsible for Race to the Top – Early Learning Challenge (RTT-ELC) <input type="checkbox"/> N/A: State/Territory does not participate in RTT-ELC	<u>DCDEE is the agency that is charged with managing many RTT-ELC projects. A Project Coordinator manages these projects in coordination with the leadership provided by the Early Childhood Advisory Council</u>	<u>The RTT-ELC projects are designed to enhance the initiatives funded through CCDF Quality funding. For example, CCDF Quality funding is used to support TEACH scholarships for child care providers. One of the RTT-ELC projects is an initiative that will provide TEACH scholarships for staff that support child care providers, such as technical assistance providers and child care health consultants. Given this design of the RTT-ELC projects, coordination with CCDF Quality initiatives is essential to the success of the RTT-ELC initiative and the ability to achieve the outcomes as indicated in the grant.</u>
<input checked="" type="checkbox"/>	State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	<u>DCDEE will coordinate with the Division of Public Health to continue to align child care licensing standards with (CACFP) requirements</u>	<u>According to child care licensing requirements, child care programs must meet CACFP nutrition standards whether or not they participate in the CACFP program.</u>

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<p>Agency/Entity (check all that apply)</p>	<p>Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services</p>	<p>Describe results expected from the coordination</p> <p>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.</p>
<p><input checked="" type="checkbox"/> State/Territory agency responsible for programs for children with special needs</p> <p>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</p>	<p><u>DCDEE coordinates services with the Coordinator within the Division of Public Health that is responsible for Part C services.</u></p> <p><u>DCDEE also coordinates services with the Section 619 Coordinator at the Office of Early Learning.</u></p>	<p><u>DCDEE maintains representation on the State Interagency Coordinating Council.</u></p>
<p><input checked="" type="checkbox"/> State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant</p>	<p><u>DCDEE has been an active member of the planning committee for the NC Home Visiting Program funded through the Maternal, Infant and Early Childhood Home Visiting Program in the Affordable Care Act.</u></p>	<p><u>DCDEE plans to support the program by using the program to help raise awareness about quality care, connect families to child care if they are not currently using regulated care, and promote licensing of Family, Friend, & Neighbor care when the home visiting program becomes involved with families in those settings.</u></p>
<p><input checked="" type="checkbox"/> State/Territory agency responsible for child welfare</p>	<p><u>DCDEE will coordinate with the Division of Social Services to streamline access for families in the child welfare system. DCDEE is also exploring ways to increase participation of</u></p>	<p><u>We expect to continue a coordinated system of services with local DSS agencies to provide “one-stop shops” for families that seek related services.</u></p>

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	Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
		<u>homeless families in the child care subsidy system.</u>	
<input checked="" type="checkbox"/>	State/Territory liaison for military child care programs or other military child care representatives	<u>DCDEE will coordinate services for military families through our work with the federal military liaison..</u>	<u>We expect that communication will be strengthened through these partnerships, and that the military perspective can be incorporated into DCDEE initiatives.</u> <u>Military families are also automatically eligible to participate (at no cost) in the NC Pre-K program.</u>
<input checked="" type="checkbox"/>	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	<u>DCDEE is a participant in the Technical Assistance Learning Table that is funded by the BUILD initiative.</u>	<u>DCDEE and agency partners are receiving training and technical assistance to support efforts to develop competencies for technical assistance providers, workforce certification systems and a workforce data system.</u>
<input checked="" type="checkbox"/>	Local community organizations (child care resource and referral, Red Cross)	<u>DCDEE contracts with the NC Child Care Resource & Referral Council to provide coordinated CCR&R services across the state.</u> <u>DCDEE coordinates initiatives funded through CCDF Quality funding with activities funded through</u>	<u>The core CCR&R services provide Technical Assistance, Professional Development & Training, Consumer Education and Referra</u> <u>Smart Start funds a variety of programs intended to advance a high quality, comprehensive,</u>

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	Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
		<u>Smart Start (local Partnerships for Children</u>	<u>accountable system of care and education for every child beginning with a healthy birth.ls.</u>
<input checked="" type="checkbox"/>	Provider groups, associations or labor organizations	<u>DCDEE coordinates efforts and collaborates with various provider organizations including: NCaeyc, the NC Licensed Child Care Association, NC CAP, North Carolina Early Childhood Association, the Institute for Child Development Professionals, and the Wake County Family Child Care Association.</u>	<u>These coordination efforts ensure that the voice of the provider community is at the table when DCDEE planning occurs. These provider groups are consulted on the CCDF plan. The DCDEE Professional Development Advisory Committee, and the DCDEE Early Learning Collaborative.</u>
<input checked="" type="checkbox"/>	Parent groups or organizations	<u>DCDEE coordinates with the MomsRising parent group.</u>	<u>These coordination efforts ensure that the voices of the families are at the table when DCDEE planning occurs.</u>
<input checked="" type="checkbox"/>	Other	<u>Child care rules in NC are set by the NC Child Care Commission. This group is comprised of members appointed by the NC House, Senate and Governor's Office.</u>	<u>The Child Care Commission ensures that a broad representation of providers, parents and community stakeholders are involved in rule-making for the child care community.</u>

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): **NC Early Childhood Advisory Council**

b) Describe the age groups addressed by the plan(s): **Children ages birth to five years old are addressed by the plan.**

c) Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):

Yes

No

d) Provide a web address for the plan(s), if available:

No

1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs?

(658D(b)(1)(D), §98.14(a)(1))

Check which entity(ies), if any, the State/Territory has chosen to designate.

State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.

If yes, describe entity, age groups and the role of the Lead Agency

N/A

State Advisory Council (as described under the Head Start Act of 2007).

If yes, describe entity, age groups and the role of the Lead Agency

North Carolina's Early Childhood Advisory Council (ECAC) to work towards five major goals:

1. Develop an integrated, comprehensive 3-year strategic plan for high-quality health, family strengthening, and early care and education services that support ready children, families, and communities.

2. Strengthen the quality of programs and expand opportunities for young children and their families to participate in high-quality programs.

3. Strengthen awareness and commitment among families, business, and policy makers to ensure that all young children in North Carolina are healthy, learning, and thriving.

4. Strengthen coordination and collaboration across service sectors to promote high-quality, efficient services for young children and their families.

5. Support the implementation of an integrated data system that meets the individual and collective needs and capacities of state-funded programs serving young children birth to age five.

- Local Coordination/Council
If yes, describe entity, age groups and the role of the Lead Agency
N/A
- Other.
N/A
Describe
- None

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

- Yes. If yes, **describe** these activities or planned activities, including the tangible results expected from the public-private partnership:
Smart Start is the NC public-private partnership that serves as a convener for early childhood programs. Smart Start local partnerships serve as a system to convene stakeholders to assess local needs; ensure accountability; and leverage private dollars, community, state and federal resources. Local partnerships have established community networks that bridge education, health services, and family supports to best meet the needs of young children and their families.
- No.

1.6. Child Care Emergency Preparedness and Response Plan

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

1.6.1. Indicate which of the following best describes the current status of your efforts in this area. Check only ONE.

- Planning.** Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps

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anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.

- Developed.** A plan has been developed as of [3/1/2012] and put into operation as of [12/01/2011], if available. Provide a web address for this plan, if available:
http://ncchildcare.dhhs.state.nc.us/providers/pv_childcarehandbook.asp
and
http://ncchildcare.dhhs.state.nc.us/pdf_forms/center_appendix_e.pdf

- Other. Describe:** N/A

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.

- Planning for continuation of services to CCDF families
 Coordination with other State/Territory agencies and key partners
 Emergency preparedness regulatory requirements for child care providers
 Provision of temporary child care services after a disaster
 Restoring or rebuilding child care facilities and infrastructure after a disaster
 None

PART 2

CCDF SUBSIDY PROGRAM ADMINISTRATION

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

2.1. Administration of the Program

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

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

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

- Eligibility rules and policies (e.g., income limits) are set by the:
 - State/Territory
 - Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - Other. Describe: _____
- Sliding fee scale is set by the:
 - State/Territory
 - Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - Other. Describe: _____
- Payment rates are set by the:
 - State/Territory
 - Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - Other. Describe: _____

2.1.2. How is the CCDF program operated in your State/Territory?

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

Implementation of CCDF Services/Activities	Agency (Check all that apply)
Who determines eligibility?	<input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ <input checked="" type="checkbox"/> Local government agencies such as county welfare or

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Implementation of CCDF Services/Activities	Agency (Check all that apply)
<p>Note: If different for families receiving TANF benefits and families not receiving TANF benefits, please describe: _____</p>	<p>social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____</p>
<p>Who assists parents in locating child care (consumer education)?</p>	<p><input type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input checked="" type="checkbox"/> Other State/Territory agency. Describe. <u>Local purchasing agencies assist parents when they need help with the provider selection process. During the initial interview, the child care worker helps the family to plan for child care, to understand what to look for when choosing an arrangement, and to deal with the emotional effects of separating from the child.</u></p> <p><u>The local child care and resource referral agencies have family support staff that provides consumer education to families on choosing child care.</u></p> <p><input checked="" type="checkbox"/> Local government agencies such as county welfare or social services departments <input checked="" type="checkbox"/> Child care resource and referral agencies <input checked="" type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____</p>
<p>Who issues payments?</p>	<p><input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ <input checked="" type="checkbox"/> Local government agencies such as county welfare or social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____</p>
<p>Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc.)</p>	<p><u>Child care payments are issued as vendor payments to providers and the local purchasing agency (LPA) claims reimbursement through the automated Subsidized Child Care Reimbursement System. Payment for subsidized child care services is determined by the plan of care and provider charges, based on the child's enrollment or attendance.</u></p>
<p>Other. List and describe: _____</p>	

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). **Note** - For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

2.2.1. By whom and how are parents informed of the availability of child care assistance services under CCDF? (658E(c)(2)(A), §98.30(a))

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

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- CCDF Lead Agency
- TANF offices
- Other government offices
- Child care resource and referral agencies
- Contractors
- Community-based organizations
- Public schools
- Internet (provide website):
<http://ncchildcaresearch.dhhs.state.nc.us/search.asp>
- Promotional materials
- Community outreach meetings, workshops or other in-person meetings
- Radio and/or television
- Print media
- Other. Describe: Parents are informed of the availability of child care services by the local Smart Start Partnerships, childcare resource & referral agencies, early childhood educators and Head Start Programs.

2.2.2. How can parents apply for CCDF services?

Check all application methods that your State/Territory has chosen to implement.

- In person interview or orientation
- By mail
- By Phone/Fax
- Through the Internet (provide website) _____
- By Email
- Through a State/Territory Agency
- Through an organization contracted by the State/Territory
- Other. Describe: _____

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

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

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

The Division of Child Development and Early Education strive to make parents and other customers aware of early care and education information and resources. The Division collects and disseminates

consumer education information to parents of eligible children and the general public that will promote informed child care choices. DCDEE's current activities include: support of CCR&R Core Services to provide resource and referral to parents and technical assistance and training to early care and education providers throughout North Carolina.

Local purchasing agencies assist parents when they need help with the provider selection process. During the initial interview, the child care worker helps the family to plan for child care, to understand what to look for when choosing an arrangement, and to deal with the emotional effects of separating from the child. Parents can visit the Division of Child Development and Early Education's website at <http://ncchildcaresearch.dhhs.state.nc.us/search.asp> to search for regulated providers. Information such as the provider's location, and star level are available online.

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

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

North Carolina has a five-star rated license system for child care facilities based upon levels of program standards and staff education. Market rates have been established for each star level of the rated license so that as providers increase their star rating they have the opportunity to receive a higher subsidy payment rate. Market rates also vary depending on the age of the child, ensuring that costly infant/toddler care receives a higher reimbursement rate.

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

- Provide access to program office/workers such as:
- Providing extended office hours
- Accepting applications at multiple office locations
- Providing a toll-free number for clients
- 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

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- Developing web-based and/or phone-based application procedures
- Coordinating eligibility policies across programs. List the program names Food and Nutrition Services
- 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 **Based on the subsidy agreement an individual is allowed the opportunity to complete training or educational activities, participate in job search and enter employment within twenty months.** (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: **Families who receive benefits through the Food and Nutrition Services Program automatically are deemed income eligible for subsidized child care services. Child care staff in local purchasing agencies access family demographics and income information from the Food Stamp Information System (FSIS). Work Support Strategies Grant: DCDEE has been working in collaboration with other means tested benefits and services programs such as (1) Food and Nutrition Services (2) Work First (3) Medicaid, and (4) Special Assistance to collect income information through the Integrated Eligibility project. The purpose is to 1) standardize the types of income collected at initial intake, and 2) align how different income types are treated. These goals will promote consistency and streamline eligibility processes.**
- Other. Describe: **Include other agency partners (ie: Smart Start, CCR&R, etc) in sharing information about child care subsidy to help promote access & awareness.**
- 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: 30-60 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 **An annual redetermination is required for every case.**
- 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 _____

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- 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 **Families who meet income eligibility and have a need for care for children age 13 through 17; such as children who have special needs or circumstances; children under court-ordered supervision; children receiving child protective services or foster care services; or children who would be left in an unsafe situation if care were not provided.**
- 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.

- 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: _____
- None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered **Spanish speaking caseworkers are available for other languages access to the telelanguage incorporated translators are available.**

2.2.8. How will the Lead Agency overcome language barriers with providers?

Check the strategies, if any, that your State/Territory has chosen to implement.

