September 8, 2016

Rachel Schumacher, Director
Office of Child Care
Administration for Children and Families
Mary E. Switzer Building
330 C Street South West, Room 4502
Washington, DC 20201

Dear Director Schumacher:

Subject: Submission of Corrective Action Plan for California’s Child Care and Development Fund 2016-2018 State Plan

As the designated Lead Agency for the Child Care and Development Fund (CCDF) in California, the California Department of Education (CDE) is formally submitting the Corrective Action Plan as requested by the Administration for Children and Families regarding the Child Care and Development Block Grant Act (the Act) for Section 5.1.6 b.

The CDE, on behalf of California, seeks approval of the provisions being updated in the Implementation Plan on September 8, 2016, stating that California fully meets Section 5.1.6 b for licensed child care providers.

California’s initial Implementation Plan for Section 5.1.6 b indicated partially meeting the required 10 Child Care and Development Block Grant (CCDBG) health and safety topics. Upon further review, the CDE in collaboration with the California Department of Social Services, its partner agency in implementation, have met and completed a detailed review of the current and continued training requirements in California against the training topics outlined in the Act. It is our belief that California covers each of the 10 training topics for licensed child care providers based on the Act (see attached table).

All 10 CCDBG health and safety training topics (658E(c)(2)(I)) are currently met for licensed providers through a required pre-service orientation for applicants pursuant to Health and Safety Code (HSC) Section 1596.845 and by the required 16 hours of Preventative Health and Safety Practices Training pursuant to HSC Section 1596.866. The required course content for these trainings and their curriculum is outlined and approved by the Emergency Medical Services Authority (EMSA) as defined in California Code of Regulations, Title 22, Division 9, Section 100000.30. A license is only issued to
a child care provider if all of the above orientation and trainings have been completed (HSC Section 1596.845).

In addition, the California’s Legislature passed Assembly Bill 1207, and the Governor of California signed it into law on October 1, 2015, adding HSC Section 1596.8662 to create additional training requirements for licensed child care providers that are ongoing and must be renewed every two years. This addition is Mandated Child Abuse Reporter training to be implemented by January 1, 2018, and will include training in dangers of shaking a child and safe sleep practices.

California eagerly awaits the final federal regulations regarding the Act in order to confirm that California’s current training requirements meet the new federal regulations.

California is submitting a corrective action plan pertaining to required health and safety training for non-family, license-exempt providers. To mandate such training in California requires legislative action. The CDE will continue to meet with local stakeholders, the Legislature, and the Governor’s Office to fully implement the health and safety training requirements for non-family, license-exempt child care providers.

If you have questions regarding this subject, please contact Debra McMannis, Director, Early Education and Support Division, by phone at 916-324-0730 or by e-mail at statepln@cde.ca.gov.

Sincerely,

/s/

(in lieu of the original signature assurance page in hard copy)
Debra McMannis, Director
Early Education and Support Division

DM:kb

cc: Abby J. Cohen, JD, Regional Program Manager, Region 9, Office of Child Care
5.1.6 a

The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics. (658E(c)(2)(l)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

a) The State/Territory certifies that it has health and safety requirements for providers receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
Implementation Plan
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- First aid and cardiopulmonary resuscitation (CPR) certification

☐ Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016. Provide a citation and a link if available.

☒ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) February 2018

- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Substantially Implemented

  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable

  CDSS has met the following requirements for licensed providers through required pre-service orientations and required preventative health and safety practices training on the following topics through health and safety preservice training and orientation for licensure:

  - Prevention and Control of Infectious Diseases (including immunization)
  - Procedures to reduce the risk of Sudden Infant Death Syndrome (SIDS)
  - Administration of Medication
  - Prevention of and Response to Emergencies due to Food Allergic Reactions
  - Building and Physical Premises Safety
  - Training procedures to reduce the risk of Shaken Baby Syndrome including abusive head trauma
Implementation Plan
Response to Section 5.1.6 (a)

- Emergency Preparedness and response planning for emergencies resulting from a natural disaster, or man-caused event
- Handling and Storage of Hazardous Materials and appropriate disposal of bio contaminants
- Precautions in transportation of Children
- First Aid and Cardiopulmonary Resuscitation (CPR)

Due to new legislation CDSS will be implementing additional sources of training material on the following requirements beginning January 1, 2018 that will include ongoing provider training for licensed providers, bringing California into full compliance with the Act. The topics are:

- Safe Sleep Practices
- Dangers of shaking a child
- Mandated Child Abuse Reporter training

- Unmet requirement - Identify the requirement(s) to be implemented
  For licensed providers, current law requires 16 hours of health and safety practices training. Legislation is needed to update HSC and/or California Ed Code as a requirement for non-family, license-exempt providers.

