

# Child Care and Development Fund (CCDF) Plan For California FFY 2019-2021

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## 1 Define CCDF Leadership and Coordination with Relevant Systems

This section identifies the leadership for the CCDF program in each Lead Agency and the entities and individuals who will participate in the implementation of the program. It also identifies the stakeholders that were consulted to develop the Plan and who the Lead Agency collaborates with to implement services. In this section respondents are asked to identify how match and maintenance-of-effort (MOE) funds are identified. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems, and outline the work they have done on their disaster preparedness and response plans.

### 1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, 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(c)(1)). Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.

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

Identify the Lead Agency or joint interagency office designated by the state or 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)).

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: California Department of Education

Street Address: 1430 N Street

City: Sacramento

State: California

ZIP Code: 95814

Web Address for Lead Agency: <https://www.cde.ca.gov>

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Tom

Lead Agency Official Last Name: Torlakson

Title: State Superintendent of Public Instruction

Phone Number: 916-319-0800

Email Address: [superintendent@cde.ca.gov](mailto:superintendent@cde.ca.gov)

### 1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or 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 the person with administrative responsibilities and include his or her contact information.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Sarah

CCDF Administrator Last Name: Neville-Morgan

Title of the CCDF Administrator: Director, Early Learning and Care Division

Phone Number: 916-324-0730

Email Address: snevillemorgan@cde.ca.gov

Address for the CCDF Administrator (if different from the Lead Agency):

Street Address: N/A

City: N/A

State: N/A

ZIP Code: N/A

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

CCDF Co-Administrator First Name: N/A

CCDF Co-Administrator Last Name: N/A

Title of the CCDF Co-Administrator: N/A

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

Phone Number: N/A

Email Address: N/A

Address for the CCDF Co-Administrator (if different from the Lead Agency):

Street Address: N/A

City: N/A

State: N/A

ZIP Code: N/A

## 1.2 CCDF Policy Decision Authority

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 public or private local agencies as long as it retains overall responsibility for the administration of the program (658D(b)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

**1.2.1 Which of the following CCDF program rules and policies are administered (i.e., set or established) at the state or territory level or local level? Identify whether CCDF program rules and policies are established by the state or territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as counties or workforce boards (98.16(i)(3)). Check one.**

- All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.
- Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.

1. Eligibility rules and policies (e.g., income limits) are set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

N/A

- Other.

Describe:

N/A

2. Sliding-fee scale is set by the:

State or territory

Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

N/A

Other.

Describe:

N/A

3. Payment rates are set by the:

State or territory

Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

N/A

Other.

Describe:

N/A

4. Other. List and describe other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):

N/A

**1.2.2 How is the CCDF program operated? In other words, which entity(ies) implement or perform these CCDF services? Check all that apply**

a) Who conducts eligibility determinations?

- CCDF Lead Agency
- Temporary Assistance for Needy Families (TANF) agency
- Other state or territory agency
- Local government agencies, such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

Public and private agencies under contract with the California Department of Education (CDE), including local educational agencies (LEAs).

b) Who assists parents in locating child care (consumer education)?

- CCDF Lead Agency
- TANF agency
- Other state or territory agency
- Local government agencies, such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

Public and private agencies under contract with the CDE, including LEAs. Public and private agencies under contract with CDE.

c) Who issues payments?

- CCDF Lead Agency
- TANF agency
- Other state or territory agency
- Local government agencies, such as county welfare or social services departments

- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

Public and private agencies under contract with the CDE, including LEAs. Public and private agencies under contract with CDE.

**1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). Note : The contents of the written agreement may vary based on the role the agency is asked to assume or type of project, but must include at a minimum, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)).**

The CDE reviews contractors using a risk assessment and also an instrument that is refined and comprehensive. The Review Instrument is guided by the requirements of current laws and regulations. Additionally, the CDE uses family files data error rate specific to eligibility, need, attendance and fees to assess contractors and determine the percentage of their performances. Contractors are required to perform at a pre-determined threshold, or develop a corrective action plan. The standard is a compliant-non-compliant based review process. Contractors are reviewed every four years using a standard document. The review document identifies the compliance items and suggested supporting documentation for each item to demonstrate compliance. The review items are in categories using The CDE Program Key Dimensions, which are determined by the SSPI, are currently as follows:

1. Involvement (parent),
2. Governance and administration,
3. Funding,
4. Standards, assessment and accountability,
5. Staffing and professional development,
6. Opportunity and equal educational access, and
7. Teaching and learning. After a review, when a non-compliant item is discovered, the

contractor will develop a corrective action plan and the reviewer will monitor the plan to ensure compliance is achieved.

The CDE conducts follow-up reviews to ensure that the implementation of the corrective action plan improved the contractors' performances to the desired threshold. Lastly, contractors are required to submit annual fiscal audits to the CDE by November 15 of every fiscal year. Each audit report is reviewed by auditors for compliance with regulations and contract requirements.

**1.2.4 Lead Agencies must assure that, to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available on request to other public agencies, including public agencies in other States, for their use in administering child care or related programs (98.15(a)(11)).**

**Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate.**

To the extent practicable and appropriate, the CDE makes the database structure and accompanying code and software for our Child Development Management Information System (CDMIS) available upon request to other public agencies for their use in administering early learning and care or related programs. All requests for software, code, or system documentation are directed to our CDMIS technicians via e-mail at [CDMIS@cde.ca.gov](mailto:CDMIS@cde.ca.gov).

**1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)).**

**Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information.**

The CDE does not disclose any personally-identifiable information (PII) about children and families receiving CCDF assistance. Data requests for PII about children, families, and providers receiving CCDF funds are not fulfilled..

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan, which serves as the application for a 3-year implementation period. As part of the Plan development process, Lead Agencies must consult with the following:

(1) Appropriate representatives of units of general purpose local government-(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S. Census at [https://www.census.gov/newsroom/cspan/govts/20120301\\_cspan\\_govts\\_def\\_3.pdf](https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf)

(2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body pursuant to 98.14(a)(1)(vii).

(3) Indian tribe(s) or tribal organization(s) within the state. This consultation should be done in a timely manner and at the option of the Indian tribe(s) or tribal organization(s) (658D(b)(1)(E)).

**Consultation**

involves meeting with or otherwise obtaining input from an appropriate agency in the development of the state or territory CCDF Plan. Describe the partners engaged to provide services under the CCDF program in question 1.4.1.

### **1.3.1 Describe the Lead Agency's consultation in the development of the CCDF plan.**

a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments.

The CDE consults with the State Superintendent of Public Instruction (SSPI) Stakeholder Group on Early Learning and Care (SSPI Stakeholder Group). The group is comprised of public and private agencies and association's providing services to children and families in California, including subsidized and non-subsidized early learning and care provider associations, the California Head Start Association, the California Department of Social Services (CDSS), LEAs, regional centers, colleges, First 5 California (F5CA), job training programs, special education agencies, and parent and provider organizations. At the February 28, 2018 SAC meeting, the CDE presented on the 2019-21 draft pre-print, shared feedback from the October and December topical input sessions, and solicited input on the various topics. The SSPI Stakeholder Group also provided input on various topics. The CDE also consults with local governments by means of its Local Child Care and Development Planning Councils (LPCs). The LPCs bring all the local stakeholders together, including subsidized and non-subsidized early learning and care providers, employers, County Welfare Departments (CWD) and human services agencies. LEAs, regional centers, colleges, First 5 county commissions, job training programs, and parent organizations to create local strategic priorities for early learning and care services for children and families. Additionally, the CDE consulted with the State Advisory Council (SAC) and Tribal Child Care Association of California (TCCAC) as described below.

b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body.

The CDE provided CCDF Plan updates and discussed State Plan input at the following SAC meetings: October 25, 2017 and February 28, 2018, where stakeholders were advised of the updates and changes on the preprint, as well as advised of the many opportunities for input via e-mail, mail, and fax. During the June 2018 SAC meeting, the CDE discussed the updated CCDF timeline issued by ACF. The board members of the SAC were given priority for input and then the floor was opened to attending stakeholders, such as: private providers, advocacy agencies, direct service providers, Alternative Payment Program (APP), and the Child Care Resource and Referral (R&R)

Network.

c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for States to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many States and Tribes have consultation policies and procedures in place.

The CDE has a dedicated Tribal Child Care Liaison. In this role, the liaison ensures the CDE enacts its Memorandum of Understanding (MOU) with the TCCAC. A core component is assisting in quarterly meetings of the TCCAC, by connecting the needs and efficiencies of the TCCAC, with that of state agency partners within the CDE such as: Nutrition Services, the Quality Improvement Office (QIO), the Policy Office (PO), the Field Services Office (FSO), California Head Start Collaboration Office (CHSCO), F5CA and the CDSS-Community Care Licensing Division (CCLD) and the CDSS-Child Care and Refugee Programs Branch, as well as other state agencies. The TCCAC is comprised of individuals who work for tribal lead agencies/grantees administering the Child Care and Development Funded Programs. TCCAC is an Association of early learning and care professionals specializing in working with Native American families, children and communities. The Tribes that are invited quarterly to the meetings include the following: Tolowa Dee-ni' Nation, Quartz Valley, Karuk, Berry Creek, Coyote Valley, Pinoleville, Hoopa Valley, Big Sandy, Redding Rancheria, Wiyot, Mechoopda, Hopland Tribe, Campo, Soboba, Quechan, Southern California Tribal Chairmen's Association, California Indian Manpower Consortium Inc., Scotts Valley, Susanville, Redwood Valley, North Fork, Bear River, Dry Creek Rancheria, Robinson Rancheria, Mooretown, Cloverdale Rancheria, Pit River Tribe, Yurok Tribe, Colusa, Bishop Paiute, Enterprise Rancheria, Quechan Tribe, Campo, Wiyot, and Round Valley. The plan pre-print was shared with participants at the February 21, 2018 TCCAC meeting. Participants were invited to provide input language for any section through the CDEs state plan mailbox at [statepln@cde.ca.gov](mailto:statepln@cde.ca.gov). Additionally, a public comment meeting was held on May 17, 2018 for interested tribes.

d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan.

In August 2015, the Child Care Law Center and Children Now commenced a process to make recommendations on how California should implement the Act. With input from a broad array of organizations, they developed a set of priority policy recommendations. On December 8, 2015, Senator Holly Michell hosted an information briefing on the implications of the Act for California and developed consensus proposals for inclusion in the plan. Notices for the updates for the 2019-21 CCDF State Plan cycle as well as related resources were posted on the CDE Website on December 8, 2017, including additional notice of the Topical Input Sessions. Topical Input Sessions regarding Market Rate Survey and Payment Practices-Timeliness of Payments, License-Exempt Monitoring, and Health and Safety Requirements were held on December 18, 2017. Notice for the December 18, 2017 Topical Input Sessions was sent to all entities on CDE's early learning and care listserv on December 15, 2017. For all notices, the same web address was shared for consistency. All materials such as copies of the pre-print, federal resources including links, recordings, and contact information were made available. The CDE partners with the California Department of Public Health (CDPH), specifically with the Site Assessment Section (SAS) of the Environmental Health Investigations Branch (EHIB), for outreach and education activities to prevent or reduce harmful environmental exposures that affect children in the child care and early learning and care settings. SAS will conduct this work as part of CDPH's Cooperative Agreement with the federal Agency for Toxic Substances and Disease Registry (ATSDR), and the implementation of ATSDR's guidance "Choose Safe Places for Early Care and Education.

**1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)).**

Reminder:

Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

- a) Date of the public hearing. 05/15/2018

Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g. the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in (a)).  
04/20/2018

*Reminder:* Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement).

c) How was the public notified about the public hearing? Please include specific website links if used to provide notice.

The CDE shared information about methods of input to the State Plan via the CDE early learning and care listserv, posting information on the CDE web site, and at meetings and presentations to stakeholder groups, advocacy organizations and membership organizations informing and encouraging broad and diverse input. To ensure the notice was accessible for the people with disabilities, the information was posted on the CDE's web site, which meets the Americans with Disabilities Act (ADA) requirements, and public notices complied with the California open meeting law, The Bagley-Keene Act. The CDE had established an email account for input and public comment on the state plan. The email address is [statepln@cde.ca.gov](mailto:statepln@cde.ca.gov) and a CDE staff is assigned to replying to emails, and organizing the input, into designated state plan topics. The designated CDE website for California's CCDF State Plan is located at:

<https://www.cde.ca.gov/sp/cd/re/stateplan.asp>

d) Hearing site or method, including how geographic regions of the state or territory were addressed. The CDE web site contains federal, and state level resources, information and updates, it houses direct contact information for formal input and also includes all past opportunities for in person input sessions, with the related materials, updated pre-print information, and recordings. Based on stakeholder input to the CDE about allowing Californians across the state, including those with limited travel opportunities to attend sessions in the state's capital, the CDE began presenting virtually via remote satellite hosted by county offices of education across the state to allow for local input. A total of four remote satellite locations, Santa Clara County Office of Education, San Bernardino County Office of Education, Santa Barbara County Office of Education, and Fresno County Office of Education, were listed and hosted on May 15, 2018. The exact host

locations for each session is listed on the CDE's web site. Also, based on stakeholder input, the CDE has moved to a webinar format that is recorded, transcribed, meets ADA accessibility standards, and is housed on the same web site, for year-round access

e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.)

In accordance with EC, Section 8206.1, the CDE released the draft Plan for a 30-day comment period. The CDE posted the draft plan on the designated CDE web site for California's CCDF State Plan is located at:

<https://www.cde.ca.gov/sp/cd/re/ccdf201921information.asp>. The information and public hearing announcement was shared through the CDE e-mail listserv, which includes CDE contractors, providers, stakeholders, advocates, and members of the public.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? The CDE reviews the public testimony, e-mails, and correspondence to determine how and if the comment is addressed in the proposed CCDF State Plan, or if it warrants further investigation. All public comments received are documented and tracked for appropriate action. All input sessions and public hearings held have been posted and shared publically with stakeholders ensuring transparency in the development of California's State Plan.

**1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: <https://www.acf.hhs.gov/occ/resource/pi-2009-01>)**

a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed.

<https://www.cde.ca.gov/sp/cd/re/stateplan.asp>

b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.

Working with advisory committees.

**Describe:**

The CDE regularly facilitates and/or supports meetings of the following groups: SAC, SSPI Stakeholder Group, the Early Learning and Care workgroup, and the TCCAC - Region 11 Quality Counts California. At each meeting, time was allotted for input, as well as regular updates and communication about where input could be given via web site, e-mail or traditional mail, and fax.

**Working with child care resource and referral agencies.**

**Describe:**

The California R&R Network as well as several local R&R programs participated in all public hearings and topical input sessions.

**Providing translation in other languages.**

**Describe:**

N/A

**Sharing through social media (e.g., Twitter, Facebook, Instagram, email).**

**Describe:**

Shared through the CDE early learning and care e-mail listserv, which includes CDE contractors, providers, stakeholders, advocates, and members of the public.

**Providing notification to stakeholders (e.g., provider groups, parent groups).**

**Describe:**

Through the CDE early learning and care listserv, topical input sessions, public hearings, presentations at meetings and conferences posting information on the CDE web site. Additionally, the CDE informed and encouraged broad and diverse input from stakeholders at meetings and presentations to stakeholder groups, advocacy organizations and membership organizations.

**Other.**

**Describe:**

N/A

## 1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

Lead Agencies are required to describe how the state or territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the federal, state/territory, and local levels for children in the programs listed below. This includes programs for the benefit of Indian children, infants and toddlers, children with disabilities, children experiencing homelessness, and children in foster care (98.14(a)(1)).

### **1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(O); 98.12(a); 98.14(a)).**

This list includes agencies or programs required by law or rule, along with a list of optional partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services.

Include in the descriptions the goals of this coordination, such as:

- extending the day or year of services for families;
- smoothing transitions for children between programs or as they age into school;
- enhancing and aligning the quality of services for infants and toddlers through school-age children;
- linking comprehensive services to children in child care or school age settings; or
- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

Check the agencies or programs the Lead Agency will coordinate with and describe all that apply.

- (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns.

Describe the coordination goals and process:

The CDE coordinates with county LPCs dually appointed by the County Board of Supervisors and the Superintendent of the County Office of Education. The LPCs

bring all the local stakeholders together, including subsidized and non-subsidized early learning and care providers, employers, CWDs and human services agencies, LEAs, regional centers, colleges, F5CA, job training programs, and parent organizations to create local strategic priorities for early learning and care services for children and families. The goal of this coordination is for the CDE to make informed decisions that take into account the local needs.

(REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

Describe the coordination goals and process:

The State Advisory Council on Early Learning and Care (SAC) is a governor-appointed leadership body that ensures statewide collaboration among early childhood programs that will help to define future policy for children birth to kindergarten. The State Advisory Council (SAC) on Early Learning and Care will make recommendations on the future policy direction for early learning and related services for young children in California. Stakeholders in early learning and members of the public are invited to participate in the upcoming meetings of the SAC. In addition to any responsibilities assigned to the council by the Governor, the SAC collaborates as follows:

- (I) conduct a periodic statewide needs assessment concerning the quality and availability of early childhood education and development programs and services for children from birth to school entry, including an assessment of the availability of high-quality pre- kindergarten services for low-income children in the State;
- (II) identify opportunities for, and barriers to, collaboration and coordination among Federally-funded and State-funded child development, child care, and early childhood education programs and services, including collaboration and coordination among State agencies responsible for administering such programs;
- (III) develop recommendations for increasing the overall participation of children in existing Federal, State, and local child care and early childhood education programs, including outreach to underrepresented and special populations;
- (IV) develop recommendations regarding the establishment of a unified data collection system for public early childhood education and development programs and services throughout the State;

(V) develop recommendations regarding statewide professional development and career advancement plans for early childhood educators in the State;

(VI) assess the capacity and effectiveness of 2- and 4-year public and private institutions of higher education in the State toward supporting the development of early childhood educators, including the extent to which such institutions have in place articulation agreements, professional development and career advancement plans, and practice or internships for students to spend time in a Head Start or pre kindergarten program; and

(VII) make recommendations for improvements in State early learning standards and undertake efforts to develop high-quality comprehensive early learning standards, as appropriate.

[Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.](#)

[\(REQUIRED\) Indian tribe\(s\) and/or tribal organization\(s\), at the option of individual tribes.](#)

[Describe the coordination goals and process, including which tribe\(s\) was consulted:](#)

The CDE meets quarterly with tribal early childhood program administrators, leads and representatives, via the Tribal/State/Federal CCDF Roundtable meetings held as part of the TCCAC meetings. The CDE's goals of this coordination include enhancing and aligning quality of services, linking comprehensive services to children in early learning and care settings and examining program funding and eligibility requirements to expand access, which align directly with the goals of the TCCAC. Tribes invited to the TCCAC meetings include: Tolowa Dee-ni' Nation, Quartz Valley, Karuk, Berry Creek, Coyote Valley, Pinoleville, Hoopa Valley, Big Sandy, Redding Rancheria, Wiyot, Mechoopda, Hopland Tribe, Campo, Soboba, Quechan, Southern California Tribal Chairmen's Association, California Indian Manpower Consortium Inc., Scotts Valley, Susanville, Redwood Valley, North Fork, Bear River, Dry Creek Rancheria, Robinson Rancheria, Mooretown, Cloverdale Rancheria, Pit River Tribe, Yurok Tribe, Colusa, Bishop Paiute, Enterprise Rancheria, Quechan Tribe, Campo, Wiyot, Round Valley.

[N/A-There are no Indian tribes and/or tribal organizations in the State.](#)

- ☑ (REQUIRED) State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and and Part B, Section 619 for preschool).

Describe the coordination goals and process:

\*The Early Learning and Care Division (ELCD) is one of seven divisions in the CDE's Teaching, Learning, and Support Branch (TLSB). The other divisions include the Career and College Transition Division, the Expanded Learning Division, Curriculum Frameworks and Instructional Resources Division, the English Learner Support Division, Educator Excellence and Equity Division, and the Special Education Division (SED). Collaboration and coordination is recognized and supported as an integral part of the TLSB which meets on a weekly basis to share resources and information for all students in California. Web link: <https://www.cde.ca.gov/re/di/or/gacbranch.asp>. The SED is responsible for Part B of Individuals with Disabilities Education Act (IDEA) and coordinates with the ELCD on the development and use of the state child observational assessment, the Desired Results Developmental Profile, and on inclusive early learning and care issues. The CDE-SED also coordinates with the California Department of Developmental Services (CDDS) who is the lead agency for Part C. The CDE coordinates with the State Interagency Coordinating Council on Early Intervention (ICC), which advises CDDS regarding the California early intervention services system established under the federal early intervention program, Part C of the IDEA. The council is comprised of parents of children with disabilities, early intervention service providers, health care professionals, state agency representatives, and others interested in early intervention. Additionally, counties implement Help Me Grow (HMG) on other early identification systems. The QRIS rating matrix within QCC includes a developmental screening element and many local QCC then coordinate with HMG to ensure families are connected to referrals and services, as applicable. In 2014, the legislature authorized approximately 1,200 CSPP slots to be prioritized to serve children with exceptional needs. The ELCD and the SED collaborated to develop the request for a funding application and provide guidance to the field on inclusive early learning and care. The Budget Act of 2018 includes three-year funding to increase access to inclusive early learning care and education programs through the Inclusive Early Education Expansion Program (IEEEP). The SED and the ELCD are working collaboratively to develop and administer the program. Additionally, the CDE-ELCD and SED will consult with CDDS

and the ICC on early intervention to develop a grant program for the county offices of education to support IEEEP for the inclusion of children with exceptional needs including children with severe disabilities in early learning and care programs.

(REQUIRED) State/territory office/director for Head Start state collaboration.

Describe the coordination goals and process:

The California Head Start Collaboration Office (CHSSCO) and the CDE have shared responsibilities through federal law to coordinate and collaborate at the state level to provide information and resources to best serve California's most vulnerable populations. The CHSSCO is located within the ELCD Director's Office and shared goals and collaboration happens on a monthly or bi-weekly basis as needed. The following work as identified by the CHSSCO continues works to leverage the common efforts of the state agencies and the Head Start programs. These priorities include but are not limited to:

1. Partnering with state early learning and care systems including the Early Head Start-Child Care Partnership (EHS-CCP) Initiative. The CHSSCO works regularly with the CDE on providing feedback on state legislation, participates on workgroups and committees to provide information about Head Start regarding coordinated efforts and continued collaboration at the local level.
2. Continue to work with the State on data needs. Through ongoing meetings and updates, the CHSSCO works internally with the CDE Data team to discuss options for data collection and shares with the groups the needs of the Head Start field for those programs that have Head Start and State/federal funding streams. Although, the CDE's current data system does not have the capacity for data sharing across systems. This is part of the CDE's data visioning in partnership with other state and local agencies. While, data visioning is part of pending legislation, the CDE and F5CA have launched the first steps of this process and are collaborating with CDSS.
3. Participate and provide input to the expansion and access of a high quality workforce. California has a complex and diverse workforce and CDE is working on capturing the needs of the State through the Workforce Registry. The CHSSCO works with the CDE Administrator providing input, feedback and assistance on this ongoing long-range goal of providing a CA Workforce Registry that will be useful to all in the early learning and care field.
4. Ongoing collaboration with the State Quality Rating and Improvement Systems

(QRIS), Quality Counts California (QCC). As a long-standing partner with the QCC, the CHSSCO will continue to participate through a newly structured system. The CHSSCO participates in meetings and workgroups, identifies participants (Head Start Directors and others) to support the state system with local voices and provides feedback including success stories and areas of concern.

5. Participate and work towards a State school systems Kindergarten Entrance Assessment for continuity with Head Start as permissible. The CHSSCO provides information and feedback on local grantee specific transition issues concerns and updates regarding entry into Kindergarten.

Through these goals, we also continue to coordinate and collaborate to support alignment of CCDF and Head Start funded programs and other priorities as directed by the Regional Office. The work of the CHSSCO also focuses on work directed by the Regional Office that can change and be continuously updated. The work of the CHSSCO, in regards to Regional Priorities, include working with the DSS-CCLD, CDPH's Home Visiting Program and Oral Health Statewide Program, and the CDE's Homeless Education and Every Student Succeeds Act, link to the website:

<https://www.cde.ca.gov/sp/cd/re/chssco.asp>.

(REQUIRED) State agency responsible for public health, including the agency responsible for immunizations.

Describe the coordination goals and process:

The goal of the CDE's coordination with the CDPH is to create and maintain the linkage between early learning and care and health care. The state provides services for pregnant women and children through various programs such as: California Home Visiting Program, Covered California, Access for Infants and Mothers, and the Healthy Families Program. Together, these three programs cover children up to 267 percent of the federal poverty level, and pregnant women and their infants up to 400 percent of the federal poverty level.

The CDPH, the CDE, and the CDSS have worked to address the growing concern about the immunization of children. The link between health care and early learning and care is strengthened by the requirement that children be immunized at the appropriate age before being enrolled in early learning and care settings. The CDPH, the CDE, and the CDSS have worked to promulgate early learning and care and

school immunization laws, in order to assist programs in achieving higher immunization rates among children at these facilities. Senate Bill 277 (statute of 2015, chapter 35), which became effective as of January 2016, no longer permits new immunization exemptions based on personal beliefs for children in early learning and care and schools. The law still requires students to provide immunization records to their early learning and care facilities and schools and in turn, early learning and care facilities must continue to report to the CDPH the immunization status of all students at the existing checkpoints of early learning and care, kindergarten and 7th grade. The bill does include provisions regarding the rights of unimmunized children with family service plans and or individualized education plan. Additional details about this law may be found at: [www.shotsforschool.org](http://www.shotsforschool.org).

(REQUIRED) State/territory agency responsible for employment services/workforce development.

Describe the coordination goals and process:

\*California provides multi-pronged strategies to provide ongoing training and professional development to help teaching staff understand research and best practices to meet the developmental needs of children and improve the quality and stability of the early learning and care workforce. At this time, 103 of the 105 Community Colleges in California have agreed to participate in Curriculum Alignment Project (CAP), which has aligned 24 units of early childhood coursework. This includes articulation agreements with state universities. A number of the local child care and development planning councils (LPCs) are included in their regional workforce or economic development plans.

(REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK).

Describe the coordination goals and process:

In addition to being the CCDF Administrator, the CDE also administers the California State Preschool Program (CSPP). The CDE coordinates California's early learning and care subsidized programs across the continuum along with the CDSS, who coordinates CalWORKs Stage 1 child care as part of Temporary Assistance for Needy Families (TANF) and the CDE's Expanded Learning Division, who administers several after school care programs. In addition, to promoting school readiness, the CDE works to facilitate transitions from early learning and care to school, link quality care to later

school success, and align objectives and projects that support inclusive care and bilingual education. A further goal for coordination is to streamline and align funding sources to ensure all children receive quality pre-kindergarten services as part of the continuum from quality early learning and care. The Web link:

<https://www.cde.ca.gov/re/di/or/gacdbbranch.asp>.

Additionally, the CDE supports Transitional Kindergarten programs, the first year of a two-year kindergarten program offered to age eligible four-year-olds. The CDE is working to coordinate the alignment of CSPP offered to subsidized families and Transitional Kindergarten to allow school districts to consolidate and provide quality pre-K services to all age eligible children.

(REQUIRED) State/territory agency responsible for child care licensing.

Describe the coordination goals and process:

The CDE coordinates extensively with the CDSS-CCLD regarding early learning and care services to children and families. In order to best coordinate services and align goals regular meetings at all levels of leadership have been established. The CDE and the CDSS-CCLD have developed, and continue to revisit on a regular basis an MOU. The MOU includes an agreement to continued partnership and collaboration, information sharing, efficiencies in administering CCDF requirements at the State Agency level and locally with regional offices, including health and safety requirements and emergency preparedness. The goal of this coordination is to insure that agency requirements are aligned and that the two agencies are working towards an integrated system of early learning and care. Particular attention is being paid to coordination in times of major emergencies and developing an articulated notification protocol.

(REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs.

Describe the coordination goals and process:

The CDE-Nutrition Services Division (NSD) is responsible for the CACFP. The ELCD and NSD work together to promote and articulate CACFP education for early learning and care programs and providers. The goal of this coordination is to ensure all providers have nutritional information and or subsidies in order to insure children are provided nutritious snack and meals and that parents are educated and have access

to adequate nutrition. Many CDE subsidized providers utilize the CACFP. Families need to be income eligible for these services, but families do not need to apply for CACFP to be provided with information about healthy nutrition. California Code of Regulations Title 5 ( 5CCR) centers (programs under contract with the CDE to provide subsidized early learning and care) must abide by the nutritional meal and snack requirements of the CACFP. Many R&Rs and Alternative Payment Programs provide a forum for CACFP to provide an introduction to voluntary CACFP participation. They also serve as CACFP sponsors for early learning and care providers providing services through a voucher. The ELCD shares NASD's CACFP information via its listserv and at various stakeholder meetings and presentations.

- ☑ (REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons.

Describe the coordination goals and process:

The CDE houses the McKinney-Vento state coordinator, who works with the early learning and care to continue the collaboration and coordination on the homeless education program. Within the CDE, the CHSSCO and the ELCD have shared responsibilities through federal law to coordinate and collaborate at the state level to provide information and resources to best serve California's most vulnerable population, including children and families who are homeless. The outcome of this CDE internal partnership is to foster and encourage local connections and outreach to homeless children and families by providing education and resources to the field. The CDE meets regularly with CDE's federal McKinney-Vento liaison to coordinate and align policies across the continuum and, as appropriate, with the CHSSCO. In addition, most subsidized early learning and care programs administered by the CDE, including those supported by the CCDF; follow the eligibility and need criteria described in EC, Section 8263 which includes access for homeless children. The CDE provides resources and training on the definition of homelessness (according to McKinney-Vento), identification, and services to homeless children and their families.

- ☑ (REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program.

Describe the coordination goals and process:

The CDE collaborates with the CDSS Bureau of Family Engagement and

Empowerment and County Welfare Directors Association (CWDA) to coordinate and facilitate the seamless transition of CalWorks Stage 1 (TANF) to the CDE-administered CalWorks Stages 2 and 3 programs. The CDE and CDSS coordinate and share pertinent eligibility data to ensure that TANF families maintain continuity of care and experience no break in services at the time of transfer. Additionally, local R&Rs and APP collaborate with CWDs, in order to coordinate services at the local level. The CDE and the CDSS meet regularly to identify and address issues regarding the transfer process and jointly facilitate workgroups and stakeholder engagement.

(REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program.

Describe the coordination goals and process:

The CDE works closely with the CDPH to create and maintain the linkage between early learning and care and health care. The state provides services for pregnant women and children through various programs: Covered California, Access for Infants and Mothers, and the Healthy Families Program. Together, these three programs cover children up to 267 percent of the federal poverty level, and pregnant women and their infants up to 400 percent of the federal poverty level. Local R&Rs, APPs, and CDE-contracted providers assist families in accessing Medicaid (MediCal), as well as accessing subsidized health care coverage via the Covered California program. A letter from the State Superintendent of Public Instruction, Tom Torlakson about Covered California can be found at: <https://www.cde.ca.gov/nr/el/le/yr15ltr0810.asp>. The School Educator Partner Toolkit for schools along with other information for schools can be found online at: <http://hbex.coveredca.com/toolkit/school-educator/>.

(REQUIRED) State/territory agency responsible for mental health

Describe the coordination goals and process:

The California Department of Health Care Services (CDHCS) administers a number of programs for children and youth related to mental health. The programs' services are directly provided at the local level by counties and their contract providers. The goal of CDE's coordination with the CDHCS is to ensure that all of the state's R&Rs, 5CCR direct service contractors, and APP providers are aware of the services provided at the county level, particularly Early and Periodic Screening Diagnosis and Treatment.

- (REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development.

Describe the coordination goals and process:

The CDE meets quarterly with staff and board members from the R&R Network to address coordination and goals. Meetings include the CDSS-CCLD to ensure improved coordination, shared goals, and alignment across all agencies.

Representatives from various organizations participate in the Child Care Health and Safety Regulatory workgroup that meets quarterly at California Emergency Medical Services Authority (EMSA). Relevant consumer education topics and training opportunities are brought to the State and local level for dissemination to staff, providers and families in the early learning and care community via newsletters training and technical assistance by local R&Rs. Oversight is provided by the CDE to R&R programs related to their function as providers of Consumer Education. The CDE co-leads with F5CA the state ECE Professional Learning Team to coordinate ECE training and professional development. As part of their California's Transforming the Workforce Birth-Eight goals, this team is working on a career lattice for approval by the SAC.

- (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable).

Describe the coordination goals and process:

In accordance with state EC. Section 8263.4 the preferred placement for children who are 11 or 12 years of age, and eligible for subsidized services, will be before or after school programs. The ELCD works with Expanded Learning Division (ELD) to support and coordinate access to these programs. Both the ELCD and the ELD are housed with the CDE's TLSB to coordinate together to assess the needs of children of school age outside of the typical school day and school year, as well as participate in joint technical assistance opportunities.

- (REQUIRED) Agency responsible for emergency management and response.

Describe the coordination goals and process:

The CDE works closely with the California Emergency Medical Services Authority (EMSA) regarding the curriculum and quality of preventive health and safety training

for child care providers. The CDE provides reimbursement funding to R&Rs for both licensed and unlicensed early learning and care providers to assist with costs of pediatric first aid, pediatric cardio pulmonary resuscitation, and EMSA-approved preventive health practices training. California Health and Safety Training (CHST) R&R project (CCDF quality-funded) coordinators are required to provide technical assistance locally to connect providers and families with local disaster plan resources and training. EMSA has assisted in the collaborative work with the CDE and the CDSS-CCLD as participants on the state's ongoing Health and Safety Multidisciplinary Regulatory Workgroup committee. Partnership has been instrumental in supporting the work of this group in the published California Child Care Disaster Plan, which assists local trainers to train early learning and care providers on disaster preparedness as well as recovery and to assist with connecting to local Office of Emergency Services (OES) local procedures. OES continues to provide the necessary guidance to develop and revise the plan, which serves as an OES annex to the governor's state disaster plan.

In response to a shortage of EMSA approved preventive health and safety training opportunities, the CDE provides CCDF-quality grants to seventeen California Preventive Health and Safety Practices (CPHSP) local hubs in order to provide no cost multilingual training statewide. University of California, San Francisco School of Nursing is under contract with the CDE and provides R&R training of trainer certification and technical assistance to both R&R training staff as well as other local collaborative partners in order to provide ready access to this state mandated training as well as technical assistance for providing resources to support families experiencing homelessness due to disaster. Local provider training will also include preventive topics based on input from local early learning and care based on the CDSS-CCLD reported citations in that locale as well as training on existing local risk factors. Local (CPHSP) hubs staff are also charged with serving as a resource for connection to the local (OES) preparedness and disaster recovery as it related to early learning and care.

*The following are examples of optional partners a state might coordinate with to provide services. Check all that apply.*

[State/territory/local agencies with Early Head Start - Child Care Partnership grants.](#)

[Describe](#)

The CDE participates in regular coordination and partnership meetings with the CA Head Start Association including quarterly meetings with their board members including grantees with EHS - CCP grants. Additionally, the CDE is a grantee of the EHS-CCP. The CDE-ELCD's Administrators, responsible for multiple federal and state funding streams supporting early learning and care across California, meet weekly to address opportunities for alignment and improved coordination. The CDE's EHS-CCP grant expands the number of high-quality slots for 236 at-risk infants and toddlers in six rural northern California counties. Through this, it: (1) provides financial support to implement the comprehensive services required to reach goals outlined in California's Early Learning Plan (CELP); (2) builds local capacity by including Partnering Agencies that did not participate in the Race to the Top - Early Learning Challenge grant (RTT-ELC); and (3) bridges the current resource gap needed to reach the high level of quality as defined in QCC and its Rating Matrix. Children receive comprehensive education, health, development, and family support services that meet or exceed EHS standards.

Services are available for low-income children birth to 36 months in center-based settings and 48 months in family child care settings. Grantee partners develop unique locally driven models to ensure parity of service throughout their program, including children who are not directly funded through EHS-CC partnership funds. Finally, early learning and care providers gain access to Early Head Start training and technical assistance and can be targeted to community providers. Grantees will work with teachers and families to review curriculum and assessment tools that are most appropriate for their settings.

[State/territory institutions for higher education, including community colleges](#)

[Describe](#)

The CDE meets quarterly with California Community College Early Childhood Education faculty and participates on Commission on Teacher Credentialing workgroups associated with early learning workforce requirements. The ELCD also

co-leads a Transforming the Workforce Birth to Eight (TWB8) and an ECE Professional Learning Team that includes community college and four year public and private university representatives. CCDF quality funds are used to support the Faculty Initiative.

- Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services.

Describe

F5CA provides joint leadership for QCC and other initiatives that impact early learning and care, e.g., Transforming the Workforce Birth to Age Eight.

- State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.