- Informational materials in non-English languages
- Training and technical assistance in non-English languages
- CCDF health and safety requirements in non-English languages
- Provider contracts or agreements in non-English languages
- Website in non-English languages
- Bilingual caseworkers or translators available
- Other: _____
- None

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If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered **Spanish speaking caseworkers are available. In addition the telelanguage incorporated translators are available.**

2.2.9. Describe how the Lead Agency documents and verifies applicant information using the table below. (§98.20(a))

Check the strategies that will be implemented by your State/Territory. **Attach** a copy of your parent application for the child care subsidy program(s) as

Attachment 2.2.9 or provide a web address, if available

<http://info.dhhs.state.nc.us/olm/manuals/dcd/ccs/man/dcd-0456.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, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes. (ACYF-PI-CC-98-08) States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing *in loco parentis*, or other household members have not provided information regarding their immigration status.

The Lead Agency requires documentation of:	Describe how the Lead Agency documents and verifies applicant information:
<input checked="" type="checkbox"/> Applicant identity	<u>When an applicant applies for child care subsidy services, the benefit programs database for Work First, Medicaid and/or Food Nutrition Services is reviewed to determine if the applicant is already receiving services and would have had their identity verified via methods such as a picture id, vital records check, social security inquiry, etc. at the time those services began. In rare cases if an applicant is not participating in another benefits program, the applicant is asked to sign a statement attesting to their identity.</u>
<input checked="" type="checkbox"/> Household composition	<u>The applicant’s statement of family size is acceptable unless there is some reason to suspect that the statement is not correct. Family size can be verified by birth certificates, baptismal certificates, and contacts with schools or other objective sources of verification are necessary. Family size is documented on the Child Care Application.</u>
<input checked="" type="checkbox"/> Applicant’s relationship to the child	<u>When an applicant applies for child care subsidy services, the benefit programs database for Work First, Medicaid and/or Food Nutrition Services is</u>

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The Lead Agency requires documentation of:	Describe how the Lead Agency documents and verifies applicant information:
	<u>reviewed to determine if the applicant is already receiving services and would have had the relationship with the child verified at the time those services began. In rare cases when the applicant and child are not participating in other benefits programs, the applicant is asked to sign a statement attesting to their relationship to the child.</u>
<input checked="" type="checkbox"/> Child's information for determining eligibility (e.g., identity, age, etc.)	<u>When an applicant applies for child care subsidy services, the benefit programs database for Work First, Medicaid and/or Food Nutrition Services is reviewed to determine if the applicant is already receiving services and would have had the child's information verified via birth certificates, hospital records, etc.at the time those services began. The family may be asked to present documentation, such as a birth certificate or hospital physician record if the child is not participating in other benefit programs.</u>
<input checked="" type="checkbox"/> Work, Job Training or Educational Program	<u>Work is verified by pay stubs, employer verification forms, award letters and current information from existing agency records and documented in the case record. Job training or educational program is documented by school schedules, proof of enrollment, grades and attendance and documented in the case record.</u>
<input checked="" type="checkbox"/> Income	<u>The amount of gross family income is verified by pay stubs, employer verification forms, award letters, current information from existing agency records and other source documents and documented in the case record.</u>
<input type="checkbox"/> Other. Describe	

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 **The applicant must be notified of any eligibility decision within 30 calendars days after the date of application.**
- Track and monitor the eligibility determination process
- Other. Describe **If eligibility requirements are not met within 30 days, the parent is issued a copy of the application which serves as notice of the eligibility decision.**
- None

2.2.11. Are the policies, strategies or processes provided in questions 2.2.1 through 2.1.10 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.

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
The Division of Social Services establishes these criteria.
- b) Provide the following definitions established by the TANF agency.
- "appropriate child care":
 - **Care in a regulated child care center or family child care home that has a license, or care in an unregulated child care arrangement that meets the minimal health, safety or criminal record check standards required of unregulated providers for payment through North Carolinas child care subsidy program.**
 - **"reasonable distance": In evaluating reasonable distance, counties or local agencies consider the total time it takes for parents to travel one-way from home to the child care provider, then to work or work-related activity. Because of differences in North Carolinas geography and highway/road systems, county departments of social services or local purchasing agencies have maximum discretion to decide what is reasonable for individuals based on their resources (i.e. whether they have a vehicle in working order or family resources available for transporting the family) and local transportation considerations. As a guideline, counties or**

local purchasing agencies should consider that it may not be reasonable to require families receiving Work First to travel more than eighty minutes one-way to work and child care. Eighty minutes is approximately 4 times the average one-way commute time in North Carolina (not including stops at child care arrangements), as reported by the US Census Bureau based on the 2000 decennial census. This does not preclude exemption from the sanction based on a shorter commute if the local purchasing agency considers the commute an obstacle to children’s healthy development or the family’s self-sufficiency goals.

- **"unsuitability of informal child care": Unregulated child care arrangements that do not meet the health, safety, and criminal record check standards required of unregulated providers necessary to receive subsidy payments from the State of North Carolina; or**
- **"affordable child care arrangements": Families receiving subsidies pay a maximum amount of 10% of their countable income as a parental fee. This fee percentage makes care affordable to families regardless of the market rate or private pay rate paid to the provider. This fee percentage allows families receiving subsidies to enroll their children in higher quality care without increased cost, thereby making care affordable.**

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

In writing

Verbally

Other: **Form DSS-8221 – What Happens If You Can’t Meet Your Work Requirements Because Appropriate Child Care Is Not Available?**

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?

- **residing with - Any adult that the child resides with and has primary responsibility for the care and well-being of the child.**

- *in loco parentis Any adult that the child resides with and has primary responsibility for the care and well-being of the child.*

2.3.2. Eligibility Criteria Based Upon Age

a) The Lead Agency serves children from birth weeks to 13 years (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))

Yes, and the upper age is 17 (may not equal or exceed age 19).
Provide the Lead Agency definition of *physical or mental incapacity* – **An “incapacity,” as determined by a medical professional, which supports the need for supervision or involvement in child care.**

No.

c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))

Yes, and the upper age is 17 (may not equal or exceed age 19)

No.

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

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

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

- *working – Being engaged in an activity on a regular basis which provides earned income. (This activity may also include a period in which the parent is seeking employment.) Child Care is approved to support full and part-time employment. Full time employment is considered an average of 30 hours or more per week. Some activities that are considered “working” include self-employment, parents participating in the Work First Program, and employment performed outside the home.*

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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* –
- **“Making satisfactory progress in a job training or educational activity approved by the local purchasing agencies.” This may include (a) education leading to a high school diploma or its equivalent, and (b) post-secondary education or skills training. There is no minimum number of hours that child care assistance can be provided to support families engaged in job training or educational programs. However, services are available to support this post-secondary education and skills training.”**

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 not working, or who are not in education/training activities for CCDF purposes these children are considered to be in protective services and should be included in this definition.

- *protective services* – **While the Division of Child Development and Early Education does provide**

child care services to children in need of "protective services," the funds used to support these services are non-CCDF funds. Consequently, the Division of Child Development and Early Education do not use CCDF funds to pay for children who receive and are in need of protective services.

No.

b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

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* – **Income is defined as monetary resources, earned or unearned, received for labor, services, government or private benefits, or any money available to members of the income unit for their maintenance.**

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.

- Adoption subsidies
- Foster care payments
- Alimony received or paid
- Child support received
- Child support paid
- Federal nutrition programs
- Federal tax credits
- 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

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- Supplemental Security Income (SSI)
- Veteran’s benefits
- Unemployment Insurance
- Temporary Assistance for Needy Families (TANF)
- Worker Compensation
- Other types of income not listed above

DCDEE excludes lump sum payments, payments/trust funds under the Indian Claims Commission, payments from the Alaska Native Claims Settlement Act, income from the sale of personal assets, bank withdrawals, money borrowed, tax refunds, non-recurring gifts, contributions or other in-kind contributions from non-legally responsible adults, capital gains, Relocation/Acquisition Act payments, earnings of a dependent child under 18 years of age, home produce utilized for household consumption, Volunteers in Service to America (VISTA) earnings and employee benefits for child care.

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
- All members of household except for parents/legal guardians
- Other _____
- None

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

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	IF APPLICABLE Income Level if lower than 85% SMI	
			(c) \$/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1	2,945	2,503	2,209	75
2	3,851	3,274	2,889	75
3	4,758	4,044	3,568	75
4	5,664	4,814	4,248	75
5	6,570	5,585	4,928	75

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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 <http://aspe.hhs.gov/poverty/13poverty.cfm>

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

Yes. If yes, **provide** the requested information from the table in 2.3.5d and **describe** _____.

Note: This information can be included in a separate table, or by placing a “/” between the entry and exit levels in the above table.

No.

f) SMI Year **2011** and SMI Source **US Census Bureau, American Community Survey, State Median Family Income by Family Size (3-year; LIHEAP)**

g) These eligibility limits in column (c) became or will become effective on: August 1, 2011

2.3.6. Eligibility Re-determination

a) **Does the State/Territory follow OCC’s 12 month re-determination recommendation? (See Program Instruction on Continuity of Care <http://www.acf.hhs.gov/programs/occ/resource/im2011-06>)**

Yes

No. If no, what is the re-determination period in place for most families?

6 months

24 months

Other. Describe _____

Length of eligibility varies by county or other jurisdiction. Describe _____

B) Does the Lead Agency coordinate or align re-determination periods with other programs?

No

Yes **If Yes, check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.**

Head Start and/or Early Head Start Programs. Re-determination period _____

Pre-kindergarten programs. Re-determination period _____

TANF. Re-determination period _____

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- SNAP. Re-determination period _____
- Medicaid. Re-determination period _____
- SCHIP. Re-determination period _____
- Other. Describe _____

- b) 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.
A six (6) month review is required for cases of families receiving assistance for developmental needs, Child Welfare Services and Child Protective Services. Cases of parents receiving assistance for education must be reviewed at the end of each semester. The local purchasing agency may choose to conduct more frequent reviews, such as quarterly reviews.
- c) Describe any action(s) the State/Territory would take in response to any change in a family's eligibility circumstances prior to re-determination
The LPA must react to any change reported by the recipient or the provider within ten (10) working days by recording the change in the record and determining if the change requires that a notice be sent to the recipient, provider or other agency staff.
- d) Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See Information Memorandum on Continuity of Care for examples
<http://www.acf.hhs.gov/programs/occ/resource/im2011-06>).

When the parent/responsible adult is temporarily absent from work with arrangements to continue the same employment, child care services may continue for at least thirty days. When an absence extends beyond the initial thirty day period, the LPA may choose to pay for child care for the extended unemployed period, terminate services, or discontinue payment during the extended period and reinstate payment when the parent returns to work. The Lead Agency also allows for temporary income increases. If the increase in income is less than \$100, an adjustment in parental fee is not required.

- f) Does the Lead Agency use a simplified process at re-determination?

- Yes. If yes, describe
Thirty days prior to the end of the eligibility period, the local purchasing agency sends the parent or responsible adult and provider written notification that a new application must be completed prior to the end of the current certification period to redetermine eligibility for child care services. The parent

schedules an appointment or the LPA provides the redetermination appointment date and time. However, the recipient can reschedule the appointment with the LPA. If the parent or responsible adult cannot visit the local purchasing agency, a phone review can be conducted or the application mailed for signature. The recipient must provide any required documentation needed to determine eligibility within thirty days of the appointment date. The LPA and parent complete and sign the following forms– Child Care Application (DCD-0456); Recipient Responsibilities for Subsidized Child Care (DCD-0106); Child Care Action Notice (DCD-0450). The parent or responsible adult receives copies of the forms. The parent or responsible adult and child care provider receives the action notice indicating the decision.

No.

2.3.7. Waiting Lists

Describe the Lead Agency's waiting list status. Select ONE of these options.

- Lead Agency currently does not have a waiting list and:
 - All eligible families *who apply* will be served under State/Territory eligibility rules
 - Not all eligible families *who apply* will be served under State/Territory eligibility rules
- Lead Agency has an active waiting list for:
 - Any eligible family who applies when they cannot be served at the time of application
 - Only certain eligible families. Describe those families: _____
- Waiting lists are a county/local decision. Describe _____
- Other. Describe _____

2.3.8. Appeal Process for Eligibility Determinations

Describe the process for families to appeal eligibility determinations

All applicants and recipients have a right to request and obtain a fair hearing if they disagree with eligibility determinations. The hearing will establish whether the action was correct and will provide benefits if it was wrong. Applicants or recipients wishing to request a fair hearing must contact the local purchasing agency within sixty (60) calendar days after the effective date of the action taken. The hearing can be requested either orally or in writing. The hearing will be scheduled with an official of the local purchasing agency.

The hearing will be held within five (5) calendar days of each request unless the applicant or recipient postpones it for good reasons. If the hearing is postponed for good cause, the hearing may be delayed up to

ten (10) additional calendar days. If the applicant or recipient is dissatisfied with the decision made at the local hearing, they can request a second hearing with an impartial official from the North Carolina Department of Health and Human Services.

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).

2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1.

Will the attached sliding fee scale be used in all parts of the State/Territory?

- Yes. Effective Date August 1, 2011
- No. If no, attach other sliding fee scales and their effective date(s) as **Attachment 2.4.1a, 2.4.1b**, etc.

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.