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
  A contract from the CDE-EESD with the Merced County Office of Education includes a scope of work that will conclude in December of 2016 as an online component that mirrors current Health and Safety Practices Training and pre-service orientation and meets all 10 CCDBG Health and Safety Requirements (658E(c)(2)(I)).
Implementation Plan
Response to Section 5.1.6 (a)

The training requirements and monitoring guidance is established by the Legislature. Once the California Health and Safety video trainings have been developed and become available online through the CECO, the CDE will promote legislation to require the trainings for non-family, license-exempt child care providers.

- Projected start date for each activity July 1, 2015
  1. July 1, 2015: the execution of the contract from CDE-EESD to develop Health and Safety Training Modules
  2. December 2016: California’s Health and Safety Video Modules will be developed and complete
  3. January-March Video Modules will be designed for use online via CECO
  4. Fall 2016: Federal CCDF Regulations will be final and approved for adoption.
  5. Winter 2016/17: The California Department of Education (CDE) will begin to assess the alignment between current training requirements for licensed child care providers with the final adopted federal regulations.
  6. The CDE will continue to meet with local stakeholders, the Legislature, and the Governor’s Office to fully implement the health and safety training requirements for non-family, license-exempt child care providers.

- Projected end date for each activity February 2018
- Agency – Who is responsible for complete implementation of this activity California Department of Education
- Partners – Who is the responsible agency partnering with to complete implementation of this activity Stakeholder groups, CDSS and other appropriate State Agencies.
b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above.

The State/Territory certifies that it has health and safety requirements for providers receiving CCDF in the following areas:

- **Prevention and control of infectious diseases (including immunization)**
- **Prevention of sudden infant death syndrome and use of safe sleeping practices**
- **Administration of medication, consistent with standards for parental consent**
- **Prevention of and response to emergencies due to food and allergic reactions**
- **Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic**
- **Prevention of shaken baby syndrome and abusive head trauma**
- **Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))**
- **Handling and storage of hazardous materials and the appropriate disposal of bio contaminants**
- **Precautions in transporting children (if applicable)**

First aid and cardiopulmonary resuscitation (CPR) certification

ACF expects these trainings will be part of a broader systematic approach and progression of professional development *(as described in Section 6)* within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education.
Implementation Plan
Response to Section 5.1.6 (b)

The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children Basics* for best practices and recommended time needed to address these training requirements.

☐ Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016. Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements ______

☒ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) **February 2018**

- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **Substantially Implemented**
  - Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented

CDSS has met the following requirements for licensed providers through required pre-service orientations and required preventative health and safety practices training on the following topics through health and safety preservice training and orientation for licensure:

- Prevention and Control of Infectious Diseases (including immunization)
Implementation Plan  
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- Procedures to reduce the risk of Sudden Infant Death Syndrome (SIDS)
- Administration of Medication
- Prevention of and Response to Emergencies due to Food Allergic Reactions
- Building and Physical Premises Safety
- Training procedures to reduce the risk of Shaken Baby Syndrome including abusive head trauma
- Emergency Preparedness and response planning for emergencies resulting from a natural disaster, or man-caused event
- Handling and Storage of Hazardous Materials and appropriate disposal of bio contaminants
- Precautions in transportation of Children
- First Aid and Cardiopulmonary Resuscitation (CPR)

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- Safe Sleep Practices
- Dangers of shaking a child
- Mandated Child Abuse Reporter training

Unmet requirement - Identify the requirement(s) to be implemented

For licensed providers, current law requires 16 hours of health and safety practices training. Legislation is needed to update HSC and/or California Ed Code as a requirement for non-family, license-exempt providers.
Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

A contract from the CDE-EESD with the Merced County Office of Education includes a scope of work that will conclude in December of 2016 as an online component that mirrors current Health and Safety Practices Training and pre-service orientation and meets all 10 CCDBG Health and Safety Requirements (658E(c)(2)(I)).

The training requirements and monitoring guidance is established by the Legislature. Once the California Health and Safety video trainings have been developed and become available on-line through the CECO, the CDE will promote legislation to require the trainings for non-family, license-exempt child care providers.