Describe

California Department of Public Health: The CDE continues to coordinate and collaborate to support alignment of CCDF and Head Start funded programs and other priorities as directed by the Regional Office. The work of the CHSSCO also focuses on work directed by the Regional Office that can change and be continuously updated. The work of the CHSSCO, in regards to Regional Priorities, include working with the DSS-CCLD, CDPH's Home Visiting Program and Oral Health Statewide Program, and the CDE's Homeless Education and Every Student Succeeds Act, link to the website: <https://www.cde.ca.gov/sp/cd/re/chssco.asp>.

- Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.

Describe

California Department of Public Health: The California Department of Health Care Services (CDHCS) administers a number of programs for children and youth related to mental health. The programs' services are directly provided at the local level by counties and their contract providers. The goal of CDE's coordination with the CDHCS is to ensure that all of the state's R&Rs, 5CCRdirect service contractors, and APP providers are aware of the services provided at the county level, particularly Early and

Periodic Screening Diagnosis and Treatment.

[State/territory agency responsible for child welfare.](#)

[Describe](#)

The CDE, the CDSS CCLD, the CDSS Welfare to Work Division, and the R&R work collaboratively to make this information available to families. The CDE contracts with local R&Rs to keep current information on the availability of child care services in their respective service area.

The CDE collaborates with the CDSS Bureau of Family Engagement and Empowerment and County Welfare Directors Association (CWDA) to coordinate and facilitate the seamless transition of CalWorks Stage 1 (TANF) to the CDE-administered CalWorks Stages 2 and 3 programs. The CDE and CDSS coordinate and share pertinent eligibility data to ensure that TANF families maintain continuity of care and experience no break in services at the time of transfer.

[State/territory liaison for military child care programs.](#)

[Describe](#)

N/A

[Provider groups or associations.](#)

[Describe](#)

Including, but not limited to, California Child Development Administrators Association (CCDAA), California Alternative Payment Program Association (CAPPA), Service Employees International Union (SEIU), American Federation of State, County and Municipal Employees (AFSCME), the California Head Start Association, the California Child Care Resource & Referral Network (R&R), and the Northern Directors Group .

[Parent groups or organizations.](#)

[Describe](#)

Parent Voices, and the Child Care Law Center: The CDE coordinates with the State

Superintendent of Public Instruction (SSPI) Stakeholder Group on Early Learning and Care (SSPI Stakeholder Group). The group is comprised of public and private agencies and association's providing services to children and families in California, including subsidized and non-subsidized early learning and care provider associations, the California Head Start Association, the California Department of Social Services (CDSS), LEAs, regional centers, colleges, First 5 California (F5CA), job training programs, special education agencies, and parent and provider organizations.

Other.

Describe

N/A

## 1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds

### Optional Use of Combined Funds:

States and territories have the option to combine CCDF funds with any program identified as required in 1.4.1. These programs include those operating at the federal, state, and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, children experiencing homelessness, and children in foster care (658E(c)(2)(O)(ii)). Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams to expand and/or enhance services for infants, toddlers, preschoolers and school-age children and families to allow for the delivery of comprehensive quality care that meets the needs of children and families. For example, state/territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a state/territory may allow a county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start Program Performance Standards or state/territory prekindergarten requirements in addition to state/territory child care licensing requirements.

As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start ' Child Care Partnerships:

[https://www.acf.hhs.gov/sites/default/files/occ/acf\\_im\\_ohs\\_15\\_03.pdf](https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf)  
).

### **1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any required early childhood program (98.14(a)(3))?**

No (If no, skip to question 1.5.2)

Yes. If yes, describe at a minimum:

a) How you define "combine"

The CDE to EC, disburses all child development funds for direct services through a contracting process. Some contracts are funded with a combination of CCDF and State General Fund, (Proposition 98 education funds and non-98 funds).

b) Which funds you will combine

Many providers utilize both Head Start and state subsidy funds. California is home to approximately 3 million children aged five years or younger. The CDE administers subsidized early learning and care and development services that currently serves children birth through 13 years of age, and the only way to meet the needs of all those children is by combining and leveraging funds. California's efforts play out against a larger backdrop that includes substantial federal, state, and local funding. The CDE combines CCDF with both State Proposition 98 and non-proposition 98 funding. Additionally, The CDE is a recipient of an Early Head Start-Child Care Partnership Grant to provide direct services for children 0 through three in counties in northern California. These partnerships utilize CCDF and state general non-proposition 98 funding to expand and enhances services.

c) Your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations

The CDE utilizes all fund sources to maximize the availability of quality services available to provide services for as many eligible children as possible. In California, at least three-quarters of preschool-age children and just under half of infants and toddlers are already in some form of out-of-home care, Jennifer Anthony and Susan Muenchow, California Infant/Toddler Early Learning and Care Needs Assessment: A Policy Brief: Sacramento, CA: American Institutes for Research as a partner in the California Comprehensive Center at WestEd, 2010). While the CDE maximizes available resources to support programs for working families, smooth transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in early learning and care and developing the supply of early learning and care for vulnerable populations, California would need to receive additional funds in order to serve all eligible children and ensure the quality level has the components associated with improved child learning and well-being.

d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?

At the State level, the CDE disburses funds to support subsidized early learning and care through contracts. The contracts support both Direct Service Agencies and APP Agencies. The contracts combine CCDF, State General Fund, and Temporary Assistance to Needy Families in order to reach more eligible children and families.

e) How are the funds tracked and method of oversight

The CDE has systems, processes, and multiple offices in place for budgeting, accounting, monitoring and auditing to accommodate the requirements associated with this grant. The CDE Accounting Office prepares and submits the quarterly Administration for Children and Families (ACF)-696 to report outlays and un-liquidated obligations in accordance with the federal reporting requirements established for the Mandatory, Matching, and Discretionary grants. Accounting Office staff prepare and reconcile various worksheets using data from the State of California's and Report

**1.5.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF matching and MOE requirements described in 98.55(e) and 98.55(h)?**

Note:

The Lead Agency must check at least public and/or private funds as matching, even if preK funds also will be used.

Use of PreK for Maintenance of Effort: The CCDF final rule clarifies that public preK funds may also serve as maintenance-of-effort funds as long as the state/territory can describe how it will coordinate preK and child care services to expand the availability of child care while using public preK funds as no more than 20 percent of the state's or territory's maintenance of effort or 30 percent of its matching funds in a single fiscal year (FY) (98.55(h)). If expenditures for preK services are used to meet the maintenance-of-effort requirement, the state/territory must certify that it has not reduced its level of effort in full-day/full-year child care services (98.55(h)(1); 98.15(a)(6)).

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

- N/A - The territory is not required to meet CCDF matching and MOE requirements
- Public funds are used 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 the source of funds:

State General Funds

-- If known, identify the estimated amount of public funds that the Lead Agency will receive: \$ 208 Million

Private donated funds are used 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 name, address, contact, and type of entities designated to receive private donated funds:

N/A

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

State expenditures for preK programs are used to meet the CCDF matching funds requirement.

If checked, provide the estimated percentage of the matching fund requirement that will be met with preK expenditures (not to exceed 30 percent):

-- If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services:

N/A

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: \$

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

N/A

State expenditures for preK programs are used to meet the CCDF maintenance-of-effort 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 98.55(h)(1) and 98.15(6).

No

Yes

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

N/A

-- Estimated percentage of the MOE Fund requirement that will be met with preK expenditures (not to exceed 20 percent):

-- If the percentage is more than 10 percent of the MOE requirement, describe how the State will coordinate its preK and child care services to expand the availability of child care:

N/A

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: \$

## 1.6 Public-Private Partnerships

Lead Agencies are required to describe how they encourage public-private partnerships among other public agencies, tribal organizations, private entities, faith-based organizations, businesses or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) (658E(c)(2)(P)). ACF expects these types of partnerships to leverage public and private resources to further the goals of the CCDBG Act. Lead Agencies are required to demonstrate how they encourage public-private partnerships to leverage existing child care and early education service-delivery systems and to increase the supply and quality of child care services for children younger than age 13, for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

**1.6.1 Identify and describe the entities with which and the levels at which the state/territory is partnering (level-state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)).**

The CDE works closely with the California Emergency Medical Services Authority (EMSA or Authority) regarding training early learning and care providers in pediatric preventive health

and safety. The CDE provides funding to early learning and care providers for health and safety training that is EMSA-approved. In order for California to meet or exceed the reauthorizations statutory requirements for health and safety training, EMSA has assisted in the collaborative work between themselves, the CDE and the CDSS, CCLD participants on the state's Health and Safety Regulatory Workgroup committee. EMSA's partnership has been instrumental in supporting the work of the group developing the California Child Care Disaster plan document, which is utilized for collaboration with California Office of Emergency Services (OES) and training of early learning and care providers locally.

The CDE has established an ongoing relationship with F5CA. The CDE shares in the vision with F5CA to fund programs that educate parents, grandparents, caregivers, and teachers about the critical role that they play during a child's first five years. The CDE is a partner of F5CA in the Talk. Read. Sing. messaging statewide and a co-lead on the California Quality Rating and Improvement System state support team. The CDE and F5CA are co-leads of the CA TWB8, as well as QCC.

The CDE works closely with the CDPH to create and maintain the linkage between early learning and care and health care. The state provides services for pregnant women and children through various programs: Covered California, Access for Infants and Mothers, and the Healthy Families Program. Together, these three programs cover children up to 267 percent of the federal poverty level, and pregnant women and their infants up to 400 percent of the federal poverty level.

The CDE partners with the CDSS to co-facilitate the early learning and care workgroup addressing higher efficiencies and reducing administrative burdens on early learning and care programs including CalWORKs Stages 1-3 (TANF child care), CCDF subsidized early learning and care, and the CSPP.

The CDE and the CCDF tribal grantees through the TCCAC established a working partnership to facilitate and consult on early childhood issues and the delivery of services to all tribal children and families in the State. The CDE and the TCCAC solidified this commitment to the collaboration with a Memorandum of Understanding (MOU). The MOU stands to memorialize the relationship between the CDE and Tribal CCDF grantee representatives to continue to work together to meet the requirements of the CCDBG Act through common goals. The CDE and the tribes released a joint announcement recognizing

this partnership as a model for local educational and health and safety agencies and to document and memorialize this monumental moment. The partnership works to promote the following:

- 1) Increase and expand access to information about early learning and care as well as identify available training and technical assistance on these topics;
- 2) Actively promote early learning and care and identification of ways to engage children and families in the education system;
- 3) Identify opportunities for funding and explore ways to promote and leverage existing resources;
- 4) Promote access to products and activities of the CDE;
- 5) Support and promote their participation in the QCC Consortia;
- 6) Include representation TCCAC Co-Chairs in the QCC state-level meetings as well as in specific workgroups (e.g., Family Engagement);
- 7) Promote culturally proficient tribal outreach and engagement strategies at the local level.

The CDE shares in the visionary goals as joint entities to: First, understand the values regarding Tribal Child Care partnerships when looking at early learning and care and culturally appropriate policy formation. Secondly, Identify benefits, barriers, challenges, and partnerships through effective strategies for respectful partnerships with Tribal Child Care and culturally appropriate programmatic and policy-related efforts at community, state, and national level. The partnership and collaboration between the state and the TCCAC tribal organization was nationally recognized in November 2017 by the National Indian Child Care Association (NICCA). A

Additionally, the CDE and the TCCAC recently were awarded through a nationally competitive process the first phase of a Project HOPE grant focusing on preventing social adversities in early childhood to promote child well-being through access and reduction of disparities. Project Hope stands for Harnessing Opportunity for Positive, Equitable Early Childhood Development and is funded by the Robert Wood Johnson Foundation in partnership with Boston Medical Center/Vital Village and Nemours, the BUILD Initiative and Nemours Children's Health System. The goals of this grant project are to use peer, state and community mentorship and technical assistance to increase state and community capacity to address concentrated poverty, institutional and structural racism, and other aspects of childhood adversity. A further goal is to improve the ability of states and local communities to

work toward shared interests and goals through feedback loops that include data and stories to monitor impact and inform community and state policy, regulation, program, and practice. In California, the Project Hope leadership team of the CDE and TCCAC co-chairs will focus on addressing inequities in the integration of systems of governance and delivery of resources. In particular, the TCCAC developed its own Quality Improvement System to address tribal communities' needs and the state has a QRIS. Through Project Hope, the CDE and TCCAC will work toward better alignment of policies, coordination and service delivery between state and tribal partners for the benefit of young children and their families in the tribal populations of our state.

## 1.7 Coordination With Local or Regional Child Care Resource and Referral Systems

Lead Agencies may use CCDF funds to establish or support a system of local or regional child care resource and referral (CCR&R) organizations that is coordinated, to the extent determined by the state/territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (such as a statewide CCR&R network) (658E(c)(3)(B)(iii); 98.52).

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Section 619 and Part C of the Individuals with Disabilities Education Act;

- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

Nothing in the statute or rule prohibits States from using CCR&R agencies to conduct or provide additional services beyond those required by statute or rule.

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, what services are provided and how it is structured and use section 7.6.1 to address the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

### 1.7.1 Does the Lead Agency fund a system of local or regional CCR&R organizations?

No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.

Yes. The state/territory funds a CCR&R system. If yes, describe the following:

a) What services are provided through the CCR&R organization?

California *EC*, Section 8212, R&R agencies are required to provide the following:

i. Parents: Identification of the full range of existing early learning and care services through information provided by all relevant public and private agencies in the areas of service, and the development of a resource file of those services which shall be maintained and updated at least quarterly. These services shall include, but not be limited to, family day care homes, public and private day care programs, full-time and part-time programs, and infant, preschool, and extended care programs. The resource file shall include, but not be limited to, the following information:

a. Type of program

b. Hours of services

c. Ages of children served

- d. Fees and eligibility for services.
- e. Significant program information.

1. Parents are given advice on questions to ask their families' potential early learning and care providers and what should be considered as indicators of quality early learning and care services.

2. Parents may be given written consumer education materials or receive an opportunity to view a video regarding the selection of an early learning and care providers.

3. Parents are also advised regarding the types of subsidized early learning and care and development programs for which their families may be eligible and ways to access those programs.

4. R&R program services are available to all families regardless of the family's income or need for early learning and care.

5. These can be found at <http://www.cde.ca.gov/fg/aa/cd/ftc2014.asp>. Supply and demand data is collected quarterly and posted on the CDE web site at <http://www.cde.ca.gov/sp/cd/re/ccannualreports.asp>.

ii. Providers: The R&R programs make referrals to licensed early learning and care facilities and to unlicensed facilities if there is no requirement that the facility be licensed. The referral process must afford parents maximum access to all referral information, including telephone referrals to be made available for at least 30 hours per week as part of a full week of operation. Every effort will be made to reach all parents within the defined geographic area, including, but not limited to, any of the following:

a. Toll-free telephone lines

b. office space convenient to parents and providers

c. Referrals are provided in languages, which are spoken in the community; each R&R program shall publicize its services through all available media sources, agencies, and other appropriate methods. The R&R programs must notify any person requesting child care referral of their right to view the licensing information including to access to public files pertaining to the facility that are maintained by the CDSS, CCLD; and of the requirement for a licensed child day care facility to post this information at the facility, pursuant to California *Health and Safety Code* ( *H&SC*), Section 1596.859.

iii. General Public: Maintenance of ongoing documentation of requests for service tabulated through the internal referral process. The following documentation of requests for service shall be maintained by all R&R programs:

- a. Number of calls and contacts to the child care information and referral program or component
- b. Ages of children served
- c. Time category of early learning and care request for each child
- d. Special time category, such as nights, weekends, and swing shift
- e. Reason that the early learning and care is needed. This information shall be maintained in a manner that is easily accessible for dissemination purposes.

iv. California Resource and Referral Program (CRRP) Funding Terms and Conditions (found at: <https://www.cde.ca.gov/fg/aa/cd/ftc2017.asp>) contain language requiring the above activities:

- a. R&R organizations serve all 58 counties in California and provide information and technical assistance to parents using license-exempt providers and to license-exempt individuals on the TrustLine Registry background check program.
- b. Parents are given advice on questions to ask their families' potential early learning and care providers and what should be considered as indicators of quality early learning and care services.
- c. Parents may be given written consumer education materials or receive an opportunity to view a video regarding the selection of an early learning and care provider.
- d. Parents are also advised regarding the types of subsidized early learning and care and development programs for which their families may be eligible and ways to access those programs.
- e. R&R program services are available to all families regardless of the family's income or need for early learning and care.

b) How are CCR&R services organized, include how many agencies, if there is a statewide network and if the system is coordinated?

R&R services are organized under contract with the CDE. The CDE contracts with 56

R&R organizations across the 58 counties in California to provide R&R services and training to parents/families and the array of early learning and care providers. The California Child Care R&R network is a membership organization that provides support and coordination; all CA R&Rs are members. The CDE also holds a contract with R&R to provide train the trainer services for local staff working to build quality and capacity locally, as well as a contract to support the informational 1-800 Child Care Consumer Education toll free line. The R&R also assists with the administration of the state's background checks through TrustLine.

## 1.8 Disaster Preparedness and Response Plan

Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children'including the need for safe child care, before, during, and after a state of emergency declared by the Governor or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122)'through a Statewide Disaster Plan that, for a State, is developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

### **1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body:**

The CDE has engaged in collaborative efforts with all of the above mentioned state entities in its work affiliated with the California Emergency Medical Services Authority (EMSA)'s California Health and Safety Workgroup and its Disaster Planning subgroup. Serving as an annex to the official State of California Emergency Plan, the CDE completed the California Child Care Disaster Preparedness Plan 2016 (Disaster Plan) and posted it for use on June 30, 2016. Several other state agencies and stakeholder groups were key partners with the

CDE regarding the guidance and development of the Plan including the California State Office of Emergency Services (OES) and the EMSA. The Disaster Plan was developed in partnership with the School of Nursing, University of California San Francisco, using funding from the CCDF Quality set-aside. The CDE currently acts upon reports of disaster affecting its contractors by making regional contact and assessing potential need as well as collaborating with the CDSS-CCLD as appropriate for response and recovery including assistance with available fiscal resources. Additionally, the CDE coordinates with the OES on the emergency response for children on school sites. Future work by the CDE will result in articulation of a joint written Disaster Plan that supports each state agency roles and their current statutory requirements with a desired outcome of assuring that early learning and care providers, emergency responders, and community members receive the appropriate supports necessary to continue to both provide and access safe early learning and care before, during, and after a state of emergency is declared by the Governor. The CDE has secured a facilitator to continue the work and work with the CDE on state coordination and identification of designees who will in turn describe roles and responsibilities. This work will inform the development of mapping to include coordination of all efforts to support a statewide collaborative Disaster Plan as described.

**1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency's guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster:**

The CDE initiates technical assistance via email and other methods as appropriate to affected areas. This guidance assists providers to continue to provide services, receive resources, and receive subsidy while providing quality services in collaboration with CDSS/CCLD technical assistance regarding legal operation. These guidelines and all the required information for providers, as well as links to the state partners are contained in the statewide child care disaster plan. The continuation of subsidized early learning and care services are determined locally via coordination of local planning councils, R&R programs and other coordination efforts with the local emergency management system. Temporary services and supports for subsidized early learning and care services are coordinated through local contracting agencies. To help contracting agencies provide against a loss of

funds due to emergency circumstances that are beyond their control, the Lead Agency may authorize reduced days of operation or attendance due to emergency conditions which are considered on a case by case basis. The governing board of contracting agencies must adopt a resolution that clearly and fully describes the nature of the emergency condition as well as the specific effect on program operations and submit the request to the Field Services Office (FSO) review and approval. This request is reviewed by both the FSO with information provided by California Department of Nutrition Fiscal Services (CDNFS) to determine the amount of reimbursement for actual program expenses incurred during the period of the emergency, or closure and inform recovery efforts. These guidelines and all the required information for providers as well as links to the state partners are contained in the statewide child care disaster plan.

**1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services:**

The Lead Agency has an internal communication and collaboration flow chart to ensure technical assistance for responses and support are coordinated and made available to impacted communities. These resources may include: mitigation, preparedness, response and recovery. FSO regional staff work in tandem with CCLD to assess need and provide technical assistance and resources as needed to local agencies impacted by the disaster or emergency. Staff teams may visit the affected community in partnership with other control agencies when it is deemed appropriate or necessary. The Lead Agency recognizes that local communities already have systems in place and is in communication with local entities to help ensure that post-disaster resources are working and provides technical assistance and support where needed and required.

**1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place-evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions:**

Licensed providers that receive CCDF funds are required to abide by basic CDSS California H&SC requirements including these procedures. Compliance with Title 22 (Licensing) is required for CDE-contracted 5CCR licensed early learning and care providers. All providers receiving CCDF funds will be required to participate in and complete approved training based in the California Child Care Disaster Preparedness Plan. The California Child Care Disaster Plan (<https://cchp.ucsf.edu/content/disaster-preparedness>) includes all CCDBG required procedures. Regulatory changes will need take place to support this training requirement.

**1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers-emergency preparedness training and practice drills as required in 98.41(a)(1)(vii):**

Every California R&R Program in each of the 58 counties in the state of California has access to one of the 17 California Preventive Health and Safety Practices regional training and technical assistance hubs providing California Emergency Services Authority certified training and technical assistance. This includes training on implementation utilization of the California Child Care Disaster Plan.

**1.8.6 Provide the link to the website where the statewide child care disaster plan is available:**

<http://cchp.ucsf.edu/sites/cchp.ucsf.edu/files/CA-ChildCare-Disaster-Plan.pdf>

## 2 Promote Family Engagement through Outreach and Consumer Education

Lead Agencies are required to support the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A key purpose of the CCDBG Act is to 'promote involvement by parents and family members in the development of their children in child care settings' (658A(b)). Lead Agencies have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care consumer education websites.

The target audience for the consumer education information includes three groups: parents receiving CCDF assistance, the general public, and when appropriate, child care providers. In this section, Lead Agencies will address how information is made available to families to assist them in accessing high-quality child care and how information is shared on other financial assistance programs or supports for which a family might be eligible. In addition, Lead Agencies will certify that information on developmental screenings is provided and will describe how research and best practices concerning children's development, including their social-emotional development, is shared.

In this section, Lead Agencies will delineate the consumer and provider education information related to child care, as well as other services, including developmental screenings, that is made available to parents, providers, and the general public and the ways that it is made available. This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency and the manner in which it links to the national website and hotline. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

## 2.1 Outreach to Families With Limited English Proficiency and Persons With Disabilities

The Lead Agency is required to describe how it provides outreach and services to eligible families with limited English proficiency and persons with disabilities and to facilitate the participation of child care providers with limited English proficiency and disabilities in the CCDF program (98.16(dd)). Lead Agencies are required to develop policies and procedures to clearly communicate program information, such as requirements, consumer education information, and eligibility information, to families and child care providers of all backgrounds (81 FR 67456).

### **2.1.1 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families for whom English is not their first language. Check all that apply.**

- Application in other languages (application document, brochures, provider notices)
- Informational materials in non-English languages
- Website in non-English languages
- Lead Agency accepts applications at local community-based locations
- Bilingual caseworkers or translators available
- Bilingual outreach workers
- Partnerships with community-based organizations
- Other.

Describe:

N/A

### **2.1.2 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families with a person(s) with a disability. Check all that apply.**

- Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities

- Websites that are accessible (e.g. Section 508 of the Rehabilitation Act)
- Caseworkers with specialized training/experience in working with individuals with disabilities
- Ensuring accessibility of environments and activities for all children
- Partnerships with state and local programs and associations focused on disability-related topics and issues
- Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers
- Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
- Availability and/or access to specialized services (e.g. mental health, behavioral specialists, therapists) to address the needs of all children
- Other.

Describe:

N/A

## 2.2 Parental Complaint Process

The Lead Agency must certify that the state/territory maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request (658E(c)(2)(C); 98.15(b)(3)). Lead Agencies must also provide a detailed description of the hotline or similar reporting process for parents to submit complaints about child care providers; the process for substantiating complaints; the manner in which the Lead Agency maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request (98.16; 98.32).

### **2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process:**

For licensed providers in California, the Central Complaint and Information Bureau, an office of the CDSS, Community Care Licensing Division (CCLD), is a centralized, statewide hotline available to anyone by calling 1-844-LET-US-NO (538-8776) or by emailing LetUsNo@dss.ca.gov. The hotline's call center intakes complaints for licensed facilities and disseminates them to the appropriate licensing regional office for investigation and response.

The Central Complaint and Information Bureau will also answer facility licensing related inquiries. The Uniform Complaint Program (UCP) is used for complaints regarding license-exempt providers. Depending on the contracted agencies that are LEAs, UCP complaints are filed with the District Superintendent for community based contractors complaints are filed with the CDE-ELCD Appeals Unit. Contacts for programs and subjects covered under the UCP can be found on the UCP Contacts Web page <https://www.cde.ca.gov/re/cp/uc/ucpcontacts.asp>.

**2.2.2 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring:**

For all licensed child care providers in California (regardless of subsidy), the CDSS, Child Care Licensing Division has specified processes for screening, substantiating and responding to complaints. Upon receipt of a complaint, the CDSS conducts a preliminary review. The CDSS will conduct an onsite inspection within 10 calendar days after receiving the complaint, except only where the visit would adversely affect the licensing investigation or the investigation by other agencies including, but not limited to, law enforcement agencies. In either event, the complainant shall be promptly informed of the CDSS's proposed course of action. During an investigation, the CDSS has the authority to inspect, audit, and copy child or facility records, as well as the authority to interview children (including observing their physical condition, which could indicate child abuse, neglect or inappropriate placement) or interview staff without prior consent. For licensed child care facilities, a complaint that is "substantiated" means that the allegation is valid because the preponderance of the evidence standard has been met. For non-licensed providers, the CDE has a Uniform Complaint Process (UCP). All UCP complaints received by the CDE are logged and tracked on a database. Complaints pertaining to CCDF-funded programs are investigated, which includes interviews with complainant and the license-exempt voucher provider. Evidentiary documents are collected, reviewed, and a final determination on whether the allegations have merit or not is made. The final letter will include whether the CDE determined the agency to be compliant or non-compliant. If the agency is determined to be non-compliant, the CDE will notify complainants and the contractors in writing. The CDE direct-service contractor may also be required to submit a corrective action plan that will be monitored by

assigned consultant.

**2.2.3 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring:**

For all licensed child care providers in California (regardless of subsidy), the CDSS, Child Care Licensing Division has specified processes for screening, substantiating and responding to complaints. Upon receipt of a complaint, the CDSS conducts a preliminary review. The CDSS will conduct an onsite inspection within 10 calendar days after receiving the complaint, except only where the visit would adversely affect the licensing investigation or the investigation by other agencies including, but not limited to, law enforcement agencies. In either event, the complainant shall be promptly informed of the CDSS's proposed course of action. During an investigation, the CDSS has the authority to inspect, audit, and copy child or facility records, as well as the authority to interview children (including observing their physical condition, which could indicate child abuse, neglect or inappropriate placement) or interview staff without prior consent. For licensed child care facilities, a complaint that is "substantiated" means that the allegation is valid because the preponderance of the evidence standard has been met.

**2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints:**

For licensed child care providers, the CDSS, Child Care Licensing Program maintains records of substantiated complaints for at least the previous five years in hard copy and electronic formats. In programs operated by school districts, if a parent has a complaint regarding program operations not covered by licensing requirements, the parent must utilize the uniform complaint procedures established by the school district. Records of substantiated complaints are kept by the school district. UCP complaint records, including those regarding providers exempt from licensure, are maintained in a database maintained by the CDE.

### **2.2.5 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3:**

For licensed child care facilities, the CDSS, CCLD makes information about substantiated complaints (which may be made to the CDSS by anyone concerned, including parents) available to the public for at least the previous five years in the following formats:

- i. Online by visiting the CDSS, CCLD, Child Care Facility Search Website (CDSS Facility Search Website) or by downloading the CDSS Facility Search Mobile Application
- ii. Over-the-phone by calling to request a file review from the local licensing regional office
- iii. In-person by visiting the local licensing regional office

All information regarding UCP complaints can be requested through a PRA request.

### **2.2.6 Provide the citation to the Lead Agency's policy and process related to parental complaints:**

For licensed facilities see California H&SC Section 1596.853 and Section 1596.859. For license-exempt providers, see CA EC 8235.5 – UCP regarding HSC 1596.7925.

## **2.3 Consumer Education Website**

States and Territories are required to provide information to parents, the general public, and when applicable, child care providers through a State website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III)). The website must include information to assist families in understanding the policies and procedures for licensing child care providers. The website information must also include provider-specific information, monitoring and inspection reports for the provider, the quality of each provider (if such information is available for the provider),

and the availability of the provider (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To assist families with any additional questions, the website should provide contact information for local child care resource and referral organizations and any other agencies that can assist families in better understanding the information on the website.

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the link in 2.3.11. If the Lead Agency has not fully implemented the Consumer Education website elements identified in Section 2.3, then respond to question 2.3.12. Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved will require a CCDF Plan amendment.

### **2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible:**

The CDSS, Community Care Licensing Division (CCLD) Website includes resources organized for “Parents”, “Providers”, “How to become licensed” and “Public information”. The Child Care Licensing Website Home page also includes “Quick Links” to the most commonly sought information (e.g. Provider Information Notices, Forms, Laws and Regulations, Quarterly Updates, etc.) as well as access to 25 easy-to-watch child care videos that explain licensing topics relevant to families and licensed child care providers. The Website has icon buttons directly linking to the CDSS Facility Search Website and online payments for annual licensing fees. The CDSS Facility Search Website and Facility Search Mobile Application (which may be downloaded on phones and tablets for ease of navigation) displays searchable provider information categorized by facility type and is organized using easy-to-navigate tabs to show information summaries and reports.

The CDE has funded the CA R&R Network to develop a statewide early learning and care data collection and efficiency project that will eventually result in a consumer-friendly and accessible website with a feature providing a tailored referral named, My Child Care Plan. This plan will result in a referral specific to family need and link R&R provider databases Statewide. The CDE plans to have a fully functional consumer-friendly, easily accessible website functional by July 2020.

The CDE Website currently provides information to assist families with additional questions on our Resource and Referral County Listing webpage at:

<https://www.cde.ca.gov/sp/cd/re/ragencylist.asp>.

### **2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)):**

For licensed facilities, the CDSS Child Care Licensing Program Website supports Google translations (at the top right-side of each Webpage) which converts *Webpage text* so the Website may be navigated in over 90 different languages. In addition, the CDSS will provide language services over-the-phone to help clarify documents or provide translations for families that speak languages other than English. Though currently under construction, the statewide child care data collection website will be accessible in both English and Spanish.

### **2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities:**

For licensed providers, the CDSS is committed to accessibility. CDSS Websites have many features that are intended to make the experience of interacting with our website positive and productive for all users, including those with disabilities, including meeting “AA” compliance of the World Wide Web Consortium (W3C), Web Content Accessibility Guidelines 2.0; in addition, this site satisfies Section 508, Subpart B, Subsection 1194.22, Guidelines A-P of the Rehabilitation Act of 1973 as revised in 1998. The statewide early learning and care data collection website will be 508 compliant, ensuring full accessibility for persons with disabilities.

### 2.3.4 Lead Agency processes related to child care.

A required component of the consumer education website is a description of Lead Agency policies and procedures relating to child care (98.33(a) (1)). This information includes a description of how the state/territory licenses child care, a rationale for exempting providers from licensing requirements, the procedure for conducting monitoring and inspections of providers, and the policies and procedures related to criminal background checks.

a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6:

The CDSS, Child Care Licensing Program Website contains information on how California licenses child care providers: <https://www.cdss.ca.gov/inforesources/Child-Care-Licensing>. California H&SC, sections 1596.792 and 1596.793 provide the legislative rationale for exempting certain providers from licensing requirements. The CDSS, Child Care Licensing Program Webpage for "Do I Need A License" contains consumer-friendly resources including an easy-to-watch video "Understanding Licensed Care and License-exempt Care" and a one-page document "What Is Licensed-exempt Care" which outlines exemptions from licensing requirements for certain providers: <https://www.cdss.ca.gov/inforesources/Child-Care-Licensing/How-to-Become-Licensed/Do-I-Need-a-License>

b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2:

The CDSS Child Care Licensing Program Webpage for "Public Information and Resources" provides a written overview for licensing, compliance and enforcement. In addition, the Webpage has links to relevant information (e.g. laws and regulations) and an easy-to-watch video "An Overview of Community Care Licensing" at: <https://www.cdss.ca.gov/inforesources/Child-Care-Licensing/Public-Information-and-Resources>

c) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from

being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.11:

California H&SC sections 1596.60 - 1596.68 provides the requirements for criminal background checks for license-exempt providers. California H&SC, Section 1596.871 addresses fingerprint checks for personnel in licensed early learning and care facilities. The CDSS Caregiver Background Check Bureau Webpage for "Background Check Process" provides a list of Non-exemptible Crimes at: <https://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Background-Check-Process>

### 2.3.5 List of providers

The consumer education website must include a list of all licensed providers and, at the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.

a) Provide the website link to the searchable list of child care providers:

For licensed providers, the CDSS Facility Search Webpage for child care is at: <https://secure.dss.ca.gov/CareFacilitySearch/>

b) In addition to the licensed providers that are required to be included in your searchable list, which additional providers are included in the Lead Agency's searchable list of child care providers (please check all that apply):

- License-exempt center-based CCDF providers
- License-exempt family child care (FCC) CCDF providers
- License-exempt non-CCDF providers
- Relative CCDF child care providers
- Other.

Describe

The consumer education database in development, My Child Care Plan, will include

information on license-exempt CCDF centers and FCC providers. This site will include quality information, languages spoken, and seamlessly link the CDSS CCLD web site .

c) Identify what informational elements, if any, are available in the searchable results.

Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

#### Licensed Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

N/A

#### License-Exempt, non-CCDF Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

In California, license exempt providers are restricted to providing services to children from one family besides their own. We work with providers to facilitate them applying for child care licensure, however until they are licensed, other

families will be unable to access their services.

#### License-Exempt CCDF Center Based Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

N/A

#### License-Exempt CCDF Family Child Care

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

N/A

#### Relative CCDF Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training

- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

Relatives caring for a grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt. However, we provide training and supports to the entire continuum of early learning and care settings including the exempt providers.Â  
Â

Other.

Describe:

N/A

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

N/A

**2.3.6 Lead Agencies must also identify specific quality information on each child care provider for whom they have this information. The type of information provided is determined by the Lead Agency, and it should help families easily understand whether a provider offers services that meet Lead Agency-specific best practices and standards or a nationally recognized, research-based set of criteria. Provider-specific quality**

information must only be posted on the consumer website if it is available for the individual provider.

a) How does the Lead Agency determine quality ratings or other quality information to include on the website?

- Quality rating and improvement system
- National accreditation
- Enhanced licensing system
- Meeting Head Start/Early Head Start requirements
- Meeting prekindergarten quality requirements
- School-age standards, where applicable
- Other.

Describe

N/A

b) For what types of providers are quality ratings or other indicators of quality available?

- Licensed CCDF providers.

Describe the quality information:

Rating elements include Child Observation, Developmental and Health Screenings, Minimum Qualifications for Lead Teacher / Family Child Care Home Provider, Effective Teacher-Child Interactions, Ratios and Group Size, Program Environment, and Director Qualifications.

- Licensed non-CCDF providers.

Describe the quality information:

Rating elements include Child Observation, Developmental and Health Screenings, Minimum Qualifications for Lead Teacher / Family Child Care Home Provider, Effective Teacher-Child Interactions, Ratios and Group Size, Program Environment, and Director Qualifications.

Â

License-exempt center-based CCDF providers.

Describe the quality information:

Military, tribal, and exempted school site centers can participate in QCC.

License-exempt FCC CCDF providers.

Describe the quality information:

Although not rated, license-exempt Family, Friend, and Neighbor care can participate in the QCC and receive quality supports and professional learning opportunities.

License-exempt non-CCDF providers.

Describe the quality information:

Although not rated, license-exempt Family, Friend, and Neighbor care can participate in the QCC and receive quality supports and professional learning opportunities.

Relative child care providers.

Describe the quality information:

Although not rated, license-exempt Family, Friend, and Neighbor care can participate in the QCC and receive quality supports and professional learning opportunities.

Other.

Describe

N/A

**2.3.7 Lead Agencies are required to post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services on the consumer education website. These reports must include results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. The reports must be in plain language and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports when available, going forward (not retrospectively), beginning**

**October 1, 2018.**

Certify by responding to the questions below:

a) What is the Lead Agency's definition of plain language and describe the process for receiving feedback from parents and the public about readability of reports.

For licensed providers, the CDSS Facility Search Website displays copies of the full inspection and substantiated complaint reports written in language such that both the parents and providers may clearly understand the content. In addition, the CDSS facility search website, provides an email address ([cclwebmaster@dss.ca.gov](mailto:cclwebmaster@dss.ca.gov)) for questions and comments regarding posted material or the website itself. Also parents and the public may call the Central Complaint and Information Bureau hotline at 1-844-538-8766 to provide feedback and/or have report information supplied to them over the phone. Lastly, parents and the public may contact their local licensing Regional Office, and the Licensing Program Analyst who wrote the report, in order to provide feedback or receive clarification regarding a report.

b) Are monitoring and inspection reports in plain language?