- State Median Income, Year: **2009.**
- Federal Poverty Level, Year: _____
- Income source and year varies by geographic region. Describe income source and year: _____
- Other. Describe income source and year: _____

2.4.3. How will the family's contribution be calculated and to whom will it be applied?

Check all that the Lead Agency has chosen to use. (§98.42(b))

- Fee is a dollar amount and
 - Fee is per child with the same fee for each child
 - Fee is per child and discounted fee for two or more children
 - Fee is per child up to a maximum per family**
 - No additional fee charged after certain number of children
 - Fee is per family
- Fee is a percent of income and
 - Fee is per child with the same percentage applied for each child
 - Fee is per child and discounted percentage applied for two or more children
 - No additional percentage applied charged after certain number of children
 - Fee is per family
- Contribution schedule varies by geographic area. Describe: _____
- Other. Describe _____

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), §98.42(b))

- Yes, and describe those additional factors: The hours that care is needed is an additional factor used when determining each family's contribution to the cost of care.**
- 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-by-case 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 **at or below the poverty level** for a family of the same size ARE NOT required to pay a fee. The Lead Agency waives the fee for the following families:
Fees are not assessed to families whose only source of income is “not countable” (as defined in child care subsidy policy). In addition, fees are not charged for children with no income who live with someone other than a biological or adoptive parent, or with someone who does not have court-ordered financial responsibility.*

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 co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B), §98.44)

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 Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules
<p>Children with special needs</p> <p><u>Provide the Lead Agency definition of <i>Children with Special Needs</i> Children who have developmental delays, an established condition, or development that is atypical. This is what is in rule and in policy. If the parent indicates that the child has not been evaluated and the child care social worker believes the child may have special needs, the child care worker should encourage the parent to have the child evaluated. Families may be referred to the local agency under the auspices of the following state agencies which are responsible for overseeing that children with special needs are identified and assessed: 1)The Early Intervention Branch in the Women’s and Children’s Health Section of the Division of Public Health (DPH) of the Department of Health and Human Services for children under age three</u></p>	<p><input checked="" type="checkbox"/> Priority over other CCDF-eligible families</p> <p><input type="checkbox"/> Same priority as other CCDF-eligible families</p> <p><input type="checkbox"/> Guaranteed subsidy eligibility</p> <p><input type="checkbox"/> Other. Describe _____</p>	<p><input type="checkbox"/> Yes. The time limit is: _____</p> <p><input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Different eligibility thresholds. Describe _____</p> <p><input checked="" type="checkbox"/> <u>Higher rates for providers caring for children with special needs requiring additional care.</u></p> <p><input type="checkbox"/> Prioritizes quality funds for providers serving these children</p> <p><input checked="" type="checkbox"/> Other. Describe <u>The amount set aside for each state fiscal year must be at least as much as they spent in SFY 1996-1997 to serve children with special needs. Counties may choose to set aside a higher amount.</u></p>

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How will the Lead Agency prioritize CCDF services for:	Eligibility Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules
<u>(3) and 2) the Exceptional Children Division in the Department of Public Instruction (DPI) for children age (3) and over.</u>			
<u>Children in families with very low incomes</u> Provide the Lead Agency definition of <i>Children in Families with Very Low Incomes</i> Families whose income is less than 75% of the state median income.	<input type="checkbox"/> Priority over other CCDF-eligible families <input checked="" type="checkbox"/> Same priority as other CCDF-eligible families <input type="checkbox"/> Guaranteed subsidy eligibility <input type="checkbox"/> Other. Describe _____	<input type="checkbox"/> Yes. The time limit is: _____ <input checked="" type="checkbox"/> No	<input type="checkbox"/> Different eligibility thresholds. Describe _____ <input checked="" type="checkbox"/> Waiving co-payments for families with incomes at or below the Federal Poverty Level <input type="checkbox"/> Other. Describe _____

2.5.2. How will CCDF funds be used to provide child care assistance to meet the needs of families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF?

(658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

Reminder - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF.

- Use priority rules to meet the needs of TANF families (describe in 2.5.1 or 2.5.3.)
- Waive fees (co-payments) for some or all TANF families who are below poverty level
- Coordinate with other entities (i.e. TANF office, other State/Territory agencies, and contractors)
- Other: **TAN funds are part of the allocation of blended funding that local purchasing agencies receive for subsidy services. Most local purchasing agencies give priority to families who are working, including those who are receiving TANF benefits, when there are not enough funds to serve all families. Local purchasing agencies develop**

local plans for meeting TANF goals which include projections about the number of families and children who need child care to support the parent’s employment. Some counties have chosen to use funding from local Work First Block Grant funds to provide child care services for TANF-eligible families when county child care allocations have been insufficient to meet the needs of families. Families that transition off TANF through work activities continue to receive child care services as long as the need and income criteria for services are met. Those at risk of becoming dependent on TANF can receive services as long as the need and income criteria are met, and as long as funding is available.

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)
<p><u>Homelessness (as defined by the McKinney-Vento Act)</u></p>	<ul style="list-style-type: none"> • <u>Individuals who lack a fixed, regular, and adequate nighttime residence.</u> • <u>Children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement.</u> • <u>Children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings.</u> • <u>Children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and migratory children.</u>

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), §98.2, §98.30(c)(4) & (e)(1) & (2))

- Before parent has selected a provider
- After parent has selected a provider
- Other. Describe _____

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:
<http://ncchildcaresearch.dhhs.state.nc.us/search.asp>
- Community outreach meetings, workshops, other in person activities
- Multiple points of communication throughout the eligibility and renew process
- Other. Describe **Local Smart Start partnerships, public schools, early childhood educators, and Head Start programs may also offer information to parents about the availability of subsidized child care services.**

c) What information is included on the child care certificate? **Attach a copy of the child care certificate as Attachment 2.6.1.** (658E(c)(2)(A)(iii))

- Authorized provider(s)
- Authorized payment rate(s)
- Authorized hours
- Co-payment amount
- Authorization period

Other. Describe **North Carolina uses a child care voucher system to provide child care services to families. The voucher includes the identifying information of the family including the family and child's name, date of birth, race, ethnicity, language preference, eligibility period, parental fee, plan of care, etc. It also provides information regarding the appeals and hearing processes. Signatures from the parent, early care and education provider and child care social worker are required on the voucher. The voucher serves as verification to an early care and education provider that the child is eligible for subsidized child care funding.**

d) What is the estimated proportion of services that will be available for child care services through certificates? 100% is the estimated proportion of services that will be available for child care services through certificates.

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)). **Note:** Do not check “yes” if every provider is simply required to sign an agreement in order to be paid in the certificate program.

- Yes. If yes, **describe** 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: _____
- No. If no, skip to 2.6.3.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following? Check the strategies, if any, that your State/Territory chooses to implement.

- Increase the supply of specific types of care
- Programs to serve children with special needs
 - Wrap-around or integrated child care in Head Start, Early Head Start, pre-k, summer or other programs
 - Programs to serve infant/toddler
 - School-age programs
 - Center-based providers
 - Family child care providers
 - Group-home providers
 - Programs that serve specific geographic areas
 - Urban
 - Rural
 - Other. Describe _____

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- Support programs in providing higher quality services
- Support programs in providing comprehensive services
- Serve underserved families. Specify: _____
- Other. Describe _____

c) Are child care services provided through grants or contracts offered throughout the State/Territory? (658E(a), §98.16(g)(3))

- Yes.
- No, and **identify** the localities (political subdivisions) and services that are not offered: _____

d) How are payment rates for child care services provided through grants/contracts determined? _____

e) What is the estimated proportion of direct services that will be available for child care services 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), §98.31)

Check the strategies that will be implemented by your State/Territory.

- Signed declaration
- Parent Application
- Parent Orientation
- Provider Agreement
- Provider Orientation
- Other. Describe: **North Carolina child care requirement 10A NCAC 09.0205 and .1701(g) requires the parent, guardian or full-time custodian of a child enrolled in any child care facility be allowed unlimited access to the child during its operating hours for the purpose of contacting the child or evaluating the center and the care provided by the center.**

2.6.4. 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?

- No
- 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.
 - Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act
 - Restricted based on provider meeting a minimum age requirement

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- Restricted based on hours of care (certain number of hours, non-traditional work hours)
- Restricted to care by relatives
- Restricted to care for children with special needs or medical condition
- Restricted to in-home providers that meet some basic health and safety requirements
- Other. Describe _____

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), §98.32)

Complaint reports alleging violations of licensing requirements in regulated programs are investigated by licensing staff from the Division of Child Development and Early Education. Staff jointly investigates reports which allege child abuse and/or neglect in child care settings with county departments of social services. Records are maintained on both unsubstantiated and substantiated complaint report investigations. The Division's website lists each complaint made against a facility and whether or not the complaint was substantiated. If a report of abuse or neglect is received and the early care and education provider is non-licensed, or if the educator is a relative of the child, the county department of social services conducts the investigation. Certain documents regarding investigative findings are considered public information and are available at the Division of Child Development and Early Education headquarters in Raleigh, North Carolina and on the Division's website.

In addition to information on complaints that are investigated and described above, parents may gain access to information on any early care and education provider's compliance with licensing requirements. Files are maintained in the Division of Child Development and Early Education's office on each regulated center and home. Parents may view the records by visiting the office, or they may request a copy via e-mail or phone (1-800-859-0829 for in-state calls or 919-662-4527). Parents can also access some information from on-line records available through the Division of Child Development and Early Education's web site (This portion of website is also available in Spanish.)

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.

2.7.1 Attach a copy of your payment rates as Attachment 2.7.1.

Will the attached payment rates be used in all parts of the State/Territory?

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- Yes. Effective Date: October 1, 2007
 No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.1a, 2.7.1b**, etc.

2.7.2. Which strategies, if any, will the Lead Agency use to ensure the timeliness of payments?

- Policy on length of time for making payments. Describe length of time **Payments are made on a monthly basis.**
 Track and monitor the payment process
 Other. Describe _____
 None

2.7.3. Market Rate Survey

The Market Rate Study is still underway at the time of our submission, we will post the market rate survey results on our website when the report is completed.

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 [Program Instruction CCDF-ACF-PI-2009-02](#) <http://www.acf.hhs.gov/programs/occ/resource/pi-2009-02> 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)):
b) Provide a summary of the results 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.

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 family child care homes (2.7.4b). Identify the highest rate area

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in the box provided. In column (a), provide the full-time monthly rate at the 75th 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 75th percentile of the most recent MRS.

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

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

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

2.7.4a – Highest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed Center Infants (11 months)			
Full-Time Licensed Center Preschool (59 months)			
Full-Time Licensed Center School-Age (84 months)			

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2.7.4b – Lowest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed Center Infants (11 months)			
Full-Time Licensed Center Preschool (59 months)			
Full-Time Licensed Center School-Age (84 months)			

In table 2.7.4c and 2.7.4d, *lowest rate area* refers to the State or Territory’s area or geographic region with the lowest maximum payment rate ceiling for child care centers and family child care homes. Identify the lowest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75th 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 75th 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.

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2.7.4c – Highest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)			
Full-Time Licensed FCC Preschool (59 months)			
Full-Time Licensed FCC School-Age (84 months)			

2.7.4d – Lowest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)			
Full-Time Licensed FCC Preschool (59 months)			
Full-Time Licensed FCC School-Age (84 months)			

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

- a) Describe how license-exempt center payment rates are set: _____
- b) Describe how license-exempt family child care home payment rates are set: _____
- c) Describe how license-exempt group family child care home payment rates are set: _____
- d) Describe how in-home care payment rates are set: _____

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 _____

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Differential rate for children with special needs as defined by the State/Territory. Describe _____

Differential rate for infants and toddlers. Describe

An infant/toddler rate is included in the tiered subsidy rate structure.

Differential rate for school-age programs. Describe _____

Differential rate for higher quality as defined by the State/Territory. Describe

Differential rates are based on the programs star level. Star levels are rated from 1-5, and 1 being the lowest rate and 5 the highest rate.

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 Information Memorandum on Continuity of Care for examples <http://www.acf.hhs.gov/programs/occ/resource/im2011-06>), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

2.7.7. What policies does the Lead Agency have regarding any additional fees that providers may charge CCDF parents? The Lead Agency...

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

Pays for provider fees (e.g., registration, meals, and supplies). Describe _____

Policies vary across region, counties and or geographic areas. Describe _____

Other. Describe _____

2.7.8 What specific policies and practices does the Lead Agency have regarding the following:

a) Number of absent days allowed. Describe

Providers can be paid for up to 10 days of absences.

b) Paying based on enrollment. Describe

The payment is made based strictly on enrollment when the child is enrolled according to the family's plan of care and is attending regularly.

When the child is enrolled in the same child care arrangement and care

averages 32 through 55 hours per week, the appropriate monthly 100% rate for full-time care is paid to the provider. When the child is enrolled in the same child care arrangement and care averages 18 through 31 hours per week, the appropriate monthly 75% rate for three-fourths care is paid to the provider. When the child is enrolled in the same child care arrangement and care averages one (1) through 17 hours a week, the appropriate monthly 50% rate for half-time care is paid to the provider.