Projected start date for each activity
1. July 1, 2015: the execution of the contract from CDE-EESD to develop Health and Safety Training Modules
2. December 2016: California’s Health and Safety Video Modules will be developed and complete
3. January-March Video Modules will be designed for use online via CECO
4. Fall 2016: Federal CCDF Regulations will be final and approved for adoption.
5. Winter 2016/17: The California Department of Education (CDE) will begin to assess the alignment between current training requirements for licensed child care providers with the final adopted federal regulations.
6. The CDE will continue to meet with local stakeholders, the Legislature, and the Governor’s Office to fully implement the health and safety training requirements for non-family, license-exempt child care providers.
Implementation Plan
Response to Section 5.1.6 (b)

- Projected end date for each activity: February 2018
- Agency – Who is responsible for complete implementation of this activity: California Department of Education
- Partners – Who is the responsible agency partnering with to complete implementation of this activity: Stakeholder groups, CDSS and other appropriate State Agencies.
|   | Prevention and control of infectious diseases (including Immunization) | Required under HSC 1596.866(a)(2)(C) as part of the preservice Health and Safety Practices Training  
Required course content is outlined and approved by the Emergency Medical Services Authority (EMSA) pursuant to 22 CCR Section 100000.30(b)(1) |
|---|---|---|
| 2 | Prevention of sudden infant death syndrome (SIDS) and use of safe sleeping practices | Required under HSC 1596.866(d)(1) as part of the preservice Health and Safety Practices Training  
Required course content is outlined and approved by the EMSA pursuant to 22 CCR Section 100000.30(b)(2)(C)  
Training augmented to include Safe Sleep Practices to be implemented by CDSS January 1, 2018 |
| 3 | Administration of medication, consistent with standards for parental consent | Required under HSC 1596.866 (a)(2)(C)(i) as part of the preservice Health and Safety Practices Training  
Required course content is outlined and approved by the EMSA pursuant to 22 CCR Section 100000.30(b)(1)(E) |
| 4 | Prevention of and response to emergencies due to food and allergic reactions | Required under HSC 1596.866 (a)(2)(A) for response and (a)(2)(C)(ii) for prevention as part of Health and Safety Practices Training  
Required course content is outlined and approved by the EMSA pursuant to 22 CCR Section 100000.30(b)(1)(E) and (a)(3) |
| 5 | Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, and bodies of water, and vehicular traffic | Required under HSC 1596.866(d)(1) as part of the preservice Health and Safety Practices Training  
Required course content is outlined and approved by the EMSA pursuant to 22 CCR Section 100000.30(b)(2)(B) and (E) |
| 6 | Prevention of shaken baby syndrome and abusive head trauma | Required under HSC 1596.866 (a)(2)(C)(i) as part of the preservice Health and Safety Practices Training  
Required course content is outlined and approved by the EMSA pursuant to 22 CCR Section 100000.30(b)(2)(C)  
Additional training augmented to include dangers of shaking a child will be implemented by CDSS January 1, 2018. |
| 7 | Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as a violence at a child care facility), within the meaning of those terms under section 602 (a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42. U.S.C 5195a(a)(1) | Required under HSC 1596.866 (a)(3) as part of the preservice Health and Safety Practices Training  
Required course content is outlined and approved by the EMSA pursuant to 22 CCR Section 100000.30(a)(5) and (a)(8)–(9) |
| 8 | Handling and storage of hazardous materials and the appropriate disposal of bio contaminants | Required under HSC 1596.866(d)(1) as part of the preservice Health and Safety Practices Training  
Required course content is outlined and approved by the EMSA pursuant to 22 CCR Section 100000.30(b)(1)(A)–(B), (b)(2)(B), and (b)(2)(E) |
| 9 | Precautions in transporting children (if applicable) | Required under HSC 1596.866(d)(1) as part of the preservice Health and Safety Practices Training  
Required course content is outlined and approved by the EMSA pursuant to 22 CCR Section 100000.30(b)(2)(F) |
| 10 | First aid and cardiopulmonary resuscitation (CPR) certification | As required under HSC 1596.866 (a)(2)(A) and (B) as part of the preservice Health and Safety Practices Training and required every two years  
Required course content is outlined and approved by the EMSA pursuant to 22 CCR Section 100000.30(a) |

The Health and Safety Code (HSC) related to this section can be found in HSC Section 1596.866  
The California Code of Regulations, Title 22 (22 CCR) related to this section can be found in 22 CCR Section 100000.30.

Updated 9/7/2016