If yes,

include a website link to a sample monitoring report.

For licensed providers, a sample of a full monitoring report may be seen here: <https://secure.dss.ca.gov/CareFacilitySearch/>

Health and Human Services Agency require licensed-exempt providers to complete Form CCP, Health and Safety Self-Certification. After completion, the provider sends it to the County Welfare Department, Alternative Payment Program or other payment agency. The link to that form is: <https://www.chs-ca.org/docs/Declaration%20of%20Exemption%20from%20TrustLine%20Registration%20and%20Health-Safety%20Self-Certification.pdf>

If no,

describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary.

N/A

c) Check to certify what the monitoring and inspection reports and/or their plain language summaries include:

- Date of inspection
- Health and safety violations, including those violations that resulted in fatalities or serious injuries.

Describe how these health and safety violations are prominently displayed.

For licensed providers, the CDSS Facility Search Website displays summaries and dates for all monitoring and inspection visits, violations, and complaints. The consumer may view the full reports for more details about the violations and complaints displayed by the summaries, including any fatalities or serious injuries that may have occurred. The site includes a link to Frequently Asked Questions (FAQs) and a glossary of terms.

- Corrective action plans taken by the State and/or child care provider.

Describe

For licensed providers, the "plan of correction" for violations is included within the monitoring report found under the "reports" tab for an individual provider on the CDSS Facility Search Website.

d) The process for correcting inaccuracies in reports.

For licensed providers, a provider may contact their licensing regional office to report inaccuracies and request a process to amend the monitoring report.

Licensed exempt providers are not monitored and inspection reports are not developed.

Therefore, there is no requirement to correct inaccuracies in their reports.

e) The process for providers to appeal the findings in reports, including the time requirements, timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded.

For licensed providers, the licensee may appeal findings in the report within 15 business

days from the date the report was received. All available supporting documentation must be submitted with the request for review. Within 30 business days of the request for review, the licensee may submit any additional supporting documentation that was unavailable at the time of the initial request. If the licensing agency requires additional information from the licensee, in order to make its determination, that information shall be requested within 30 business days of receiving the initial request. The licensee shall provide this information within 30 business days of receiving the request from the licensing agency. The licensee shall be notified, in writing, of the licensing agency's decision within 60 business days of the date when all necessary information has been provided to the department by the licensee. If this process results in an amendment of the initial report, those changes will be inputted into the licensing database and will be reflected on the CDSS Facility Search Website the following Sunday when the website is updated with the latest information.

f) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of 'timely' and describe how it ensures that reports are posted within its timeframe. Note: While Lead Agencies define 'timely,' we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken

For licensed providers, once monitoring reports are completed (and the licensee has read and reviewed it), reports are uploaded to an internal database system which then automatically updates the CDSS Facility Search Website accordingly, on a weekly basis, each Sunday.

g) Describe the process for maintaining monitoring reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)).

For licensed providers, monitoring reports are posted for five years from the date the report was taken. The CDSS Facility Search Website automatically removes reports after 5 years (from the date the report was taken) when it updates the system on a weekly basis.

h) Any additional providers on which the Lead Agency chooses to include reports. Note - Licensed providers and CCDF providers must have monitoring and inspection reports

posted on their consumer education website.

- License-exempt non-CCDF providers
- Relative child care providers
- Other.

Describe

N/A

**2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted on the consumer education website. This aggregate information on serious injuries and deaths must be organized by category of care (e.g., center, FCC, etc.) and licensing status for all eligible CCDF provider categories in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. The aggregate report should not list individual provider-specific information or names.**

Certify by providing:

a) The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity.

For licensed providers, the designated entity is the Child Care Licensing Regional Office that provides licensing oversight for the respective facility. The aggregate data will be posted to the Child Care Licensing Program Website for public information.

b) The definition of "substantiated child abuse" used by the Lead Agency for this requirement.

For licensed providers, the definition of "substantiated child abuse" used is defined by California *H&SC*, Section 1548(f)(2) to include physical injury inflicted upon a child by another person by other than accidental means and sexual abuse (as defined in Penal Code Section 11165.1) and neglect (as defined in Penal Code Section 11165.2) and unlawful corporal punishment or injury (as defined in Penal Code Section 11165.4).

c) The definition of "serious injury" used by the Lead Agency for this requirement.

For licensed providers, the definition of "serious injury" used is defined in by California H&SC , Section [1596.8865\(d\)](#) to include serious impairment of physical condition, including, but not limited to, the following: loss of consciousness; concussion; bone fracture; protracted loss or impairment of function of any bodily member or organ; a wound requiring extensive suturing; and serious disfigurement.

d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.

Currently, the CDE does not provide this information. The licensed facility inspection reports includes this information at the site level and is provided to the public on the Child Care Transparency webpage on the CDSS website at <https://www.cdss.ca.gov/inforesources/Community-Care-Licensing/Facility-Search-Welcome>

**2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information:**

The CDE has provided funding for the CA Child Care Resource & Referral Network to continue the development of an expanded consumer education website that includes all of the local Resource & Referral child care data. This database, <https://www.mychildcareplan.org/partners/Account/Login.aspx?ReturnUrl=%2fpartners%2f> has been piloted and will be expanded in FY 2018/19, to be fully operational by July 2020. The website will provide a link for inquirers to their local R&R. in addition. The 800-KIDS-793 Phone Line for Parents currently provides information to assist the caller by providing a toll-free phone system, accessible to the public throughout the state of California, that provides general child care information to and connects all parents, child care providers, and other interested individuals to their local child care resource and referral programs in California. There is no income eligibility or fee related to receiving this service. Using the automated system, a caller can enter his/her zip code and be provided with the name and phone number of his/her local child care resource and referral agency or can choose to speak to a live information specialist. This bilingual

(Spanish and English) service system is an important component of the comprehensive consumer education campaign. [https://www.rnetwork.org/find\\_child\\_care](https://www.rnetwork.org/find_child_care)

#### 800-KIDS-793 Phone Line for Parents

A toll-free phone system, accessible to the public throughout the state of California, that provides general child care information to and connects all parents, child care providers, and other interested individuals to their local child care resource and referral programs in California. There is no income eligibility or fee related to receiving this service. Using the automated system, a caller can enter his/her zip code and be provided with the name and phone number of his/her local child care resource and referral agency or can choose to speak to a live information specialist. This bilingual (Spanish and English) service system is an important component of the comprehensive consumer education campaign.

[https://www.rnetwork.org/find\\_child\\_care](https://www.rnetwork.org/find_child_care)

### **2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website. Describe and include a website link to this information:**

For licensed providers, the CDSS Child Care Licensing Program Website Homepage makes contact information (that can help parents understand the information on the website) available at the 'top right-side of the page' for all licensing regional offices (and two county licensing offices). The Child Care Licensing Program Office and the Child Care Advocate Program Office can be found at: <https://www.cdss.ca.gov/inforesources/Child-Care-Licensing> The "My Child Care" Plan web site (<https://www.mychildcareplan.org/partners/Account/Login.aspx?ReturnUrl=%2fpartners%2f>) will provide a link to the lead agency, the CDE.

**2.3.11 Provide the website link to the Lead Agency's consumer education website. Note: An amendment is required if this website changes.**

For licensed providers, the website link is: <https://www.cdss.ca.gov/inforesources/Child-Care-Licensing> The "My Child Care Plan" database has been piloted and will be expanded and made publicly available during FY 2019/20; the site will be <https://www.mychildcareplan.org/partners/Account/Login.aspx?ReturnUrl=%2fpartners%2f>

**2.3.12 Other. Identify and describe the components that are still pending per the instructions on CCDF Plan Response Options for Areas where Implementation is Still in Progress in the Introduction.**

As noted above, the CDE, in conjunction with the R&R, is in the process of making the "My Child Care Plan" database functional with the appropriation of supporting funds.

**2.4 Additional Consumer and Provider Education**

Lead Agencies are required to certify that they will collect and disseminate information about the full diversity of child care services to promote parental choice to parents of eligible children, the general public, and where applicable, child care providers. In addition to the consumer education website, the consumer education information can be provided through CCR&R organizations or through direct conversations with eligibility case workers and child care providers. Outreach and counseling can also be effectively provided via information sessions or intake processes for families (658E(c)(2)(E); 98.15(b)(4); 98.33(b)).

In questions 2.4.1 through 2.4.5, certify by describing:

**2.4.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state preK, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences.**

The CDE's primary vehicle for providing eligible parents, the general public, and child care providers about the availability of child care services is through its system of R&Rs, who provide both direct communication, written materials, and outreach to the community. Alternative Payment Programs also provide eligible families with information about the array of early learning and care options in order to make an informed choice. The "My Child Care Plan" website will provide this information.

**2.4.2 The partnerships formed to make information about the availability of child care services available to families.**

The CDE, the CDSS CCLD, the CDSS Welfare to Work Division, and the R&R work collaboratively to make this information available to families. The CDE contracts with local R&Rs to keep current information on the availability of child care services in their respective service area.

**2.4.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.**

Temporary Assistance for Needy Families program:

The R&R Phone Counselor modules train staff to provide information about the county CalWORKs program, program eligibility, and County Welfare Department contact information.

[Head Start and Early Head Start programs:](#)

The R&R Phone Counselor modules train staff to provide information about Head Start and Early Head Start, program eligibility, and contact information to the grantees in their service area.

[Low Income Home Energy Assistance Program \(LIHEAP\):](#)

The R&R Phone Counselor modules train staff to provide information about LIHEAP, eligibility for the program, and local contact information.

[Supplemental Nutrition Assistance Programs \(SNAP\) Program:](#)

The R&R Phone Counselor modules train staff to provide information about the SNAP program, program eligibility, and County Welfare Department contact information.

[Women, Infants, and Children Program \(WIC\) program:](#)

The R&R Phone Counselor modules train staff to provide information about the Women, Infants, and Children (WIC) program, program eligibility, and local site information.

[Child and Adult Care Food Program\(CACFP\):](#)

The R&R Phone Counselor modules train staff to provide information about the CACFP program, program eligibility, and CDE contact information.

[Medicaid and Children's Health Insurance Program \(CHIP\):](#)

The R&R Phone Counselor modules train staff to provide information about the SNAP program, program eligibility, and County Welfare Department contact information.

[Programs carried out under IDEA Part B, Section 619 and Part C:](#)

The R&R Phone Counselor modules train staff to provide information about the programs carried out under IDEA Part B, Section 619 and Part C, program eligibility, and contact information to their local school district, the SELPA, and the Regional Center in their service area.

All of the above information is provided, as appropriate, to inquiring parents, providers, and the general public when they contact any of California's local R&R agencies. If the inquiry is by phone, the counselor walks the party through the information and how to make contact. If the inquiry is in person, the counselor is not only able to provide information and referrals, but may have flyers and brochures that can be given to the party. The skill of the R&R counselor is the ability to tailor the response to the particular parent or inquiring party.

**2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information.**

The CDE contracts with R&R and organizations in each of the 58 counties in California to include information on child care programs and CDE publications. This information is provided by local R&R Phone Counselor staff who talk to early learning and care consumers directly, explain in further detail, and answer questions about local availability, early learning and care programs, relevant resources, and quality indicators in the appropriate language for that family. Phone counselors are intentional about approaching the referral process with respect for the family and the information they possess and providing written information and brochures judiciously and following up with further opportunities as required. The phone counselor will search for early learning and care options that meet the family's needs and share information with regard to quality and availability of resources utilizing strength based communication process. The CDE, together with First 5 California (F5CA), have worked to create a QRIS Web site, Quality Counts CA, which aims to provide resources and support in

order to connect parents and families with their local QRIS websites and R&R agencies. The statewide QRIS web site went live in April 2018, with the newly branded name and tagline: QCC, Raising the Quality of Early Learning and Care. The website provides parents with information about quality early learning. Parents are provided information of the best practices in child development through a parent-friendly website, All About Young Children: Information for Families on Children’s Early Development, which can be found at: <https://allaboutyoungchildren.org/>. This website provides information in eight languages about what skills help children learn how they learn language, how they learn about feelings and relationships, how they learn about numbers, and how they become skillful at moving their bodies. The CDE web page at: <https://www.cde.ca.gov/sp/cd/re/caqintro.asp>, Care About Quality: Your Guide to Child Care, includes information on defining quality early learning and care and how to choose child care. The CDE provides information on research and best practices concerning children’s development through its publications and video resources that can be found at: <https://www.cde.ca.gov/sp/cd/re/cddpublications.asp>. The CDE website, <https://www.caearlychildhoodonline.org/>, provides training modules on physical development, healthy eating, and physical activity. Note: See the “Healthy and Active Preschoolers” modules. Although accessible to the general public, the primary audience is intended to be the ECE workforce.

**2.4.5 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and include any partners in providing this information.**

The CDE policies regarding social-emotional and behavioral issues and early childhood mental health are described in its Infant/Toddler and Preschool Curriculum Frameworks and Program Guidelines and the Guidelines for Early Learning in Family Child Care Settings. This information provides guidelines and strategies for promoting healthy social-emotional development and for addressing challenging behaviors. For providers, the California

Collaborative for Social-Emotional Foundations for Early Learning (CCSEFEL) provides training and coaching regarding the teaching pyramid, with its focus on positive social-emotional interactions between young children and providers. The California Inclusion and Behavior Consultation Network (<http://www.cainclusion.org/camap/>) provides support for early learning and care providers regarding children with challenging behaviors and inclusion issues. The Family Child Care at its Best training has two modules on the Teaching Pyramid tailored for family early learning and care providers. California Child Care Initiative Project (CCIP) provide training facilitated locally at each R&R offers family child care technical strategies to providers in an effort to supporting the mental health of both providers and the families that they serve. In addition, QCC addresses social-emotional supports through its local QRIS implementation and training and technical assistance..

**2.4.6 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public.**

The CDE's CA Collaborative for the Social Emotional Foundations of Early Learning State Leadership Team, with partner WestEd, has recently launched a website that offers resources to assist early learning and care programs to address and prevent suspensions and expulsions; the site is <https://preventingchildcareexpulsionca.org/>.

In August and September of 2018, the CDSS Child Care Licensing Program required all licensing inspectors and their managers to attend an all-day training (in partnership with Linda Brault of West Ed) regarding *Understanding Children with Challenging Behaviors* and preventing child expulsions.

In addition to AB 752 (legislation regarding child care: state preschool programs: expulsion), CDSS has published to all staff and providers an Implementation Plan for this chaptered legislation regarding that legislation's impact on expulsions. The information is available on the CDSS Child Care Licensing Program Website, under the WebPage for Provider Information Notices located at <https://www.cdss.ca.gov/inforesources/Community-Care-Licensing/Policy/Provider-Information-Notices/Child-Care> as PIN 18-04-CCP, located at <https://www.cdss.ca.gov/Portals/9/CCLD/PIN%2018-04-CCP%202017%20Chaptered%20Legislation.pdf?ver=2018-04-05-082756-340>

## 2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings, including information on resources and services that the State can deploy, such as the use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)).

### **2.5.1 Certify by describing:**

a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)).

The CDE provides this through the R&R agencies located in every county. Local R&Rs gather information on resources and share them with parents, early learning and care providers, and the broader public through their websites, trainings, collaborative meetings, and direct conversations through phone and email. In addition, the QCC's Rating Matrix includes developmental screening as an element. To better support this, many local QCC's have connected their work with HMG.

b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program - carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) - and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).

The CDE provides this through the R&R agencies located in every county. The R&Rs

gather information on developmental screening resources and share them with parents, early learning and care providers, and the broader public through their websites, trainings, collaborative meetings, and direct conversations through phone and email.

c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work.

The CDE provides this through the California Child Care R&R agencies located in every county through their websites, trainings, collaborative meetings, and direct conversations through phone and email.

d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays.

Programs participating in their local QRIS receive points on a tiered Rating Matrix for conducting or facilitating developmental screening. At the highest-level tier, programs work with families to screen all children using the Ages and Stages Questionnaire (ASQ) and ASQ-SE (Social Emotional), if indicated, at program entry, then as indicated by results thereafter. Local QRIS consortia actively work to make developmental screenings accessible to all families and early learning and care programs. In many counties, they also collaborate with HMG.

e) How child care providers receive this information through training and professional development.

The Developmental Screening Network (DSN) provides training to QRIS trainers to promote local use of developmental screening tools such as ASQ. The DSN offers ongoing training, technical assistance, and networking opportunities for trainers to enhance their ability to teach child care providers across the state about conducting developmental screening. Funding terms and conditions and program requirements can be located at: <https://www.cde.ca.gov/fg/aa/cd/index.asp>. Additionally, most of the local press offer training on the ASQ to participating sites.

f) Provide the citation for this policy and procedure related to providing information on developmental screenings.

Pending regulatory development.

## 2.6 Consumer Statement for Parents Receiving CCDF Funds

Lead Agencies must provide CCDF parents with a consumer statement in hard copy or electronically (such as referral to a consumer education website) that contains specific information about the child care provider they select. This information about the child care provider selected by the parent includes health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. It must also describe how CCDF subsidies are designed to promote equal access, how to submit a complaint through a hotline, and how to contact local resource and referral agencies or other community-based supports that assist parents in finding and enrolling in quality child care (98.33(d)). Please note that if the consumer statement is provided electronically, Lead Agencies should consider how to ensure that the statement is accessible to parents and that parents have a way to contact someone to address questions they have.

### **2.6.1 Certify by describing:**

a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement.

Phone counselors at every R&R statewide provide walk in, phone, and email counseling for families in search of care. The results of this tailored search assist the family to determine quality early learning and care indicators. The session concludes with a statement clarifying that the information provided is a referral not a recommendation, and also provides instructions on how to link to CCLD to check on posted reports for all licensed providers the family is considering for the provision of care.

b) What is included in the statement, including when the consumer statement is provided to families.

Families receiving CCDF funding are engaged in strength-based communication and

provided verbal consumer education information. Written consumer education materials, in hard copy or electronically, on the topic of choosing child care are provided to families. Families will be referred to the DSS CCL facility search database site that contains specific information about any licensed child care provider they select. This child care provider information includes health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and, using the Quality Counts CA website, any voluntary quality standards met by the provider. The CDE promotes access by allowing eligible families to choose from CDE-contracted programs or to use a voucher to select a provider. Parents receive information on how to submit a complaint about a licensed provider through the DSS hotline and how to contact local resource and referral agencies or other community-based supports that assist parents in finding and enrolling in quality child care (98.33(d)). The CDE will ensure that the information about the complaint process for license-exempt providers is accessible to parents on the consumer education website currently in development and that parents have a way to contact someone to address questions they have. It is planned that the consumer education database underway will link to the DSS CCLD database for ease of use. The CDE will revise CAPP and CRRP program requirements to ensure compliance.

c) Provide a link to a sample consumer statement or a description if a link is not available.

<http://wp.childaction.org/find-child-care/>

### 3 Provide Stable Child Care Financial Assistance to Families

In providing child care assistance to families, Lead Agencies are required to implement these policies and procedures: a minimum 12-month eligibility and redetermination periods, a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for a job search of not fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. Also, procedures for the enrollment of homeless children and children in foster care, if served, pending the completion of documentation, are required.

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond 12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local prekindergarten, and other collaborative programs to finish the program year. This type of policy promotes continuity for families receiving services through multiple benefit programs.

In this section, Lead Agencies will identify how they define eligible children and families and how the Lead Agency improves access for vulnerable children and families. This section also addresses the policies that protect working families and determine a family's contribution to the child care payment.

### 3.1 Eligible Children and Families

At the time when eligibility is determined or redetermined, children must (1) be younger than age 13; (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size and whose family assets do not exceed \$1,000,000 (as certified by a member of said family); and (3)(a) reside with a parent or parents who are working or attending a job training or educational program or (b) receives, or needs to receive, protective services and resides with a parent or parents not described in (3)(a.) (658P(4)).

#### **3.1.1 Eligibility criteria based on a child's age**

a) The CCDF program serves children

from 0

(weeks/months/years)

through 12

years (under age 13). . Note: Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).

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))

- No  
 Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity: The child who is physically or mentally incapable of self-care is a child who has exceptional needs as defined in California EC, Section 8208(l) and needs adult supervision in a child care setting.

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))

- No.  
 Yes

and the upper age is N/A

(may not equal or exceed age 19)

d) How does the Lead Agency define the following eligibility terms?

"residing with":

Living in the same household, (5 CCR Section 18078 [f]).

"in loco parentis":

Any adult living with the child who has responsibility for the care and welfare of the child, (5 CCR Section 18078 [m]).

### 3.1.2 Eligibility criteria based on reason for care

a) How does the Lead Agency define "working or attending a job training and educational program" for the purposes of CCDF eligibility at the time of determination? Provide the definitions below for:

"Working":

Work is defined as employment, self-employment or seeking employment. Travel time and or sleep time may be included in the approved schedule of services for employment and self-employment. Seeking employment is limited to no more than 5 days per week and for less than 30 hours per week - California Code of Regulations, 5 CCR, Section 18086[e][1])

"Job training":

Job training is defined as vocational training leading directly to a recognized trade, paraprofession or profession ( 5 CCR Section 18087).

"Education":

Education is defined as vocational training leading directly to a recognized trade, paraprofession or profession ( 5 CCR Section 18087), and includes those enrolled in an English language learner program or a program to complete a high school equivalency exam.

"Attending job training or education" (e.g. number of hours, travel time):

Attending job training or education is defined as (e.g. number of hours, travel time): Includes the hours attending class, study time and travel time as necessary. California 5 CCR, Section 18086[e][1]).

3.1.2 Eligibility criteria based on reason for care

b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?

No.

If no, describe the additional work requirements:

N/A

Yes.

If yes, describe the policy or procedure:

Yes. Pursuant to EC 8263(a) in order to be eligible for federal and state subsidized

early care and education services in California, the family need only meet at least one eligibility and one need requirement. The need based on either education or training is sufficient in itself to meet the need requirement.

### 3.1.2 Eligibility criteria based on reason for care

c) Does the Lead Agency consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search)

No.

Yes.

If yes, describe the policy or procedure. (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):

A family certified as seeking employment is currently eligible for no less than 12 months at both initial eligibility and redetermination (recertification). The CDE is soliciting input on regulatory requirements for implementing 12-month eligibility pursuant to the Budget Act of 2017. To view full information to the field please visit the Management Bulletin (MB) Webpage at: <https://www.cde.ca.gov/sp/cd/ci/allmbs.asp>

### 3.1.2 Eligibility criteria based on reason for care

d) Does the Lead Agency provide child care to children in protective services?

No.

Yes. If yes:

i. Please provide the Lead Agency's definition of "protective services":

Definition of protective services - Neglected or abused children who are recipients of child protective services ( EC, Section 8263(b)(1)(A) or "children identified as at-risk of abuse, neglect, or exploitation" upon written referral from a medical, or social service agency, or emergency shelter.

*Note:* Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective

services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are not working or are not in education/training activities, but this provision should be included in the protective services definition above.

ii. Are children in foster care considered to be in protective services for the purposes of eligibility at determination?

- No
- Yes

iii. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (658E(c)(5))?

- No
- Yes

iv. Does the Lead Agency provide respite care to custodial parents of children in protective services?

- No
- Yes

**3.1.3 Eligibility criteria based on family income. Note: The question in 3.1.3 relates to initial determination. Redetermination is addressed in 3.1.7.**

a) How does the Lead Agency define "income" for the purposes of eligibility at the point of determination?

Adjusted monthly income includes all sources of income to the family, minus verified child support payments paid by the parent whose child is receiving child development services, excluding the non-countable income listed below:

- 1) Earning of a child under age 18 years;
- 2) Loans;
- 3) Grants or scholarships to students for educational purposes;
- 4) Food Stamps or other food assistance;
- 5) Earned Income Tax Credit or tax refund;
- 6) GI Bill entitlements; hardships duty pay, hazardous duty pay, hostile fire pay, or imminent danger pay;

- 7) Adoption assistance payments received pursuant to Welfare and Institutions Code Section 16115 et seq.;
- 8) Non-cash assistance or gifts;
- 9) All income of any individual counted in the family size who is collecting federal Supplemental Security Income (SSI) or State Supplementary Payment (SSP) benefits;
- 10) Insurance or court settlements including pain and suffering and excluding lost wages and punitive damages;
- 11) Reimbursements for work-required expenses such as uniforms, mileage, or per diem expenses for food and lodging;
- 12) Business expenses for self-employed family members;
- 13) When there is no cash value to the employee, the portion of medical and/or dental insurance documented as paid by the employer and included in gross pay; and,
- 14) Disaster relief grants or payment, except any portion for rental assistance or unemployment.

In accordance with *EC*, Section 8263.1 a family is initially income eligible if a family's adjusted monthly income is at or below 70 percent of the state median income (SMI), adjusted for family size. A family is ongoing eligible if a family's adjusted monthly income is at or below 85 percent of the SMI, adjusted for family size.

Per legislative directions, the SMI to be used is that calculated by the California Department of Finance (CADO) pursuant to *EC*, Section 8263.1(c), for more information on the SMI and how it is currently used, please visit our website here:

<https://www.cde.ca.gov/sp/cd/ci/mb1803.asp>.

b) Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if* the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children). If the income eligibility limits are not statewide, please respond to c) below the table.

	(a)	(b)	(c)	(d)
Family Size	100% of	85% of SMI	(IF APPLICABLE)	(IF APPLICABLE)

	(a)	(b)	(c)	(d)
	SMI(\$/Month)	(\$/Month) [Multiply (a) by 0.85]	(\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	(% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	\$5,757	\$4,893	\$4,030	70%
2	\$5,757	\$4,893	\$4,030	70%
3	\$6,200	\$5,270	\$4,340	70%
4	\$6,967	\$5,922	\$4,877	70%
5	\$8,082	\$6,870	\$5,657	70%

c) If the income eligibility limits are not statewide, describe how many jurisdictions set their own income eligibility limits and provide the income limit ranges across the jurisdictions (e.g. range from [lowest limit] to [highest limit])( 98.16(i)(3)).

Currently, San Francisco, San Mateo, Alameda, and Santa Clara counties (nine additional counties, upon approval from the CDE) have been authorized to use 85 percent of SMI for both initial and redetermination. An additional nine counties have pilot program plans pending approval and many have shared they plan to request 85% SMI.

*Reminder:* Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census (98.20(a)(2)(i)) even if the federal poverty level is used in implementing the program. SMI guidelines are available at: <https://www.acf.hhs.gov/ocs/resource/liheap-im2017-03>.

d) SMI source and year. California Department of Finance, 2017, based on 2015 American Community survey (2015ACS)

e) Identify the most populous area of the State used to complete the chart above.

All counties use the same threshold except for the ones noted in ( c ) above.

f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became effective? July 1, 2018. The information in the table above reflects the eligibility limits established by the Budget Act of 2017 (Assembly Bill 99)

g) Provide the citation or link, if available, for the income eligibility limits. California EC, Section 8263.1

**3.1.4 Lead Agencies are required to ensure that children receiving CCDF funds do not have family assets that exceed \$1,000,000, as certified by a family member (98.20(a)(2)(ii)).**

a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application).

Self-certification under penalty of perjury on the application for services.

b) Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?

No.

Yes.

If yes, describe the policy or procedure and provide citation:

N/A

**3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)).**

Pursuant to *EC 8263(a)* in order to be eligible for federal and state subsidized early care and education services in California, the family need only meet at least one eligibility and one need requirement. Additionally, *EC 8263(b)* provides first priority to those children who are identified as either neglected or abused children, who are recipients of child protective services, or children who are at risk of being neglected or abused, upon written referral from a legal, medical, or social services agency. If an agency is unable to enroll a child in the first priority category, the agency shall refer the family to local resource and referral services to locate services for the child. Second priority shall be given equally to eligible families, regardless of the number of parents in the home, who are income eligible. Within this priority, families with the lowest gross monthly income in relation to family size, as determined by a schedule adopted by the Superintendent, shall be admitted first. If two or more families are in the same priority in relation to income, the family that has a child with exceptional needs shall be admitted first. If there is no family of the same priority with a child with exceptional needs, the same priority family that has been on the waiting list for the longest time shall be

admitted first.

**3.1.6 Lead Agencies are required to take into consideration children's development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.**

- Coordinating with Head Start, prekindergarten, or other early learning programs to create a package of arrangements that accommodates parents' work schedules
- Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
- Establishing minimum eligibility periods greater than 12 months
- Using cross-enrollment or referrals to other public benefits
- Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services
- Providing more intensive case management for families with children with multiple risk factors;
- Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
- Other.

Describe:

To promote the continuity of services, a family that no longer meets a particular program's income, eligibility, or need criteria may have their services continued if the contractor is able to transfer that family's enrollment to another program for which the family continues to be eligible prior to the date of termination of services (i.e., a preschooler aging out and no longer having a need for a preschool program could be transferred directly into a school-age program without having to reapply). The transfer of enrollment may be to another program within the same contracting agency or to

another agency that administers state or federally funded early learning and care and development programs.

### **3.1.7 Policies and processes for graduated phase-out of assistance at redetermination.**

**Lead Agencies are required to provide for a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income. Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy program as income increases, and supports long-term self-sufficiency for families.**

- i. 85 percent of SMI for a family of the same size
- ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold that:
  - (A) Takes into account the typical household budget of a low-income family
  - (B) Provides justification that the second eligibility threshold is:
    - (1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability
    - (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency's income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)). Note that once deemed eligible, the family shall be considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

A family eligible for services via the graduated phase-out of assistance is considered eligible under the same conditions as other eligible families with the exception of the copayment restrictions, which do not apply to a graduated phase-out. To help families transition off of child

care assistance, Lead Agencies may gradually adjust copay amounts for families whose children are determined eligible under a graduated phase-out and may require additional reporting on changes in family income. However, Lead Agencies must still ensure that any additional reporting requirements do not constitute an undue burden on families.

a) Check and describe the option that best identifies the Lead Agency's policies and procedures regarding the graduated phase-out of assistance.

- N/A - The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- N/A - The Lead Agency sets its exit eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- The Lead Agency sets the second tier of eligibility at 85 percent of SMI.

Describe the policies and procedures.

The state sets the income eligibility threshold for newly enrolling families at 70 percent of State Median Income (SMI). For families that are being recertified, the income eligibility threshold is set at 85 percent of SMI.

Provide the citation for this policy or procedure.

California EC, Section 8263.1.

- The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold.

Provide the second tier of eligibility for a family of three.

N/A

Describe how the second eligibility threshold:

- i. Takes into account the typical household budget of a low-income family:

N/A

- ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:

N/A

iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:

N/A

iv. Provide the citation for this policy or procedure:

N/A

Other.

Identify and describe the components that are still pending per the instructions on *CCDF Plan Response Options for Areas where Implementation is Still in Progress* in the Introduction.

N/A

3.1.7 b) To help families transition from assistance, does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?

No

Yes

i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out.

N/A

ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? (*Note: Additional reporting requirements are also discussed in section 3.3.3 of the plan.*)

No.

Yes.

Describe:

N/A

### 3.1.8 Fluctuation in earnings.

Lead Agencies are required to demonstrate how their processes for initial determination and redetermination take into account irregular fluctuations in earnings (658E(c)(2)(N)(i)(II)). The Lead Agency must put in place policies that ensure that temporary increases in income, including temporary increases that can result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) from seasonal employment or other temporary work schedules, do not affect eligibility or family copayments (98.21(c)). Check the processes, if applicable, that the Lead Agency uses to take into account irregular fluctuations in earnings and describe, at a minimum, how temporary increases that result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) do not affect eligibility or family copayments.

- Average the family's earnings over a period of time (i.e. 12 months).

Describe:

Income fluctuation means income that varies due to migrant agricultural work, intermittent earnings or income and unpredictable days of employment overtime or self-employment. For migrant, agricultural, seasonal, or intermittent earnings are calculated by using a 12 month average. Unpredictable overtime or self employment by averaging income from at least 3 months and no more than 12 months preceding the certification. 5CCR 18096, 18078(i) .

- Request earning statements that are most representative of the family's monthly income.

Describe:

The CDE requires paycheck stubs from the month preceding certification.

- Deduct temporary or irregular increases in wages from the family's standard income level.

Describe:

N/A

- Other.

Describe:

N/A

**3.1.9 Lead Agencies are required to have procedures for documenting and verifying that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)). Check the information that the Lead Agency documents and verifies and describe, at a minimum, what information is required and how often. Check all that apply.**

Applicant identity.

Describe:

N/A

Applicant's relationship to the child.

Describe:

A parent provides the names of parents and names, gender, and birthdates of the children identified in the family. The number of children is documented by providing at least one of the following documents, as applicable: birth certificates; court orders regarding child custody; adoption documents; records of foster care placements; school or medical records; CWD record; or other reliable documentation indicating the relationship of the child to the parent. These documents are reviewed by the agency and included in family data file.

Child's information for determining eligibility (e.g., identity, age, citizen/immigration status).

Describe:

Documents reviewed by agency and included in family data file such as birth certificates/vital records, immunization records, and health records.

Work.

Describe:

Letters of employment, self-employment bookkeeping records, work schedules, and paystubs. Independent verification of employment. Agency can either call or send the form for the employer to complete.

Job training or educational program.

Describe:

Class schedules or progress reports submitted for documentation education.  
Documents reviewed by agency and included in family data file.

Family income.

Describe:

Pay stubs, child support enforcement records, and profit and loss statements.  
Documents reviewed by agency and included in family data file.

Household composition.

Describe:

A parent provides the names of parents and names, gender, and birthdates of the children identified in the family. The number of children is documented by providing at least one of the following documents, as applicable: birth certificates; court orders regarding child custody; adoption documents; records of foster care placements; school or medical records; CWD records; or other reliable documentation indicating the relationship of the child to the parent. Documents are reviewed by agency and included in the family data file.

Applicant residence.

Describe:

N/A

Other.

Describe:

N/A

**3.1.10 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:

30 Days

Track and monitor the eligibility determination process

Other.

Describe:

N/A

None

### **3.1.11 Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement.**

Lead Agencies are required 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 younger than age 6 (98.16(v); 98.33(f)).

Lead Agencies must coordinate with TANF programs to ensure 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/territory 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: The California Department of Social Services (CDSS) establishes the following criteria or definitions.

b) Provide the following definitions established by the TANF agency:

"Appropriate child care":

Appropriate early learning and care is defined as early learning and care chosen by

the parent that meets the needs of the child and parent(s). Early learning and care is either licensed for the appropriate age group, or special needs category, or is license-exempt and the parents and providers have completed the Health and Safety Self-Certification form and the provider meets TrustLine requirements, unless the early learning and care arrangement is exempt from the TrustLine requirements. The following individuals are exempt from TrustLine:

Aunts, uncles, grandparents of the child(ren) in care by blood, marriage or court decree (adoptions or other court orders impacting family relationships)

A school or recreation program exempt from TrustLine. A public recreation program as defined in California *H&SC*, Section 1596.792 for a public or private school. California *H&SC* 1596.792 states the following:

This chapter, Chapter 3.5 (commencing with Section 1596.90), and Chapter 3.6 (commencing with Section 1597.30) do not apply to any of the following:

- (a) Any health facility, as defined by Section 1250.
- (b) Any clinic, as defined by Section 1202.
- (c) Any community care facility, as defined by Section 1502.
- (d) Any family day care home providing care for the children of only one family in addition to the operator's own children.
- (e) Any cooperative arrangement between parents for the care of their children when no payment is involved and the arrangement meets all of the following conditions:

(1) In a cooperative arrangement, parents shall combine their efforts so that each parent, or set of parents, rotates as the responsible caregiver with respect to all the children in the cooperative.

(2) Any person caring for children shall be a parent, legal guardian, stepparent, grandparent, aunt, uncle, or adult sibling of at least one of the children in the cooperative.

(3) There can be no payment of money or receipt of in-kind income in exchange for the provision of care. This does not prohibit in-kind contributions of snacks, games, toys, blankets for napping, pillows, and other materials parents deem appropriate for their children. It is not the intent of this paragraph to prohibit payment for outside

activities, the amount of which may not exceed the actual cost of the activity.

(4) No more than 12 children are receiving care in the same place at the same time.

(f) Any arrangement for the receiving and care of children by a relative.

(g) Any public recreation program. "Public recreation program" means a program operated by the state, city, county, special district, school district, community college district, chartered city, or chartered city and county that meets either of the following criteria:

(1) The program is operated only during hours other than normal school hours for kindergarten and grades 1 to 12, inclusive, in the public school district where the program is located, or operated only during periods when students in kindergarten and grades 1 to 12, inclusive, are normally not in session in the public school district where the program is located, for either of the following periods:

(A) For under 20 hours per week.

(B) For a total of 14 weeks or less during a 12-month period. This total applies to any 14 weeks within any 12-month period, without regard to whether the weeks are consecutive.