- c)) Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly) Describe **Providers are paid on a monthly basis the rates charged to private paying parents or the current market rate associated with their star rated license, whichever is lower.**
- d) Using electronic tools (automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe **Lead Agency is in the process of implementing electronic payment system which would allow direct deposit for provider payments.**

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)) **Separate payment rates for subsidized child care are established for child care centers and family child care homes, and in-home care. Subsidized child care reimbursement rates are further delineated by county, age group, and star level based on rates reported by providers to be charged for each of these categories of care. This allows for a wide range of centers and homes of different licensing levels to be available to parents.**
- b) How payment rates are adequate based on the most recent local MRS (§98.43(a)(2)) **Although market rates have not been adjusted recently, 84% of the licensed child care centers and family child care homes currently report that they will participate in the subsidized child care program. This percentage is the same as reported in 2009.**

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c) How family co-payments based on a sliding fee scale are affordable (§98.43(a)(3)) **Family co-payments do not exceed 10% of a family's gross monthly income.**

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 **In the 2011 market rate survey, providers that did not participate in the subsidized child care program were asked if they chose not to participate because the market rate was lower than the rate they charged private-paying parents. Only 18% of centers and 16% of family child care homes statewide reported they did not participate for this reason.**

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.)

Goals 1 – Implement the automatic payment system SEEK to align with NC FAST.

Goal 2 –Streamline subsidy policies by integrating all means tested programs through the development of an integrated policy manual to align all eligibility requirements with Work First, Medicaid and Food and Nutrition services.

Goal 3 –Implement integrated services by providing a one stop shop for increased parent access.

Goal 4 – Improve access to quality child care through a revised allocation formula for subsidy funds.

Goal 5 – Increase subsidy access to Homeless families by developing policies to include homelessness as a need category.

DRAFT

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**
4. Creating pathways to an effective, well-supported child care workforce through **professional development systems and workforce initiatives.**

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

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

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

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

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

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

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

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

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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).

a) Is the Lead Agency responsible for child care licensing? (§98.11(a))

- Yes.
- No. Please identify the State or local (if applicable) entity/agency responsible for licensing

b) Provide a brief overview of the relationship between the licensing requirements and CCDF health and safety requirements in your State/Territory.

North Carolina’s child care laws and rules serve as the CCDF health and safety requirements. Licensed providers paid with CCDF funds are subject to licensing under the State requirements.

c) Do the State/Territory’s licensing requirements serve as the CCDF health and safety requirements?

	Center-Based Child Care	Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care <input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory.
Yes, for all providers in this category	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes, for some	Describe _____	Describe _____	Describe _____	Describe _____

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	Center-Based Child Care	Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care <input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory.
providers in this category				
No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	Describe <div style="background-color: #ADD8E6; height: 15px; width: 100%;"></div>	Describe <div style="background-color: #ADD8E6; height: 15px; width: 100%;"></div>	Describe <div style="background-color: #ADD8E6; height: 15px; width: 100%;"></div>	Describe <div style="background-color: #ADD8E6; height: 15px; width: 100%;"></div>

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.**

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CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
<p>Center-Based Child Care</p>	<p>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.</p>	<p>Describe which types of center-based settings are subject to licensing in your State/Territory</p> <p><u>Child care in NC is defined as a program or arrangement where three or more children less than 13 years old, who do not reside where the care is provided, receive care on a regular basis of at least once per week for more than four hours but less than 24 hours per day from persons other than their guardians or full-time custodians, or from persons not related to them by birth, marriage, or adoption.</u></p>	<p>Describe which types of center-based settings are exempt from licensing in your State/Territory For example, some jurisdictions exempt school-based centers, centers operated by religious organizations, summer camps, or Head Start programs.</p> <p><u>Child care does not include the following:</u></p> <p><u>a. Arrangements operated in the home of any child receiving care if all of the children in care are related to each other and no more than two additional children are in care;</u></p> <p><u>b. Recreational programs operated for less than four consecutive months in a year;</u></p> <p><u>c. Specialized activities or instruction such as athletics, dance, art, music lessons, horseback riding, gymnastics, or organized clubs for children, such as Boy Scouts, Girl Scouts, 4-H groups, or boys and girls clubs;</u></p> <p><u>d. Drop-in or short-term care provided while parents participate in activities that are not employment related and where the parents are on the premises or otherwise easily accessible, such as</u></p>

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CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
			<p><u>drop-in or short-term care provided in health spas, bowling alleys, shopping malls, resort hotels, or churches;</u></p> <p><u>d1. Drop-in or short-term care provided by an employer for its part-time employees where (i) the child is provided care not to exceed two and one-half hours during that day, (ii) the parents are on the premises, and (iii) there are no more than 25 children in any one group in any one room;</u></p> <p><u>e. Public schools;</u></p> <p><u>f. Nonpublic schools described in Part 2 of Article 39 of Chapter 115C of the General Statutes that are accredited by the Southern Association of Colleges and Schools and that operate a child care facility as defined in subdivision (3) of this section for less than six and one-half hours per day either on or off the school site;</u></p> <p><u>g. Bible schools conducted during vacation periods;</u></p> <p><u>h. Care provided by facilities licensed under Article 2 of Chapter 122C of the General Statutes;</u></p> <p><u>i. Cooperative arrangements among parents to provide care for their own children as a convenience rather than for</u></p>

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CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
			<p><u>employment; and</u></p> <p><u>j. Any child care program or arrangement consisting of two or more separate components, each of which operates for four hours or less per day with different children attending each component.</u></p>
<p>Group Home Child Care</p> <p><input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.</p>	<p>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.</p>	<p>Describe which types of group homes are subject to licensing <u>N/A</u></p>	<p>Describe which types of group homes are exempt from licensing <u>N/A</u></p>
<p>Family Child Care</p>	<p>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.</p> <p>Reminder - Do not check if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.</p>	<p>Describe which types of family child care home providers are subject to licensing</p> <p><u>A family child care home is a child care arrangement located in a residence where, at any one time, more than two children, but less than nine children, receive care.</u></p>	<p>Describe which types of family child care home providers are exempt from licensing Child care does not include the following:</p> <p><u>a. Arrangements operated in the home of any child receiving care if all of the children in care are related to each other and no more than two additional children are in care.</u></p> <p><u>i. Cooperative arrangements among parents to provide care for their own children as a convenience rather than for employment.</u></p>

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CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
In-Home Care	In-home child care provider is defined as an individual who provides child care services in the child's own home. Reminder - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	<input checked="" type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. Describe which in-home providers are subject to licensing	Describe which types of in-home child care providers are exempt from licensing <u>Arrangements operated in the home of any child receiving care if all of the children in care are related to each other and no more than two additional children are in care. Effective August 1, 2011. North Carolina no longer allows subsidy payment to be made for new children to be enrolled in unlicensed In-Home Care. This means that there will be no new subsidy payments to unlicensed providers.</u>

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 NRCKid's website at <http://nrckids.org/CFOC3> 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: <http://nrckids.org/CFOC3>

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For each indicator, check all requirements for licensing that apply, if any.				
Indicator	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
<p>Do the licensing requirements include child: staff ratios and group sizes?</p> <p>If yes, provide the ratio for age specified.</p>	<p><input checked="" type="checkbox"/> Yes, Child: staff ratio requirement</p> <p>STAFF/CHILD RATIOS FOR CENTERS WITH A LICENSED CAPACITY OF LESS THAN 30 CHILDREN include the following: 0 to 12 Months 1/5; 12 to 24 Months 1/6; 2 to 3 Years 1/10 ; 3 to 5 Years 1/15; and 5 Years and Older 1/25.</p> <p>STAFF/CHILD RATIOS FOR CENTERS WITH A LICENSED CAPACITY OF 30 OR MORE CHILDREN include the following: 0 to 12 Months 1/5 ; 12 to 24 Months 1/6 ; 2 to 3 Years 1/10 ; 3 to 4 Years 1/15; 4 to 5 Years 1/20 ; and 5 years and older 1/25.</p> <p>Infant ratio (11 months): 1:5 Toddler ratio (35 months): 1:6 Preschool ratio (59 months): <input type="checkbox"/> No ratio requirements.</p> <p><input checked="" type="checkbox"/> Yes, Group size requirement</p>	<p><input type="checkbox"/> Yes, Child: staff ratio requirement</p> <p>Infant ratio (11 months): Toddler ratio (35 months): Preschool ratio (59 months): <input type="checkbox"/> No ratio requirements.</p> <p><input type="checkbox"/> Yes, Group size requirement Infant group size (11 months): Toddler group size (35 months): Preschool group size (59 months): <input type="checkbox"/> No group size requirements.</p>	<p><input checked="" type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement by age group:</p> <p>NCAC. 09 .1700 Family Child Care Home Capacity. Of the children present at any time in a family child care home, no more than five children shall be preschool-aged, including the operator's own preschool-age children. Eight is the total number of children that can be served and that includes five preschool-aged children and three school-aged children total.</p> <p><input type="checkbox"/> No ratio requirements.</p> <p><input type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group</p> <p><input type="checkbox"/> No group size requirements.</p>	<p><input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)</p> <p><input type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement by age group:</p> <p><input type="checkbox"/> No ratio requirements.</p> <p><input type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group</p> <p><input type="checkbox"/> No group size requirements.</p>

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For each indicator, check all requirements for licensing that apply, if any.				
Indicator	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
		<input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.		<input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
	Infant group size (11 months): See Above! Toddler group size (35 months): Preschool group size (59 months): <input type="checkbox"/> No group size requirements.			
Do the licensing requirements identify specific educational credentials for child care directors?	<input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input checked="" type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input checked="" type="checkbox"/> Other: Equivalencies are allowed	Do the licensing requirements identify specific educational credentials for child care directors?	<input checked="" type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other:	Do the licensing requirements identify specific educational credentials for child care directors?
Do the licensing requirements identify specific educational credentials for child care teachers?	<input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input checked="" type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input checked="" type="checkbox"/> Other: Equivalencies are allowed	Do the licensing requirements identify specific educational credentials for child care teachers?	<input checked="" type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other:	Do the licensing requirements identify specific educational credentials for child care teachers?
Do the licensing requirements specify that directors and caregivers must attain a	<input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year <input type="checkbox"/> No training requirement	Do the licensing requirements specify that directors and caregivers must attain a specific number of	<input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year <input type="checkbox"/> No training requirement	Do the licensing requirements specify that directors and caregivers must attain a

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For each indicator, check all requirements for licensing that apply, if any.				
Indicator	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
specific number of training hours per year?	<input checked="" type="checkbox"/> Other: <u>Complete five to twenty annual in-service training hours. Number of hours is based on the individuals education and experience.</u>	<input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. training hours per year?	<input checked="" type="checkbox"/> Other: <u>Complete twelve hours of annual in-service training.</u>	<input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) specific number of training hours per year?

e) Do you expect the licensing requirements for child care providers to change in FY2014-2015?

Yes. Describe

The NC Child Care Commission has proposed rule changes on Emergency Preparedness and Response (EPR) Rules for child care centers and family child care homes. The proposed rules would require child care staff to complete training on EPR and develop and implement an EPR plan. In addition, the facility would be required to conduct quarterly shelter-in place and lock down drills.

In addition, the NC Child Care Commission proposed rule related to transportation safety that would prohibit the use of a cellular phone while transporting children.

No

3.1.2 Enforcement of Licensing Requirements

Each Lead Agency is required to provide a detailed description of the State/Territory's licensing requirements and how its licensing requirements are effectively enforced. (658E(c)(2)(E), §98.40(a)(2)) The Lead Agency is also required to certify that that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with the applicable health and safety requirements. (658E(c)(2)(G), §98.41(d))

Describe the State/Territory's policies for effective enforcement of the licensing requirements using questions 3.1.2a through 3.1.2e below. This description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.

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a) Does your State/Territory include **announced** and/or **unannounced** visits in its policies as a way to effectively enforce the licensing requirements?

- Yes. If “Yes” please refer to the chart below and check all that apply.
 No

CCDF Categories of Care	Frequency of Routine Announced Visits	Frequency of Routine Unannounced Visits
<input checked="" type="checkbox"/> Center-Based Child Care	<input checked="" type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe <u>As requested for technical assistance regarding any child care requirement.</u>	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe <u>Additional unannounced visits are conducted by the Division of Child Development and Early Education when allegations of violations of child care requirements are received and for the purpose of evaluating the program for quality indicators (varies by facility). In some counties additional, visits are conducted by building inspectors, fire inspectors and environmental health agencies.</u>
<input type="checkbox"/> Group Home Child Care	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe
<input checked="" type="checkbox"/> Family Child Care Home	<input checked="" type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe <u>As requested for technical assistance regarding any child care requirement.</u>	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe <u>Additional unannounced visits are conducted by the Division of Child Development and Early Education and Early Education when allegations of violations of child care requirements are received and for the</u>

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CCDF Categories of Care	Frequency of Routine Announced Visits	Frequency of Routine Unannounced Visits
		<u>purpose of evaluating the program for quality indicators (varies by facility). In addition, visits are conducted by building inspectors, fire inspectors and environmental health agencies in some counties.</u>
<input type="checkbox"/> In-Home Child Care <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b)	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe _____	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> 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	Describe 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.	<input checked="" type="checkbox"/> Yes. Describe <u>Pre-licensing workshops are required for a child care facility prior to issuing a license.</u> <input type="checkbox"/> No. <input checked="" type="checkbox"/> Other. Describe <u>Pre-licensing is optional for Family Child Care Home operators (training is offered but not currently required).</u>
The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license.	<input checked="" type="checkbox"/> <u>An on-site inspection is conducted.</u> <input type="checkbox"/> Programs self-certify. Describe _____ <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe _____
Licensing staff has procedures in place to address violations found in an inspection.	<input checked="" type="checkbox"/> Providers are required to submit plans to correct violations cited during inspections. <input checked="" type="checkbox"/> Licensing staff approve the plans of correction submitted by providers. <input checked="" type="checkbox"/> Licensing staff verify correction of violation. <input checked="" type="checkbox"/> Licensing staff provide technical

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Licensing Procedures	Describe which procedures are used by the State/Territory for enforcement of the licensing requirements.
	assistance regarding how to comply with a regulation.
	<input type="checkbox"/> No procedures in place.
	<input checked="" type="checkbox"/> Other. Describe Corrective action plans can include staff training.
Licensing staff has procedures in place to issue a sanction to a noncompliant facility.	<input checked="" type="checkbox"/> Provisional or probationary license
	<input checked="" type="checkbox"/> License revocation or non-renewal
	<input type="checkbox"/> Injunctions through court
	<input checked="" type="checkbox"/> Emergency or immediate closure not through court action
	<input checked="" type="checkbox"/> Fines for regulatory violations
	<input type="checkbox"/> No procedures in place.
	<input checked="" type="checkbox"/> Other. Describe
The State/Territory has procedures in place to respond to illegally operating child care facilities.	<input type="checkbox"/> Cease and desist action
	<input type="checkbox"/> Injunction
	<input checked="" type="checkbox"/> Emergency or immediate closure not through court action
	<input type="checkbox"/> Fines
	<input type="checkbox"/> No procedures in place.
	<input type="checkbox"/> Other. Describe
The State/Territory has procedures in place for providers to appeal licensing enforcement actions.	<input checked="" type="checkbox"/> Yes. Describe <u>Process for Appeal: NCGS 110-90.2(d) allows for a disqualified applicant to appeal the decision by filing a civil lawsuit in district court within 60 days of the disqualification. DCDEE also provides for a reapplication process that doesn't involve the court system.</u>
	<input type="checkbox"/> No.
	<input type="checkbox"/> Other. Describe

c) Does your State/Territory use **background checks as a way to effectively enforce the licensing requirements?**

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

No

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CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
<input checked="" type="checkbox"/> Center-Based Child Care	<input checked="" type="checkbox"/> Child Abuse Registry	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Background checks are required every 3 years.</u>	<input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input checked="" type="checkbox"/> Non-teaching staff <input checked="" type="checkbox"/> Volunteers <input type="checkbox"/> Other _____
	<input checked="" type="checkbox"/> State/Territory Criminal Background <input checked="" type="checkbox"/> Check if State/Territory background check includes fingerprints	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Household members age 16 years and older in a center in a residence.</u>	<input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input checked="" type="checkbox"/> Non-teaching staff <input checked="" type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other <u>Household members age 16 years and older in a center in a residence.</u>
	<input checked="" type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>FBI background checks are conducted every 3 years.</u>	<input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input checked="" type="checkbox"/> Non-teaching staff <input checked="" type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other <u>Household members age 16 years and older in a center in a residence.</u>
	<input checked="" type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Sex Offender Registry is reviewed on a monthly basis.</u>	<input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input checked="" type="checkbox"/> Non-teaching staff <input checked="" type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other <u>Household members age 16 years and older in a center in a residence.</u>

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CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
<input type="checkbox"/> Group Child Care Homes <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	<input type="checkbox"/> Child Abuse Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home <input style="background-color: #ADD8E6;" type="checkbox"/>
	<input type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe <input style="background-color: #ADD8E6;" type="checkbox"/>	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home <input style="background-color: #ADD8E6;" type="checkbox"/>
	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe <input style="background-color: #ADD8E6;" type="checkbox"/>	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home <input style="background-color: #ADD8E6;" type="checkbox"/>
	<input type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe <input style="background-color: #ADD8E6;" type="checkbox"/>	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home <input style="background-color: #ADD8E6;" type="checkbox"/>
<input checked="" type="checkbox"/> Family Child Care Homes	<input checked="" type="checkbox"/> Child Abuse Registry	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Background checks are required every 3 years.</u>	<input checked="" type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home <u>Any individual employed and household members 16 years and older.</u>
	<input checked="" type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describer <u>Criminal background checks conducted every 3 years.</u>	<input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home <u>Any individual employed and household members 16</u>

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CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
	fingerprints		<u>years and older.</u>
	<input checked="" type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> <u>Other. Describe FBI background check every 3 years.</u>	<input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home <u>Any individual employed and household members 16 years and older.</u>
	<input checked="" type="checkbox"/> Sex Offender Registry	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Sex Offender Registry is reviewed on a monthly basis.</u>	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home <div style="background-color: #ADD8E6; width: 50px; height: 15px; margin-left: 10px;"></div>
<input type="checkbox"/> In-Home Child Care Providers <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2e)	<input type="checkbox"/> Child Abuse Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe <div style="background-color: #ADD8E6; width: 50px; height: 15px; margin-left: 10px;"></div>	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home <div style="background-color: #ADD8E6; width: 50px; height: 15px; margin-left: 10px;"></div>
	<input type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe <div style="background-color: #ADD8E6; width: 50px; height: 15px; margin-left: 10px;"></div>	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home <div style="background-color: #ADD8E6; width: 50px; height: 15px; margin-left: 10px;"></div>
	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home <div style="background-color: #ADD8E6; width: 50px; height: 15px; margin-left: 10px;"></div>

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CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
	<input type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home

d) Please **provide a brief overview** of the State/Territory’s process for conducting background checks for child care. In this brief overview, include the following:

d -1) The cost associated with each type of background check conducted **\$25.00 Total Cost**

d-2) Who pays for background checks **Individuals pay for their own federal background checks. DCDEE staff conduct other background checks at the agency’s expense.**

d-3) What types of violations would make providers ineligible for CCDF? Describe
Specific violations alone would not make a provider ineligible but the issuance of specific enforcement actions would make a provider ineligible to receive CCDF funds beginning 45 days after the enforcement action is received by the operator. Those enforcement actions are Revocation of a License, Denial of a License and Summary Suspension of a License. In addition, the issuance of a Special Provisional License may limit the enrollment of new children that are eligible for CCDF services during the six month time period of the license. However, that restriction would not affect any currently enrolled children.

d-4) The process for providers to appeal the Lead Agency’s decision based on the background check findings. Describe
Violations that make providers ineligible include: North Carolina General Statute 110-90.2 and 110-91(8) provides the authority for criminal offenses (convictions and pending indictments/charges) that will disqualify an applicant from providing child care.

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Such offenses include child abuse and neglect, murder, rape, assault, drugs, DUI and other crimes of moral turpitude

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? N/A (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

The NC Division of Child Development and Early Education website (www.ncchildcare.net) offers information to parents, providers and staff regarding the child care requirements. This includes a search feature that parents may utilize to review facility compliance records. Those records include documentation from each visit, violations cited during visits and whether or not an enforcement action has been issued. Currently, the enforcement actions are not posted on the website but the website does indicate if an enforcement action has been issued within the past three years and states if that enforcement action is under appeal. In addition, there is an email request form for public records that may be submitted to the Division for processing.

No

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

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

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

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

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

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

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The Lead Agency requires:	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
<input checked="" type="checkbox"/> Fire inspection	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Building inspection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Health inspection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Inaccessibility of toxic substances policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Safe sleep policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tobacco exposure reduction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Transportation policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
Child Care Centers	First Aid	<u>First aid training must have been completed within the last 12 months prior to receiving a license.</u>	<u>First aid training shall be renewed on or before the expiration of the certification or every two years, whichever is</u>

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	CPR	<u>CPR training must have been completed within the last 12 months prior to receiving a license</u>	<u>less.</u> <u>CPR training shall be renewed on or before the expiration of the certification or every two years, whichever is less.</u>
	Medication Administration Policies and Practices	<u>Medication Administration is a requirement for new hires, within the first 2 weeks off the hiring date.</u>	<u>Medication Administration is a requirement for new hires, within the first 2 weeks off the hiring date.</u>
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	<u>ITS-SIDS training must be completed within 4 months of assuming caregiving responsibilities and every 3 years. Part of the orientation requirement for new hires, is to receive training and orientation on center's operational policies, including the center's safe sleep policy (completed within first 2</u>	<u>ITS-SIDS training must be completed within 4 months of assuming caregiving responsibilities and every 3 years. Part of the orientation requirement for new hires, is to receive training and orientation on center's operational policies, including the center's safe sleep policy (completed within first 2</u>

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
		<u>weeks of the hire date).</u>	<u>weeks of the hire date).</u>
	Shaken Baby Syndrome and abusive head trauma prevention	N/A	N/A
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A
	Physical Activities	N/A	N/A
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A	N/A
	Recognition and mandatory reporting of suspected child abuse and neglect	N/A	N/A
	Emergency preparedness and planning response procedures	N/A	N/A
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A	N/A
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	<u>Child Development concepts are the foundation for the NC Early Childhood Credential.</u>	<u>Child Development concepts are the foundation for the NC Early Childhood Credential.</u>
	Supervision of children	N/A	N/A
	Behavior management	N/A	N/A
	Other. Describe 	N/A	N/A
Group Home Child Care	First Aid	N/A	N/A
	CPR	N/A	N/A
	Medication Administration Policies and Practices	N/A	N/A
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	N/A	N/A

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	Shaken Baby Syndrome and abusive head trauma prevention	N/A	N/A
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A
	Physical Activities	N/A	N/A
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A	N/A
	Recognition and mandatory reporting of suspected child abuse and neglect	N/A	N/A
	Emergency preparedness and planning response procedures	N/A	N/A
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A	N/A
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	N/A	N/A
	Supervision of children	N/A	N/A
	Behavior management	N/A	N/A
	Other. Describe 	N/A	N/A
Family Child Care Providers	First Aid	<u>First aid training must have been completed within the last 12 months prior to receiving a license.</u>	<u>First aid training shall be renewed on or before the expiration of the certification or every two years, whichever is less. First aid training shall be renewed on or</u>

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
			<u>before the expiration of the certification or every two years, whichever is less.</u>
	CPR	<u>CPR training must have be completed within the last 12 months prior to receiving a child care license.</u>	<u>CPR training shall be renewed on or before the expiration of the certification or every two years, whichever is less.</u>
	Medication Administration Policies and Practices	N/A	N/A
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention		<u>Training must be completed within 4 months of assuming caregiving responsibilities and every 3 years.</u>
	Shaken Baby Syndrome and abusive head trauma prevention	N/A	N/A
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A
	Physical Activities	N/A	<u>Staff shall complete at least four clock hours of training in safety. This training shall address playground safety hazards, playground</u>

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
			<u>supervision, maintenance and general upkeep of the outdoor area, and age and developmentally appropriate playground equipment</u>
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A	<u>Each center shall assure that each new employee who is expected to have contact with children receives a minimum of 16 clock hours of on-site training and orientation within the first six weeks of employment. This training and orientation shall include instruction in the maintenance of a safe and healthy environment.</u>
	Recognition and mandatory reporting of suspected child abuse and neglect	N/A	<u>Each center shall assure that each new employee who is expected to have contact with children receives a minimum of 16 clock hours of</u>

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
			<p><u>on-site training and orientation within the first six weeks of employment. This training and orientation shall include: (1) training in the recognition of the signs and symptoms of child abuse or neglect and in the employee's duty to report suspected abuse and neglect.</u></p>
	Emergency preparedness and planning response procedures	N/A	N/A
	Management of common childhood illnesses, including food intolerances and allergies	N/A	<p><u>Each center shall assure that each new employee who is expected to have contact with children receives a minimum of 16 clock hours of on-site training and orientation within the first six weeks of employment. This training and orientation shall include instruction in the maintenance of a safe and healthy environment.</u></p>

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A	N/A
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	N/A	N/A
	Supervision of children	N/A	<p><u>Each center shall assure that each new employee who is expected to have contact with children receives a minimum of 16 clock hours of on-site training and orientation within the first six weeks of employment. This training and orientation shall include: Training on adequate supervision of children, taking into account their age, emotional, physical, and cognitive development.</u></p>
	Behavior management		
Other. Describe <u>Child Care Center staff complete</u>			

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	<p><u>twenty annual in-service training hours. Training must be from these topic areas:</u></p> <p><u>Planning a safe, healthy learning environment</u></p> <p><u>Steps to advance children’s physical and intellectual development</u></p> <p><u>Positive ways to support children’s social and emotional development</u></p> <p><u>Strategies to establish productive relationships with families</u></p> <p><u>Strategies to manage an effective program operation</u></p> <p><u>Maintaining a commitment to professionalism</u></p> <p><u>Observing and recording children’s behavior</u></p> <p><u>Principles of growth and development</u></p> <p><u>Learning activities that promote inclusion of children with special needs</u></p> <p><u>Family Child Care Providers complete twelve annual in-service training hours. Training must be from these topic areas:</u></p> <p><u>Planning a safe, healthy learning environment</u></p>		

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	<p align="center"><u>Steps to advance children’s physical and intellectual development</u></p> <p align="center"><u>Positive ways to support children’s social and emotional development</u></p> <p align="center"><u>Strategies to establish productive relationships with families</u></p> <p align="center"><u>Strategies to manage an effective program operation</u></p> <p align="center"><u>Maintaining a commitment to professionalism</u></p> <p align="center"><u>Observing and recording children’s behavior</u></p> <p align="center"><u>Principles of growth and development</u></p> <p align="center"><u>Learning activities that promote inclusion of children with special needs</u></p>		
In-Home Child Care Providers	First Aid	N/A	N/A
	CPR	N/A	N/A
	Medication Administration Policies and Practices	N/A	N/A
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	N/A	N/A
	Shaken Baby Syndrome and abusive head trauma prevention	N/A	N/A
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A

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CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	Physical Activities	N/A	N/A
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A	N/A
	Recognition and mandatory reporting of suspected child abuse and neglect	N/A	N/A
	Emergency preparedness and planning response procedures	N/A	N/A
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A	N/A
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	N/A	N/A
	Supervision of children	N/A	N/A
	Behavior management	N/A	N/A
	Other. Describe 		

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

- All relative providers are subject to the same health and safety requirements as described in 3.1.2a-c, as appropriate; there are no exceptions for relatives.
 - Relative providers are NOT required to meet any health and safety requirements as described in 3.1.2a-c, as appropriate.
 - Relative providers are subject to certain requirements. Describe the different requirements
- N/A

e) Provide a web address for the State/Territory’s health and safety requirements, if available:
http://ncchildcare.dhhs.state.nc.us/providers/pv_childcarehandbook.asp

f)

3.1.4 Effective enforcement of the CCDF health and safety requirements.

For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described in 3.1.2 for licensed providers, please describe how the Lead Agency enforces the CCDF health and safety enforcement requirements. N/A

a) Describe whether and how the Lead Agency uses on-site visits (announced and unannounced) _____

b) Describe whether the Lead Agency uses background checks _____

c) Does the Lead Agency permit providers to self-certify compliance with applicable health and safety standards?