In determining "normal school hours" or periods when students are "normally not in session," the CDSS shall, when appropriate, consider the normal school hours or periods when students are normally not in session for students attending a year-round school.

(2) The program is provided to children who are over the age of four years and nine months and not yet enrolled in school and the program is operated during either of the following periods:

(A) For under 16 hours per week.

(B) For a total of 12 weeks or less during a 12-month period. This total applies to any 12 weeks within any 12-month period, without regard to whether the weeks are consecutive.

(3) The program is provided to children under the age of four years and nine months with sessions that run 12 hours per week or less and are 12 weeks or less in duration. A program subject to this paragraph may permit children to be enrolled in consecutive

sessions throughout the year. However, the program shall not permit children to be enrolled in a combination of sessions that total more than 12 hours per week for each child.

(h) Extended day care programs operated by public or private schools.

(i) Any school parenting program or adult education early learning and care program that satisfies both of the following:

(1) Is operated by a public school district or operated by an individual or organization pursuant to a contract with a public school district.

(2) Is not operated by an organization specified in Section 1596.793.

(j) Any child day care program that operates only one day per week for no more than four hours on that one day.

(k) Any child day care program that offers temporary early learning and care services to parents and that satisfies both of the following:

(1) The services are only provided to parents and guardians who are on the same premises as the site of the child day care program.

(2) The child day care program is not operated on the site of a ski facility, shopping mall, department store, or any other similar site identified by the department by regulation.

(l) Any program that provides activities for children of an instructional nature in a classroom-like setting and satisfies both of the following:

(1) Is operated only during periods of the year when students in kindergarten and grades 1 to 12, inclusive, are normally not in session in the public school district where the program is located due to regularly scheduled vacations.

(2) Offers any number of sessions during the period specified in paragraph (1) that when added together do not exceed a total of 30 days when only school age children are enrolled in the program or 15 days when children younger than school age are enrolled in the program.

(m) A program facility administered by the Department of Corrections and Rehabilitation that (1) houses both women and their children, and (2) is specifically

designated for the purpose of providing substance abuse treatment and maintaining and strengthening the family unit pursuant to Chapter 4 (commencing with Section 3410) of Title 2 of Part 3 of the California Penal Code, or Chapter 4.8 (commencing with Section 1174) of Title 7 of Part 2 of that code.

(n) Any crisis nursery, as defined in paragraph (17) of subdivision (a) of Section 1502. (Amended by Stats. 2014, Ch. 735, Sec. 4. Effective January 1, 2015.)

**"Reasonable distance":**

Reasonable distance is defined as the distance customarily traveled by working families in accessing early learning and care in the community.

**"Unsuitability of informal child care":**

Informal early learning and care is unsuitable when the caregiver cannot be Trustlined in accordance with the Trustline regulations or would otherwise be denied payment for early learning and care services that are exempt from licensure because of a violent felony conviction.

**"Affordable child care arrangements":**

Affordable early learning and care is early learning and care where the total cost to the family does not exceed the regional market rate plus family fees established by the state in accordance with the family fee schedule.

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

In writing

Verbally

Other.

Describe:

In writing: Parents who receive TANF benefits are informed about the exception to individual penalties associated with the TANF work requirements through a written notice known as a Notice of Action (NOA).

d) Provide the citation for the TANF policy or procedure:

The TANF policy can be found in the California Manual of Policy and Procedures, (MPP) Sections 42-711.11 through 42-721.3.

## 3.2 Increasing Access for Vulnerable Children and Families

Lead Agencies are required to give priority for child care assistance to children with special needs, which can include vulnerable populations, in families with very low incomes and to children experiencing homelessness (658E(c)(3)(B); 98.46(a)). The prioritization of CCDF assistance services is not limited to eligibility determination (i.e., the establishment of a waiting list or the ranking of eligible families in priority order to be served).

Note:

CCDF defines "child experiencing homelessness" as a child who is homeless, as defined in Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C. 11434a) (98.2).

### **3.2.1 Describe how the Lead Agency defines:**

a) "Children with special needs":

Means either of the following: (1) Infants and toddlers under three years of age who have been determined to be eligible for early intervention services pursuant to the California Early Intervention Services Act (Title 14 (commencing with Section 95000) of the Government Code) and its implementing regulations. These children include an infant or toddler with a developmental delay or established risk condition, or who is at high risk of having a substantial developmental disability, as defined in subdivision (a) of Section 95014 of the Government Code. These children shall have active individualized family service plans, shall be receiving early intervention services, and shall be children who require the special attention of adults in an early learning and care setting. (2) Children 3 to 21 years of age, inclusive, who have been determined to be eligible for special education and related services by an individualized education program team according to the special education requirements contained in Part 30 (commencing with Section 56000) of Division 4 of Title 2, and who meet eligibility criteria described in Section 56026 and, Article 2.5 (commencing with Section 56333) of Chapter 4 of Part 30 of Division 4 of

Title 2, and Sections 3030 and 3031 of 5CCR of the California *Code of Regulations*. These children shall have an active individualized education program, shall be receiving early intervention services or appropriate special education and related services, and shall be children who require the special attention of adults in an early learning and care setting. These children include children with intellectual disabilities, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance (also referred to as emotional disturbance), orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities, who need special education and related services consistent with Section 1401(3)(A) of Title 20 of the United States Code. For CCDF purposes, only children through age 18 may be eligible if they are physically or mentally incapable of self-care.

b) "Families with very low incomes":

The CDE does not have a definition for "families with very low incomes." Services are prioritized after Child Protective Services (CPS) children are enrolled; families are enrolled in income ranking order. Families with the lowest income, adjusted for family size are enrolled first. *EC*, Section 8263.

**3.2.2 Describe how the Lead Agency will prioritize or target child care services for the following children and families.**

a) Identify how services are prioritized for children with special needs. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

After CPS, families with the lowest gross monthly income in relation to family size

will be admitted first when two families have the same income. If two or more families have the same income in relation to family size, the family that has a child with exceptional needs shall be admitted first. EC 8263.

The 2018-19 Budget provides funds to support recent legislation for activities to increase capacity for serving children with exceptional needs. The Inclusive Early Education Expansion Program provides money to Local Education Agencies (LEAs) for one-time infrastructure costs, including facility renovations, equipment, and professional development, and the Inclusive Early Learning and Care Coordination Program provides money to county offices of education for building local and regional capacity for inclusive early learning.

b) Identify how services are prioritized for families with very low incomes. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

After CPS families with the lowest gross monthly income in relation to family size will be admitted first EC 8263.

c) Identify how services are prioritized for children experiencing homelessness, as defined by the CCDF. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

**Describe:**

If the parent has been identified as homeless on the application, contractors should permit the enrollment of homeless children to begin immediately upon the parent signing the application for services. The contractor is required to provide the family with a NOA, approving or denying services within 30 days of the parent signing the application for services.

d) Identify how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)). Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

**Describe:**

Recipients of TANF, referred to as California Work Opportunity and Responsibility to Kids (CalWORKs) in California are required to engage in work or work preparation activities. CalWORKs programs provide an array of welfare-to-work services, including child care (funded with state and federal funds) in three stages. Stage 1 is administered by the CDSS through county welfare departments (CWDs). Stage 1 begins when a participant enters the CalWORKs grant program and engages in activities pursuant to a welfare-to-work plan developed by the CWD for each family. The CWDs refer families to R&R agencies to assist them in finding child care providers. Some CWDs pay those providers directly for the services performed. Many CWDs have a sub-contract with APPs to pay for the child development services. Stage 2 is administered by the CDE through its APPs. CalWORKs families are transferred into Stage 2 when the CWD deems the family to be stable. Participation in Stage 1 and/or Stage 2 is limited to two years after the family stops receiving a CalWORKs grant. Stage 3 is also administered by the CDE through its Alternative Payment Programs (APPs). A family can move to this stage when it has exhausted its two-year limit in Stage 1 and/or Stage 2 (referred to as timing out), and for as long as the family remains otherwise eligible for child care

programs.

**3.2.3 List and define any other priority groups established by the Lead Agency.**

N/A

**3.2.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3.**

N/A

**3.2.5 Lead Agencies are required to expend CCDF funds to (1) permit the enrollment (after an initial eligibility determination) of children experiencing homelessness while required documentation is obtained, (2) provide training and TA to child care providers and the appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (addressed in section 6), and (3) conduct specific outreach to homeless families (658E(c)(3); 98.51).**

a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained.

When a family indicates on the application that they are experiencing homelessness the contractors shall provide for the enrollment of homeless children to begin immediately upon the parent signing the application for services pending the submittal of all eligibility and need documentation, and immunization records. Pursuant to 5 CCR, Section 18094, the contractor is required to provide the family with a NOA, approving or denying services within 30 days of the parent signing the application for services. During this 30 day period, contractors are encouraged to support the homeless family by providing child care services while the family obtains any required documentation of need and any

missing immunization records. When the parent is unable to provide the required documentation of need, including documentation of seeking permanent housing, or the immunization records within the 30 day period, the contractor is required to provide a NOA, Denial of Services stating that the denial is due to the inability to provide required documentation of need. If the family has been found ineligible after all documentation is received, it is not considered an improper payment and the family should be immediately disenrolled. The family must be provided due process pursuant to 5 CCR Section 18094. General guidance from Community Care Licensing Division (CCLD) is that a child who is homeless may be admitted immediately even if the child arrives without immunization records. Contractors should utilize their resources to make sure these students have received all required immunizations as soon as possible. It is expected that if there is a delay in obtaining immunizations, that this information be documented and readily available during inspection by CCLD. APPs are not required to collect immunization records, as stated in 5 CCR, Section 18081. Contractors can use some of the provided sample documents on the CDE resources web page found at <https://www.cde.ca.gov/sp/hs/cyl/> in supporting the families as they work to obtain any required documentation or immunization records.

b) Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.

- Lead Agency accepts applications at local community-based locations
- Partnerships with community-based organizations
- Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care
- Other

As California continues to work to best serve families and children who are experiencing homelessness there are resources at the federal, state, and local level to support and assist programs. The CDE has shared with agencies the Department of Health and Human Services Administration for Children and Families document titled, "Policies and Procedures to Increase Access to ECE Services for Homeless Children & Families." This particular document provides some strategies for working with children and families who are homeless and

identifies the policies specific to both Head Start and policies specific to the Child Care and Development Fund. The CDE also has shared information from the Office of Head Start website Early Childhood Learning and Knowledge Center, secondly, modules as an interactive learning series to support and assist professionals in the early childhood field to learn how to identify and provide outreach to children and families who are experiencing homelessness.

In the recently released Management Bulletin (MB) 18-04, contractors were directed to sample documents on the CDE resources web page found at <https://www.cde.ca.gov/sp/hs/cy/> and were encouraged to reach out to their Local Educational Agency (LEA) which designates a staff member as a local homeless educational liaison. This individual, among other things, links students and their families to the schools and community services, assists the student with enrolling in school, provides educational services for which they are eligible and gives referrals to health, mental health, dental and other appropriate services. Additionally, CDE shared the contact information for the Consultant and State Homeless Coordinator for the California Department of Education, Coordinated School Health and Safety Office.

*Note:* The Lead Agency shall pay any amount owed to a child care provider for services provided as a result of the initial eligibility determination, and any CCDF payment made prior to the final eligibility determination shall not be considered an error or improper payment (98.51(a)(1)(ii)).

**3.2.6 Lead Agencies must establish a grace period that allows homeless children and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements (as described in section 5). The length of such a grace period shall be established in consultation with the state, territorial, or tribal health agency (658E(c)(2)(I)(i)(I); 98.41(a)(1)(i)(C)).**

Note:

Any payment for such a child during the grace period shall not be considered an error or improper payment (98.41(a)(1)(i)(C)(2)).

a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:

Children experiencing homelessness (as defined by Lead Agency's CCDF)

As explained to contractors in MB 18-04 which can be found at <https://www.cde.ca.gov/sp/cd/ci/mb1804.asp> contractors are allowed to enroll homeless families without immunization records, giving families a grace period to obtain/provide proof of immunizations. The grace period for obtaining the immunization records can also be considered the 30 day period between the parent signing the application for service and the day the contractor approves or denies the application. In consultation with representatives from California Department of Social Services (CDSS), Community Care Licensing (CCL), while pending the implementation of new regulations allowing the 30 day grace period, CCLD provided general guidance that they would not cite an agency if a child who is homeless was admitted immediately even if the child arrived without immunization records. Since, this is not stipulated in regulations yet, contractors are expected to utilize their resources to make sure these children have received all required immunizations as soon as possible and CCLD expects that if there is a delay in obtaining immunizations, that this information be documented and readily available during inspection by CCLD. There is no citation yet, other than direction in the MB as regulations are pending.

Provide the citation for this policy and procedure.

Pursuant to 5 CCR, Section 18094 and described in MB 18-04

Children who are in foster care.

N/A

Provide the citation for this policy and procedure.

N/A

b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and

other health and safety requirements (98.41(a)(1)(i)(C)(4)).

General guidance from CCLD is that a child who is homeless may be admitted immediately even if the child arrives without immunization records. Contractors should utilize their resources to make sure these students have received all required immunizations as soon as possible. It is expected that if there is a delay in obtaining immunizations, that this information be documented and readily available during inspection by CCLD.

c) Does the Lead Agency establish grace periods for other children who are not experiencing homelessness or in foster care?

No.

Yes.

Describe:

N/A

## 3.3 Protection for Working Families

### **3.3.1 12-Month eligibility.**

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period, regardless of changes in income (as long as the income does not exceed the federal threshold of 85 percent of the state median income) or temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).

This change means that a Lead Agency may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold, but not the federal threshold of 85 percent of SMI. The Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. A temporary change in eligible activity includes, at a minimum, any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or

education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the 12-month eligibility period (except as described in 3.1.1); and any changes in residency within the state, territory, or tribal service area.

a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity.

The Budget Act of 2017 established 12-month eligibility. Once certified for child care services, a family is considered to meet eligibility and need requirements for not less than 12 months, will receive services for not less than 12 months before having their eligibility or need recertified, and will not be required to report changes, except when a family's income exceeds 85 percent of the SMI.

Contractors are not precluded from having a policy allowing parents to request a temporary suspension of services during the 12-month eligibility period. During the temporary suspension of services, contractors do not report attendance for those families. Upon return after the temporary suspension, family will receive services based on the certified hours they were receiving before they left.

Also, pursuant to *EC 8263* during the 12 month eligibility period a parent may voluntarily report changes to request a change in services, for example a temporary change in service. The responsibility and requirements of the contractors and parents when this voluntary request is made is described in the Implementation Guidance Section 18084.2 provided as Attachment A in Management Bulletin 17-14 at <http://www.cde.ca.gov/sp/cd/ci/documents/twelvemonthguidance.doc>.

b) How does the Lead Agency define "temporary change?"

No definition for temporary change has been established. Families are determined eligible for no less than 12 months, and there is no requirement for them to report any changes, except when income is above 85 percent of SMI. If income changes are due to temporary fluctuations such as overtime, bonuses, etcetera, contractors shall calculate average income as described in section 3.1.8 of the State Plan.

c) Provide the citation for this policy and/or procedure.

The Budget Act of 2017 established 12-month eligibility and authorized the CDE to implement through issuance of aMB or similar letter of instruction. The MB includes a guidance document which, pursuant to EC, Section 8263(j), has the same force and effect in law as regulations promulgated through the formal rulemaking process, it can be found on the CDE Website at:

<https://www.cde.ca.gov/sp/cd/ci/documents/twelvemonthguidance.doc>.

### **3.3.2 Option to discontinue assistance during the 12-month eligibility period.**

Lead Agencies have the option, but are not required, to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity (i.e., if the parent experiences a temporary change in his or her status as working or participating in a training or educational program, as described in section 3.3.1 of the plan).

If the Lead Agency chooses the option to discontinue assistance due to a parent's non-temporary loss or cessation of eligible activity, it must continue assistance at least at the same level for a period of not fewer than 3 months after each such loss or cessation for the parent to engage in a job search and to resume work or resume attendance in a job training or educational program. At the end of the minimum 3-month period of continued assistance, if the parent has engaged in a qualifying work, training, or educational program activity with an income below 85 percent of SMI, assistance cannot be terminated, and the child must continue receiving assistance until the next scheduled redetermination or, at the Lead Agency option, for an additional minimum 12-month eligibility period.

a) Does the Lead Agency choose to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?

- No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program.

- Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:
- i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:

N/A

- ii. Describe what specific actions/changes trigger the job-search period.

N/A

- iii. How long is the job-search period (must be at least 3 months)?

N/A

- iv. Provide the citation for this policy or procedure.

N/A

b) The Lead Agency may discontinue assistance prior to the next 12-month redetermination in the following limited circumstances. Check and describe any circumstances in which the Lead Agency chooses to discontinue assistance prior to the next 12-month redetermination. Check all that apply.

- Not applicable.
- Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

- i. Define the number of unexplained absences identified as excessive:

N/A

- ii. Provide the citation for this policy or procedure:

N/A

- A change in residency outside of the state, territory, or tribal service area.

Provide the citation for this policy or procedure:

N/A

- Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility.

Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure.

N/A

### 3.3.3 Change reporting during the 12-month eligibility period.

The Lead Agency must describe the requirements for parents to report changes in circumstances during the 12-month eligibility period and describe efforts to ensure that such requirements do not place an undue burden on eligible families, which could impact the continuity of care for children and stability for families receiving CCDF services (98.16(h)(1)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.1.7(b).

Families are required to report a change to the Lead Agency at any time during the 12-month eligibility period if the family's income exceeds 85 percent of the state median income, taking into account irregular fluctuations in income (98.21(e)(1)). If the Lead Agency chooses the option to terminate assistance, as described in section 3.3.2 of the plan, they may require families to report a non-temporary change (as described in section 3.3.3 of the plan) in work, training or educational activities (otherwise known as a parent's eligible activity).

a) Does the Lead Agency require families to report a non-temporary change in a parent's eligible activity?

No

Yes

b) Any additional reporting requirements during the 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., income changes over 85 percent of SMI or that impact the Lead Agency's ability to contact the family or pay the child care providers (e.g., a family's change of address, a change in the parent's choice of child care provider).

Check and describe any additional reporting requirements required by the Lead Agency during the 12-month eligibility period. Check all that apply.

- [Additional changes that may impact a family's eligibility during the 12-month period.](#)

[Describe:](#)

California requires families that are determined income eligible to report income exceeding 85 percent SMI [EC 8263 (h)(2)].

Sub grantees may set attendance policies that promote the importance of continuity of care for children and allows for temporary changes in families need for services, and may include provisions for the abandonment of care.

Pursuant to *EC 8263*, during the 12 month eligibility period a parent may voluntarily report changes to request a change in services, for example a temporary change in service. Contractors may have a policy allowing parents to request a temporary suspension of services during which time attendance would not be reported. Upon return after the temporary suspension, the family will receive services based on the certified hours they were receiving before they left.

As far as gaps in service due to unexcused absences, for example, an extended family vacation, the parent is still required to abide by the contractor's absence policies, which may include a provision about disenrollment in the event that exceed the limited number of unexcused absences.

- [Changes that impact the Lead Agency's ability to contact the family.](#)

[Describe:](#)

Agencies may set policies and procedures for the families including requirements to report changes of address.

- [Changes that impact the Lead Agency's ability to pay child care providers.](#)

[Describe:](#)

Agencies shall set policies and procedures for provider participation and they may also set policies and procedures for delinquency of fees. 18220.6 - 5 CCR Section 18221

[Any additional reporting requirements that the Lead Agency chooses, as its option to require from parents during the 12-month eligibility period, shall not require an office](#)

visit. In addition, the Lead Agency must offer a range of notification options to accommodate families.

c) How does the Lead Agency allow for families to report changes to ensure that reporting requirements are not burdensome and to avoid an impact on continued eligibility between redeterminations? Check all that apply.

- Phone
- Email
- Online forms
- Extended submission hours
- Postal Mail
- FAX
- In-person submission
- Other.

Describe:

Upon establishing initial eligibility or ongoing eligibility for services a family shall be considered to meet all eligibility and need requirements for those services for not less than 12 months, shall receive services for not less than 12 months before having their eligibility or need recertified, and shall not be required to report changes in income or other changes for at least 12 months (EC 8263 (h)) except when income is over 85 percent SMI.

d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

i. Describe any other changes that the Lead Agency allows families to report.

A family may at any time voluntarily report income or other changes. This information shall be used, as applicable, to reduce the family's fees, increase the family's services, or extend the period of the family's eligibility before recertification.

ii. Provide the citation for this policy or procedure.

EC, Section 8263(h)

### 3.3.4 Prevent the disruption of employment, education, or job training activities

Lead Agencies are required to have procedures and policies in place to ensure that parents (especially parents receiving assistance under the TANF program) are not required to unduly disrupt their employment, education, or job training activities to comply with the Lead Agency's or designated local entity's requirements for the redetermination of eligibility for assistance (658E(c)(2)(N)(ii); 98.21(d)).

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, states and territories can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g. use of languages other than English, access to transportation, accommodation of parents working non-traditional hours, etc.).

a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the state/territory's or designated local entity's requirements for the redetermination of eligibility.

- Advance notice to parents of pending redetermination
- Advance notice to providers of pending redetermination
- Pre-populated subsidy renewal form
- Online documentation submission
- Cross-program redeterminations
- Extended office hours (evenings and/or weekends)
- Other.

Describe:

Families receiving CalWORKs cash aid are categorically eligible for services and pay no family fees. A CalWORKs cash aid family does not need to report changes

in income or family size while they receive cash aid, and cannot be terminated for failure to do so. A contractor's policies must not supersede the categorical eligibility of a family receiving CalWORKs cash aid. In the event a categorically eligible family would otherwise have their child care terminated due to the family's violation of a child care contractor's policies, the contractor must notify the CWD of the actions by the family that violated the contractor's policy. This will determine what action(s) may be taken, including referring the family back to the Stage 1 Program. (5 CCR Section 18408).

Pursuant to 5 CCR Section 18225, contractors are required to provide services to the families enrolled in the program continuously throughout the contract period. Additionally, pursuant to EC 8263(i)(1) because a family that meets eligibility requirements at its most recent eligibility certification or recertification is considered eligible until the next recertification, as provided in subdivision (h), a payment made by a child development program for a child during this period shall not be considered an error or an improper payment due to a change in the family's circumstances during that same period.

Pursuant to EC 8212, Resource and Referral programs shall provide information about the full range of services and shall establish a referral process, which responds to the family's need for information.

Pursuant to EC 8220.1 THE CDE shall contract with local agencies for alternative payment programs so that services will be available throughout the state. The CDE shall expand the existing alternative programs and fund new alternative payment programs to the extent that funds are provided by Legislature.

Pursuant to EC 8227.5, and 8227.6 use of digital signatures, and use of digital forms, respectively, allow easier access to services of the alternative payment programs for parents.

b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.

- Postal Mail
- Email
- Online forms
- FAX
- In-person submission
- Extended submission hours
- Other.

Describe:

Varies and is based on each local agency's policies

### 3.4 Family Contribution to Payments

Lead Agencies are required to establish and periodically revise a sliding-fee scale for CCDF families that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF funds (658E(c)(5)). In addition to income and the size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. Lead Agencies, however, may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).

Note: To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies only to families in their initial/entry eligibility period. See section 3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

#### **3.4.1 Provide the CCDF co-payments in the chart below according to family size for one child in care.**

a) Fill in the chart based on the most populous area of the State (area serving highest number of CCDF children).

	(a)	(b)	(c)	(d)	(e)	(f)
<b>Family Size</b>	<b>Lowest Initial or First Tier</b>	<b>What Is the Monthly Co-Payment for a</b>	<b>The Co-Payment in</b>	<b>Highest Initial or First Tier</b>	<b>What Is the Monthly Co-Payment for a</b>	<b>The Co-Payment in</b>

	(a)	(b)	(c)	(d)	(e)	(f)
	Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	Family of This Size Based on the Income Level in (a)?	Column (b) is What Percentage of the Income in Column (a)?	Income Level Before a Family Is No Longer Eligible	Family of This Size Based on the Income Level in (d)?	Column (e) is What Percentage of the Income in Column (d)?
1	\$2,325	\$58 Full-time monthly fee	2.49%	\$5,067	\$502	9.91%
2	\$2,325	\$58 Full-time monthly fee	2.49%	\$5,067	\$502	9.91%
3	\$2,508	\$58 Full-time monthly fee	2.31%	\$5,467	\$541	9.90%
4	\$2,928	\$58 Full-time monthly fee	1.98%	\$6,383	\$632	9.90%
5	\$3,397	\$58 Full-time monthly fee	1.71%	\$7,404	\$632	8.54%

b) What is the effective date of the sliding-fee scale(s)? July 1, 2018

c) Identify the most populous area of the state used to complete the chart above.

Los Angeles County

d) Provide the link to the sliding-fee scale:

<https://www.cde.ca.gov/sp/cd/ci/documents/famfeeschedjuly2018.xls>

e) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

N/A

### 3.4.2 How will the family's contribution be calculated, and to whom will it be applied?

Check all that apply.

- The fee is a dollar amount and:
  - The fee is per child, with the same fee for each child.
  - The fee is per child and is discounted for two or more children.

- The fee is per child up to a maximum per family.
- No additional fee is charged after certain number of children.
- The fee is per family.
- The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

N/A

- Other.

Describe:

N/A

- The fee is a percent of income and:

- The fee is per child, with the same percentage applied for each child.
- The fee is per child, and a discounted percentage is applied for two or more children.
- The fee is per child up to a maximum per family.
- No additional percentage is charged after certain number of children.
- The fee is per family.
- The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

N/A

- Other.

Describe:

N/A

**3.4.3 Does the Lead Agency use other factors in addition to income and family size to determine each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).**

No.

Yes, check and describe those additional factors below.

Number of hours the child is in care.

Describe:

Families will be assessed either a flat monthly full-time fee or part-time fee, based on hours of care certified for the month, income, and family size. Families with a certified need of less than 130 hours per month will be assessed a part-time fee while families with a certified need of 130 hours or more per month will be assessed a full-time fee.

Lower co-payments for a higher quality of care, as defined by the state/territory.

Describe:

N/A

Other.

Describe:

N/A

**3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.**

No, the Lead Agency does not waive family contributions/co-payments.

Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size.

Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility.

Describe the policy and provide the policy citation.

Families who establish eligibility based on CPS or at-risk categorical may be exempt from family fees for up to 12 months, when the CPS plan indicates that fees shall be waived EC 8273.

- Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency.

Describe the policy and provide the policy citation.

Families who are receiving TANF Cash Aid.

## 4 Ensure Equal Access to Child Care for Low-Income Children

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each State/Territory identifies and defines its own categories and types of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

### 4.1 Parental Choice in Relation to Certificates, Grants, or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling his or her child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll his or her child with a provider who

has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider or faith-based provider, etc.) (98.15 (a)(5)).

**4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)).**

A state as large and diverse as California necessitates that there are several ways to ensure parents are informed about the full array of early learning and care options. When a parent calls or visits an R&R agency seeking information about early learning and care choices, he/she is counseled about how to select the most appropriate care to meet the family’s needs. At that time, he/she is given a list of several early learning and care providers of the types and in the locations (whether near home, work, or place of training) in which he/she has indicated an interest. The APPs also offer and explain the full array of early learning and care setting options to parents who are eligible for early learning and care subsidy and assist them with finding the appropriate care to meet their needs.

**4.1.2 Describe how the parent is informed that the child certificate allows the option to choose from a variety of child care categories, such as private, not-for-profit, faith-based providers; centers; FCC homes; or in-home providers (658E(c)(2)(A)(i); 658P(2); 658Q).**

**Check all that apply.**

- Certificate that provides information about the choice of providers
- Certificate that provides information about the quality of providers
- Certificate not linked to a specific provider, so parents can choose any provider
- Consumer education materials on choosing child care

- Referral to child care resource and referral agencies
- Co-located resource and referral in eligibility offices
- Verbal communication at the time of the application
- Community outreach, workshops, or other in-person activities
- Other.

Describe:

N/A

#### 4.1.3 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))? Note: Do not check 'yes' if every provider is simply required to sign an agreement to be paid in the certificate program.

- No. If no, skip to 4.1.4.
- Yes, in some jurisdictions but not statewide.

If yes, describe how many jurisdictions use grants or contracts for child care slots.

N/A

- Yes, statewide. If yes, describe:

i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

The Resource and Referral agencies are required to have written referral policies, which are available to all persons requesting them regardless of income level or other eligibility requirements. The agencies shall assist parents in choosing a provider by providing parents with information regarding how to select child care services, and the range of possible child care alternatives from which to choose.

ii. The type(s) of child care services available through grants or contracts:

Infant/toddler, preschool, and school age center based services or family child care home education networks.

iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):

APP and direct service receive contracts for services. The R&R agencies are supported through contracts. The LPCs provide allocation needs for each of the counties

iv. The process for accessing grants or contracts:

When there is new funding available, the CDE initiates the Request for Application (RFA) process and the availability of funding is announced. The RFA for an award of new funding for early learning and care and development services or expansion of existing level of services, is posted on the Funding Web page at: <https://www.cde.ca.gov/fg/fo/>. The CDE also provides training and technical assistance for applicants via webinar and other formats. For new and renewing contractors, a training session/webinar was held to train them on program, fiscal, and reporting. The CDE held these in September and October 2017.

v. How rates for contracted slots are set through grants and contracts:

The Legislature sets the standard reimbursement rates (SRR's), which is reflected in statute (EC 8265) and provisional budget language. To determine a contract maximum reimbursable amount (MRA), the contractor uses the SRR multiplied by the total child days of enrollment. This number sets the amount of the contract agreement between the lead agency and the contractor.

vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality:

When funding is available for expansion of services, the CDE releases a Request for Funding Application, which is sent to *Local Educational Agencies (LEA) and other agencies that currently hold contracts with CDE as well as LEAs and other agencies that have never had a CDE contract previously. Funds are intended to increase the availability of services to eligible children based on the needs of families in the community being served. The applications are evaluated and scored solely on the assessment of the written narrative.*

vii. If contracts are offered statewide and/or locally:

The CDE has contracts to provide early learning and care services with local entities statewide, which may include LEAs.

4.1.3 Child care services available through grants or contracts.

b) Will the Lead Agency use grants or contracts for child care services to increase the supply and/or quality of specific types of care? Check all that apply.

- Programs to serve children with disabilities
- Programs to serve infants and toddlers
- Programs to serve school-age children
- Programs to serve children needing non-traditional hour care
- Programs to serve children experiencing homelessness
- Programs to serve children in underserved areas
- Programs that serve children with diverse linguistic or cultural backgrounds
- Programs that serve specific geographic areas
  - Urban
  - Rural
- Other  
Describe

Consistent with statutory requirement, each fiscal year the budget identifies the amount of funding available for distribution in each program (for a summary of early learning and care and Development programs, see <https://www.cde.ca.gov/sp/cd/op/cdprograms.asp>). The CDE uses Local Child Care and Development Planning Council (LPC) priorities, updated annually, to distribute funds in the form of contracts to the most needy zip codes in terms of infant/toddler care, preschool-aged care, and school-aged care. The LPC priorities indicate underserved areas at the zip code level. This information allows the CDE to continually refocus funding to increase the supply of early learning services in the most needy areas of the state. This data is also being used to award grants for the \$167 million Inclusive Early Education Expansion Program that has the specific objective of increasing the supply of inclusive early learning settings.

#### 4.1.3 Child care services available through grants or contracts.

c) Will the Lead Agency use grants or contracts for child care services to increase the quality of specific types of care? Check all that apply.

- Programs to serve children with disabilities
- Programs to serve infants and toddlers
- Programs to serve school-age children
- Programs to serve children needing non-traditional hour care
- Programs to serve homeless children
- Programs to serve children in underserved areas
- Programs that serve children with diverse linguistic or cultural backgrounds
- Programs that serve specific geographic areas
  - Urban
  - Rural
- Other

Describe

N/A

#### 4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)).

Licensing requirements require providers to inform parents they have unlimited access to children in care. Written materials given to parents and providers at redetermination contain the same information and the CDE monitors to ensure that the requirement is met. The CDE - FSO consultants ensure agencies are providing this service as part of the monitoring and review process. The agencies include this information in both the parent and provider files.

**4.1.5 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(i)(2)). 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 that apply.

Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements.

Describe:

The in home provider must serve a minimum number of children to ensure that they are meeting California state minimum wage requirements.

Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2).

Describe:

N/A

Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours).

Describe:

N/A

Restricted to care by relatives.

Describe:

N/A

Restricted to care for children with special needs or a medical condition.

Describe:

N/A

- Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF.

Describe:

N/A

- Other.

Describe:

Any individual other than a grandparent, aunt, or uncle, providing care must be checked with TrustLine registry.

## 4.2 Assessing Market Rates and Child Care Costs

Lead Agencies have the option to conduct a statistically valid and reliable (1) market rate survey (MRS) reflecting variations in the price to parents of child care services by geographic area, type of provider, and age of child and/or (2) an alternative methodology, such as a cost estimation model (658E(c)(4)(B)). A cost estimation model estimates the cost of care by incorporating both data and assumptions to model what expected costs would be incurred by child care providers and parents under different cost scenarios. Another approach would be a cost study that collects cost data at the facility or program level to measure the costs (or inputs used) to deliver child care services. The MRS or alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan.

Note - Any Lead Agency considering using an alternative methodology, instead of a market rate survey, is required to submit a description of its proposed approach to its ACF Regional Child Care Program Office for pre-approval in advance of the Plan submittal (see <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2016-08>). Advance approval is not required if the Lead Agency plans to implement both a market rate survey and an alternative methodology. In its request for ACF pre-approval, a Lead Agency must:

- Provide an overview of the Lead Agency's proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.

- Describe how the Lead Agency will consult with the State's Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, organizations representing child care caregivers, teachers and directors,

and other appropriate entities prior to conducting the identified alternative methodology.

- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the model.
- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care'such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.
- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.
- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.
- Describe how the alternative methodology will use current, up to date data.
- Describe the estimated reporting burden and cost to conduct the approach.

**4.2.1 Please identify the methodology(ies) used below to assess child care prices and/or costs.**

MRS

Alternative methodology.

Describe:

N/A

Both.

Describe:

N/A

**4.2.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors (98.45 (e)).**

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

Through the California Comprehensive Early Learning Plan (CCELP) stakeholders, members of the SAC and partnering state agencies, including the CDE, mentions ensuring that even as it raises expectations for the workforce through the Early Childhood Educator (ECE) Competencies, career pathways, and staff qualifications California will need to simultaneously take steps to ensure that the workforce is diverse and reflects the population of the State. Early childhood professionals with academic degrees that are comparable to those of K-12 teachers earn only about half of what K-teachers earn, leading to very high turnover. Better compensation will help programs recruit and retain qualified staff. For more information please visit:

<https://www.cde.ca.gov/sp/cd/ce/documents/compearlylearningplan2013.pdf> (CCELP, page 15).

b) Local child care program administrators:

N/A

c) Local child care resource and referral agencies:

N/A

d) Organizations representing caregivers, teachers, and directors:

N/A

e) Other. Describe:

The Market Rate Survey (MRS) methodology used for the 2016 survey was approved by

the California State Legislature in 2004, and has been the only authorized methodology used in the 2005, 2007, 2009, 2012 and 2014 MRS. Prior to each MRS, the local R&R agencies are notified that the MRS will soon commence. The R&R's notify and encourage their providers to participate in the MRS.

**4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods.**

In the 2016 MRS, California's survey vendor identified a sample each of the licensed center and licensed family child care home (FCCH) populations. The contractor drew a sample from a population based on the California Department of Social Services (CDSS), Community Care Licensing Division (CCLD) database, as well as datasets of providers from nearly all of the R&R agencies in California. Of the 9,433 licensed centers population, the identified sample total was 6,869; of the 30,300 FCCH population, the identified sample was 8,032. For centers, the contractors drew a sample by multiple strata: market profiles and then license type (e.g. infant, preschool, school age); for FCCH, the contractor drew samples by the market profile stratum. Market profiles are groupings of ZIP Code Tabulation Areas that share similar socioeconomic characteristics, which accounts for variation in geographics, both at the state level and within counties. Data collection was multi-faceted and included a pre-notification letter announcing the upcoming survey, distribution of the survey by mail, and three follow-up mailings. Providers had the option of completing a web version of the survey. For non-responsive providers in the sample, the survey vendor attempted up to 15 follow-upcalls. Data analysis included reviewing respondent rates for errors. Of the 14,901 providers that were sent surveys, 5,545 responded either through the web, mail, or phone surveys; this is a response rate of 37.21%.