- Yes. If yes, what documentation, if any, is required? Describe _____
 No

d) Describe whether the Lead Agency uses any other enforcement policies and practices for the health and safety requirements _____

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 Care 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, but 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.

- Yes. Describe **Screenings and referrals are a requirement for the state NC Pre-K program; Early Head Start; Head Start programs and Development Day programs.**

No

a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?

Yes. Describe **Training and resources are provided to program staff to ensure children receive appropriate**

developmental screenings through the NC Pre-K program, Early Head Start, Head Start, and Developmental Day.

programs.

No

Other. Describe

b) If yes, are resources and supports provided to programs to help them understand how families are referred to indicated services and how to work with the health, mental health, and developmental disabilities agencies to support children when follow-up to screening is needed?

Yes. Describe

Resources and supports are provided to child care programs to assist staff with information and resources to help families receiving referral services when a follow-up to a developmental screening is required for a child. The state-wide Healthy Social Behavior project provides child care program staff with resources to local mental health and developmental disabilities agencies, so children and their families receive appropriate referrals and supports in their local communities.

No

Other. Describe

c) Does the State/Territory use developmental screening and referral tools?

Yes. If Yes, provide the name of the tool(s)

Approved screening tools for NC Pre-K include:

1. Ages & Stages Questionnaires, Third Edition (ASQ-3) or Ages & Stages Questionnaires (ASQ)

2. Brigance Early Childhood Screen II (3-5 Years), or Brigance Head Start Screen, or

Brigance Preschool Screen – II, (under 4 yrs. 11 mos.) or Brigance K & 1 Screen – II (5 yrs.0 mos. and older)

3. Developmental Indicators for the Assessment of Learning, Third Edition (DIAL-3)

or Fourth Edition (DIAL-4)

4. Parents' Evaluation of Developmental Status (PEDS)

No

Other. Describe

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

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Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) Data on licensing and health and safety. Indicate if the Lead Agency or another agency has access to data on:

- Number of licensed programs. Describe (optional) **Data is available in the Child Care Regulatory database. As of February 2013, North Carolina has 7,654 licensed facilities (4,786) centers and (2868) family child care homes.**
- Numbers of programs operating that are legally exempt from licensing. Describe (optional) **N/A**
- Number of programs whose licenses were suspended or revoked due to non-compliance. Describe (optional)) **Data is available in the Child Care Regulatory database.**
- Number of injuries in child care as defined by the State/Territory. Describe (optional)) **Data is available in the Regulatory Child Care database.**
- Number of fatalities in child care as defined by the State/Territory. Describe (optional)
- Number of monitoring visits received by programs. Describe Programs receive a (optional) **Data is available in the Regulatory Child Care database. Licensed center-based programs received an average of 2 monitoring visits during the last fiscal year.**
- Caseload of licensing staff. Describe (optional) **Current caseloads are averaging from 65-75 per child care licensing staff.**
- Number of programs revoked from CCDF due to non-compliance with health and safety requirements. Describe (optional)
- 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?

North Carolina uses Article 7 Chapter 110 of the North Carolina General Statutes and Chapter 9 – Child Care Rules as the measures to verify compliance with CCDF health and safety requirements. Contained within our child care requirements are rules to ensure the health and safety; education and training standards; developmentally appropriate environments; nutrition standards; transportation standards; space requirements; criminal records and discipline/emotional and

social health of the children served in North Carolina as well as the state's QRIS standards that are part of the licensing system

Here is a link to the requirements:

<http://nrckids.org/STATES/NC/northcarolina.htm>

- 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.

After a license is issued, the Lead Agency is responsible for monitoring the facility to assure that compliance is being maintained. Monitoring compliance is an official observation to determine ongoing compliance. One goal of monitoring is to reduce noncompliance to avoid issuing negative administrative actions in the future. Monitoring visits also reveal whether an operator has corrected previously documented violations. Compliance visits include routine visits, complaint investigations, annual compliance visits, and follow-up visits. The Lead Agency conducts at least an unannounced annual compliance visit to each facility plus complaint investigation visits, and routine monitoring visits are completed as needed. Specific requirements at a minimum must be monitored during certain types of visits.

North Carolina's Quality Rating and Improvement System is tied to the licensing system and is identified by a One to Five Star Rated License. The Rated License Program is North Carolina's means of recognizing child care facilities that provide higher quality care than the minimum One Star level. It is also a way to encourage facilities to continue working to improve the quality of care they provide. Facilities are rated according to the applicable components they choose to meet. North Carolina assigns ratings every three years and monitor annually for maintenance of ratings. A reassessment of the rating may also be conducted before the three year time period if the annual monitoring identified certain indicators, such as high staff turnover, a new director, or serious licensing violations. A program may also request a rated license assessment if it anticipates the rating will improve ratings every three years and monitor annually for maintenance of ratings. A reassessment of the rating may also be conducted before the three year time period if the annual monitoring identified certain indicators, such as high staff turnover, a new director, or serious licensing violations. A program may also request a rated license

assessment if it anticipates the rating will improve.

3.1.7

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 – Implement new emergency preparedness and response rules.

Goal 2 – Increase the cultural responsiveness of Regulatory monitoring staff to better prepare staff for working in diverse child care programs and communities.

Goal 3 – Expand training conducted by the Child Care Health Consultants across the entire state.

Goal 4 – Implement monitoring of Pre-K programs by regulatory staff, required in rule.

New!

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 follow this link <http://www.acf.hhs.gov/programs/occ/resource/government-performance-and-results-act-gpra-measures> to see the CCDF performance measures. A number of these performance measures rely on information reported in

the State and Territorial Plans as a data source. We have added a ruler icon  in Section 3.2 through 3.4 in order to identify the specific questions used in the performance measures. When answering these questions, Lead Agencies should

ensure that their answers are accurate and complete in order to promote the usefulness and integrity of the performance measures.

3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

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

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

- Birth-to-three
- Three-to-five
- Five years and older
- None. **Skip to 3.2.6.**

If yes, insert web addresses, where possible: State/Territory agency is the lead for the early learning guidelines?

Infant Toddler can be found here:

http://ncchildcare.dhhs.state.nc.us/pdf_forms/dcd_infant_toddler_early_foundations.pdf

Foundations can be found here:

<http://www.ncprek.nc.gov/Foundations/index.asp>

 **3.2.2 Do the early learning guidelines cover a range of domains across physical, cognitive, and social and emotional development?**

Check all that apply for each age group as applicable in the chart below. Because States vary in their domain names and which domains to include, we have used the domains identified in the Head Start Child Development and Early Learning Framework for reference purposes.

Domains	Birth-to-Three ELGs	Three-to-Five ELGs	Five and Older ELGs
Physical development and health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Social and emotional development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Approaches to learning	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Logic and reasoning (e.g., problem-	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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Domains	Birth-to-Three ELGs	Three-to-Five ELGs	Five and Older ELGs
solving)			
Language development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Literacy knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mathematics knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Science knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Creative arts expression (e.g., music, art, drama)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Social studies knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
English language development (for dual language learners)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List any domains not covered in the above _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other. Describe <u>Cultural competence and inclusion are embedded throughout the early learning guidelines in each of the domains.</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

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

	Information Dissemination	Voluntary Training	Mandatory Training
Parents in the child care subsidy system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parents using child care more broadly	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practitioners in child care centers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Providers in family child care homes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practitioners in Head Start	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practitioners in Early Head Start	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practitioners in public Pre-K program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Practitioners in elementary schools	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other. List _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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.

- To define the content of training required to meet licensing requirements
- 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

The early learning guidelines are incorporated into the Pre-K Program (Pre-K), Infant Toddler Quality Improvement Project's Trainings and Technical Assistance, and embedded into the Community College Early Childhood coursework.

- 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.

- Cross-walked to align with Head Start Child Development and Early Learning Framework
- Cross-walked to align with K-12 content standards
- Cross-walked to align with State/Territory pre-k standards
- Cross-walked with accreditation standards
- Other. List
- None.

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

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)

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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

The Division of Child Development and Early Education administers the state Pre-k (NC Pre-K) and requires ongoing assessments of children's progress using valid reliable and age appropriate tools aligned with the early learning guidelines.

a-1) If yes, are programs encouraged to use information from ongoing assessments to improve practice and individual children’s needs?

Yes. Describe

Programs are encouraged to use the assessments to improve classroom practices and meet individual children's developmental needs. This is a requirement for state Pre-K and Developmental Day Programs.

No

Other. Describe

a-2) If yes, is information on child’s progress reported to parents?

Yes. Describe

Partnering with families and keeping them well-informed of their child's development is a requirement for both NC Pre-K and Developmental Day Programs.

No

Other. Describe

No

Other. Describe

- b) Does the State/Territory use tools that are valid, reliable and age-appropriate to track the readiness of children within pre-kindergarten and/or as they enter kindergarten?

Yes. Describe

All children enrolled in the NC Pre-K programs and Developmental Day programs are assessed using reliable assessment tools.

b-1) If yes, do the tools cover the developmental domains identified in 3.2.2?

Yes. Describe

The developmental domains are identified in the assessment tools.

No

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Other. Describe

b-2) If yes, are the tools used on all children or samples of children?

All children. **Describe**
All children enrolled in the NC Pre-K programs and Developmental Day programs are assessed using reliable assessment tools.

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
The Infant Toddler Quality Improvement Project and Smart Start technical assistance projects statewide use the information to conduct ongoing assessment to gather information to improve teacher practices and for the development of program quality improvement activities.

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)?

Yes. Describe

No

Not applicable. State does not have an SLDS.

3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines –

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

a) **Data on voluntary early learning guidelines.** Indicate if the Lead Agency or another agency has access to data on:

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- Number/percentage of child care providers trained on ELG's for preschool aged children. Describe (optional) [redacted]
- Number/percentage of child care providers trained on ELG's for infants and toddlers. Describe (optional) [redacted]
- Number of programs using ELG's in planning for their work. Describe (optional) [redacted]
- Number of parents trained on or served in family support programs that use ELG's. Describe (optional) [redacted]
- Other. Describe [redacted]
- None

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures related to dissemination and implementation of the early learning guidelines?

The current Infant Toddler and the Preschool Early Learning Guidelines are currently under revision. An Early Learning Guidelines Advisory Committee has been convened to revise both the Infant Toddler Foundations and the Preschool into one Early Learning Guidelines document for children ages 0-5. The expected date for the completion of the revised Early Learning Guidelines is set for June 2013. The dissemination and implementation of the revised document includes the development of a two credit CEU course for providers.

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

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?

North Carolina's Early Learning Guidelines are currently under revision. The revised Early Learning Guidelines will be developed for children ages 0-5, as a replacement for NC two Early Learning Guidelines. North Carolina has convened an advisory committee of early care and educators working on the revised Early Learning Guidelines. The development of tools to track and record the implementation of the

revised Early Learning Guidelines will be underway as the revised Early Learning Guideline is released. The expected completion date of the revised Early Learning Guidelines is set for June 2013. A RTT-ELC project will develop a two credit CEU course to support providers with the revised Early Learning Guidelines.

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 entities involved in the planning and administering of program quality improvement activities include the following: DCDEE; QRIS Advisory Committee; Professional Development Advisory Committee; CCR&R; Smart Start; Rated License Assessment Project; NC Pre-K Program; Head Start; Child Care Health & Safety Resource Center and the Institutes of Higher Education.

The QRIS Advisory Committee released an Executive Summary of the proposed recommendations for the NC QRIS. The Executive Summary can be found here:

http://ncchildcare.dhhs.state.nc.us/PDF_forms/QRIS-Advisory-Committee-Executive-Summary.pdf

A revised Tiered Quality Rating and Improvement System (TQRIS) will be the subject of a comprehensive validation study.

Information about the validation study can be found here:

http://ncchildcare.dhhs.state.nc.us/PDF_forms/TQRIS-Validation-Study.pdf

3.3.1 Element 1 – Program Standards

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

 a) Does your State/Territory's have quality improvement standards that include indicators covering the following areas beyond what is required for licensing? Check any indicators, if any, that your State/Territory has chosen to establish.

- Ratios and group size
- Health, nutrition and safety
- Learning environment and curriculum
- Staff/Provider qualifications and professional development
- Teacher/providers-child relationships
- Teacher/provider instructional practices
- Family partnerships and family strengthening
- Community relationships
- Administration and management
- Developmental screenings
- Child assessment for the purposes of individualizing instruction and/or targeting program improvement
- Cultural competence
- Other. Describe
- None. If checked, skip to 3.3.2.

b) Does your State/Territory have quality improvement standards with provisions about the care of any of these groups of children? Check any provisions your State/Territory has chosen to establish.

- Children with special needs as defined by your State/Territory

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- Infants and toddlers
- School-age children
- Children who are dual language learners
- 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.

- Licensing is a pre-requisite for participation
- Licensing is the first tier of the quality levels
- State/Territory license is a “rated” license.
- Other. Describe
- Not linked.

d) Do your State/Territory’s quality improvement standards align with or have reciprocity with any of the following standards? Check any alignment, if any, between your State/Territory’s quality standards and other standards.

- Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)
- Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)
- Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)
- Other. Describe
- None

3.3.2 Element 2 –Supports to Programs to Improve Quality

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

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

Types and Purposes of Support	Information or Written Materials	Training	On-Site Consultation
<input checked="" type="checkbox"/> Attaining and maintaining licensing compliance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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Types and Purposes of Support	Information or Written Materials	Training	On-Site Consultation
<input checked="" type="checkbox"/> Attaining and maintaining quality improvement standards beyond licensing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Attaining and maintaining accreditation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Providing targeted technical assistance in specialized content areas:			
Health and safety	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Infant/toddler care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
School-age care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Inclusion	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Teaching dual language learners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Business management practices	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other. Describe 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> None. Skip to 3.3.3.			

b) Methods used to customize quality improvement supports to the needs of 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
- No
- Other. Describe **CCR&R and Smart Start strategies are based on the outcomes related to helping providers to increase quality as measured by the QRIS.**

3.3.3 Element 3 – Financial Incentives and Supports

Definition – For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and QRIS or other child care quality improvement standards for programs.

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 a) Identify which types of financial incentives are offered and to which providers in the following chart. Check which incentives and supports, if any, the State/Territory chooses to offer. If none, skip to 3.3.4.

Types of Financial Incentives and Supports for Programs	Child Care Centers	Child Care Homes	License-Exempt Providers
<input checked="" type="checkbox"/> Grants to programs to meet or maintain licensing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Grants to programs to meet QRIS or similar quality level	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> One-time awards or bonuses on completion of quality standard attainment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tiered reimbursement tied to quality for children receiving subsidy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> On-going, periodic grants or stipends tied to improving/maintaining quality	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Tax credits tied to meeting program quality standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Other. Describe <u>T.E.A.C.H. Early Childhood Scholarship Program, T.E.A.C.H. Health Insurance and WAGE\$ Salary Supplement Program provide financial incentives and supports for programs.</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> None. Skip to 3.3.4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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.**

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Types of Program Quality Assessment Tools	Child Care Centers	Child Care Homes	License-Exempt Providers
<input checked="" type="checkbox"/> Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS) Describe, including frequency of assessments. <u>Environment Rating Scales are conducted every three years, or before by request of the facility operator. A reassessment of the rating may also be conducted before the three year time period if the annual monitoring identified certain indicators, such as, high staff turnover, a new director, or serious licensing violations.</u>	<input checked="" type="checkbox"/> Infant/Toddler <input checked="" type="checkbox"/> Preschool <input checked="" type="checkbox"/> School-Age	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Classroom Assessment Scoring System (CLASS) Describe, including frequency of assessments.	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<input type="checkbox"/> Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes Describe, including frequency of assessments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21 st Century Learning Center programs Describe, including frequency of assessments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> None. Skip to 3.3.5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b) What steps, if any, has the State/Territory taken to align quality assurance and monitoring across funding streams and sectors in order to minimize duplication?

- Have a mechanism to track different quality assessments/monitoring activities to avoid duplication
- Include QRIS or other quality reviews as part of licensing enforcement

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- Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- Other. Describe
- None

3.3.5 – Element 5 - Outreach and Consumer Education

Definition – For purposes of this section, outreach and consumer education refers to the strategies used to promote the child care quality improvement standards to parents, programs and the general public.

 a) Does the State/Territory use symbols or simple icons to communicate levels of quality for child care programs beyond what may be communicated to parents about licensing status and licensing compliance as reported in 3.1.3? (e.g. stars, or gold/silver/bronze levels).

- Yes. If yes, how is it used?
 - Resource and referral/consumer education services use with parents seeking care
 - Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting
 - Searchable database on the web
 - Voluntarily, visibly posted in programs
 - Mandatory to post visibly in programs
 - Used in marketing and public awareness campaigns
 - Other. Describe
- No. If no, skip to 3.3.6.

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.

- Print
- Radio
- Television
- Web
- Telephone
- Social Marketing
- Other. Describe **The CCR&R system is required to provide targeted outreach and referrals in the two most dominant languages in each region of the state.**

None

c) Describe any targeted outreach for culturally and linguistically diverse families.

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:

Licensed child care centers and family child care home operators are eligible to apply for a Two to Five Star Rated License.

Participation is mandatory for:

Licensed one star child care centers and family child care homes.

Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating as a pilot or in a few localities but not State/Territory-wide.

No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.

State/Territory is in the development phase

State/Territory has no plans for development

Other. Describe

 b) If yes to 3.3.6a, **CHECK** 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

Head Start programs

Pre-kindergarten programs

School-age programs

Other. **Describe Public school preschool programs funded with Title I funding or other funding sources.**

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 The Division of Child Development and Early Education is currently targeting quality improvement strategies for religious sponsored, one and two star programs through the RTT-ELC project.

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).

a) **Data on program quality.** Indicate if the Lead Agency or another agency has access to data on:

- Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory. Describe (optional) _____
- Number of programs that move program quality levels annually (up or down). Describe (optional) _____
- Program scores on program assessment instruments. List instruments: **ERS averaged among classrooms** Describe (optional) _____
- Classroom scores on program assessment instruments. List instruments: **ERS** Describe (optional) _____
- Qualifications for teachers or caregivers within each program. Describe (optional) _____
- Number/Percentage of children receiving CCDF assistance in licensed care. Describe (optional) _____
- Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory
- Number/Percentage of programs receiving financial assistance to meet higher program standards. Describe (optional) _____
- Other. Describe _____
- None

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures on program quality? **The quality level of programs are tracked for all licensed child care facilities.**

- b) **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 North Carolina Rated License Assessors use the ITERS-R for infant and toddlers center classrooms, the ECERS-R for early childhood center classrooms, the FCCERS for family child care homes and the SACERS for school age classrooms are used to assess classrooms. The Division of Child Development and Early Education continues to use CCDF funds to support the implementation of this project.

3.3.9 Goals for the next Biennium –

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

1. Including all sectors in the QRIS, which includes Pre-K, public school, Title I, Head Start and religious sponsored programs?

2. The development of a new evaluation system for projects funded with CCDF Quality funding.

3. The development and completion of the RTT-ELC QRIS Validation Study.

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

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- 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. **DCDEE, Smart Start, CCR&R, Institute for Child Development Professionals, NC Pre-K**

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.

-  a) Has the State/Territory developed core knowledge and competencies (CKCs) for practitioners working with and/or on behalf of children?

- Yes
- No, the State/Territory has not developed core knowledge and competencies. Skip to question 3.4.2.
- Other. Describe

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**

Inclusive classroom environments are covered in the CKCS.

- None

- 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.

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- 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 **Specialized competencies are embedded in the Infant-Toddler Certificate, the North Carolina Early Childhood Credential, the North Carolina School Age Credential, and the Head Start CDA Credential.**
- Providers working directly with children in family child care homes, including aides and assistants. Describe **Specialized competencies are embedded in the North Carolina Family Child Care Home (FCCH) Credential.**
- Administrators in centers (including educational coordinators, directors). Describe **Specialized competencies are embedded in the Child Care Administration Credential.**
- Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe **Each special quality improvement project has its own set of**

required competencies for its Technical Assistance providers. Specialized technical assistance competencies are under development for including mentors, coaches and consultants (Infant/Toddler, Healthy Social Behaviors, School Age).

- 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

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

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?

- Yes. Describe

The Early Educator Certification (EEC) is a voluntary professional certification granted by the North Carolina Institute for Child Development Professionals. EEC assesses an individual's verified level of educational achievement based on a standardized scale and assigns an EEC level. As with other occupations, EEC recognizes and validates educational accomplishments of Early Educators.

<http://ncicdp.org/certification-licensure/>

- No, the State/Territory has not developed a career pathway. Skip to question 3.4.3.

Insert web addresses, where possible:

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b) Check for which roles, if any, the career pathways include qualifications, specializations or credentials.

Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe

The State's Workforce Education unit collects child care program staff's education to determine education levels for the North Carolina Early Childhood Credentials (NCECC).

<http://ncchildcare.dhhs.state.nc.us/providers/credent.asp>

All (NC Pre-K) teachers will hold or work towards a North Carolina (NC) Birth-Kindergarten (B-K) Standard Professional II or Preschool Add On Licensure.

Early Educator Certification (EEC) is North Carolina's voluntary certification system for the field of Early Childhood. EEC is an acknowledgement of an individual's verified level of educational achievement, based on a standardized scale. The scale assess staff directly working with children in centers.

Providers working directly with children in family child care homes, including aides and assistants. Describe

The State's Workforce Education unit collects family child care home provider's education to determine education level for the North Carolina Early Childhood Credentials, but specifies family care provider.

http://ncchildcare.dhhs.state.nc.us/providers/pv_sn2_ereq.asp

Early Educator Certification (EEC) is North Carolina's certification system for the field of Early Childhood. EEC is an acknowledgement of an individual's verified level of educational achievement, based on a standardized scale. The scale assess staff directly working with children.

Administrators in centers (including educational coordinators, directors). Describe

The State's Workforce Education unit collects child care Administrators education to determine education level for the North Carolina Early Childhood Administration Credentials (NCECAC).

http://ncchildcare.dhhs.state.nc.us/providers/pv_sn2_ereq.asp

Early Educator Certification (EEC) is North Carolina's certification system for the field of Early Childhood. EEC is an acknowledgement of

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an individual's verified level of educational achievement, based on a standardized scale. The scale assess staff directly working with children in centers.

- 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

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 _____
- None

e) Are individuals' qualifications, professional development, and work experience verified prior to placement on the career pathway (or lattice)?

- Yes. If yes, describe
All credentials, certifications and licensures are verified by the DCDEE Workforce Section The North Carolina Institute for Child Development Professionals and NC Pre-K.
- 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

DCDEE has determined through its collaboration with higher education systems in NC, that degrees programs are available to practitioners statewide either in person, through hybrid courses or via distance learning.

www.ncicdp.org

No.

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

Through the CCR & R System; Smart Start ; Cooperative Extension; and Child Care Health Consultants project, DCDEE assures training and TA availability to practitioners in all 100 counties across the state.

No

c) What quality assurance mechanisms, if any, are in place for the degree programs and courses offered by the State/Territory institutions?

Standards set by the institution

Standards set by the State/Territory higher education board

Standards set by program accreditors

Standards set by State/Territory departments of education

Standards set by national teacher preparation accrediting agencies

Other. Describe

Training can be delivered via "exempt" agencies, (colleges/universities, government agencies, state/national professional organizations) with annual approval from DCDEE required training plan. Non-exempt independent trainer's trainings require comprehensive approval by DCDEE.

None

d) What quality assurance mechanisms, if any, are in place for the training and technical assistance programs offered by the State/Territory?

Training approval process. Describe **(1) Prior approval from the Division is not required for training offered by a college or university with nationally recognized regional accreditation, a government agency, or a state or national professional organization or its affiliates, provided the content complies with G.S. 110-91(11). Government agencies or state or national professional organizations who provide training shall submit an annual training plan on a form provided by the Division for review by the Division. The plan is not required for any state, national, or international conferences sponsored by a professional child care organization. Effective March 1, 2013**

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(2) Prior approval from the Division is required for any agencies, organizations, or individuals not specified in Item (1) of this Rule who wish to provide training for child care operators and staff. To obtain such approval, the agency, organization, or individual shall complete and submit the in-service training approval forms provided by the Division at least 20 business days prior to the training event.

Trainer approval process. Describe

Training and/or technical assistance evaluations. Describe

Other. Describe

None

e) Does the State/Territory have articulation agreements in place across and within institutions of higher education?

Yes. If yes, describe

No

f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?

Yes. If yes, describe

No

3.4.4 Workforce Element 4 – Access to Professional Development

Definition – For purposes of this section, access to professional development (training, education and technical assistance) refers to the degree to which practitioners are made aware of, and receive supports and assistance to utilize, professional development opportunities.

 a) Does the State/Territory have professional development opportunities accessible for professionals in various or all sectors of the early childhood and school-age field?

- Yes. If yes, for which sectors?
- Child care
 - Head Start/Early Head Start
 - Pre-Kindergarten
 - Public schools
 - Early intervention/special education
 - Other. Describe
- No

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.