**4.2.4 Describe how the market rate survey or alternative methodology reflects variations in the price or cost of child care services by:**

a) Geographic area (e.g., statewide or local markets). Describe:

All 58 counties of the State of California were included in the MRS sample.

b) Type of provider. Describe:

All Licensed Child Care Centers (LCC) and Licensed Family Child Care Homes (LFCH), including those that contracted directly with the CDE, whose programs served any children whose services weren't subsidized. LCCs and LFCHs that only served subsidized children were excluded from the survey population.

c) Age of child. Describe:

Infant (under two years of age), preschooler (between the ages of two through five), and school-age (age six and older).

d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level.

N/A

**4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures.)**

Describe how the Lead Agency made the results of the market rate survey or alternative methodology report widely available to the public (98.45(f)(1)). by responding to the questions below.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 04/14/2017

b) Date the report containing results was made widely available - no later than 30 days after the completion of the report. The CDE has not made the 2016 MRS report widely available. We attempted to post the report to the CDE website early in 2018, after changes to Section 508 of the Rehabilitation Act went into effect. The CDE has strict requirements for publishing documents that are accessible and conform to Section 508. The CDE will be making the 2018 MRS report widely available by posting it on the CDE website as soon as it is ready. While the CDE has not published the report itself, it has made the reimbursement rate ceilings, which are derived from the report, widely available. These rates were posted to the CDE website on January 2, 2018.

c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

The CDE distributed the MRS report to California control agencies including the Legislative Analyst's Office and the Department of Finance. Additionally, the CDE shared the report with the state's Department of Social Services, and has also provided it to other individuals and groups upon request. The report has not been published to the CDE website or distributed in hard copy widely. The CDE will be making the 2018 MRS report widely available when it is ready.

The CDE distributed the MRS report to California control agencies including the Legislative Analyst's Office and the Department of Finance. Additionally, the CDE shared the report with the state's Department of Social Services, and has also provided it to other individuals and groups upon request. The report has not been published to the CDE website or distributed in hard copy widely. The CDE will be making the 2018 MRS report widely available when it is ready.

d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report.

The CDE did not consider stakeholder views and comments in the detailed report.

### 4.3 Setting Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or alternative methodology, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF funds. The Lead Agency must re-evaluate its payment rates at least every 3 years.

**4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an alternative methodology. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.**

a) Infant (6 months), full-time licensed center care in the most populous geographic region

Rate \$ 1,594.48 per Month unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

b) Infant (6 months), full-time licensed FCC home in the most populous geographic region

Rate \$ 927.25 per Month unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: between the 75th and 76th

c) Toddler (18 months), full-time licensed center care in the most populous geographic region

Rate \$ \*1,594.48 per Month unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region

Rate \$ 927.25 per Month unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: between the 75th and 76th

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

Rate \$ 1,124.28 per Month unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 866.57 per Month unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75th

g) School-age child (6 years), full-time licensed center care in most populous geographic region

Rate \$ 904.68 per Month unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 75th

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 657.27 per Month unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: between the 76th and 77th

i) Describe how part-time and full-time care were defined and calculated.

California did not define part-time or full-time care in the survey. Rather, survey respondents indicated the number of weekly hours that represented their full-time threshold; any hours below the threshold are inherently part-time. Part-time and full-time grouped and calculated separately. Part-time and full-time rates were further calculated separately by market profile.

j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). January 1, 2018

k) Identify the most populous area of the state used to complete the responses above.  
Los Angeles County

l) Provide the citation or link, if available, to the payment rates. The CDE Website Reimbursement Ceiling for Subsidized early learning and care  
<https://www3.cde.ca.gov/rcscc/index.aspx>

m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

Statewide payment rates are determined in the annual budget act, as passed by the legislature and approved by the Governor.

**4.3.2 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).**

Check and describe the types of tiered reimbursement or differential rates, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

Differential rate for *non-traditional hours*.

Describe:

When the licensed provider is meeting the certified need for early learning and care that includes hours during the period from 6:00 p.m. to 6:00 a.m. on any day of the week or from 6:00 a.m. Saturday to 6:00 a.m. Monday, the contractors shall multiply the regional market rate ceiling for the applicable rate category by the appropriate adjustment factor as follows: 1) by 1.25 when 50 percent or more of the certified need for early learning and care occurs during this period 2) by 1.125 when at least ten percent, but less than 50 percent of the certified need for early learning and care occurs during this period. When the need for care is less than 10 percent, there is no adjustment.

Differential rate for *children with special needs*, as defined by the state/territory.

Describe:

When early learning and care and developmental services are provided to a child with exceptional needs, the contractor shall multiply the lesser of the RMR ceiling or the provider rate, whichever is lower, by only one of the following:

- 1) 1.2, when the child has an exceptional need as defined in *EC*, Section 8208(I),
- 2) 1.5 when the child is severely disabled as defined in *EC*, 8208 (y).

Differential rate for *infants and toddlers*. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

N/A

Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

N/A

Differential rate for higher quality, as defined by the state/territory.

Describe:

N/A

Other differential rates or tiered rates.

Describe:

N/A

Tiered or differential rates are not implemented.

## 4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access

**4.4.1 Lead Agencies must certify that CCDF payment rates are sufficient to ensure equal access for eligible families to child care services comparable to those provided by families not receiving CCDF assistance (98.16(a)). Certify that payment rates reported in 4.3.1 are sufficient to ensure equal access by providing the following summary of facts (98.45(b)):**

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices.

Through the Market Rate Survey (MRS), providers in various regions determine the normal and customary rates being charged by licensed providers by setting type and age groups in the region. Based on the results of the MRS, California's legislature has set the RMR ceilings at rates equal to or greater than the 75th percentile in order to allow subsidized families access to 75 percent of licensed child care centers and homes in the market. Additionally, families have access to license-exempt providers in the market. The CDE has not collected information regarding the extent of provider participation in the CCDF, nor has it collected information regarding barriers related to payment rates and practices. The CDE will be collecting this information during the 2018 Market Rate Survey (MRS). The CDE in collaboration with First 5 California (F5CA) has established a rates work group to discuss and identify different methodologies for establishing regional market rates as well as the cost of care.

b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology** . Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

The regional market rate survey collects information from licensed providers that must meet the requirements for health, safety, supervision and staffing ratios set forth in 22CCR. The regional market rate survey contract will include an alternate rate methodology to identify barriers.

Effective January 1, 2018, California's payment rates are set at the 75th percentile of the 2016 MRS. This standard is consistent with ACF's view of the 75th percentile as being the benchmark for gauging equal access. As the results of the 2016 MRS indicated an increase in provider rates, as compared to the results of the 2014 MRS, California enacted the higher rates from the 2016 MRS. In cases where the 2016 rates were higher than the 2014 rates, California held affected providers harmless by enacting the greater of the 2016 rates or those that existed previously.

c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.

Because the MRS is a survey of providers that meet the health, safety, quality, and staffing requirements provided by the CCDF, the rates are inherently sufficient to meet these requirements. However, in part due to the increased cost of meeting these requirements and doing business, California updated the reimbursement rate ceilings, effective January 1, 2018, for licensed and unlicensed providers so that rates better reflected the costs of meeting CCDF requirements.

d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, Pre-K standards, Head Start performance standards, or State defined quality measures).

The CDE's MRS for 2016 was awarded to a successful bidder prior to the release of the final rule, as such the MRS for this year did not consider the cost of higher quality into account. The CDE's MRS for 2018 was awarded in a non-competitive bid under the same terms as the 2016 MRS request for proposals (RFP) and as such the CDE was unable to ask the successful bidder to account for the cost of higher quality.

The CDE is requiring all bidders for the 2020 MRS RFP to account for the cost of higher quality in surveying rates. The successful bidder will be required to measure the cost of quality as established in California's QRIS, Quality Counts California.

e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds (98.16 (k))? Check all that apply.

Limit the maximum co-payment per family.

Describe: .

EC 8273 states that family fees (copayments) shall not exceed 10 percent of families income.

Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

N/A

Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.1.7.

Families initial certification at 70 percent of SMI, they are recertified annually, at which time the family fee is reassessed based on their income until it exceeds 85 percent of SMI.

Other.

Describe:

N/A

f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

No

Yes. If yes:

i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.

The reimbursement rate ceiling is set at the 75th percentile allowing families access to 75 percent of the market at no additional cost. However, families may choose higher rate providers, and must pay the difference between the ceiling and the rate the provider charges.

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.

Data not collected.

iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

It is statutory requirement that the CDE only pays to the reimbursement ceiling.

g) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers.

Vouchers/certificates are issued based on the families certified need for care. Agencies pay the providers published rates for non-subsidized families up to the RMR ceiling, whichever is less. Families have access to 75 percent of the market. In areas where license providers maybe limited, families also have access to license-exempt providers.

Payment practices include paying the providers within no more than 21 days, and reimbursements in voucher programs are based on the hours of service that are broadly consistent with the certified hours of need rather than attendance. In direct service programs, reimbursements are based on enrollment rather than attendance except unexcused absences in excess of five percent if a child's total attendance.

Payment practices also include general programs paying on the basis of part time or fulltime ranging from full time plus (10.5 hours and over) to half time (under 4 hours). For

alternative payment programs reimbursement is based on the most applicable reimbursement ceiling established based on the market rate survey including, hourly, daily, part time weekly, part time monthly, and full time monthly.

h) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.

Geographic area.

Describe:

California uses the results of the MRS to establish regional market rate ceilings by county. Regional market rate ceilings are a composite of surveyed rates within market profiles within a given county. Market profiles are groupings of providers located in ZIP Code Tabulation Areas with similar socioeconomic characteristics.

Type of provider.

Describe:

California surveys LCC and LFCH.

Age of child.

Describe:

California surveys provider rates for ages birth through age two, age two through age five, and six years of age and above.

Quality level.

Describe:

N/A

Other.

Describe:

N/A

i) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access. Check all that apply and describe:

- Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS.

Describe:

Effective January 1, 2018, California's reimbursement ceilings are established as the greater of the 75th percentile of the 2016 MRS, or the rate in effect as of December 31, 2017, whichever is higher

- Based on the approved alternative methodology, payments rates ensure equal access.

Describe:

N/A

- Feedback from parents, including parent surveys or parental complaints.

Describe:

N/A

- Other.

Describe:

N/A

## 4.5 Payment Practices and the Timeliness of Payments

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted

payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(l)(3)).

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

#### **4.5.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.**

a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

N/A

Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

The CDE intends to update the FY 2019/20 funding terms and conditions to implement this provision. Contractors will be required to pay invoices no later than 21 days from the date they received a correct invoice.

b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead

Agency is to choose at least one of the following):

- Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

For providers reimbursed through voucher programs, reimbursement is based upon the hours of service provided that are broadly consistent with the certified hours of need, for variable schedules, the actual days and hours of attendance, up to the maximum certified hours, and for license-exempt providers, the actual days and hours of attendance, up to the maximum certified hours. For purposes of reimbursement to providers, contractors shall not be required to track attendance. ( *EC*, Section 8221.5) Organizations that contract directly with the CDE for early learning and care services are reimbursed based on enrollment rather than attendance. However, organizations are not reimbursed for unexcused absences in excess of five percent of a child's total attendance. Excused absences include illness or quarantine of parent or child, family emergency, or days where it is in the best interest of the child to not attend school.

- Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

N/A

- Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

N/A

- Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

N/A

c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state

(658E(c)(2)(S); 98.45(l)(3)).

i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

General programs are divided into four part day designations. The four designations in accord with *Education Code* Section 8266.1, are:

- Full-time plus (10.5 hours and over)
- Full-time (6.5 to under 10.5 hours)
- Three-quarters-time (4 to under 6.5 hours)
- Half-time (under 4 hours)

For Alternative Payment programs, the reimbursement ceilings are established based on market rate survey, agencies select the most applicable ceiling based on the families certified need ( 5CCR 18075). The ceilings are as follows:

- Hourly, typically this is used to reimburse for hours that are in excess of the certified need for care, i.e. overtime.
- Daily, six hour or more per day,
- Part-time weekly, less than 30 hours per week
- Part-time monthly, less than 30 hours per week and need occurs in every week of the month
- Full-time monthly, 30 hours or more per week and need occurs in every week of the month

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

Pursuant to 5CCR, Section 18076.1, subgrantees (i.e., Alternative Payment Programs) must reimburse fees charged by all providers, such as registration, material, and insurance, either in a single payment or prorated over a 12-month period, as long as the provider document the contractual terms used for services to unsubsidized families require payment for such fee; and the fees or prorated portion, plus the providers normal a customary rate, do not exceed the regional market rate ceiling.

d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe:

As part of the monitoring review process, the CDE ensures that the requirements regarding timely payment, provider policies, including rates, schedules and dispute-resolution process set for in 5CCR 18221-18224 and 18226 are being met.

e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur.

Describe:

The CDE has provided guidance through MBS to contractors regarding insuring that providers are notified when there are changes to the family's certification. Contractors are strongly encouraged to provide a copy of any NOA describing changes to certification to the providers. Additionally, the CDE is working with stakeholders including advocates, contractors, parents, and providers to identify and address efficiencies and improvements within the system.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

Currently contractors are required to set timely payment policies (5CCR 18226).

Additionally, contractors must set conflict resolution policies and provide to each provider

and parent. As part of this process, parents must be provided with information regarding the Uniform Complaint Process set forth in the *EC*, which requires complaints received by the CDE to be investigated and resolved within 30 days 5CCR 4660 - 4670.

g) Other. Describe:

N/A

#### **4.5.2 Do payment practices vary across regions, counties, and/or geographic areas?**

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

The CDE does not collect data regarding the payment practices of individual contractors, however, contractors are required to set policies regarding timely payments to providers to pay no less than once per month. The CDE has issued guidance encouraging contractors to set up payment systems that would allow multiple payment cycles within a month.

#### **4.6 Supply-Building Strategies to Meet the Needs of Certain Populations**

Lead Agencies are required to develop and implement strategies to increase the supply of and to improve the quality of child care services for children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours (658 E(c)(2)(M); 98.16 (x)).

**4.6.1 Lead Agencies must identify shortages in the supply of high-quality child care providers. List the data sources used to identify shortages, and describe the method of tracking progress to support equal access and parental choice.**

In licensed family child care.

N/A

In licensed child care centers.

N/A

Other.

Between 2014 and 2017, California's supply of licensed early learning and care has decreased, center-based decreased by three percent and family child care homes decreased by 10 percent. Only 23 percent of children (birth to 12 years old) with parents in the labor force have a licensed early learning and care slots available for them. (Data in this section is from the 2017 California Child Care Portfolio produced by the California Child Care R&R Network.) The CDE uses CCDF quality set-aside funds to support activities by both the LPCs and the local R&Rs to address community needs around areas of supporting providers and identifying and addressing the low supply of early learning and care. Additional information about supply of licensed care is collected at the county level by the LPCs as well as the R&Rs. The LPCs use their data to identify priority areas for subsidized early learning and care funding. Request for Funding Applications for subsidized early learning and care funding received from providers located in the LPC priority zip codes area receive priority for funding. The R&Rs support provider recruitment and training, including efforts to support license-exempt providers and encourage those interested to become licensed.

#### **4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.**

a) Children in underserved areas. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

EC requires the CDE to prioritize and distribute funding to underserved areas, where the ratio publicly subsidized services to the need for those services is low as

determined by the SSPI. To best support this, the CDE is updating formulas to address unintended inequities in services and funding amounts across the state.

[Family child care networks.](#)

[Describe:](#)

The EC requires that funding be prioritized and distributed to underserved areas, in areas where the ratio of publicly subsidized services to the need for those services is low as determined by the SSPI. These contractors can apply for services as centers or family child care home education networks (FCCHENs) Use of FCCHENs is particularly viable in remote rural communities.

[Start-up funding.](#)

[Describe:](#)

Contracted center based providers may receive up to 15 percent of their maximum reimbursement contract amount to be reimbursed for start-up costs.

[Technical assistance support.](#)

[Describe:](#)

EC requires that CCIP provided by R&R programs increase the availability of quality child care in the state by supporting individuals seeking to become licensing providers. QCC local consortia provide technical assistance to the participating providers to improve their quality. CCDBG funds are used to support a wide array of the CDE EESD Quality professional development systems that improve the quality of license-exempt and licensed providers. The CDE, along with F5CA, leads Quality Counts CA, working with local consortia to improve the quality of early learning settings.

[Recruitment of providers.](#)

[Describe:](#)

CCIP engages in outreach to underserved zip codes in each R&R's service area in order to recruit new family child care providers.

[Tiered payment rates \(as discussed in 4.3.2\).](#)

Describe:

N/A

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

CCIP includes training and technical assistance for providers in the area improving business practices. Additionally, The Business of Family Child Care is a recently developed set of modules that are posted for use on the California Early Childhood Online website.

- Accreditation supports.

Describe:

N/A

- Child Care Health Consultation.

Describe:

N/A

- Mental Health Consultation.

Describe:

The California Inclusion and Behavior Consultation Network provides support and consultation to providers serving children with special needs or behavior issues.

- Other.

Describe:

N/A

4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.

b) Infants and toddlers. Check and describe all that apply.

- Grants and contracts (as discussed in 4.1.3).

**Describe:**

In 2018-19, the CDE will be releasing a RFA specifically to support increased high-quality infant and toddler services. The EC requires the CDE to prioritize and distribute funding to underserved areas, where the ratio publicly subsidized services to the need for those services is low as determined by the SSPI. To best support this, the CDE is updating formulas to address unintended inequities in services and funding amounts across the state. Contracted programs have a reimbursement that includes an adjustment factor over the base rate in order to compensate for adult/child ratio requirements. In addition, the CDE is utilizing quality projects to support capacity building through efforts such as the CCIP and PITC with the R&Rs.

**Family child care networks.**

**Describe:**

Many of the FCCHENs have a focus on serving infants and toddlers.

**Start-up funding.**

**Describe:**

Contracted center based providers may receive up to 15 percent of their maximum reimbursement contract amount to be reimbursed for start-up costs.

**Technical assistance support.**

**Describe:**

The CDE EESD Quality Projects: Program for Infant/Toddler Care, Family Child Care at Its Best, and CCIP provide training and technical assistance for serving infants and toddlers in group care.

**Recruitment of providers.**

**Describe:**

As noted above, CCIP engages in outreach to underserved zip codes in each R&R's service area in order to recruit new providers, particularly for serving infants and toddlers.

Tiered payment rates (as discussed in 4.3.2) .

Describe:

N/A

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

CCIP includes training and technical assistance for providers in the area of improving business practices.

Accreditation supports.

Describe:

N/A

Child Care Health Consultation.

Describe:

N/A

Mental Health Consultation.

Describe:

The California Inclusion and Behavior Consultation Network provides support and consultation to providers serving children with special needs or behavior issues.

Other.

Describe:

The LPCs set local priorities that reflect the early learning and care needs for the county. These priorities are submitted to the CDE for use in allocating available funding *EC 8499.5* and provide priorities for infants and toddlers.

4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.

c) Children with disabilities. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

The Budget Act of 2018 provides \$167 million to support the inclusion of children birth to kindergarten entry in inclusive early learning and care settings. Grants will be provided to support facilities modifications, acquisition of appropriate materials and equipment for serving children with special needs, and targeted professional development and technical assistance.

Family child care networks.

Describe:

N/A

Start-up funding.

Describe:

N/A

Technical assistance support.

Describe:

The CDE EESD Quality Project, the California Inclusion and Behavior Consultation Network provides technical assistance to support inclusion of children with special needs in early learning and care settings. Likewise, the CA Collaborative for the Social-Emotional Foundations of Early Learning, provides the Teaching Pyramid training and coaching to support the inclusion of children with special needs in early learning and care settings.

Recruitment of providers.

Describe:

N/A

Tiered payment rates (as discussed in 4.3.2).

Describe:

N/A

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

N/A

- Accreditation supports.

Describe:

N/A

- Child Care Health Consultation.

Describe:

N/A

- Mental Health Consultation.

Describe:

N/A

- Other.

Describe:

The Budget Act of 2016 authorized the enrollment of 4-year olds with special needs regardless of income in the California State Preschool program.

4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.

d) Children who receive care during non-traditional hours. Check and describe all that apply

- Grants and contracts (as discussed in 4.1.3).

Describe:

Voucher programs allow services that include non-traditional hours.

- Family child care networks.

Describe:

N/A

Start-up funding.

Describe:

N/A

Technical assistance support.

Describe:

N/A

Recruitment of providers.

Describe:

CCIP outreaches to recruit individuals to meet the child care needs of families.

Tiered payment rates (as discussed in 4.3.2) .

Describe:

N/A

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

N/A

Accreditation supports.

Describe:

N/A

Child Care Health Consultation.

Describe:

N/A

Mental Health Consultation.

Describe:

N/A

Other.

Describe:

Meeting the certified need during the hours of 6:00pm to 6:00am on any day of the week or 6:00am Saturday to 6:00am Monday the contractor shall receive an adjustment of 1.25 when 50 percent or more of the certified need occurs during those hours and an adjustment factor of 1.125 when at least 10 percent less than 50 percent of the certified hours fall within those time frames. 5CCR 18075.1

4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.

e) Other. Check and describe all that apply:

Grants and contracts (as discussed in 4.1.3).

Describe:

N/A

Family child care networks.

Describe:

N/A

Start-up funding.

Describe:

N/A

Technical assistance support.

Describe:

N/A

Recruitment of providers.

Describe:

N/A

Tiered payment rates (as discussed in 4.3.2).

Describe:

N/A

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

N/A

Accreditation supports.

Describe:

N/A

Child Care Health Consultation.

Describe:

N/A

Mental Health Consultation.

Describe:

N/A

Other.

Describe:

N/A

**4.6.3 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs.**

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

The LPCs are required to conduct an assessment of early learning and care needs every five years. The SSPI defines the data elements for the needs assessment and specifies the format for data reporting. The needs assessment must also include all factors deemed appropriate by the LPC in order to obtain an accurate picture of the comprehensive early learning and care needs in the county. EC 8499.5 (b)(1) identifies factors that will be included.

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs

EC requires that funding be prioritized and distributed to underserved areas where the ratio of publicly subsidized services to the need for those services is low as determined by the SSPI. EC, Section 8499.5 describes the responsibilities of LPC to establish local priorities for the early learning and care needs of the county.

(a) The department shall allocate early learning and care and funding pursuant to Chapter 2 (commencing with Section 8200) based on the amount of state and federal funding that is available.

(b) By May 30 of each year, upon approval by the county board of supervisors and the county superintendent of schools, a local planning council shall submit to the department the local priorities it has identified that reflect all early learning and care needs in the county. To accomplish this, a LPC shall do all of the following:

(1) Conduct an assessment of early learning and care needs in the county no less frequently than once every five years. The department shall define and prescribe data elements to be included in the needs assessment and shall specify the format for the data reporting. The needs assessment shall also include all factors deemed appropriate by the local planning council in order to obtain an accurate picture of the comprehensive early learning and care needs in the county. The factors include, but are not limited to, all of the following:

(A) The needs of families eligible for subsidized early learning and care.

- (B) The needs of families not eligible for subsidized early learning and care.
- (C) The waiting lists for programs funded by the CDE and the CDSS.
- (D) The need for early learning and care for children determined by the child protective services agency to be neglected, abused, or exploited, or at risk of being neglected, abused, or exploited.
- (E) The number of children in families receiving public assistance, including CalFresh benefits, housing support, and Medi-Cal, and assistance from the Healthy Families Program and the TANF program.
- (F) Family income among families with preschool or school age children.
- (G) The number of children in migrant agricultural families who move from place to place for work or who are currently dependent for their income on agricultural employment in accordance with subdivision (a) of, and paragraphs (1) and (2) of subdivision (b) of, *EC*, Section 8231.
- (H) The number of children who have been determined by a regional center to require services pursuant to an individualized family service plan, or by a local educational agency to require services pursuant to an individualized education program or an individualized family service plan.
- (I) The number of children in the county by primary language spoken pursuant to the department's language survey.
- (J) Special needs based on geographic considerations, including rural areas.
- (K) The number of children needing early learning and care services by age cohort.
- (L) Document information gathered during the needs assessment which shall include, but need not be limited to, data on supply, demand, cost, and market rates for each category of early learning and care in the county.
- (M) Encourage public input in the development of the priorities. Opportunities for public input shall include at least one public hearing during which members of the public can comment on the proposed priorities.
- (N) Prepare a comprehensive countywide early learning and care plan designed to mobilize public and private resources to address identified needs.
- (O) Conduct a periodic review of early learning and care programs funded by the CDE and the CDSS to determine if identified priorities are being met.
- (P) Collaborate with subsidized and nonsubsidized early learning and care providers, CWDs, human service agencies, regional centers, job training programs, employers, integrated child and family service councils, local and state children and families commissions, parent organizations, early start family resource centers, family

empowerment centers on disability, local early learning and care R&R programs, and other interested parties to foster partnerships designed to meet local early learning and care needs.

(Q) Design a system to consolidate local early learning and care waiting lists, if a centralized list is not already in existence.

(R) Coordinate part-day programs, including state preschool and Head Start, with other early learning and care and development services to provide full-day early learning and care.

(S) Submit the results of the needs assessment and the local priorities identified by the LPC to the board of supervisors and the county superintendent of schools for approval before submitting them to the department.

(T) Identify at least one, but not more than two, members to serve as part of the department team that reviews and scores proposals for the provision of services funded through contracts with the department. LPC representatives may not review and score proposals from the geographic area covered by their own LPC. The CDE shall notify each local planning council whenever this opportunity is available.

(c) The CDE shall, in conjunction with the CDSS and all appropriate statewide agencies and associations, develop guidelines for use by local planning councils to assist them in conducting needs assessments that are reliable and accurate. The guidelines shall include acceptable sources of demographic and early learning and care data, and methodologies for assessing early learning and care supply and demand.

(d) Except as otherwise required by subdivision (c) of Section 8236, the CDE shall allocate funding within each county in accordance with the priorities identified by the local planning council of that county and submitted to the department pursuant to this section, unless the priorities do not meet the requirements of state or federal law.

## 5 Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children, whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for providers of child care in a state or territory and then moves to focus in on CCDF providers who may be licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

Note: When responding to questions in this section, the OCC recognizes that each State/Territory identifies and defines its own categories of care. The 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.

Criminal background check requirements are included in this section (98.16(o)). It is important to note that these requirements are in effect for all child care staff members that are licensed, regulated or registered under state/territory law and all other providers eligible to deliver CCDF services.

## 5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

**5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check all that apply and provide a citation to the licensing rule.**

Center-based child care.

Describe and Provide the citation:

For licensed Center-based providers, the Child Day Care Act provides a description of licensing requirement authority per California H&SC Sections 1596.70 - 1597.71.

Family child care.

Describe and Provide the citation:

For licensed Family Child Care Home providers, the Child Day Care Act provides a description of licensing requirement authority per California H&SC Sections 1596.70 - 1597.71.

In-home care (care in the child's own home).

Describe and provide the citation (if applicable):

N/A

**5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)).**

**Note:** Additional information about exemptions related to CCDF providers is required in 5.1.3.

License-exempt child care is a program that can legally operate without a license, and licensing standards do not apply to them. Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers. The State does not conduct on-site visits for license-exempt providers. However, license-exempt providers are investigated by Child Protective Services if there is any report of abuse, neglect or any situation that affects the safety of the child. As a result of these investigations, license-exempt providers may no longer qualify for reimbursement for care provided and funding would cease. License-exempt family home providers and in home providers who are not a grandparent, aunt, or uncle of the child are required to be TrustLine registered in order to receive subsidy payment. TrustLine fingerprinting includes: California Department of Justice (CADOJ) background checks for criminal arrests and convictions, FBI fingerprint criminal background checks, and California Child Abuse Central Index reports at CADOJ check. If subsequent disqualifying arrest or conviction information is received by CADOJ then the CDSS is informed and TrustLine registration may be revoked. Currently, providers are required to provide the certificate program (APPs, including CWDs) with evidence of licensure or, if the provider is exempt from licensure, he/she must become TrustLine registered and complete a Health and Safety Self-Certification form that is signed by both the parent and the provider. Grandparents, aunts, and uncles are exempt from this requirement.

**5.1.3 Check and describe any CCDF providers in your state/territory who are exempt from licensing (98.40(2)(i) through (iv))? Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care or any other factors applicable to the exemption**

Center-based child care.

If checked, describe the exemptions.

Public/private schools, before and after school programs/extended day care programs operated by public/private schools. Recreation programs operated by Boy and Girl

Scouts, Boys and Girls Club, YMCA, Camp Fire USA and similar organizations. Public recreation programs as defined by California *H&SC*, Section 1597.792(g) Organized Camps as defined in California *H&SC*, Section 18897 California State Preschool Programs, operating in a school building under contract through a local educational agency that meets specific conditions, commencing with the adoption of emergency regulations promulgated by the California Department of Education no later than July 1, 2019.

**Family child care.**

If checked, describe the exemptions.

Any arrangement providing care for children of only one family in addition to the operator's own children. Cooperative arrangements (Co-Ops) between parents as defined by California *H&SC*, Section 1597.792(e).

**In-home care.**

If checked, describe the exemptions.

Any arrangement providing care for children of only one family in addition to the operator's own children.

## 5.2 Health and Safety Standards and Requirements for CCDF Providers

### **5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.**

Lead Agencies are required to establish child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories.

a) Licensed CCDF center-based care

## 1. Infant

-- How does the State/territory define infant (age range):

Birth to 2 years.

-- Ratio:

4:1

-- Group size:

Individual group sizes are based on the criteria to accommodate indoor activity space of at least 35 square feet per child and outdoor activity space of at least 75sq feet per child, a sink for every 15 infants, 1 potty chair for every 5 infants being toilet trained, a separate napping area (not counted as part of the indoor activity space) to accommodate appropriate sleeping equipment for each infant, and a local Fire Department clearance.

-- Teacher/caregiver qualifications:

Infant lead teacher qualifications require 12 core semester units in early childhood education/development semester units with 3 semester units in infant care, and 6months experience with children under the age of 5. Assistant teacher qualifications require 6 completed units of early childhood education and 18 years old, high school graduate or enrolled in a Regional Occupation Program (ROP) at an accredited high school.

## 2. Toddler

-- How does the State/territory define toddler (age range):

"Toddler" means a child from 18 months up to 36 months (at age three).

-- Ratio:

6:1

-- Group size:

12:1

-- Teacher/caregiver qualifications:

An Infant Center licensee or Preschool Center licensee may request to add a toddler option program to their license. In this instance the teacher/caregiver qualifications described for the Infant Center license and the Preschool Center would both apply and in particular any toddler in care under the age of 24 months would require teacher/caregiver qualifications equivalent to the Infant Center license.

### 3. Preschool

-- How does the State/territory define preschool (age range):

"Preschool-age Children" means children enrolled in an early learning and care center licensed by the CDSS and who are not enrolled in either an infant center or a school age center.

-- Ratio:

12:1

-- Group size:

California's licensed early learning and care facilities have a maximum "capacity" that is directly associated with their license type and is based on the physical space and staffing levels of the provider.

-- Teacher/caregiver qualifications:

Preschool lead teacher qualifications require 12 core semester units in early childhood education/development semester units and 6 months experience in a licensed early learning and care center or comparable early learning and care program. Assistant teacher qualifications require 6 completed units of early childhood education and 18 years old, high school graduate or enrolled in an ROP at an accredited high school.

### 4. School-age

-- How does the State/territory define school-age (age range):

"School-age Child" means any child who has entered the first grade or above, or is a child in an early learning and care program providing care and supervision to children enrolled in kindergarten and above.

-- Ratio:

14:1

-- Group size:

California's licensed early learning and care facilities have a maximum "capacity" that is directly associated with their license type and is based on the physical space and staffing levels of the provider.

-- Teacher/caregiver qualifications:

School-age lead teacher qualifications require 2 core semester units in early childhood education/development semester units and 6 months experience in a licensed early learning and care center or comparable early learning and care program.

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers

License-exempt child care is a child care program that can legally operate without a license and licensing standards do not apply to them. License exempt providers may only provide care for children from one family in addition to their own.

6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups.

Classrooms with mixed age groups must observe the individual requirements of the three types of child care licenses based on the age of the children in care. For example: 1) the Infant license is issued for providing care to infant from birth to 2 years old with a ratio of 1 teacher to 4 infants. 2) the Preschool license issued for children 2 years old to 6 years old and or enrolled in kindergarten with a ratio of 1 teacher to 12 children. 3) the School age license is issued for children enrolled in a school program with a teacher to child ratio of 1 teacher to 14 children. The licensee may request to add a toddler option program to either their infant license or preschool license.

Teacher to child ratio for Toddler Option is 1 to 6 with a maximum of 12 toddler per group size. Individual group sizes are based on indoor activity space of 35 square feet per child and outdoor activity space of 75sq feet per child, 1 sink for every 15 children, 1 toilet for every 15 children, and local Fire Department clearance.

Staff Qualifications for classrooms with mixed age groups are based upon the age of children being served, whereby qualifications for those caregivers would include all required training in Sections 5.2.3., 5.2.4, and 5.2.5., as well as any corresponding qualifications specific to the age of children being served outlined in Plan Section 5.2.1.(a)(1), (a)(2), (a)(3), (a)(4), and (a)(7).

**7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care.**

Early learning and care center directors shall have completed one of the following prior to employment:

(1) High school graduation or General Education Development (GED) completion, with passing grades, of 15 semester or equivalent quarter units as specified in (h)(1)(A) and (h)(1)(B) below at an accredited or approved college or university; and at least four years of teaching experience in a licensed early learning and care center or comparable early learning and care program

(A) Three of the 15 units required in (h) (1) above shall be in administration or staff relations.

(B) Twelve of the 15 units required in (h) (1) above shall include courses that cover the general areas of child growth and development, or human growth and development; child, family and community, or child and family; and program/curriculum.

(2) An associate of arts degree from an accredited or approved college or university with a major or emphasis in early childhood education or child development; and at least two years of teaching experience in a licensed early learning and care center or comparable early learning and care program

(A) Three semester or equivalent quarter units shall be in administration or staff relations.

(3) A bachelor's degree from an accredited or approved college or university with a

major or emphasis in early childhood education or child development and at least one year of teaching experience in a licensed early learning and care center or comparable early learning and care program

(A) Three semester or equivalent quarter units shall be in administration or staff relations.

(4) A Child Development Site Supervisor Permit or a Child Development Program Director Permit issued by the California Commission on Teacher Credentialing.

## b) Licensed CCDF family child care provider

### 1. Infant

-- How does the State/territory define infant (age range):

birth to 2 years

-- Ratio:

4:1

-- Group size:

A maximum of 4 infants for a Family Child Care Home both Small and Large.

NOTE: if a Small Family Child Care Home has 4 infants in care then that facility may not care for any other children.

-- Teacher/caregiver qualifications:

All LFCH are required to have 16 hours of health and safety training. This training includes pediatric first aid and pediatric CPR as well as a requirement that at least one staff member who has a current course completion card in pediatric first aid and pediatric CPR shall be on site at all times when children are present in the facility. They shall also be present with children when children are offsite for facility activities.

### 2. Toddler

-- How does the State/territory define toddler (age range):

18 months to 36 months in age

-- Ratio:

6:1

-- Group size:

6:1 for a Small Family Child Care Home

12:1 for a Large Family Child Care Home (must have 2 caregivers present)

-- Teacher/caregiver qualifications:

At least one caregiver is required to have 16 hours of health and safety training. This training includes pediatric first aid and pediatric CPR as well as a requirement that at least one staff member who has a current course completion card in pediatric first aid and pediatric CPR shall be on site at all times when children are present in the facility. They shall also be present with children when children are offsite for facility activities. They must also have required mandated reporter training.

### 3. Preschool

-- How does the State/territory define preschool (age range):

Children who are enrolled in a child day care center licensed by CCLD and who are not enrolled in either an Infant Center or a Schoolage Center (i.e. enrolled in a school program).

-- Ratio:

6:1

-- Group size:

6:1 for a Small Family Child Care Home

12:1 for a Large Family Child Care Home (must have 2 caregivers present)

-- Teacher/caregiver qualifications:

At least one caregiver is required to have 16 hours of health and safety training. This training includes pediatric first aid and pediatric CPR as well as a requirement that at least one staff member who has a current course completion card in pediatric first aid and pediatric CPR shall be on site at all times when children are present in the facility. They shall also be present with children when children are offsite for facility activities. They must also have required mandated reporter training.

#### 4. School-age

-- How does the State/territory define school-age (age range):

A child enrolled in a school program

-- Ratio:

8:1

-- Group size:

8:1 for a Small Family Child Care Home

14:1 for a Large Family Child Care Home (must have 2 caregivers present)

-- Teacher/caregiver qualifications:

At least one caregiver is required to have 16 hours of health and safety training. This training includes pediatric first aid and pediatric CPR as well as a requirement that at least one staff member who has a current course completion card in

pediatric first aid and pediatric CPR shall be on site at all times when children are present in the facility. They shall also be present with children when children are offsite for facility activities. They must also have required mandated reporter training.

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes

California does not monitor license-exempt providers. The R&Rs through CCIP do active engagement to provide supports and training to license - exempt providers as well as local QRIS through QCC. Additionally, CCIP provides an on-ramp for providers wishing to become licensed professionals.

c) In-home CCDF providers:

1. Describe the ratios

In home providers only provide care for those children in a single family. Because caregivers provide care in their own home, they are not required to be licensed.

2. Describe the group size

In home providers only provide care for those children in a single family. Because caregivers provide care in their own home, they are not required to be licensed.

3. Describe the maximum number of children that are allowed in the home at any one time.

In home providers only provide care for those children in a single family. Because caregivers provide care in their own home, they are not required to be licensed.

4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size

In home providers only provide care for those children in a single family. Because caregivers provide care in their own home, they are not required to be licensed.

5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day

In home providers only provide care for those children in a single family. Because caregivers provide care in their own home, they are not required to be licensed.

## 5.2 Health and Safety Standards and Requirements for CCDF Providers

### 5.2.2 Health and safety standards for CCDF providers.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the topics listed below, as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care providers receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

a) To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note: This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

#### 1. Prevention and control of infectious diseases (including immunization)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers, "prevention and control of infectious diseases" means standards, training, and practices that include: standard precautions, e.g. sanitation; hygiene for children and caregivers, e.g. diapering and hand washing; childhood immunizations; infectious disease requirements, e.g. handling sick children and when to notify local public health; community resources to include information on local

resources for services that deal with children's health and the prevention of infectious disease; maintenance of health records and forms; and process for review of medical form information including immunizations, and health insurance. CDE utilizes the current standards for all health and safety related topics including immunization as set forward by American Academy of Pediatrics

<https://www.healthychildren.org/english/Pages/default.aspx>.

-- List all citations for these requirements, including those for licensed and license-exempt programs

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

## 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers caring for infants, "prevention of sudden infant death syndrome (SIDS) and the use of safe sleep practices" means required training that is ongoing, on the procedures to reduce the risks of Sudden Infant Death Syndrome and reinforcement of best practices through technical assistance provided by licensing

staff in the field and eventually monitors assigned to the oversight of these license-exempt and CCDF settings. Regulations for licensed providers to require specific procedures for safe sleep are under development and due for completion prior to 2019. These same procedures will be required of CCDF providers.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

### 3. Administration of medication, consistent with standards for parental consent

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers, "administration of medication, consistent with standards for parental consent" means provider standards for medication safety procedures and required practices for parent notification, as well as provider training on the following: process for review of medical form information; medication administration; allergies; immunizations; and health insurance.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

#### 4. Prevention of and response to emergencies due to food and allergic reactions

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers requirement to participate in training, and ensure practices that include pediatric first aid, medication administration, allergic reaction, as described in 22 CCR S 84276.

CCDF providers will be required to meet existing Health and Safety Code Division 2 Chapter 3.4

1596.866

(ii) For licenses issued on or after January 1, 2016, at least one director or teacher at

each day care center, and each family day care home licensee who provides care, shall have at least one hour of childhood nutrition training as part of the preventive health practices course or courses:

1596.866. (a) (1) In addition to other required training, at least one director or teacher at each day care center, and each family day care home licensee who provides care, shall have at least 15 hours of health and safety training, and if applicable, at least one additional hour of training pursuant to clause (ii) of subparagraph (C) of paragraph (2). (2) The training shall include the following components: (A) Pediatric first aid. (B) Pediatric cardiopulmonary resuscitation (CPR). (C) (i) A preventive health practices course or courses that include instruction in the recognition, management, and prevention of infectious diseases, including immunizations, and prevention of childhood injuries. (ii) For licenses issued on or after January 1, 2016, at least one director or teacher at each day care center, and each family day care home licensee who provides care, shall have at least one hour of childhood nutrition training as part of the preventive health practices course or courses. (3) The training may include instruction in sanitary food handling, emergency preparedness and evacuation, caring for children with special needs, and identification and reporting of signs and symptoms of child abuse.

Included in the nutrition training section, caregivers are required to have instruction on food allergies and how they are to care for children related to potential food allergy emergencies. Providers will discuss food allergies and dangers with the all families in care and work with both the family and identified child as well as children in care, to prepare a written food safety plan. All child care staff who provide care to a child or prepare a child's food as to food allergy will be alerted to the agreed upon procedures to ensure safety.

-- [List all citations for these requirements, including those for licensed and license-exempt providers](#)

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers

#### 5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers, "building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic" means standards, training, and practice. These standards include: child injury prevention; and process for review of medical form information including health insurance; and facility requirements regarding bodies of water, hazard free indoor and outdoor environments, and child supervision.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers

#### 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers, "prevention of shaken baby syndrome, abusive head trauma, and child maltreatment" means provider requirements that forbid child maltreatment, abuse, and corporal punishment, as well as required provider training to reduce the risks of Shaken Baby Syndrome.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-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)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers, "emergency preparedness and response" means training on reassuring parents and children in an emergency situation, how to talk to young children about emergencies, and instructing children to participate in the emergency action plan. Technical assistance will be provided in the areas of preparedness, establishing disaster plans at the time of pre-licensure and orientation; standards for Earthquake preparation; and requirements for facilities to have disaster plans and to also regularly conduct varied emergency drills at the facility with the children.

Existing disaster drill related Health and Safety Code Sections are:

- 1596.95(f) for Centers to document the occurrence of fire and disaster drills every six months
- 1597.54(b)(2) for Homes to document the occurrence of fire and disaster drills every six months
- 1596.867 for all facilities to include an earthquake specific checklist, covering

earthquake drills four times per year.

The California Child Care Disaster Preparedness Plan

<https://cchp.ucsf.edu/sites/cchp.ucsf.edu/files/CA-ChildCare-Disaster-Plan.pdf> is an annex to the State Plan of California Emergency Plan. It serves as an inclusive training module that will be posted on the CECO website for CDE approved training to assist child care providers to mitigate, prepare, respond, and recover from disaster. The training module is utilized to provide local emergency preparedness training that builds on local training plans and supports all related requirements as stated in Title 22 required for licensed providers. Plans include training on the provision of evacuation procedures for children with special needs in order to evacuate safely as necessary as identified in CCR Title 22 CCR 12 Operation of a Child Care Home 102417(g)(9)(A)(1).

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers

## 8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers, "handling and storage of hazardous materials and the appropriate disposal of bio-contaminants" means training in hygiene for children and caregivers to include diapering; and requirements for handling and storage of hazardous materials and disposal of waste.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California H&SC, sections 1596.70 - 1597.71

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

## 9. Precautions in transporting children (if applicable)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers, "precautions in transporting children" means training in transportation of children during early learning and care to include motor vehicle safety, child passenger safety, field trip safety, and school bus safety; and requirements for child passenger safety; and requirements for child passenger health and safety, e.g. use of child passenger restraint systems, no smoking in vehicles where children are present, etc.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides a training and supports to the entire continuum of early learning and care settings including the exempt providers.

#### 10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers, "pediatric first aid and CPR certification" means required training and procedural requirements on: patient examination and injury assessment

principles; orientation and access to the emergency medical services system; recognition and treatment of various conditions; assembly and use of first aid kits and supplies; understanding of standard precaution and personal safety in giving emergency care; first aid action planning; and injury reporting including how to reassure parents and children in an emergency situation. In addition, there are licensing standards for incidental medical services performed by the early learning and care provider.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

## 11. Recognition and reporting of child abuse and neglect

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For all CCDF providers, "recognition and reporting of child abuse and neglect" means required training on: the identification of child abuse and neglect including recognition

of behavioral signs; reporting requirements; the legal responsibility for reporting; professional immunity and the consequences for those who impede reporting; childhood stages of development and recognizing risk factors to help identify signs of abuse and neglect apart from normal development; child safety and maltreatment prevention; protective factors that may help prevent abuse to include dangers of shaking a child and age appropriate forms of safe discipline; when to call for emergency medical attention to prevent further injury; and how a provider might communicate with a family before and after making a report. In addition, licensed providers are required to report abuse to the early learning and care licensing program for investigation and enforcement action purposes.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care

N/A

-- Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

b) Does the Lead Agency include any of the following optional standards?

No, if no, skip to 5.2.3.

Yes, if yes provide the information related to the optional standards addressed.

## 1. Nutrition

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For licensed providers, "nutrition" means at least one hour of required training in nutrition and required practices regarding standards for healthy food and beverages.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards, training, and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care.

N/A

--Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

## 2. Access to physical activity

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

For licensed providers, "access to physical activity" means requirements for child access to outdoor activity space.

-- List all citations for these requirements, including those for licensed and license-exempt providers

For licensed providers, the standards and practices required for this topic are cited throughout the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71.

-Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care.

N/A

--Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt. However, we provide training and supports to the entire continuum of early learning and care settings including the exempt providers.

### 3. Caring for children with special needs

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

N/A

-- List all citations for these requirements, including those for licensed and license-exempt providers

N/A

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care.

N/A

--Describe if relatives are exempt from this requirement

N/A

4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)).

Describe:

N/A

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

N/A

-- List all citations for these requirements, including those for licensed and license-exempt providers

N/A

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

N/A

-- Describe any variations based on the age of the children in care.

N/A

--Describe if relatives are exempt from this requirement

N/A

### **5.2.3 Health and safety training for CCDF providers on required topics.**

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(I)(i);

98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

### **Pre-Service or Orientation Training Requirements**

a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:

1. Licensed child care centers:

At least one director or teacher shall have 16 hours of health and safety training (Topics 1-10 referenced in section 5.2.2). In addition, all providers and facility staff shall have mandated child abuse reporter training (Topic 11, and including Topic 2 and 6) averaging about 2 hours to complete (which is self-paced online and does not have a defined minimum for training hours).

2. Licensed FCC homes:

At least one director or teacher shall have 16 hours of health and safety training (Topics 1-10 referenced in section 5.2.2). In addition, all providers and facility staff shall have mandated child abuse reporter training (Topic 11, and including Topic 2 and 6) averaging about 2 hours to complete (which is self-paced online and does not have a defined minimum for training hours).

3. In-home care:

Family, friend or neighbor who care for children in their own home are considered licensed-exempt providers. CDE does not monitor license-exempt providers for Pre-Service or Orientation Training Requirements.

#### 4. Variations for exempt provider settings:

Pediatric first aid and CPR plus 14 hours of online training on the required topics.

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

For licensed providers they must complete training as a precondition to licensure and new facility employees must complete training within 90 days.

c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served

There are not any differences in pre-service or orientation training requirements based on the ages of the children served.

d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered

For licensed providers, California law requires that the 16 hours of Health and Safety training not be conducted by home study (online) and therefore this training is delivered in-person by third party trainers certified by Emergency Medical Services Authority. The Mandated Reporter training is available online and provided free by CDSS, but providers have the option of taking an alternative third party online or in-person training to meet this requirement.

e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

##### 1. Prevention and control of infectious diseases (including immunizations)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California H&SC, Section 1596.866

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care

for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers

#### 5.2.3e 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California *H&SC*, sections 1596.866 and 1596.8662

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF are allowed to care for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and

supports to the entire continuum of early learning and care settings including the exempt providers

### 5.2.3e 3. Administration of medication, consistent with standards for parental consent

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California H&SC, section 1596.866.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

### 5.2.3e 4. Prevention and response to emergencies due to food and allergic reactions

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California H&SC, section 1596.866.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

#### 5.2.3e 5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California *H&SC*, Section 1596.866.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the

exempt providers.

#### 5.2.3e 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California *H&SC*, Section 1596.866.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

#### 5.2.3e 7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California *H&SC*, Section 1596.866.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care

for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

#### 5.2.3e 8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California *H&SC*, Section 1596.866.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and

supports to the entire continuum of early learning and care settings including the exempt providers.

#### 5.2.3e 9. Appropriate precautions in transporting children (if applicable)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California *H&SC*, Section 1596.866.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

#### 5.2.3e 10. Pediatric first aid and CPR certification

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California *H&SC*, Section 1596.866.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

#### 5.2.3e 11. Recognition and reporting of child abuse and neglect

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed providers, California H&SC, section 1596.866.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the

exempt providers.

### 5.2.3e 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt, however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

### 5.2.3e 13.

Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc..

The one-hour childhood nutrition training gives child care providers an overview of the importance of childhood nutrition and the benefits of the federal nutrition program, the Child and Adult Care Food Program (CACFP). Specific topics covered include: Feeding infants, toddlers, and older children according to their development and nutritional needs (including the importance of breastfeeding); Why good nutrition is important for child development and reduction of disease; the importance of feeding

from the five food groups; California's Healthy Beverage Law; Healthy eating habits including the division of responsibility: the child care provider prepares food/children choose what to eat/family-style eating/the child care provider is a role model; reducing salt, solid fats, and added sugars; food allergies and the importance of working with parents to develop plans for children with food allergies; food safety in purchasing and preparing foods, how to read food labels to understand ingredients; and referral to the CDE's CACFP website.

[Provide the citation for this training requirement, including citations for both licensed and license-exempt providers](#)

For licensed providers, California *H&SC*, Section 1596.866

[Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?](#)

Yes

No

[Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?](#)

Yes

No

[Describe if relatives are exempt from this requirement](#)

Relatives defined as those restricted to caring for grandchild(ren), niece(s), nephew(s) or sibling(s) are exempt however, the CDE provides training and supports to the entire continuum of early learning and care settings including the exempt providers.

## Ongoing Training Requirements

### **5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.**

#### a) Licensed child care centers:

Currently Health and Safety regulations require that at least one director or teacher shall have eight hours of CPR and First Aid training every two years. In addition, all providers and facility staff shall have mandated child abuse reporter training every two years, averaging about two hours to complete (which is self-paced online and does not have a defined minimum for training hours). The CDE, through a process of convening stakeholders, will be determining the minimum number of annual health and safety training hours and requiring all teaching staff in centers accepting CCDF to obtain these hours, with the objective to be in full compliance by October 2019.

#### b) Licensed FCC homes:

Currently Health and Safety regulations require that at least one home provider shall have eight hours of CPR and First Aid training every two years. In addition, all providers and facility staff shall have mandated child abuse reporter training every two years, averaging about two hours to complete (which is self-paced online and does not have a defined minimum for training hours). The CDE, through a process of convening stakeholders, will be determining the minimum number of annual health and safety training hours and requiring all teaching staff in family child care homes accepting CCDF to obtain these hours, with the objective to be in full compliance by October 2019.

#### c) In-home care:

The CDE, through a process of convening stakeholders, will be determining the minimum number of annual health and safety training hours and requiring all in-home care providers accepting CCDF to obtain these hours, with the objective to be in full compliance by October 2019.

d) Variations for exempt provider settings:

The CDE, through a process of convening stakeholders, will be determining the minimum number of annual health and safety training hours and requiring all license-exempt providers accepting CCDF to obtain these hours, with the objective to be in full compliance by October 2019.

**5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).**

1. Prevention and control of infectious diseases (including immunizations)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For LCCC providers and LFCH providers - California *H&SC*, Section 1596.8662.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

For licensed providers, at least once every two years.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

3. Administration of medication, consistent with standards for parental consent

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed

#### 4. Prevention and response to emergencies due to food and allergic reactions

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed

#### 5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed

#### 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For LCCC providers and licensed family child care home providers - California *H&SC*, Section 1596.8662.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

For licensed providers, at least once every two years.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

#### 9. Appropriate precautions in transporting children (if applicable)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

#### 10. Pediatric first aid and CPR certification

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For LCCC providers and licensed family child care home providers - California H&SC, Section 1596.8662.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

For licensed providers, at least once every two years.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

#### 11. Recognition and reporting of child abuse and neglect

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

For licensed child care center providers and licensed family child care home providers - California H&SC, Section 1596.8662.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

For licensed providers, at least once every two years.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

## 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc..

N/A

Provide the citation for other training requirements, including citations for both licensed and license-exempt providers

N/A

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Statute or Regulations would be needed.

## 5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

### **5.3.1 Enforcement of licensing and health and safety requirements**

Lead agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable State and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is

not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.3.2.

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements

For licensed providers see the Child Day Care Act per California *H&SC*, sections 1596.70 - 1597.71 or see regulations and procedures on the early learning and care licensing program Webpage for “Laws and Regulations” at: <http://www.cdss.ca.gov/inforesources/Child-Care-Licensing/Resources-for-Providers/Laws-and-Regulations>. CDSS CCLD licensing program analysts monitor compliance to these health and safety requirements during their annual monitoring visits. The CDE, through a process of convening stakeholders, will be determining which agency(ies) will conduct on-site visits and the process for monitoring license-exempt providers for compliance with health and safety requirements.

### 5.3.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections-with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards-of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)). Certify by responding to the questions below to describe your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

#### a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards

Currently, the CDSS conducts a pre-licensing visit to all Child Care Center applicant

facilities to ensure the facility meets licensing requirements and all CCDF areas of Health and Safety, including fire standards requiring facilities to contain State Fire Marshal approved fire extinguishers and smoke detectors, and verification of fire clearance from the local office of the State Fire Marshal in accordance with California law (per H&SC Section 1596.809).

## 2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers

As specified in California law, licensed Child Care Centers receive unannounced inspections for compliance with health, safety and fire standards. Currently some facilities are inspected annually due to non-compliance, however the 2018-19 State Budget appropriated funding to enable the Child Care Licensing Program to begin implementation for increased inspections for all licensed child care facilities (with the goal of leading to annual inspections)all child care facilities to be inspected annually.

## 3. Identify the frequency of unannounced inspections:

- Once a year  
 More than once a year

Describe:

increased frequency (with the goal of leading to annual inspections) beyond the prior protocol of at least once every three years.

## 4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards.

Community Care Licensing Program has implemented a "differential monitoring" system to inspect for applicable licensing standards including health, safety, and fire standards; which has allowed the CDSS Child Care Licensing Program to maximize efficiencies and enable inspections to exceed the current mandate where possible without additional resources. The differential monitoring system has been proven to be an asset helping to ensure the health and safety of children in care through robust and

frequent monitoring and enforcement. The differential monitoring system implementation has extended the CDSS's current resources to their full potential.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

For licensed providers, see the Child Day Care Act per California H&SC, Sections 1596.70 - 1597.71.

b) Licensed CCDF family child care home

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards

Currently, the CDSS conducts a Family Child Care Home (FCCH) pre-licensing inspection for each provider applicant; meeting onsite with the provider applicant to ensure their understanding of all licensing requirements and inspecting the home facility to ensure initial compliance with licensing requirements, including verification of a fire clearance for any FCCH serving more than eight children (i.e. Large FCCHs). During the pre-licensing inspection, the Licensing Program Analyst (LPA) verifies criminal background clearances for those adults living in the home, and reviews required postings and licensing forms with the applicants to answer any questions the applicant may have. The LPA inspects the applicant's records and their home facility, inside and outside, to ensure compliance with health, safety, and training requirements, including but not limited to:

Prevention and control of infectious diseases (including child and caregiver immunizations)

Prevention of sudden infant death syndrome and compliance with Title 22 safe-sleep requirements

Building premises safety, including identification and protection for physical hazards such as bodies of water and nearby vehicular traffic

Emergency preparedness that includes review of their completed facility disaster plan

Handling and storage of any hazardous materials, including appropriate and safe disposal

Appropriate precautions in transporting children, including adherence to state laws regarding transporting children

Certifications for Pediatric First Aid and CPR trainings (current within two years)  
Required provider training on preventative health practices, which includes training in nutrition and policies on the administration of medication (consistent with standards for parental consent), as well as how to respond to medical emergencies  
Required training for all staff in the recognition and reporting of child abuse and neglect

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers

As specified in law, licensed Family Child Care Homes receive unannounced inspections for compliance with health, safety and fire standards. Currently some facilities are inspected annually due to non-compliance, however the 2018-19 State Budget appropriated funding to enable the Child Care Licensing Program to begin implementation increased inspections for all licensed child care facilities (with the goal of leading to annual inspections)all child care facilities to be inspected annually.

3. Identify the frequency of unannounced inspections:

- Once a year
- More than once a year

Describe:

increased frequency (with the goal of leading to annual inspections) beyond the prior protocol of at least once every three years.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

Community Care Licensing Program has implemented a "differential monitoring"

system to inspect for applicable licensing standards including health, safety, and fire standards; which has allowed the CDSS Child Care Licensing Program to maximize efficiencies and enable inspections to exceed the current mandate where possible without additional resources. The differential monitoring system has been proven to be an asset helping to ensure the health and safety of children in care through robust and frequent monitoring and enforcement. The differential monitoring system implementation has extended the CDSS's current resources to their full potential.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

For licensed providers, see the Child Day Care Act per California H&SC , Sections 1596.70 - 1597.71.

c) Licensed in-home CCDF child care

N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to 5.3.2 (d).

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards

N/A

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF in-home child providers

N/A

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

N/A

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

N/A

5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers

N/A

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers

N/A

### 5.3.3 Inspections for license-exempt CCDF providers

Lead Agencies must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety (including, but not limited to, those requirements described in 98.41), and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Lead Agencies have the option to exempt relative providers (as described in section (658P(6)(B)) from this requirement. To certify, respond to the questions below to describe the policies and practices for the annual monitoring of:

a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

1. All center-based providers with a CDE-direct service contract, including, license-exempt centers, are reviewed at the local level by the CDE using the following procedures:

a. Each contractor completes the annual program self-evaluation (PSE) using the Categorical Program Monitoring (CPM)/Contract Monitoring Reviews (CMRs) instrument. The PSE is reviewed by CDE for adherence to administrative and program quality requirements.

b. The CDE conducts announced Categorical Program Monitoring (CPM)/Contract Monitoring Reviews (CMRs) for each contractor on a three or four year cycle for non-LEAs and LEAs respectively.

c. The CDE Governance and Administration Unit (GAU) conducts ongoing review of individual contractors by sampling the eligibility and need documentation in family files to estimate and reduce error rates. The GAU provides specific technical assistance based on the error rate reduction plan as well as follow-up sampling to ensure the contractor's policy and procedures produce the required reduction of error rates.

d. The CDE implements unannounced CMRs when:

- i. The contractor's annual audit notes audit exceptions;
- ii. The contractor's CMR findings are not resolved within the required time-period;
- iii. The contractor's error rate is not resolved; or
- iv. There is reported mishandling of CDE funding.

2. License-exempt center-based CCDF providers whom accept vouchers but are not CDE-direct service contractors are subject to annual fire inspections and enforcement of requirements, as well as alternate health and safety standards, i.e. license-exempt centers located on a military bases or tribal lands.

[Provide the citation\(s\) for this policy or procedure](#)

5 CCR, sections 18023 and 18270 - 18308.

[b\) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used](#)

The CDE does not monitor non-relative exempt providers (family, friend, and neighbor, [FFN] informal caregivers) although the providers may choose to participate in quality improvement efforts including training and other supports offered by QCC, the QRIS. The CDE is working on how to best monitor license-exempt home-based providers. Using CCDF quality set-aside, CCIP was expanded in July 2018 to increase its inclusion of license-exempt providers and create a stronger path to licensing.

The CDE acknowledges that these efforts, although moving in the right direction, still do not comply with CCDF requirements.

[Provide the citation\(s\) for this policy or procedure](#)

N/A

c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used

The CDE does not monitor license-exempt (FFN informal caregivers) in-home providers although the FFN providers may choose to participate in quality improvement efforts including training and other supports offered by QCC, the QRIS. The CDE is working on how to best monitor license-exempt home-based providers. Using CCDF quality set-aside, CCIP was expanded in July 2018 to increase its inclusion of license-exempt providers and create a stronger path to licensing.

The CDE acknowledges that these efforts, although moving in the right direction, still do not comply with CCDF requirements.

Provide the citation(s) for this policy or procedure

N/A

d) Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home (98.42(b)(2)(iv)(B)). Does your state use alternate monitoring procedures for monitoring in-home care?

No

Yes. If yes,

decide:

N/A

e) List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers

Undetermined

#### 5.3.4 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the State's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

The CDSS is mandated to make efforts to recruit Licensing Program Analysts (LPAs) with early learning and care experience, training and education. The LPAs begin their training with a four-week long academy of coursework that includes: health and safety requirements and language and cultural diversity of the providers. In addition, LPAs are required to take 40 hours of Early Childhood Education training which addresses the developmental needs of children in care and type of provider setting. Lastly, the LPAs are required to complete 36 hours of training each year that include regulation administration as well as communication, writing and human relations skills.

b) Provide the citation(s) for this policy or procedure

For licensed providers, see the Child Day Care Act per California H&SC, Sections 1596.70 - 1597.71.

**5.3.5 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).**

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to

conduct effective inspections on a timely basis.

The CDSS Licensing Program has approximately 43,500 licensed facilities statewide. The current inspector (Licensing Program Analyst or LPA) to provider standard (as of June 2018) is approximately one LPA for every 127 Centers providers and or one LPA for every 216 Homes providers. This number will be changing to reflect the number necessary to perform annual increased inspections for all licensed facilities and beginning January 1, 2019, the facility specific ratio will be adjusted to about one LPA for per every 94 114 Centers providers and 140 or one LPA per every 190 Homes providers. In practice, LPAs cover regions that include both Center and Home providers, and their corresponding caseload ratio would be a combination of the facility specific ratios provided; for example one LPA may have a caseload ratio consisting of both 95 Home and 57 Center providers.

b) Provide the policy citation and state/territory ratio of licensing inspectors

For licensed providers, see the Child Day Care Act per CaliforniaH&SC Sections 1596.70 - 1597.71.

**5.3.6 States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from inspection requirements. Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?**

Yes, relatives are exempt from all inspection requirements.

If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.

Relative providers are investigated by Child Protective Services if there is any report of abuse, neglect or any situation that affects the safety of the child. As a result of these investigations, relative providers may no longer qualify for reimbursement for care provided and funding would cease. Relative providers may access information regarding children's health and safety issues and available trainings through the Resource and Referral agencies.

Yes, relatives are exempt from some inspection requirements.

If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.

N/A

No, relatives are not exempt from inspection requirements.

## 5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks

<b>Components</b>	<b>In-State</b>	<b>National</b>	<b>Inter-State</b>
1. Criminal registry or repository using fingerprints in the current state of residency	x		
2. Sex offender registry or repository check in the current state of residency	x		
3. Child abuse and neglect registry and database check in the current state of residency	x		
4. FBI fingerprint check		x	
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)		x	
6. Criminal registry or repository in any other state where the			x

individual has resided in the past 5 years, with the use of fingerprints being optional			
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years			X
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years			X

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

--The national FBI fingerprint check; and,	
--The three in-state background check provisions for the current state of residency:	
	--state criminal registry or repository using fingerprints;
	--state sex offender registry or repository check;
	--state-based child abuse and neglect registry and database.

All four components are required in order for the milestone to be considered met.

Components	New (Prospective) Staff	Existing Staff
1. Criminal registry or repository using fingerprints in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
2. Sex offender registry or repository check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
3. Child abuse and neglect registry and database check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
4. FBI fingerprint check	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff	

	and/or --Conducting checks on current (existing) staff
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff

Use the questions below to describe the status of the requirements, policies and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form, for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

## In-state Background Check Requirements

### **5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).**

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

California has one of the most robust and comprehensive background check processes in the nation. State law requires a criminal record clearance prior to working or being present in licensed facilities. This reflects collaboration between the individuals, associated facility licensees, the CADOJ, the FBI and the CDSS. Utilizing Live Scan technology, the individual submits fingerprints to the CADOJ and the FBI. Additionally, the individual submits information for a name-based check of California's Child Abuse Registry, the Child Abuse Index. California received and processed approximately 190,000 fingerprint submissions for all licensed programs during state fiscal year 2014-15. Historically, 90% of these submissions result in a prompt and direct criminal record clearance from the CADOJ, which is electronically transmitted to the CDSS. For licensed care, the CADOJ sends clearance notification to the licensee and the CDSS in approximately five days from fingerprint submission. For license-exempt child care (TrustLine Registry), the CADOJ sends the clearance notification to the CDSS and then the CDSS notifies the TrustLine applicant that she/he is on the registry. Based upon the fingerprint submissions, the CADOJ transmits all subsequent arrest and conviction information to the CDSS as authorized by statute. The CADOJ also provides subsequent child abuse information to the CDSS. Individuals with criminal history undergo an additional criminal record exemption process as outlined below in section 5.4.12.

Pursuant to

California H&SC Section 1596.871, H&SC 1596.603, Title 22 California Code of Regulations Section 101170 (22 CCR § 101170), 22 CCR § 101170.1, 22 CCR § 101170.2, 22 CCR § 102370, 22 CCR 102370.1, 22 CCR § 102370.2, these requirements, policies, and procedures fully apply to all licensed, regulated, or registered child care providers. The CDSS regional offices monitor compliance with these requirements, policies, and procedures. Failure to fully comply with these requirements, policies, and procedures may result in decertification, removal from registry, or exclusion from the facility.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Pursuant to California H&SC Section 1596.871 and H&SC 1596.603, these requirements,

policies, and procedures fully apply to license-exempt child care providers that are funded through the CCDF, TANF, or California child care subsidy funds. License-exempt child care providers must be registered on Trustline, which requires a background check, in order to be paid. Failure to fully comply with these requirements, policies and procedures may result in removal from the Trustline registry.

b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

N/A

#### **5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).**

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state sex offender registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

As described above, all staff members of licensed care facilities are required to undergo a criminal record check, which includes state summary criminal history information, FBI summary criminal history information, and the Child Abuse Central Index (CACI - California's child abuse and neglect registry). Per California Penal Code (PEN) Section 11105(m)(2)(D), the state summary criminal history includes the state sex offender registration status of the applicant. Pursuant to California H&SC Section 1596.871, H&SC 1596.603, Title 22 California Code of Regulations Section 101170 (22 CCR § 101170), 22 CCR § 101170.1, 22 CCR § 101170.2, 22 CCR § 102370, 22 CCR 102370.1, 22 CCR § 102370.2, these requirements, policies, and procedures fully apply to all licensed, regulated, or registered child care providers. The CDSS regional offices monitor compliance with these requirements, policies, and procedures. Failure to fully comply with these requirements, policies, and procedures may result in decertification, removal from registry, or exclusion from the facility.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Pursuant to California H&SC Section 1596.871 and H&SC 1596.603, these requirements, policies, and procedures fully apply to license-exempt child care providers that are funded through the CCDF, TANF, or California child care subsidy funds. License-exempt child care providers must be registered on Trustline and are required to undergo a criminal record check which includes state summary criminal history information, FBI summary criminal history information, and CACI checks-California's child abuse and neglect registry, in order to be paid. Pursuant to California Penal Code (PEN) Section 11105(m)(2)(D), the state summary criminal history includes the state sex offender registration status of the applicant. Failure to fully comply with these requirements, policies, and procedures may result in removal from the Trustline registry.

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

N/A

#### **5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).**

Note: This is a name-based search.

a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state child abuse and neglect registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Pursuant to California H&SC Section 1596.871 and H&SC 1596.603, Title 22 California Code of Regulations Sections 101170, 101170.1, 101170.2, 102370, 102370.1, and

102370.2, these requirements, policies, and procedures fully apply to all licensed, regulated, or registered child care providers and all staff members of licensed care facilities. DSS monitors compliance with these requirements, policies and procedures. Failure to fully comply with these requirements, policies, and procedures may result in decertification, removal from registry, or exclusion from the facility. All licensed, regulated, or registered child care providers and all staff members of licensed care facilities undergo a criminal record check, which includes state summary criminal history information, FBI summary criminal history information, and CACI checks-California's child abuse and neglect registry. The CACI check is conducted by CADOJ and includes a name-based search of CACI and results in a response to CDSS of "possible match" or "no match to any report on file entered as an applicant". If there is a possible match, the CBCB will notify the individual of the possible match in writing, and conduct a preliminary investigation that includes identification, confirmation and obtaining the initial investigation documents from the reporting child protective or law enforcement agency. If a Trustline applicant/registrant does not respond or responds with a withdrawal from the registry, the application is denied or the registration is revoked. For licensed facilities, the investigation continues whether or not a response is received.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Pursuant to California H&SC Section 1596.871 and H&SC 1596.603, these requirements, policies, and procedures fully apply to license-exempt child care providers that are funded through the CCDF, TANF, or California child care subsidy funds. License-exempt child care providers must be registered on Trustline and are required to undergo a criminal record check, which includes state summary criminal history information, FBI summary criminal history information, and CACI checks-California's child abuse and neglect registry, in order to be paid. Failure to fully comply with these requirements, policies, and procedures may result in removal from the Trustline registry.

b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

N/A

## National Background Check Requirements

### **5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).**

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note, that an FBI fingerprint check satisfies the requirement to perform an interstate check of another State's criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies and procedures for the search of the National FBI fingerprint check.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and

**98.16(o). Describe and provide citations**

Pursuant to California H&SC Section 1596.871 and H&SC 1596.603, Title 22 California Code of Regulations Sections 101170, 101170.1, 101170.2, 102370, 102370.1, and 102370.2, these requirements, policies, and procedures fully apply to all licensed, regulated, registered and license exempt eligible child care providers and all staff members of licensed care facilities. DSS monitors compliance with these requirements, policies and procedures. Failure to fully comply with these requirements, policies, and procedures may result in decertification, removal from registry, or exclusion from the facility. All licensed, regulated, registered, and license-exempt child care providers and all staff members of licensed care facilities undergo a criminal record check, which includes FBI summary criminal history information.

**ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations**

Pursuant to California H&SC Section 1596.871 and H&SC 1596.603, Title 22 California Code of Regulations Sections 101170, 101170.1, 101170.2, 102370, 102370.1, and 102370.2, these requirements, policies, and procedures fully apply to all licensed, regulated, registered and license exempt eligible child care providers and all staff members of licensed care facilities. DSS monitors compliance with these requirements, policies and procedures. Failure to fully comply with these requirements, policies, and procedures may result in decertification, removal from registry, or exclusion from the facility. All licensed, regulated, registered, and license-exempt child care providers and all staff members of licensed care facilities undergo a criminal record check, which includes FBI summary criminal history information.

**b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?**

**Yes**

**Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.**

N/A

- No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:
- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
  - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
  - Key challenges to fully implementing this requirements
  - Strategies used to address these challenges

Describe:

N/A

## National Background Check Requirements

### **5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).**

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff

- Yes. If yes,
- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

- ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible

providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Licensed and license-exempt child care providers must submit their fingerprints, through Live Scan vendors, to the CADOJ. Per California Penal Code Section 11105, CA DOJ coordinates with the FBI to use the fingerprint images to search FBI records and databases for criminal history information. If there is a Sex Offender flag in FBI records, that information is transmitted to CADOJ and to the CDSS background check staff.

Additionally, CDSS's Investigations Branch conducts a monthly address-based check of the NSOR to see if any registered sex offender is associated with any state licensed facility. Per California Penal Code Sections 290 to 290.024 , individuals who are required to register as sex offenders in other states must register in California as a sex offender upon moving to or becoming employed in California. As part of this registration process, individuals must supply, among other information, addresses for their place of residence and their employer. If the Department finds, as a result of the monthly address-based NSOR check, that a registered sex offender is associated with a licensed facility, the Department acts to immediately exclude that individual from the licensed facility.

Although California does not conduct a name-based NCIC NSOR check, CDSS's current background check process fulfills the intent behind this requirement.

Legislation and additional funding would be required to implement a name-based NSOR check, only performed by law enforcement, as part of the criminal record check process. California conducted a pilot study of the costs and benefits of implementing such an

NSOR check. In the pilot study, NSOR did not identify any additional individuals who were registered sex offenders who were not already identified through California's existing background check system. Fully implementing this requirement would require CDSS to hire an additional 280 staff whose sole responsibility would be to check NSOR for licensed and license-exempt child care staff. Currently there are approximately 90 staff who conduct background checks for all child care, foster care, license-exempt child care, and adult and senior community care facilities. California has not implemented this requirement because the excessive costs do not justify the demonstrably absent benefits, and there is no existing statutory authority to conduct this check.

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Licensed and license-exempt child care providers must submit their fingerprints, through Live Scan vendors, to the CADOJ. Per California Penal Code Section 11105, CA DOJ coordinates with the FBI to use the fingerprint images to search FBI records and databases for criminal history information. If there is a sex offender flag in FBI records, that information is transmitted to CADOJ and to CDSS background check staff.

Additionally, CDSS's Investigations Branch conducts a monthly address-based check of the NSOR to see if any registered sex offender is associated with any state licensed facility. Per California Penal Code Sections 290 to 290.024 , individuals who are required to register as sex offenders in other states must register in California as a sex offender upon moving to or becoming employed in California. As part of this registration process, individuals must supply, among other information, addresses for their place of residence and their employer. If the Department finds, as a result of the monthly address-based NSOR check, that a registered sex offender is associated with a licensed facility, the Department acts to immediately exclude that individual from the licensed facility. Although California does not conduct a name-based NCIC NSOR check, CDSS's current background check process fulfills the intent behind this requirement.