- Yes. If yes, describe
Each CCR&R Region maintains a training calendar listing professional development opportunities available across the region.
- No.
 No

Insert web addresses, where possible:

<http://childcarerrnc.org/index.php>

c) What supports, if any, does the State/Territory provide to promote access to training and education activities?

- Scholarships. Describe
The T.E.A.C.H. Early Childhood® Project provides educational scholarships to eligible early care and education professionals working in licensed child care across the state.

Free training and education. Describe Free or low-cost training is provided through the CCR&R System ,Smart Start , and Rated License Assessment Project, Child Care Health Consultants, and (DCDEE) Licensing Consultants Staff.

Reimbursement for training and education expenses.

Describe [redacted]

Grants. Describe

Smart Start provides grants for licensure upgrades and licensure maintenance.

Loans. Describe [redacted]

Loan forgiveness programs. Describe [redacted]

Substitute pools. Describe [redacted]

Release time. Describe

Certain T.E.A.C.H. Early Childhood® Project scholarship models offer release time for participants.

Other. Describe [redacted]

None

d) Does the State/Territory have career advisors for early childhood and school-age practitioners?

Yes. If yes, describe

Early childhood and school age practitioners have access to career advisors through the higher education system; Smart Start; NC Pre-k program; T.E.A.C.H. Early Childhood® Project and Child Care WAGE\$ programs.

No

e) Does the State/Territory have mentors, coaches, consultants, and/or other specialists available to provide technical assistance to the workforce?

Yes. If yes, describe

Technical Assistance is provided by DCDEE Regulatory Licensing Consultants, Quality Improvement Projects, CCR&R, Smart Start Quality Improvement and Quality Enhancement staff, Child Care Health Consultants, and North Carolina Rated License Assessment Project staff.

No

3.4.5 Workforce Element 5- Compensation, Benefits and Workforce Conditions

Definition – For purposes of this section, rewards for education and training refers to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.

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 a) Does the State/Territory have a salary or wage scale for various professional roles?

Yes. If yes, describe

The NC Pre-K program has an official salary schedule and the NC Institute for Child Development Professionals has a schedule of suggested salaries for professionals.

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?

Yes. If yes, describe

The T.E.A.C.H. Early Childhood® Project gives scholarships to child care workers to complete course work in early childhood education and to increase their compensation.

www.childcareservices.org

No

 c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?

Yes. If yes, describe

The Child Care WAGES® Project provides education-based salary supplements to low-paid teachers, directors and family child care providers working with children between the ages of birth-5. The project is designed to provide preschool children more stable relationships with better educated teachers by rewarding teacher education and continuity of care.

www.childcareservices.org

No

d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?

Yes. If yes, describe

Through the T.E.A.C.H. Early Childhood® Health Insurance Program, the state provides limited reimbursement for a portion of the cost of health insurance for licensed programs that demonstrate a commitment to high quality professional development for their teaching staff.

www.childcareservices.org

No

3.4.6 Data & Performance Measures on the Child Care Workforce –

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

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

The State's Workforce Education database; the Institute for Child Development Professionals 'Certification database; & the NC Pre-K program each collect this information for their participants.

- Qualifications of teachers or caregivers linked to the programs in which they teach. Describe (optional)

- Number of scholarships awarded . Describe (optional)

The T.E.A.C.H. Early Childhood® program has information on the number of scholarships awarded for its participants.

- Number of individuals receiving bonuses or other financial rewards or incentives. Describe (optional)

T.E.A.C.H. Early Childhood® and WAGE\$ programs has data on the number of bonuses and financial rewards warded for its participants.

- Number of credentials and degrees conferred annually. Describe (optional)

DCDEE issues and collects the data for the NC Early Childhood, Administration, Family Child Care, and School Age Credential.

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- 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?

Definition– For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.

Yes.

b-1) If yes, which roles are included in the workforce data system? For each role checked, indicate in your description whether participation is voluntary or mandatory.

Staff working directly with children in centers, including aides, assistants, teachers, master teachers.

Describe _____

Providers working directly with children in family child care homes, including aides and assistants. Describe _____

Administrators in centers (including educational coordinators, directors). Describe _____

Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____

Education and training staff (such as trainers, CCR&R staff, faculty). Describe

Other. Describe

None

b-2) Does the workforce data system apply to:

all practitioners working in programs that are licensed or regulated by the State/Territory to serve children birth to 13?

all practitioners working in programs that receive public funds to serve children birth to age 13?

No

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

development systems?

- c) **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.

Periodic workforce studies are completed to assess the conditions of the workforce. The most recent workforce study can be found here:

http://www.childcareservices.org/downloads/research/WorkforceReport_2011.pdf

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 –Implementation of T.E.A.C.H. Master Degree Scholarships for Technical Assistance Providers through RTT-ELC

Goal 2 –Revise the Workforce Data system. system.

Goal 3 – Development of the RTT-ELC Workforce Study.

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 ACF Program Instruction regarding CCDF Plan amendments for more information

<http://www.acf.hhs.gov/programs/occ/resource/pi-2009-01>

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) and 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 same 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.

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

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

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

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

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

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

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

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

A1.1 Progress on Overall Goals

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

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

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

Note: If your licensing standards changed during this period, please provide a brief summary of the major changes and submit the updated regulations to the National Resource Center for Health and Safety in Child Care (www.nrckids.org.) _____

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

- a) How many licensed center-based programs operated in the State/Territory as of September 30, 2014? _____
 N/A
Describe: _____
- b) How many licensed home-based programs operated in the State/Territory as of September 30, 2014? _____
 N/A
Describe: _____
- c) Does the State/Territory have data on the number of programs operating in the State/Territory that are legally exempt from licensing? **At a minimum, the Lead Agency should provide the number of legally exempt providers serving children receiving CCDF.**
 - Yes. If yes, include the number of programs as of September 30, 2014 and describe _____ (Use the Describe Box to provide the universe of programs on which the number is based)
 - No. Describe: _____

A1.2.2 Number and Frequency of Monitoring Visits

For licensed programs, a monitoring visit is an onsite visit by department personnel to a licensed child care program with the goal of ensuring compliance with licensing regulations. This may include initial licensing determination visits, licensing renewal visits, periodic announced or unannounced visits, and visits made after a complaint is lodged. For legally exempt providers, a monitoring visit is an onsite visit to a child care program with the goal of ensuring compliance with health and safety standards as defined by CCDF and required for receipt of CCDF funds. Use the Describe box to provide your State/Territory monitoring visit requirement.

- a) How many licensed center-based programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?

 - a-1) Of those programs visited how many were unannounced? _____
 - a-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____
 - a-3) What percentage of required visits for licensed center-based program were completed? _____ N/A
Describe: _____

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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? _____
- 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 Care Centers	_____	_____	_____	<input type="checkbox"/>	_____
Group Child Care Homes	_____	_____	_____	<input type="checkbox"/>	_____

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	How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year?	N/A	Describe
Family Child Care Homes	█	█	█	<input type="checkbox"/>	█
In-Home Providers	█	█	█	<input type="checkbox"/>	█

A1.2.5 How many previously license-exempt providers were brought under the licensing system during the last fiscal year? _____

N/A

Describe: █

A1.2.6 How many injuries as defined by the State/Territory occurred in child care during the last year?

Please provide your definition of injuries in the Describe box and indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). _____

N/A

Describe: █

A1.2.7 How many fatalities occurred in child care or as the result of a child care accident or injury as of the end of the last year?

Please indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). _____

N/A

Describe: █

Establishing Early Learning Guidelines (Component #2)

A2.1 Progress on Overall Goals

A2.1.1 Did the State/Territory make any changes to its voluntary early learning guidelines (including guidelines for school-age children) as reported in 3.2 during the last fiscal year?

Yes. Describe _____

No

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

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

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

A2.2 Key Data

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

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

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

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

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

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

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

Provider Categories	Birth to Three ELG's	Three-to-Five ELG's	Five and Older ELG's	N/A	Describe
How many children are served in center-based programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____	<input type="checkbox"/>	_____
How many children are served in program implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____ _____	_____ _____	_____ _____	<input type="checkbox"/>	_____
How many children are served in programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____ _____	_____ _____	_____ _____	<input type="checkbox"/>	_____

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

A3.1 Progress on Overall Goals

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

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

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

A3.2 Key Data

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

A3.2.1 Number of Program Receiving Targeted Technical Assistance

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

- a) How many programs received targeted technical assistance during the last fiscal year (October 1, 2013 through September 30, 2014)?
- N/A
- Describe:

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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 _____

N/A

Describe:

Family Child Care Homes _____

N/A

Describe:

b) How many programs received on-going or periodic quality stipends?

Child Care Centers _____

N/A

Describe:

Family Child Care Homes _____

N/A

Describe:

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 QRIS _____ OR Other Quality Improvement System? _____

N/A

Describe:

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b) What is the total number of eligible family child care homes for QRIS _____ OR Other Quality Improvement System? _____

N/A

Describe: _____

c) What is the total number of eligible license-exempt providers for QRIS _____ OR Other Quality Improvement System? _____

N/A

Describe: _____

A3.2.4 Number and Percentage of Programs Participating in State/Territory QRIS or Other Quality Improvement System

a) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of child care center programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of Child Care Centers Participating in QRIS _____ OR Other Quality Improvement System _____

Percentage of Child Care Centers Participating in QRIS _____ OR Other Quality Improvement System _____

N/A

Describe: _____

b) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of family child care programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of Family Child Care Homes QRIS _____ OR Other Quality Improvement System _____

Percentage of Family Child Care Homes QRIS _____ OR Other Quality Improvement System _____

N/A

Describe: _____

c) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of license-exempt programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of License-Exempt Providers QRIS _____ OR Other Quality Improvement System _____

Percentage of License-Exempt Providers QRIS _____ OR Other Quality Improvement System _____

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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	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Family Child Care Homes	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
License-Exempt Providers	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

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 moved up within the QRIS or achieved another quality threshold established by the State/Territory over the 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 Centers	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Family Child Care Homes	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
License-Exempt Providers	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

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? _____

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- 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 2014-2015 CCDF Plan	Describe Progress – Include Examples and Numeric Targets where Possible

A4.2 Key Data

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

A4.2.1 Number of Teachers/Caregivers and Qualification Levels

- a) What is the total number of child care center teachers in the State/Territory as of September 30, 2014? _____

N/A

Describe:

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b) What is the total number of family child care providers in the State/Territory as of September 30, 2014? _____

N/A

Describe:

c) What is the number of center teachers and family child care providers by qualification level as of the end of the last fiscal year? Count only the highest level of education attained.

	Child Care Center Teachers	Family Child Care Providers	N/A	Describe
Child Development Associate (CDA)	_____	_____	<input type="checkbox"/>	_____
State/Territory Credential	_____	_____	<input type="checkbox"/>	_____
Associate's degree	_____	_____	<input type="checkbox"/>	_____
Bachelor's degree	_____	_____	<input type="checkbox"/>	_____
Graduate/Advanced degree	_____	_____	<input type="checkbox"/>	_____

A4.2.2 Number of Individuals Included in State/Territory's Professional Development Registry during Last Fiscal Year (October 1, 2013 through 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 Training and/or Education as defined by State/Territory during the last fiscal year

Teachers in child care centers _____

Family child care home providers _____

License-exempt providers _____

N/A

Describe:

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.

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Setting	List Type of Credential and Provide Number Awarded	List Type of Degree and Provide Number Awarded	N/A	Describe
Teachers in child care centers	_____	_____	<input type="checkbox"/>	_____
Family child care home providers	_____	_____	<input type="checkbox"/>	_____
License-exempt providers	_____	_____	<input type="checkbox"/>	_____

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

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

Setting	List Type of Technical Assistance and Provide Number	N/A	Describe
Teachers in child care centers	_____	<input type="checkbox"/>	_____
Family child care home providers	_____	<input type="checkbox"/>	_____
License-exempt providers	_____	<input type="checkbox"/>	_____

A4.2.6 Type of Financial Supports Provided and Number of Teachers/Providers Receiving as of End of Last Fiscal Year?

- Scholarships. How many teachers/providers received? _____
 - Reimbursement for Training Expenses. How many teachers/providers received? _____
 - Loans. How many teachers/providers received? _____
 - Wage supplements. How many teachers/providers received? _____
 - Other. Describe
 - N/A
- Describe:

Building Subsidy Systems that Increase Access to High Quality Care

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

A5.1 Progress on Overall Goals

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

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

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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))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (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))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

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

1. Assurance of compliance with Title VI of the Civil Rights Act of 1964:

<http://www.hhs.gov/forms/HHS690.pdf>

2. Certification regarding debarment:

<http://www.acf.hhs.gov/grants/certification-regarding-debarment-suspension-and-other>

3. Definitions for use with certification of debarment:

<http://www.acf.hhs.gov/grants/certification-regarding-debarment-suspension-and-other-o>

4. HHS certification regarding drug-free workplace requirements:

<http://www.acf.hhs.gov/grants/certification-regarding-drug-free-workplace-requirements>

5. Certification of Compliance with the Pro-Children Act of 1994:

<http://www.acf.hhs.gov/grants/certification-regarding-environmental-tobacco-smoke>

6. Certification regarding lobbying:

<http://www.acf.hhs.gov/grants/certification-regarding-lobbying>

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

DRAFT