Legislation and additional funding would be required to implement a name-based NSOR check, only performed by law enforcement, as part of the criminal record check process. California conducted a pilot study of the costs and benefits of implementing such an NSOR check. In the pilot study, NSOR did not identify any additional individuals who were registered sex offenders who were not already identified through California's existing background check system. Fully implementing this requirement would require CDSS to hire an additional 280 staff whose sole responsibility would be to check NSOR for licensed and license-exempt child care staff. Currently there are approximately 90 staff who conduct background checks for all early learning and care, foster care, license-exempt child care, and adult and senior community care facilities. California has not implemented this requirement because the excessive costs do not justify the demonstrably absent benefits, and there is no statutory authority to conduct this check.

## [Inter-state Background Check Requirements](#)

[Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43\(b\)\(3\). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the](#)

state where the staff member is employed may be advisable, but are not strictly required.

**5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).**

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

a) Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the interstate criminal registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

There is currently no state requirement to search other states' criminal registries. Legislation is necessary to effectuate this requirement. In lieu of this requirement, licensed and license-exempt child care providers must submit their fingerprints, through Live Scan vendors, to the CADOJ. CADOJ coordinates with the FBI to use the fingerprint images to search FBI records and databases for criminal history information. The FBI RAP sheet includes records of arrests and prosecutions from other states, including states that participate in the NFFP.

b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

There is currently no state requirement to search other states' criminal registries. Legislation is necessary to effectuate this requirement. In lieu of this requirement, licensed and license-exempt child care providers must submit their fingerprints, through Live Scan vendors, to the CADOJ. CADOJ coordinates with the FBI to use the fingerprint images to search FBI records and databases for criminal history information. The FBI RAP sheet includes records of arrests and prosecutions from other states, including states that participate in the NFFP. The CDE is working with DSS to explore the expansion of the FBI clearance to include participation across state check.

**5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).**

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

There is currently no state requirement to search other states' sex offender registries.

Legislation is necessary to effectuate this requirement. All staff members of licensed care facilities are required to undergo a criminal record check, which includes the state criminal background checks, FBI criminal background checks, and the Child Abuse Central Index (California's child abuse and neglect registry). Per California Penal Code Section 290, individuals are included in the Sex Offender Registry as a result of a conviction for specified crimes. Registered sex offenders are required to re-register when they move to California from another state. Any conviction in California that would result in an individual's inclusion in the Sex Offender Registry appears on the state Record of Arrests and Prosecutions (RAP) sheet, and the convictions from other states appear on the FBI RAP sheet. The CDSS/CADOJ do not conduct a separate check of other states' Sex Offender Registries because that search would be duplicative of the information the CDSS/CADOJ already receives through the RAP sheets.

b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

There is currently no state requirement to search other states' sex offender registries.

Legislation is necessary to effectuate this requirement. All staff members of licensed care facilities are required to undergo a criminal record check, which includes the state

criminal background checks, FBI criminal background checks, and the Child Abuse Central Index (California's child abuse and neglect registry). Per California Penal Code Section 290, individuals are included in the Sex Offender Registry as a result of a conviction for specified crimes. Registered sex offenders are required to re-register when they move to California from another state. Any conviction in California that would result in an individual's inclusion in the Sex Offender Registry appears on the state Record of Arrests and Prosecutions (RAP) sheet, and the convictions from other states appear on the FBI RAP sheet. The CDSS/CADOJ do not conduct a separate check of other states' Sex Offender Registries because that search would be duplicative of the information the CDSS/CADOJ already receives through the RAP sheets.

#### **5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).**

Note: This is a name-based search.

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

There are currently no requirements, and this would require a statutory change. Child abuse allegations that result in an arrest or conviction in any state are received as part of FBI results.

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

There are currently no requirements, and this would require a statutory change. Child abuse allegations that result in an arrest or conviction in any state are received as part of FBI results.

## Provisional Employment

The CCDF final rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2)). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF final rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

### 5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below. (Waiver request allowed. See Appendix A). Check all that apply.

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides.

Describe and include a citation:

N/A

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A).

Describe and include a citation:

N/A

Other.

Describe:

Provisional employment is not allowed. California's Criminal Background check system requires that all licensed providers and staff receive either a criminal record clearance or criminal record exemption prior to issuance of a license or prior to employment. License-exempt child care providers are not registered on Trustline until they receive a criminal record clearance or criminal record exemption. Health H&SC sections 15896.66 and 1596.67.

**5.4.10 The state/territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The state/territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the state/territory will provide information about each disqualifying crime to the staff member.**

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)).

Upon request, the CDSS provides a confirmation of an individual's background check clearance or exemption and the facility the individual is associated with. The State is supporting the CCDF Tribal grantees through additional funding for Tribes to have access to Trustline. The CDE supports the CCDF tribal grantees by covering the trustline costs for tribes. CDE is in the process of working with its state agency partners to determine who is responsible for responding to other states, territories, and tribes' requests, and once that is determined, how it will respond as expeditiously as possible to accommodate the 45-day timeframe.

**5.4.11 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or - subject to an individual review (at the state/territory's option)- a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).**

Note: The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(c)(i)?

No

Yes.

Describe other disqualifying crimes and provide citation:

The State has a criminal record exemption process to determine if the individual is eligible for employment as a early learning and care worker. This process is required for all criminal convictions other than minor traffic violations. State laws define non-exemptible crimes which will automatically disqualify a child care staff member from being employed as a child care provider. These non-exemptible crimes, which are statutorily specified in California H&SC 1596.871(f), include convictions for crimes that are considered violent felonies, crimes for which one must register as a sex offender, and other egregious crimes. For crimes other than those listed on the nonexemptible list, the Department grants an exemption to work in a licensed child care facility only

when the individual and/or licensee has provided substantial and convincing evidence of present good character. California's list of non-exemptible crimes includes all of the federal non-exemptible crimes.

**5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3).**

Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2-4)).

Prior to prohibiting an individual's presence or employment at a licensed child care facility based on criminal history information, the CADOJ provides the subject of the background check with notice of any criminal history received by the CDSS and the process by which the subject may present any rehabilitative evidence relevant to the background check evaluation. Anyone who is issued a denial, either due to a conviction or based on conduct related to an arrest entry, has the right to appeal and request an administrative hearing with an Administrative Law Judge. Denial letters issued by the CDSS include information on appeal rights and how to request a hearing. These due process protections are clearly established in state law. Felony drug offenders are included in the standard exemption process used for any prospective child care licensee/employee with criminal convictions. The CDSS reviews the conviction(s) and, with the exception of certain serious offenses, provides the individual to an opportunity to present rehabilitative evidence to determine if he/she is of present good character necessary to operate or work at a licensed child care facility. This process allows the CDSS to take all available information into consideration including, but not limited to, the number of convictions, character references, participation in any drug/alcohol treatment programs, and how much time has passed since the individual's most recent conviction. For example, an individual who has been convicted of a single nonviolent felony that is over four years old would be more likely to demonstrate "present good character" than someone who has been convicted of two felonies within the past year, absent additional facts.

**5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)).**

Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)).

Prospective child care providers who seek employment in a licensed child care setting pay the eligible Live Scan vendor of their choosing the cost of rolling their fingerprints. These fees are set by the Live Scan vendor. CDSS does not charge the applicant to process their background check information. Subsidized license-exempt TrustLine providers are exempt from paying any fees. These costs are paid by the CDSS or the California Department of Education. The only fee that an applicant may have to pay is the scanning of his/her fingerprints, for which they may be reimbursed.

**5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider.**

Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

- No, relatives are not exempt from background check requirements.
- Yes, relatives are exempt from all background check requirements.
- Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers. Relatives (grandparents, aunts, and uncles of the child in care) who provide license-exempt child care are exempt from background check requirements if they do not

receive CCDF, TANF, or California child care subsidy funds. However, if the relative provides license-exempt child care and receives CCDF, TANF, or California child care subsidy funds, then the relative is subject to the background check requirements established in California H&SC Section 1596.871 H&SC 1596.603.

## 6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

### 6.1 Professional Development Framework

**6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce**

information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.

a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

-- State/territory professional standards and competencies. Describe:

The *California Early Childhood Educator Competencies (ECE Competencies)* describe the knowledge, skills and dispositions that early childhood educators need in order to provide high-quality care and education to young children and their families. The *ECE Competencies* are aligned with the *California Preschool Learning Foundations* and the *California Infant/Toddler Learning & Development Foundations* to guide professional development and related quality improvement activities. The *ECE Competencies* are organized into twelve overlapping areas:

- (1) Child Development and Learning;
- (2) Culture, Diversity and Equity;
- (3) Relationships, Interactions, and Guidance;
- (4) Family and Community Engagement;
- (5) Dual-Language Development;
- (6) Observation, Screening, Assessment, and Documentation;
- (7) Special Needs and Inclusion;
- (8) Learning Environments and Curriculum;
- (9) Health, Safety, and Nutrition;
- (10) Leadership in Early Childhood Education;
- (11) Professionalism; and
- (12) Administration and Supervision.

The term *early childhood educator* includes everyone responsible for the care and education of young children. The *ECE Competencies* also *competency contexts*: Supporting Early Learning and Development; Planning and Guiding Early Learning and Development; Creating and Maintaining Program Policies and Practices; and Advancing the Early Childhood Profession. More information can be found at:

<https://www.cde.ca.gov/sp/cd/re/ececomps.asp>. Included in Administration and Supervision Performance Area 2 (Human Resources) competencies, the *ECE Competencies* include expectations regarding adult learning and coaching. The specific

competency requires that personnel in these positions "support ongoing adult learning, coaching, and mentoring" by "understand[ing] that adults learn differently from children and that adults have different approaches to learning. [Individuals in these positions] understand that adult learning opportunities outside the classroom enhance the work [of the classroom personnel] with children". Career pathways: \*California has a career ladder for staff in the CDE-contracted state preschool programs and early learning and care and development programs. Levels of the Child Development Permit are: Child Development Assistant Permit, Child Development Associate Teacher Permit, Child Development Teacher Permit, Child Development Master Teacher Permit, Child Development Site Supervisor Permit, Child Development Program Director Permit, and there is also a School-Age Emphasis Authorization. A revised career lattice was presented to the State Advisory Council (SAC) on October 25, 2017. Additional information on stakeholder input will be provided at the February 28, 2018 meeting and finalized at their June 20, 2018 meeting. The Career Lattice has ten levels and expands to include additional options for levels 4 - 10. These options represent a variety of positions a person may want to pursue: Early Learning Caregiver/Teacher/TK-3rd grade Teacher (teacher, family child care provider, assistant) Early Learning Administrator/School Administrator (ex. program director, principal) Early Learning Specialist/Innovator (ex. Coach, trainer, mentor) Early Learning Infrastructure Support Person (ex. Staff who work at a R&R Agency, County Office of Education, or First 5 Commission) Levels 1 - 3 have professional development/training hours and Levels 3 - 10 are differentiated by academic achievement and coursework. Advisory structure: \*California has an Early Childhood Education Professional Learning Team (CA ECE PL Team) that reports regularly to the SAC for Early Learning and Care. The Team, working within the parameters of a newly formed organizational "constellation map" based on the recommendations of *Transforming the Workforce Birth to Eight* (TWB8), is comprised of members representing virtually all California ECE entities. The ECE PL Team works hand-in-hand with the CA TWB8 Stewardship Group to ensure meaningful input from all stakeholder groups. Articulation: \*The CDE supported an alignment of the core Early Childhood Education/Child Development (ECE/CD) courses for its Community Colleges through a Curriculum Alignment Project (CAP). For more information, please go to: <http://cccece.net/curriculum-alignment-project>. 103 Community Colleges in California have agreed to participate in CAP. Of these colleges, 91 are officially aligned and 2 others are in the revision process to align their courses. The CAP courses have been accepted as the required core for the Associate in Science for Transfer (ADT) in Early

Childhood Education. For information on the courses and the degree, go to: <http://www.cid.net> The CAP courses are the foundation for the ADT in ECE. To view a list of California State Universities who have a program similar to the ADT in ECE visit: (<http://www.calstate.edu/transfer/adt-search/search.shtml>) Workforce information:: \*The California ECE Workforce Registry is a state, regional and local collaboration designed to track and promote the education, training and experience of the early learning and care workforce for the purpose of improving professionalism and workforce quality to positively impact children. The Registry is funded by First 5 California (F5CA) and several local First 5's. More information can be found at: <http://www.caregistry.org/> California also utilizes the Registry for a "participant profile" for individuals in the workforce who are accessing the CDE ECE Quality Improvement professional development services and other training. The most recent data can be found at: <https://www.cde.ca.gov/sp/cd/re/qipdprofilereport2015.pdf> Additionally, the CDE has contracted with UC Berkeley to plan and prepare to conduct an updated survey of the California early care and education (ECE) workforce. The 2019 California Early Care and Education Workforce Study will collect information about the wages, demographic characteristics, and educational qualifications of the ECE serving children from birth to five years old. The survey will be completed by a statewide representative sample of approximately 3,600 early educators in center and family child care homes. The survey results will provide a source of statewide data that can assess progress in addressing long-standing challenges facing the California ECE workforce related to their educational attainment, compensation, stability, and stratification by race, ethnicity, and language. This will allow for the assessment of the impact of funding and policy changes on the composition and characteristics of the workforce. The survey will also provide current data that will allow for appropriate projections and planning in response to emerging issues in ECE. The objectives of this project are to:

- 1) identify implementation partners and consultants and develop agreements with them;
- 2) conduct community outreach and engagement to inform stakeholders and providers about the study;
- 3) develop early learning and care center and family child care provider surveys;
- 4) develop the sample, sampling plan, and research design;
- 5) program and pretest the surveys for CATI (Computer Assisted Telephone Interview) and/or web implementation; and
- 6) pilot the surveys with early learning and care center and family child care provider respondents.

Financing: \*CCDF quality funds are the primary source of financing for State early learning and care training and professional development. First Five IMPACT and the CDE State Preschool QRIS Block grant funds are utilized by QRIS consortia to provide training, coaching, and professional development. \* **AB 212 Child Development Staff Retention Funds**: are provided to Child Care and Local Development Planning Councils (LPCs) for early learning and care staff retention activities to retain qualified staffs who work directly with children in the CDE-contracted centers or family child care home education networks. The LPCs develop countywide plans in accordance with approved guidelines and submit these plans to the CDE for review and approval. The funds are intended to supplement, not supplant, existing efforts and investments to retain qualified early learning and care staff at the local level. There are currently [LPCs representing each county in California](#). (See *California EC*, Chapter 2.3, Article 1, Section 8499 and Article 2, sections 8499.3, 8499.5 and 8499.7).

-- Career pathways. Describe:

California has a career ladder for staff in the CDE-contracted state preschool programs and early learning and care and development programs. Levels of the Child Development Permit are:

1. Child Development Assistant Permit,
2. Child Development Associate Teacher Permit,
3. Child Development Teacher Permit,
4. Child Development Master Teacher Permit,
5. Child Development Site Supervisor Permit,
6. Child Development Program Director Permit, and
7. there is also a School-Age Emphasis Authorization.

A revised career lattice was presented to the State Advisory Council (SAC) on October 25, 2017. Additional information on stakeholder input will be provided at the February 28, 2018 meeting and finalized at their June 20, 2018 meeting. The Career Lattice has ten levels and expands to include additional options for levels 4 - 10. These options represent a variety of positions a person may want to pursue: Early Learning Caregiver/Teacher/TK-3rd grade Teacher (teacher, family child care provider, assistant), Early Learning Administrator/School Administrator (ex. program director, principal), Early Learning Specialist/Innovator (ex. Coach, trainer, mentor), Early Learning Infrastructure

Support Person (ex. Staff who work at a R&R Agency, County Office of Education, or First 5 Commission) Levels 1 - 3 have professional development/training hours and Levels 3 - 10 are differentiated by academic achievement and coursework.

-- **Advisory structure. Describe:**

California has an Early Childhood Education Professional Learning Team (CA ECE PL Team) that reports regularly to the SAC for Early Learning and Care. The Team, working within the parameters of a newly formed organizational "constellation map" based on the recommendations of *Transforming the Workforce Birth to Eight* (TWB8), is comprised of members representing virtually all California ECE entities. The ECE PL Team works hand-in-hand with the CA TWB8 Stewardship Group to ensure meaningful input from all stakeholder groups.

-- **Articulation. Describe:**

The CDE supported an alignment of the core Early Childhood Education/Child Development (ECE/CD) courses for its Community Colleges through a Curriculum Alignment Project (CAP). For more information, please go to: <http://cccece.net/curriculum-alignment-project>. 103 Community Colleges in California have agreed to participate in CAP. Of these colleges, 91 are officially aligned and 2 others are in the revision process to align their courses. The CAP courses have been accepted as the required core for the Associate in Science for Transfer (ADT) in Early Childhood Education. For information on the courses and the degree, go to: <http://www.cid.net> The CAP courses are the foundation for the ADT in ECE. To view a list of California State Universities who have a program similar to the ADT in ECE visit: ( <http://www.calstate.edu/transfer/adt-search/search.shtml> )

-- **Workforce information. Describe:**

The California ECE Workforce Registry is a state, regional and local collaboration designed to track and promote the education, training and experience of the early learning and care workforce for the purpose of improving professionalism and workforce quality to positively impact children. The Registry is funded by First 5 California (F5CA) and several local First 5's. More information can be found at: <http://www.caregistry.org/> California also utilizes the registry for a "participant profile" for individuals in the workforce who are accessing the CDE ECE Quality Improvement professional development services and other training. The most recent data can be found at:

<https://www.cde.ca.gov/sp/cd/re/qipdprofilereport2015.pdf> Additionally, the CDE has contracted with UC Berkeley to plan and prepare to conduct an updated survey of the California early care and education (ECE) workforce. The 2019 California Early Care and Education Workforce Study will collect information about the wages, demographic characteristics, and educational qualifications of the ECE serving children from birth to five years old. The survey will be completed by a statewide representative sample of approximately 3,600 early educators in center and family child care homes. The survey results will provide a source of statewide data that can assess progress in addressing long-standing challenges facing the California ECE workforce related to their educational attainment, compensation, stability, and stratification by race, ethnicity, and language. This will allow for the assessment of the impact of funding and policy changes on the composition and characteristics of the workforce. The survey will also provide current data that will allow for appropriate projections and planning in response to emerging issues in ECE. The objectives of this project are to: 1) identify implementation partners and consultants and develop agreements with them; 2) conduct community outreach and engagement to inform stakeholders and providers about the study; 3) develop early learning and care center and family child care provider surveys; 4) develop the sample, sampling plan, and research design; 5) program and pretest the surveys for Computer Assisted Telephone Interview and/or web implementation; and 6) pilot the surveys with early learning and care center and family child care provider respondents.

-- **Financing. Describe:**

CCDF quality funds are the primary source of financing for State early learning and care training and professional development. First Five IMPACT and the CDE State Preschool QRIS Block grant funds are utilized by QRIS consortia to provide training, coaching, and professional development. \* **Child Development Staff Retention Funds( AB 212 (statute 2000, chapter 547):** are provided to Child Care and Local Development Planning Councils (LPCs) for early learning and care staff retention activities to retain qualified staffs who work directly with children in the CDE-contracted centers or family child care home education networks. The LPCs develop countywide plans in accordance with approved guidelines and submit these plans to the CDE for review and approval. The funds are intended to supplement, not supplant, existing efforts and investments to retain qualified early learning and care staff at the local level. There are currently [LPCs representing each county in California](#). (See *California EC*, Chapter 2.3, Article 1, Section 8499 and Article 2, sections 8499.3, 8499.5 and 8499.7.)

b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:

Academic units for the Program for Infant/Toddler Care (PITC) are available through a local community college or state university. Continuing education units are offered through the University of California at the Davis Extension for Family Child Care at Its Best trainings.

- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

California's ECE Professional Learning Team is co-lead by the CDE and F5CA and composed of representatives from the ECE higher education and professional development providers.

- Other

Describe:

California's Early Childhood Educator Self-Assessment Toolkit (ECE CompSAT) is an online, comprehensive professional development website with interactive and self-reflective activities and videos highlighting research-based guidance on the *ECE Competencies*. <http://www.ececompsat.org/>.

**6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.**

California has health and safety training requirements, which predate the SAC. 5CCR

(Education) programs require Child Development Permits, which have educational requirements. The state's Transforming the Workforce: Birth to Age Eight team has a higher education workgroup that is exploring how to best support academic achievement in the workforce. The State Advisory Council (SAC) is reviewing a Career Lattice for approval. The state's ECE Professional Learning Team reports to the SAC and meets regularly to examine the state's training and professional development system. F5CA has a project, in collaboration with the CDE, exploring how to improve the state's training and technical assistance system. Part of this project will create a training approval process and a coaching certification process.

### **6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).**

The framework improves the quality, diversity, stability, and retention of the state's ECE workforce by articulating the knowledge, skills and dispositions needed for those assisting in children's care, those teaching, those leading programs, and those advocating, training or coaching the workforce. All approved state training must articulate which competencies attendees are expected to learn. Faculty and professional development providers are able to map their coursework to the competencies. Training and coursework are intended to improve the quality of the workforce by ensuring that there are ample opportunities to practice and reflect. Efforts are made so that training and coursework are linguistically and culturally relevant to their communities. Cohort modules are often used to support California's diverse ECE workforce. The Career Lattice will promote stability for the workforce by articulating career choices. The Career Lattice will be expressed in the registry, so individuals can see what career opportunities exist with their training and academic achievement. Retention of a high-quality workforce remains an on-going challenge. Funding mechanisms are in place, as Child Development Staff Retention funds (AB 212 section 2000, chapter 547) and stipends for permit, but adequate compensation remains a struggle for most. Some counties, like San Francisco, have local taxes that help to address a living wage. The California Early Childhood Mentor Program suggests retention of high-quality teachers and directors by providing stipends for their service as mentors.

## 6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

### **6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)).**

The CDE has a comprehensive system for ensuring that training and professional learning incorporates early learning guidelines, health and safety standards and social-emotional/behavior intervention models. The CDE incorporates knowledge, application of the State's early learning, and developmental guidelines in all of its professional development opportunities. California supports health and safety standards in-depth training through contracts to the R&R agencies and through a network of regional preventive health and safety trainers. California incorporates and supports social-emotional development and behavior intervention models, which include positive behavior interventions, through the CA CSEFEL, which provides in-depth training and coaching. Social emotional resources are provided through a website called MAP to Inclusion and Belonging, see [www.cainclusion.org](http://www.cainclusion.org). California has a state CA CSEFEL Leadership Team with representation from professional development systems to ensure that the teaching pyramid principles are incorporated with consistency into training. The California Inclusion and Behavior Consultation Network (CIBC) provides intervention supports to early childhood teachers teaching children with special

needs or challenging behaviors, see <http://www.cibc-ca.org/>. CCDF Quality funds support the Faculty Initiative Project (<http://facultyinitiative.wested.org/>) which developed instructional guides for faculty on the *Preschool Learning Foundations* and *California Preschool Curriculum Framework* will include the *Infant/Toddler Learning and Development Foundations and Framework*. California Early Childhood Online (CECO) is an accessible web site (<http://www.caearlychildhoodonline.org>) for foundational online modules on the *Preschool Learning Foundations* and *Preschool Curriculum Framework* and CA CSEFEL. The PITC is funded to provide in-person training of the *Infant/Toddler Learning and Development Foundations and California Infant/Toddler Curriculum Framework*. CPIN is the system for training on the *Preschool Learning Foundations* and *Preschool Curriculum Framework*.

**6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).**

All training and resources are available to California Indian Tribes and tribal organizations who receive CCDF funds. Communication with California Indian Tribes is facilitated through quarterly Tribal Roundtable meetings. Staff persons from the CDE are regular participants and contributors to the meetings, and communication is facilitated by the CDE Tribal Liaison. Additionally, all licensees have access to California Emergency Services Authority approved health and safety program training for early learning and care providers, and the trainings are taught by Child Preventative Health and Safety Instructors training which requires instructors to include strategies incorporating cultural awareness and sensitivity, per California H&SC, Section 1596. In 2017-2018 the CDE grants QRIS funds to support the TCCAC to support tribal Quality Improvement System work. The CDE, in partnership and consultation with the TCCAC will ensure that culturally appropriate training and resources are available.

**6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:**

**a) with limited English proficiency**

The CDE contracts with all of its R&Rs for California Child Care Initiative Project (CCIP). The CCIP recruits potential child care providers from the local communities and provides training and technical assistance in the languages of that community. Most of the other professional development providers offer training in Spanish and several provide Family Child Care at Its Best training in multiple languages.

**b) who have disabilities**

As part of the Inclusive Early Education Expansion Program, the CDE will include criteria to suggest the recruitment and participation of ECE providers with disabilities.

**6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii--iv)).**

In addition to the English versions of the California Infant/Toddler Learning and Development Foundations (Infant/Toddler Foundations) and Infant/Toddler Curriculum Framework (Infant/Toddler Frameworks) <https://www.cde.ca.gov/sp/cd/re/itfoundations.asp> and the California Preschool Learning Foundations (Preschool Foundations) and Preschool Curriculum Frameworks (Preschool Frameworks) <https://www.cde.ca.gov/sp/cd/re/psfoundations.asp> these Foundations and Frameworks have been translated into Spanish. Translations are in the process of final editing before publication. The local R&Rs organizations conduct language cohort outreach and training for

the CCIP and Health and Safety Training. The online resources at CECO are accessible in English and Spanish. To the extent feasible, the CDE provides all of its resources available in both English and Spanish.

**6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).**

a) Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

The CDE is currently developing a best practices document on serving children and families who are homeless, with a focus on trauma-informed care. Once published, work will begin on training modules.

b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2).

The CDE staff have focused on the McKinney-Vento definition to provide technical assistance and its implication for practice. A best practices resource on serving children and families who are homeless (currently in development) will provide the source content for training modules that will be created and posted on CA Early Childhood Online.

**6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply**

Issue policy change notices

- Issue new policy manual
- Staff training
- Orientations
- Onsite training
- Online training
- Regular check-ins to monitor the implementation of CCDF policies

Describe the type of check-ins, including the frequency.

The CDE EESD, Field Services Office (FSO) Governance and Administration Units monitor programs on a triannual basis.

- Other

Describe:

The CDE EESD, FSO, provides series of trainings for contractors. Some of the trainings are in the form of webinars, others are in-person trainings held in many regions across the state. FSO also provides workshops at various conferences and meetings across the state.

**6.2.7 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.**

a) Describe the strategies that the state/territory is developing and implementing for training and TA.

The CCIP in-person training includes a module on "Building a Strong Family Child Care Business. Online "Business Practices" modules will be posted on the CECO website October 2018.

b) Check the topics addressed in the state/territory's strategies. Check all that apply.

- Fiscal management
- Budgeting

- Recordkeeping
- Hiring, developing, and retaining qualified staff
- Risk management
- Community relationships
- Marketing and public relations
- Parent-provider communications, including who delivers the training, education, and/or technical assistance
- Other

Describe:

Strength-based parent communication

## 6.3 Early Learning and Developmental Guidelines

**6.3.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.**

a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry

California has developed research-based early learning guidelines (ELGs); these are the *Infant/Toddler Learning and Development Foundations* and the *Preschool Foundations*. This has been an intentional systematic process. Documents are revised and updated on a systematic basis, generally between every 10 to 15 years. The *Preschool Program*

Guidelines were updated and released in spring 2015.

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

The state's ELGs, i.e., Foundations, express children's knowledge and skills at: 8, 18, 36, 48, and 60 months of age.

c) Verify by checking the domains included in the state/territory's early learning and developmental guidelines. Responses for "other" is optional

- Cognition, including language arts and mathematics
- Social development
- Emotional development
- Physical development
- Approaches toward learning
- Other

Describe:

History-social science, visual and performing arts, and science.

d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

The state's ELGs, i.e., foundations, are aligned to the CDE's kindergarten standards.

e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates

The CDE generally updates its publications on a ten-year cycle. This process entails examination of the current research and updating of the content, as necessary, with the assistance of an expert advisory panel and stakeholder input. The *Infant/Toddler Foundations* was released in 2010, the *Preschool Learning Foundations*, volume 1 in 2010, volume 2 in 2011, and volume 3 in 2013.

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards

In 2014, the CDE adopted the state's first ever *Quality Standard for Expanded Learning in*

*California* which provides a framework for high quality programming and are a strong complement to Common Core and Next Generation Science Standards, as well as many of the priorities for the Local Control Funding Formula. Also in 2014, with the passage of SB 1221 (statute 2014, chapter 370) and now codified in Education Code 8484 [a][2], all After School Education and Safety programs and 21st Century Community Learning Centers programs are required to engage in a continuous quality improvement process based on the Quality Standards. Beginning in 2016-17, programs began submitting evidence of the implementation of a Continuous Quality Improvement (CQI) process as part of their annual outcomes based data submitted to the CDE.

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

<https://www.cde.ca.gov/sp/cd/re/itfoundations.asp>

<https://www.cde.ca.gov/sp/cd/re/psfoundations.asp>

### **6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:**

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,
- Will be used as the primary or sole method for assessing program effectiveness,
- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

The state's ELGs, i.e., foundations, inform all of the state's training and technical assistance activities. Basic overviews of the Infant/Toddler and Preschool Foundations and Frameworks are available for all providers at the CECO website. The foundations are the basis for the state's child observational assessment, the Desired Results Developmental Profile. The Infant/Toddler Foundations are source content for training provided by the PITC. The

Preschool Foundations are the source content for the California Preschool Instructional Network's CPIN training and technical assistance. These foundations are embedded in the California Early Childhood Educator Competencies. The state foundations inform the curriculum frameworks and program guidelines.

## 7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system for

child care providers and services

- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)
- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)) These activities can benefit infants and toddlers through school age populations.

This section covers the quality activities needs assessment and quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

## 7.1 Quality Activities Needs Assessment for Child Care Services

**7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).**

The CDE co-chairs the state Early Childhood Education Professional Learning (ECE PL)

Team with First 5 California (F5CA). The ECE PL Team is working to support the implementation of the state's Transforming the Workforce: Birth to Age Eight. This team provides guidance of workforce initiatives. The CDE also uses the annual quality budget input sessions to inform a continuous quality improvement plan by examining potential project additions, deletions, or adjustments that are consistent, strategic, and in alignment with CCDBG requirements. As of 2012-13, the CDE has been conducting evaluations of its quality activities on an annual basis, initiating an evaluation of one of the projects each year, to the extent feasible, eventually cycling through all of the projects. An evaluation of the Child Care R&R agencies professional development activities and CCIP, implemented by local R&Rs, began in 2012-13, concluding in 2014. An evaluation of the CPIN began in 2013-14, concluding in 2015. In 2014-15, an evaluation of the California Collaborative for the Social-Emotional Foundations of Early Learning's Teaching Pyramid was initiated. In 2015-16, an evaluation of the LPCs and AB 212 Retention Project, implemented by LPCs, was initiated. Completed evaluations can be found at: <https://www.cde.ca.gov/sp/cd/re/cddadminres.asp>. Due to contracting negotiations, no evaluation could be initiated in 2016-17. An evaluation of the PITC is being initiated in 2017-18 and an evaluation of the Child Development Training Consortium is planned for 2018-19. The results of the evaluation are used for project improvement. In addition, the CDE is using a workforce project with the Council of Chief School Officers and the National Governor's Association, to conduct a review of its quality investments. Specifically, the project has brought together a small group representing CCDF funded programs, the workforce and dual language learners, and tribal child care to review how the quality projects support advancement along the Career Lattice and promote equality.

### **7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.**

The most recent quality improvement activities input session was conducted on October 5, 2017. All of the existing CDE quality improvement professional development (PD) systems received positive comments during the input session. Focused input regarding the state quality rating improvement system, QCC, requested support for the entire continuum of early learning and care and for improved alignment between the CDE PD systems and the local

QCC consortia.

## 7.2 Use of Quality Funds

### 7.2.1 Check the quality improvement activities in which the state/territory is investing

- Supporting the training and professional development of the child care workforce. If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

N/A

- Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

N/A

- Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

State Preschool QRIS Block Grant (\$50 million a year in State Education Funds)

- Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this

activity. Check all that apply

- CCDF funds
- Other funds

Describe:

N/A

- Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.

- CCDF funds
- Other funds

Describe:

State General Fund

- Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.

- CCDF funds
- Other funds

Describe:

State General Fund

- Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.

- CCDF funds
- Other funds

Describe:

N/A

- Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

- CCDF funds
- Other funds

Describe:

N/A

- Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

N/A

- Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

State General Fund

### 7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

#### **7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce**

- a) Check and describe which content is included in training and professional

development activities and describe who or how an entity is funded to address this topic. Check all that apply.

- Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies

Describe:

The CDE quality funds support the following: the CCIP provides training on these domains for prospective and new family child care home providers. The PITC provides training on these domains for providers serving infants and toddlers. The CPIN provides training on these domains for providers serving preschool-aged children. Family Child Care at Its Best (FCCIB) provides training on these domains to providers serving mixed-aged groups of children. The CECO provides online training modules on these domains to all. The content is built on or aligned with the *Infant/Toddler and Preschool Foundations and Frameworks*.

- Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.5.)

Describe:

The CDE quality funds support the following: The California Collaborative for the Social-Emotional Foundations of Early Learning (CA CSEFEL)'s Teaching Pyramid, which support a cadre of CA CSEFEL-certified trainers and coaches, the California Inclusion and Behavior Consultation (CIBC) Network deploys mental health consultants and inclusion specialist to provide on-site technical assistance, The CCIP, PITC, CPIN, and FCCIB provide strategies to support these needs. A Best Practices document on serving boys of color, with a focused section on suspension and expulsion is in development; this document will serve as a source document for development of professional development module(s).

- Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development

Describe:

CCIP, PITC, CPIN, and FCCIB have been developed to support parents and families in culturally and linguistically appropriate ways. The Infant/Toddler and Preschool Frameworks, Infant/Toddler and Preschool Program Guidelines, and the Guidelines for Early Learning in Child Care Home Settings each have sections that address engaging parents and families in culturally and linguistically appropriate ways.

- [Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards.](#)

[Describe:](#)

The Infant/Toddler and Preschool Frameworks, Infant/Toddler and Preschool Program Guidelines, and the Guidelines for Early Learning in Child Care Home Settings provide guidance on implementing developmentally appropriate, culturally and linguistically responsive instruction that is aligned to the Infant/Toddler and Preschool Foundations. The PITC trains on the Infant/Toddler Framework and Infant/Toddler Program Guidelines, the CPIN trains on the Preschool Framework and Preschool Program Guidelines. Family Child Care at Its Best and the local R&Rs use the foundations and the Guidelines for Early Learning in Child Care Home Settings. The CDE will work in collaboration with the TCCAC- QCC Region 11 to develop culturally appropriate training and approaches to work with tribal communities.

- [Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development](#)

[Describe:](#)

County R&R agencies provide information to early learning and care providers regarding comprehensive services and assist with making connections to those services within their respective service areas.

- [Using data to guide program evaluation to ensure continuous improvement](#)

[Describe:](#)

Desired Results Training and Technical Assistance assists sites in using their Desired

Results, Developmental Profile results, their Environment Rating Scale results, and their parent survey results to inform their quality improvement plans.

[Caring for children of families in geographic areas with significant concentrations of poverty and unemployment](#)

Describe:

Professional development services are prioritized to those programs serving children in high needs areas and to those participating in their local QRIS. A Best Practices document is under development on serving children and families who are homeless; this document will serve as the source document for the development on professional development modules. The CDE will work in collaboration with the TCCAC - QCC Region 11 to develop culturally appropriate training and approaches to work with tribal communities and to provide feedback on materials and trainings developed by quality projects.

[Caring for and supporting the development of children with disabilities and developmental delays](#)

Describe:

The CIBC Network provides on-site TA, the CA CSEFEL Teaching Pyramid and Beginning Together train trainers and coaching inclusive practices, and the MAP to Inclusion and Belonging website support providers to link to resources for serving children with disabilities and developmental delays.

[Supporting the positive development of school-age children](#)

Describe:

CCDF funds were used to develop online training modules for staff serving school-aged children. In collaboration with the Expanded Learning Division, the CDE provides access to these professional development opportunities to before and after school programs. The CDE, in collaboration with the TCCAC - QCC Region 11, ensures that their trainings are culturally appropriate to work with tribal communities.

[Other](#)

Describe:

Strengthening Families (SF) Network supports local R&Rs to be SF trainers for their

local communities in family engagement strategies and best practices.

b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply

- Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling
- Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities
- Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education
- Other

Describe:

Coordination for the above is provided by the Child Development Training Consortium, in conjunction with the Workforce Registry, and LPCs.

### **7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

The QCC rating matrix measures academic achievement and professional development hours. The September 2017 submission of the QCC common data file provides a baseline moving forward. Each year progress will be checked, including the number of providers that are maintaining or increasing their tier rating. Take up with the Workforce Registry is currently limited. With additional funding from F5CA, it is planned that over time the registry will provide sufficient data to track progress.

## 7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. 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

### **7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?**

- No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.
- No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.
- Yes, the state/territory has a QRIS operating statewide or territory-wide

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available.

The QCC is administered locally, through county or regional consortia. Core membership of each QRIS consortium includes: County First 5 Commission, County Office of Education, County LPC, R&R(s), and institutions of Higher Education. In 2018-19 they are expanding to add local alternative payment programs. Information can be found at: <https://qualitycountsca.net/>.

- Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available. N/A

Yes, the state/territory has another system of quality improvement

If the response is yes to any of the above, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

N/A

#### 7.4.2 QRIS participation

a) Are providers required to participate in the QRIS?

Participation is voluntary

Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).

N/A

Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply

Licensed child care centers

Licensed family child care homes

License-exempt providers

Early Head Start programs

Head Start programs

State prekindergarten or preschool programs

Local district-supported prekindergarten programs

Programs serving infants and toddlers

Programs serving school-age children

Faith-based settings

- Tribally operated programs
- Other

Describe:

Military, and other programs exempt from licensure that meet the licensing health and safety standards. License-exempt individuals can participate in quality improvement activities, but are not subject to rating.

### 7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- No
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
  - Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system) .
  - Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs 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, an alternative pathway exists to meeting the standards).
  - Programs that meet all or part of state/territory school-age quality standards.
  - Other.

Describe:

N/A

**7.4.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?**

- No
- Yes. If yes, check any links between the state/territory's quality standards and licensing requirements
  - Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
  - Embeds licensing into the QRIS
  - State/territory license is a "rated" license
  - Other.

Describe:

License-exempt family, friend, and neighbor providers can participate in the quality improvement part of the QRIS; however, will not be rated.

**7.4.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS**

- No
- Yes. If yes, check all that apply
  - One time grants, awards, or bonuses.
  - Ongoing or periodic quality stipends
  - Higher subsidy payments
  - Training or technical assistance related to QRIS.
  - Coaching/mentoring.
  - Scholarships, bonuses, or increased compensation for degrees/certificates

- Materials and supplies
- Priority access for other grants or programs
- Tax credits (providers or parents)
- Payment of fees (e.g., licensing, accreditation)
- Other

Describe:

All of the above are locally determined, though the majority of the funding for these is provided by state funds.

#### **7.4.6 Describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

The CDE and F5CA will use 2017 data submission as the benchmark; compare the increase in the number of participating sites over time and the number of programs that increase their tier rating.

### 7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs. Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

**7.5.1 What activities are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe**

- Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families

Describe:

The CDE has a contracting process that allows the state to contract with public and private agencies to provide high-quality early learning and care services. LPCs in each county provide priority data so that new funds can be directed to high priority communities.

- Establishing or expanding the operation of community- or neighborhood-based family child care networks.

Describe:

The CDE has a contracting process that allows the state to contract with public and private agencies to establish family child care home education networks, provide high-quality early learning and care services. LPCs in each county provide priority data so that new funds can be directed to high priority communities.

- Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers

Describe:

The CCIP has a focus in assisting family child care providers to provide infant/toddler care. PITC offers four modules to enhance participants' abilities to provide training that supports providers in the care of infants and toddlers, including those with disabilities and special needs. *Beginning Together* (<https://cainclusion.org/bt/>) was created in collaboration with the CDE and WestEd, Center for Child and Family Studies as an inclusion support to the PITC.

- Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists

Describe:

California utilizes the PITC Regional Partners for Quality to have a system of qualified infant-toddler specialists. These partners have a system to extend their reach to the certification process for additional trainers that are part of their service, but who are not on their staff.

- Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

Describe:

The CDE engages with its Part C partners at the California Department of Developmental Services (CDDS). A representative from its TA system is a member of the state ECE Professional Learning Team.

- Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments

Describe:

The QCC has embedded CDE's *Infant/Toddler Learning and Development Foundations* and *Curriculum Framework* and its aligned child observational assessment, the DRDP into the QCC QRIS Pathways. Quality funds are used to support a \$10.4 million in Infant/Toddler QRIS Block Grant, with plans to increase the funding over time.

- Developing infant and toddler components within the state/territory's child care licensing regulations

Describe:

Developed: The CDSS Community Care Licensing Division (CCLD) requires 6 units in Infant/Toddler course work to work as an Infant/Toddler teacher.

- Developing infant and toddler components within the early learning and developmental guidelines

Describe:

The CDE has developed *Infant/Toddler Learning and Development Foundations*, a

*Curriculum Framework*, and *Infant/Toddler Program Guidelines* with companion DVDs and online modules which can be found here <https://www.caearlychildhoodonline.org/>.

- Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development

Describe:

California has a robust system of R&Rs dedicated to provide consumer education, including QRIS information, about high-quality early learning and care. To strengthen their work, consumer education modules for R&R phone counselors are being deployed for all R&Rs.

- Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being

Describe:

California supports the PITC demonstration sites at several community colleges across the state to provide an opportunity to observe high-quality infant/toddler care. California has adopted the teaching pyramid principles of CSEFEL and provides training on the infant/toddler modules. Using RTT-ELC funds, the community colleges created three aligned infant/toddler courses for use across the system.

- Coordinating with child care health consultants.

Describe:

N/A

- Coordinating with mental health consultants.

Describe:

The CDE funds the California Inclusion and Behavior Consultation (CIBC) Network. The WestEd Center for Prevention and Early Intervention manages the CIBC Network, providing coordination and facilitating reflective practice among the mental health consultants.

Other

Describe:

N/A

### **7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures**

QCC and each of the local QRIS consortia are making concerted efforts to reach out and engage providers serving infants and toddlers. The September 2017 QCC common data submission provides a baseline for the number of programs serving infants and toddlers and their tier rating. This baseline will be used to indicate both expansion of reach and engagement in QCC, but also an increase in the number of infants and toddlers served in high quality settings. The CDSS is able to track the number of infant centers that are licensed and identify if there is a growth in capacity. LPCs periodically conduct a needs assessment to determine the need for infant/toddler care; this information is used to guide the awarding of contracts to meet communities' need for infant/toddler care. Local R&Rs track the need for services by the age of the child. The California Child Care R&R Network periodically releases a state and county level Child Care Portfolio that describes the status of early learning and care. Local QRIS track program improvement and increases in quality levels with information about the ages of the children served.

## **7.6 Child Care Resource and Referral**

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

**7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

R&R agencies are under contract with the CDE and subject to periodic monitoring to ensure compliance to statutory and regulatory requirements. The CDE engaged an independent evaluation of TA and professional development (PD) activities conducted by California's R&R which took place from May 1, 2013 through June 20, 2014. The research areas evaluated which TA and PD services were provided through local R&Rs and who was participating in these activities, and strived to determine the level of improvement in the quality of early learning and care provided after receiving PD training.

**7.7 Facilitating Compliance With State Standards**

**7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe:**

\$34.6 million in CCDF quality funds are provided from the CDE to the CDSS to help meet inspection and monitoring of State licensing standards. With the increased 2018 CCDF funds, an additional \$26.4 (approximately \$26.6) million was provided.

**7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?**

No

Yes. If yes, which types of providers can access this financial assistance?

Licensed CCDF providers

Licensed non-CCDF providers

License-exempt CCDF providers

Other

Describe:

N/A

### **7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

As more counties adopt a QRIS and sites participate in their local QRIS, this will be used to measure improvement in early learning and care quality.

## **7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services**

### **7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children**

The CDE, has established the Desired Results System to improve program quality in its early learning care programs across the state. This system has several components to address all aspects of program quality: DRDP (2015) for child assessment, the ERS tool appropriate for the site/setting type, a Parent Survey, and a Program Self-Assessment which utilizes a Summary of Findings from the program's DRDP results, the ERS results, and the Parent

Survey. For non-CDE-contracted programs, this is complimented by, its Rating Matrix, and Continuous Quality Improvement Pathways that is used by the CCQ Consortium. These are local consortia focused on QRIS and blending the various funding opportunities.

**7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures**

The RTT-ELC evaluation and the semi-annual data submission provided data on the progress that has been made over the life of the RTT-ELC grant. In the subsequent grants, the State Preschool and Quality Counts CA (QCC) QRIS Block Grant and the F5CA IMPACT grant, similar data is being collected to demonstrate increased participation of early learning programs in these quality improvement efforts and the increase in the number of sites at high quality tiers, as well as, increased numbers of children with high needs being served in higher quality programs over time. The CDE and F5CA will continue to collect and analyze the data.

7.9 Accreditation Support

**7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?**

- Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

N/A

- Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

N/A

- Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

N/A

- Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide

- Focused on child care centers

Describe:

N/A

- Focused on family child care homes

Describe:

N/A

- No, but the state/territory is in the accreditation development phase

- Focused on child care centers

Describe:

N/A

- Focused on family child care homes

Describe:

N/A

- No, the state/territory has no plans for accreditation development

**7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

The CDE does not provide any support for accreditation; therefore, there are no relevant measures to describe.

**7.10 Program Standards**

**7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children**

The CDE has developed program standards through the statutory and regulatory process for its contracted infant/toddler and preschool programs. It has also produced Infant/Toddler and Preschool Program Guidelines and Guidelines for Early Learning in Family Child Care Home Settings. The CDE has a voluntary process for After-School programs to be engaged in a program Quality Improvement Process and provides guidance to support that local work. For more information, view details at: <https://www.cde.ca.gov/ls/ex/cqguidance.asp>

**7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

The CDE has 18 Field Service Office (FSO) consultants who monitor direct-service programs under contract with the CDE statewide. These consultants review the program's annual performance documents as well as conduct onsite monitoring and Technical Assistance (TA). With guidance from the QCC state support team, local QRIS are transforming into sustainable systems, particularly with the annual Legislative infusion of \$50 million in State Preschool QRIS Block Grants; \$10 million in the QCC QRIS block grant, and F5CA's \$120 million in system funding. The CDE will be able to measure progress as more centers and family child care homes move to higher rated levels of quality and as more sites participate in quality improvement activities.

## 7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

### **7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).**

Participation in QCC and improvement in tier ratings will be used to evaluate CA's progress in improving the quality of early learning and care programs. Data from the annual Fall submission will be used. The QCC evaluation will also be able to provide qualitative data on the improved services for children.

### **7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider**

**preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe:**

A. Quality Improvement Activity 1: Beginning Together: Inclusion of Infants and Toddlers with Disabilities: The Beginning Together project ensures that information about children with special needs is incorporated and appropriate inclusive practices are promoted in the training and TA provided by certified trainers for the PITC. Beginning Together is designed to move inclusive experiences for young children with disabilities or other special needs and their families from theory into practice. This is accomplished through a training-of-trainers institute, a seminar for community colleges, regional TA activities, support to institute graduates, and support of inclusive practices in other PITC activities, including a Beginning Together advanced TA institute.

a. The various institutes and academies offered continue to build a cadre of qualified trainers who are available to assist local early learning and care providers in complying with the requirements of the Americans with Disabilities Act by creating inclusive environments. The PITC infant/toddler specialists and coordinators receive TA to support them in creating linkages with early interventionists and infant/toddler early learning and care programs at the local level. Outreach sessions are conducted throughout the state each year to bring together PITC trainers, infant/toddler staff, family child care providers, early interventionists, and other professionals working with children with disabilities and other special needs and their families to discuss strategies for local coordination of services. The PITC college demonstration programs also receive training and TA. <https://cainclusion.org/bt/> - Measure to Evaluate: More infants and toddlers with IFSPs will be served in community-based settings, improving their opportunities for development.

B. Quality Improvement Activity 2: California Collaborative for Social and Emotional Foundations of Early Learning (CSEFEL): The CA CSEFEL Teaching Pyramid approach was built on the Positive Behavior Interventions and Support (PBIS) model with the incorporation of quality early childhood practices. WestEd Center for Child & Family Studies has further adapted the approach to incorporate the “facilitative administrative practices” as described in research documents. The power of the CA CSEFEL Teaching Pyramid is most clearly seen when it is implemented across an entire site, district, or agency (i.e., program-wide). There are six recommended components for achieving a program-wide approach:

1) planning by a group of leaders,

- 2) training in a systematic way,
- 3) coaching/TA to support implementation to fidelity,
- 4) incorporation of family engagement to strengthen the link between home and school,
- 5) identification and training of those responsible for the development of positive behavior support plans, and
- 6) follow-up for sustainability after training ends <http://cainclusion.org/camap/cacsefel.html>.

Measure to Evaluate: Sites implementing CSEFEL to fidelity will have reduced instances of expulsions, fewer children inappropriately referred for special education services, and more children confident and ready to enter kindergarten. A CSEFEL evaluation is currently underway.

C. Quality Improvement Activity 3: California Early Childhood Mentor Program: Mentor activities are provided at 100 community college campuses to support experienced teachers and directors and encourage them to remain in the field of early childhood education. Financial compensation and professional development support are provided to more than 640 early learning and care teachers and 145 directors who have been selected as mentors. Mentor Teacher applicants must complete a self-assessment of their classroom, and their program director must agree to conditions of their participation. Candidates for Director Mentor attend an orientation webinar and a full-day training in mentoring techniques to qualify to apply. A local selection committee convened each academic year by the community college chooses mentor teachers and directors. The average stipend per classroom mentor is estimated to be approximately \$1,600 per year. More than 2,100 early childhood education students will be provided with alternative placements for practicum experiences and mentoring support to achieve their academic goals and over 90 director protégés will receive support in improving their program leadership and management skills at: <http://www.ecementor.org/>

## 8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF
- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities
- Internal processes for conducting child care provider subsidy

### 8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

**8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:**

Train on policy manual

Describe:

The CDE conducts a yearly comprehensive off-site training of three to five days for its

staff members. The staff members also meet monthly to discuss issues regarding CCDF program administration, requirements, and integrity. They, conversely, provide on-going training and TA to contractors in regional sessions, in one-on-one sessions, and/or in clusters with webinars or during face-to-face presentations. These sessions address CCDF program administration, requirements, and integrity.

**Train on policy change notices**

**Describe:**

The CDE will support the participation of the Field Services Office (FSO) staff at conferences outside the department to enable them to stay informed about current federal requirements.

**Ongoing monitoring and assessment of policy implementation**

**Describe:**

N/A

**Other**

**Describe:**

N/A

**8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:**

**Verifying and processing billing records to ensure timely payments to providers**

**Describe:**

The CDE's payment procedures include reporting deadlines and payment schedules to ensure timely payments to contractors. These procedures include reviewing and processing contractor reports to determine payment amounts and providing payments by the first of the month for which it is intended. Further, these procedures include review of attendance and fiscal data for reasonableness and to ensure they are free of material

error. Department staff contact contractors with questions or concerns about reported data. The CDE schedules payments twice per month, to provide another payment opportunity for contractors who have submitted revised reports.

[Fiscal oversight of grants and contracts](#)

[Describe:](#)

The CDE conducts fiscal reviews to ensure that contractors are accurately tracking and reporting their services, revenues, and expenditures. Further, each contracting agency is subject to an annual independent financial and compliance audit, which is conducted by a certified public accountant or a public accountant, licensed by the State. The CDE provides training and TA to contractors to ensure that contractors are informed of the state and federal laws and regulations that pertain to child development contracts. The CDE provides training to both individual and large audiences of contractors as well as special training for new contractors.

[Tracking systems to ensure reasonable and allowable costs](#)

[Describe:](#)

The CDE uses both manual and automated systems to ensure reported contractor costs are reasonable and necessary. Manual systems include the audit and fiscal review processes described above. The CDE will reduce payment to the contractor for any reported costs that are deemed to not be reasonable or necessary. Staff follow-up with contractors in the event the contractor has findings of non-compliance in the annual audit or during a fiscal review. Additionally, the CDE's payment system includes controls to prevent payment of administrative and other costs that exceed allowable thresholds. The CDE provides follow-up TA in instances of disallowed costs due to reporting

[Other](#)

[Describe:](#)

N/A

**8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:**

Conduct a risk assessment of policies and procedures

Describe:

N/A

Establish checks and balances to ensure program integrity

Describe:

N/A

Use supervisory reviews to ensure accuracy in eligibility determination

Describe:

N/A

Other

Describe:

Review of each early learning and care service contractor at the local level by the CDE or other authorized representative using the following procedures:

1. Agency annual self-review,
2. Categorical Program Monitoring (CPMs)/Contract Monitoring Reviews (CMRs) of each school or program under contract
3. Sampling and review of individual agencies to estimate and reduce error rates
4. Enforcement of requirements.

Review of contractors or grantees that provide quality improvement activities encompasses the following tasks:

1. Review of monthly invoices and progress report
2. For those producing materials, review and approval of materials during development

and prior to final production

3. For those conducting training, review of training plan, observation of training activities, and review of client evaluations of training activities

4. Verification of periodic independent evaluations of the efficiency and effectiveness of all of the major quality improvement activities of the contractors and grantees.

**8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.**

a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.

- Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe

N/A

- Run system reports that flag errors (include types).

Describe:

N/A

- Review enrollment documents and attendance or billing records

Describe:

N/A

Conduct supervisory staff reviews or quality assurance reviews.

Describe:

N/A

Audit provider records.

Describe:

N/A

Train staff on policy and/or audits.

Describe:

N/A

Other

Describe:

The CDE has staff analysts working in teams, full-time, reviewing files, identifying administrative errors, and assisting sub-recipients in crafting and implementing error rate reduction plans. Agency specific error rate estimates have been successful in identifying issues that impact future statewide estimates and reducing the instance of error. For all sub-recipients, an annual independent audit is required and reviewed by the CDE. Actions taken: on-site reviews of sub-recipients to estimate and reduce errors, follow-up reviews to assess effective implementation of error rate reduction plans, and review of annual agency audits and completion of on-site audits of high-risk contractor by the CDE auditors.

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

N/A

Run system reports that flag errors (include types).

Describe:

N/A

Review enrollment documents and attendance or billing records

Describe:

The CDE has staff analysts working in teams, full-time, reviewing files, identifying administrative errors, and assisting sub-recipients in crafting and implementing error rate reduction plans. Agency specific error rate estimates have been successful in identifying issues that impact future statewide estimates and reducing the instance of error.

Conduct supervisory staff reviews or quality assurance reviews.

Describe:

N/A

Audit provider records.

Describe:

N/A

Train staff on policy and/or audits.

Describe:

The CDE conducts a yearly comprehensive off-site training of three to five days for its staff members. The staff members also meet monthly to discuss issues regarding CCDF program administration, requirements, and integrity. They, conversely, provide on-going training and TA to contractors in regional sessions, in one-on-one sessions, and/or in clusters with webinars or during face-to-face presentations. These sessions address CCDF program administration, requirements, and integrity.

Other

Describe:

N/A

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

N/A

Run system reports that flag errors (include types).

Describe:

N/A

Review enrollment documents and attendance or billing records

Describe:

The CDE Governance and Administration Unit (GAU) conducts ongoing review of individual contractors by sampling the eligibility and need documentation in family files to identify errors, estimate the error rates and assist the contractor in developing a robust error rate reduction plan. The GAU provides specific technical assistance based on the error rate reduction plan as well as follow-up sampling to ensure the contractor's policy and procedures produce the required reduction of error rates. The GAU also reviews attendance records and reporting thereof to CDE to ensure accurate contractor earnings.

The CDE Child Development and Nutrition Fiscal Services Division conducts focused reviews of contractor fiscal administration when there is a report of potential misuse of CDE funds.

The CDE Audits and Investigations Division conducts limited scope audits when there

is a report of potential misuse of CDE funds.

[Conduct supervisory staff reviews or quality assurance reviews.](#)

[Describe:](#)

During a compliance review, a team of CDE staff review a contractor's program at the program's site to determine compliance with applicable laws, regulations, or contractual provisions, using the Coordinated Compliance Review Guide. At least once every three years and as resources permit, the CDE conducts reviews at the contractor's office's and operating facilities to determine the contractor's compliance with applicable laws, regulations, or contractual provisions, including staff qualifications. The reviews are conducted by consultants, analysts, and/or management staff of the CDE or other State of California representatives.

[Audit provider records.](#)

[Describe:](#)

The CDE Governance and Administration Unit (GAU) conducts review of provider records during CMR on a file by file basis to identify errors, estimate the error rates and assist the contractor in developing a robust error rate reduction plan for provider reimbursements. The GAU provides specific technical assistance based on the error rate reduction plan as well as follow-up sampling to ensure the contractor's policy and procedures produce the required reduction of error rates for provider reimbursements.

[Train staff on policy and/or audits.](#)

[Describe:](#)

On an annual basis the CDE provides training to CDE early learning and care service contractors on the following areas at a minimum:

- 1) Eligibility certification and recertification;
- 2) Income calculation;
- 3) Need and family fee assessment;
- 4) Collecting and earning family fees;
- 5) Attendance recording and reporting;

- 6) Earning your contract; and
- 7) Written information for Parents and Providers;

Trainings are provided at statewide conferences, local regional area trainings; individual contractor level trainings, by webinar and video conferences. All trainings focus on how contractors can meet the regulatory requirements in an effort to provide quality services and achieve the lowest error rate possible through ongoing improvement.

Other

Describe:

Review of contractors or grantees that provide quality improvement activities encompass the following tasks: Review of monthly invoices and progress reports. For those producing materials, review and approval of materials during development and prior to final production. For those conducting training, review of training plan, observation of training activities, and review of client evaluations of training activities takes place. Additionally, there is verification of periodic independent evaluations of the efficiency and effectiveness of all of the major quality improvement activities of the contractors and grantees.

#### **8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.**

a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

Regardless of the reason for recovery of funds, the collection of funds occur for any amount at or above the threshold of \$25.00.

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

The CDE consults with a collection agency in retrieving excess funds provided to CDE Contractors. Funds are sought after a period of about 120 days delinquent from the Invoice due date.

- Recover through repayment plans.

Describe:

Within special circumstances or per the directive of legal settlements and decisions, the CDE will generate a repayment plan with the CDE Contractor for one or multiple outstanding Invoices. Repayment plans will stipulate a specific amount to be paid by a predetermined schedule until the remaining balance is paid-in-full.

- Reduce payments in subsequent months.

Describe:

The CDE will reduce monthly or quarterly advance apportionments to contractors in subsequent months of the fiscal year if and when the contractor has misrepresented / misreported actual contract earnings.

- Recover through state/territory tax intercepts.

Describe:

N/A

- Recover through other means.

Describe:

When instructed, the CDE will collect funds in restitution as court ordered. The collection of funds will be returned to the CDE directly or indirectly through existing contracts with the involved agency or parties.

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

N/A

- Other

Describe:

N/A

b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

Regardless of the reason for recovery of funds, the collection of funds occur for any amount at or above the threshold of \$25.00.

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

The CDE consults with a collection agency in retrieving excess funds provided to CDE Contractors. Funds are sought after a period of about 120 days delinquent from the Invoice due date.

Recover through repayment plans.

Describe:

Within special circumstances or per the directive of legal settlements and decisions, the CDE will generate a repayment plan with the CDE Contractor for one or multiple outstanding Invoices. Repayment plans will stipulate a specific amount to be paid by a predetermined schedule until the remaining balance is paid-in-full.

Reduce payments in subsequent months.

Describe:

The CDE will reduce monthly or quarterly advance apportionments to contractors in subsequent months of the fiscal year if and when the contractor has misrepresented / misreported actual contract earnings.

Recover through state/territory tax intercepts.

Describe:

N/A

Recover through other means.

Describe:

When instructed, the CDE will collect funds in restitution as court ordered. The collection of funds will be returned to the CDE directly or indirectly through existing contracts with the involved agency or parties.

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

N/A

Other

Describe:

N/A

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

Regardless of the reason for recovery of funds, the collection of funds occur for any amount at or above the threshold of \$25.00.

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

The CDE consults with a collection agency in retrieving excess funds provided to CDE Contractors. Funds are sought after a period of about 120 days delinquent from the Invoice due date.

- Recover through repayment plans.

Establish a unit to investigate and collect improper payments.

Within special circumstances or per the directive of legal settlements and decisions, the CDE will generate a repayment plan with the CDE Contractor for one or multiple outstanding Invoices. Repayment plans will stipulate a specific amount to be paid by a predetermined schedule until the remaining balance is paid-in-full.

- Reduce payments in subsequent months.

Describe:

The CDE will reduce monthly or quarterly advance apportionments to contractors in subsequent months of the fiscal year if and when the contractor has misrepresented /

misreported actual contract earnings.

Recover through state/territory tax intercepts.

Describe:

N/A

Recover through other means.

Describe:

When instructed, the CDE will collect funds in restitution as court ordered. The collection of funds will be returned to the CDE directly or indirectly through existing contracts with the involved agency or parties.

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

N/A

Other

Describe:

N/A

**8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:**

Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe:

The parent is provided a Notice of Action (NOA), termination of services. If the parent disagrees with the written decision the parent has 14 days (19 days if the NOA was received by mail) to request a hearing. Within 10 calendar days of the receipt of the

request for a hearing, the contractor shall notify the parent of the date and time of the hearing. The parent or an authorized representative is required to attend the hearing and shall have the opportunity to explain the reasons they believe the action was incorrect. Within 10 days of the hearing the hearing officer shall mail or deliver to the parent a written decision. If the parent disagrees with the written decision, they may request an appeal, specifying the reason why they believe the decision is incorrect. Upon receipt of the appeal request, the CDE may investigate as necessary to resolve the appeal. The decision of the CDE shall be mailed or delivered to the parent and the contractor within 30 calendar days after the receipt of the appeal request.

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

Describe:

Contractors shall develop and implement written policies and procedures for provider participation, which includes grievance procedures for parents and providers in the program. (California Code of Regulations, Title 5, Section 18223)

Prosecute criminally.

Describe:

N/A

Other.

Describe:

N/A

## [Appendix A: Background Check Waiver Request Form](#)

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered "transitional and legislative waivers" to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These

waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 -- 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019. If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

#### Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019

Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting a time-limited waiver extension.



**Appendix A.5:** National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for new or prospective staff. (See related question at 5.4.5 (a))

Describe the provision from which the state/territory seeks relief.

California seeks a waiver from the requirement to search NCIC NSOR for new or

prospective staff.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

A waiver from this provision will allow California to concentrate resources on the delivery of services to children and families.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

California has a robust criminal records check system that thoroughly and individually evaluates the criminal backgrounds of new and existing child care staff, licensees, and Trustline providers. When an individual applies for a child care license, employment in a licensed child care facility, or inclusion in the Trustline registry, the CDSS reviews a copy of their California Record of Arrests and Prosecutions (RAP) sheet, their FBI RAP sheet, and their presence or absence in the California Child Abuse Central Index (CACI). Per California Penal Code Section 290, et seq., individuals who have been convicted of specified crimes are required to register as a Sex Offender upon moving to or becoming employed in California. If the individual is a registered sex offender, that information will be included on their California RAP sheet. Consequently, registered sex offenders are not granted a criminal record clearance or exemption, and they may not be regularly present in any licensed child care facility.

Additionally, CDSS's Investigations Branch conducts a monthly address-based check of the NSOR to see if any registered sex offender is associated with any state licensed facility. Per [California Penal Code Sections 290 to 290.024](#), individuals who are required to register as sex offenders in other states must register in California as a sex offender upon moving to or becoming employed in California. As part of this registration process, individuals must supply, among other information, addresses for their place of residence and their employer. If the Department finds, as a result of the monthly address-based NSOR check, that a registered sex offender is associated with a licensed facility, the Department acts to immediately exclude that individual from the licensed facility.

Although California does not conduct a name-based NCIC NSOR check, CDSS's current background check process fulfills the intent behind this requirement.

Furthermore, CDSS receives RAP back services from the California Department of Justice, which requires the CADOJ to send to the CDSS updated RAP sheets anytime additional criminal history information is received on an individual who is registered on

Trustline, or employed by or licensed to operate a child care facility. If a RAP back indicates that a child care provider is a registered sex offender, then the individual is excluded from licensed facilities and/or removed from the Trustline Registry. Legislation is required to implement this requirement.

 **Appendix A.6: National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff. (See related question at 5.4.5 (b))**

Describe the provision from which the state/territory seeks relief.

California seeks a waiver from the requirement to search NCIC NSOR for existing staff.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

A waiver from this provision will allow California to concentrate resources on the delivery of services to children and families.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

California has a robust criminal records check system that thoroughly and individually evaluates the criminal backgrounds of new and existing child care staff, licensees, and Trustline providers. When an individual applies for a child care license, employment in a licensed child care facility, or inclusion in the Trustline registry, the CDSS reviews a copy of their California Record of Arrests and Prosecutions (RAP) sheet, their FBI RAP sheet, and their presence or absence in the California Child Abuse Central Index (CACI). Per California Penal Code Section 290, et seq., individuals who have been convicted of specified crimes are required to register as a Sex Offender upon moving to or becoming employed in California. If the individual is a registered sex offender, that information will be included on their California RAP sheet. Consequently, registered sex offenders are not granted a criminal record clearance or exemption, and they may not be regularly present in any licensed child care facility.

Additionally, CDSS's Investigations Branch conducts a monthly address-based check of the NSOR to see if any registered sex offender is associated with any state licensed facility. Per [California Penal Code Sections 290 to 290.024](#), individuals who are required

to register as sex offenders in other states must register in California as a sex offender upon moving to or becoming employed in California. As part of this registration process, individuals must supply, among other information, addresses for their place of residence and their employer. If the Department finds, as a result of the monthly address-based NSOR check, that a registered sex offender is associated with a licensed facility, the Department acts to immediately exclude that individual from the licensed facility. Although California does not conduct a name-based NCIC NSOR check, CDSS's current background check process fulfills the intent behind this requirement. Furthermore, CDSS receives RAP back services from the California Department of Justice, which requires the CADOJ to send to the CDSS updated RAP sheets anytime additional criminal history information is received on an individual who is registered on Trustline, or employed by or licensed to operate a child care facility. If a RAP back indicates that a child care provider is a registered sex offender, then the individual is excluded from licensed facilities and/or removed from the Trustline Registry. Legislation is required to implement this requirement.

**Appendix A.7: Interstate criminal registry or repository check for new or prospective staff. (See related question at 5.4.6 (a))**

**Describe the provision from which the state/territory seeks relief.**

California seeks a waiver from the requirement to search interstate criminal registry or repositories for new or prospective staff.

**Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children**

A waiver from this provision will allow California to concentrate resources on the delivery of services to children and families.

**Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.**

California has a robust criminal records check system that thoroughly and individually evaluates the criminal backgrounds of new and existing child care staff, licensees, and Trustline providers. When an individual applies for a child care license, employment in a licensed child care facility, or inclusion in the Trustline registry the CDSS reviews a copy of their California Record of Arrests and Prosecutions (RAP) sheet, their FBI RAP sheet,

and their presence or absence in the California Child Abuse Central Index (CACI). The FBI RAP sheet contains records of arrests and prosecutions from other states. California considers that it meets the intent of this requirement by checking the FBI RAP sheet for all child care providers.

Furthermore, CDSS receives RAP back services from the California Department of Justice, which requires the CADOJ to send to the CDSS updated RAP sheets anytime additional criminal history information is received on an individual who is registered on Trustline, or employed by or licensed to operate a child care facility. If a RAP back indicates that a child care provider has additional criminal history information, then the individual may be excluded from licensed facilities and/or removed from the Trustline Registry and required to go through the rigorous criminal record exemption process. Legislation is required to implement this requirement.

**Appendix A.8: Interstate criminal registry or repository check for existing staff.** (See related question at 5.4.6 (b))

Describe the provision from which the state/territory seeks relief.

California seeks a waiver from the requirement to search interstate criminal registry or repositories for existing staff.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

A waiver from this provision will allow California to concentrate resources on the delivery of services to children and families.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

California has a robust criminal records check system that thoroughly and individually evaluates the criminal backgrounds of new and existing child care staff, licensees, and Trustline providers. When an individual applies for a child care license, employment in a licensed child care facility, or inclusion in the Trustline registry, the California Department of Social Services reviews a copy of their California Record of Arrests and Prosecutions (RAP) sheet, their FBI RAP sheet, and their presence or absence in the California Child Abuse Central Index (CACI). The FBI RAP sheet contains records of arrests and prosecutions from other states. California considers that it meets the intent of this

requirement by checking the FBI RAP sheet for all child care providers.

Furthermore, CDSS receives RAP back services from the California Department of Justice, which requires the California Department of Justice to send to the California Department of Social Services updated RAP sheets anytime additional criminal history information is received on an individual who is registered on Trustline, or employed by or licensed to operate a child care facility. If a RAP back indicates that a child care provider has additional criminal history information, then the individual may be excluded from licensed facilities and/or removed from the Trustline Registry and required to go through the rigorous criminal record exemption process.

Legislation is required to implement this requirement.

 **Appendix A.9: Interstate sex offender registry or repository check for new or prospective staff. (See related question at 5.4.7 (a))**

**Describe the provision from which the state/territory seeks relief.**

California seeks a waiver from the requirement to search interstate sex offender registries or repositories for new or prospective staff.

**Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children**

A waiver from this provision will allow California to concentrate resources on the delivery of services to children and families.

**Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.**

California has a robust criminal records check system that thoroughly and individually evaluates the criminal backgrounds of new and existing child care staff, licensees, and Trustline providers. When an individual applies for a child care license, employment in a licensed child care facility, or inclusion in the Trustline registry, the CDSS reviews a copy of their California Record of Arrests and Prosecutions (RAP) sheet, their FBI RAP sheet, and their presence or absence in the California Child Abuse Central Index (CACI). Per California Penal Code Section 290, et seq., individuals who have been convicted of specified crimes are required to register as a Sex Offender upon moving to or becoming employed in California. If the individual is a registered sex offender, that information will be included on their California RAP sheet. Consequently, registered sex offenders are

not granted a criminal record clearance or exemption, and they may not be regularly present in any licensed child care facility.

Furthermore, CDSS receives RAP back services from the CADOJ, which requires the CADOJ to send to the CDSS updated RAP sheets anytime additional criminal history information is received on an individual who is registered on Trustline, or employed by or licensed to operate a child care facility. If a RAP back indicates that a child care provider is a registered sex offender, then the individual is excluded from licensed facilities and/or removed from the Trustline Registry. Legislation is required to implement this requirement.

**Appendix A.10: Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b))**

[Describe the provision from which the state/territory seeks relief.](#)

California seeks a waiver from the requirement to search interstate sex offender registries or repositories for existing staff.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

A waiver from this provision will allow California to concentrate resources on the delivery of services to children and families.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

California has a robust criminal records check system that thoroughly and individually evaluates the criminal backgrounds of new and existing child care staff, licensees, and Trustline providers. When an individual applies for a child care license, employment in a licensed child care facility, or inclusion in the Trustline registry, the CDSS reviews a copy of their California Record of Arrests and Prosecutions (RAP) sheet, their FBI RAP sheet, and their presence or absence in the California Child Abuse Central Index (CACI). Per California Penal Code Section 290, et seq., individuals who have been convicted of specified crimes are required to register as a Sex Offender upon moving to or becoming employed in California. If the individual is a registered sex offender, that information will be included on their California RAP sheet. Consequently, registered sex offenders are not granted a criminal record clearance or exemption, and they may not be regularly

present in any licensed child care facility.

Furthermore, CDSS receives RAP back services from the CADOJ, which requires the CADOJ to send to the CDSS updated RAP sheets anytime additional criminal history information is received on an individual who is registered on Trustline, or employed by or licensed to operate a child care facility. If a RAP back indicates that a child care provider is a registered sex offender, then the individual is excluded from licensed facilities and/or removed from the Trustline Registry. Legislation is required to implement this requirement.

 **Appendix A.11: Interstate child abuse and neglect registry check for new or prospective staff. (See related question at 5.4.8 (a))**

Describe the provision from which the state/territory seeks relief.

California seeks a waiver from the requirement to search interstate child abuse and neglect registries for new or prospective staff.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

A waiver from this provision will allow California to concentrate resources on the delivery of services to children and families.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

California has a robust criminal records check system that thoroughly and individually evaluates the criminal backgrounds of new and existing child care staff, licensees, and Trustline providers. When an individual applies for a child care license, employment in a licensed child care facility, or inclusion in the Trustline registry the CDSS reviews a copy of their California Record of Arrests and Prosecutions (RAP) sheet, their FBI RAP sheet, and their presence or absence in the California Child Abuse Central Index (CACI). The FBI RAP sheet contains records of arrests and prosecutions from other states.

Furthermore, CDSS receives RAP back services from the CADOJ, which requires the CADOJ to send to the CDSS updated RAP sheets anytime additional criminal history information is received on an individual who is registered on Trustline, or employed by or licensed to operate a child care facility. If a RAP back indicates that a child care provider has additional criminal history information, then the individual may be excluded from

licensed facilities and/or removed from the Trustline Registry and required to go through the rigorous criminal record exemption process. Legislation is required to implement this requirement.

 **Appendix A.12: Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b))**

Describe the provision from which the state/territory seeks relief.

California seeks a waiver from the requirement to check interstate child abuse and neglect registries for existing staff.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

A waiver from this provision will allow California to concentrate resources on the delivery of services to children and families.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

California has a robust criminal records check system that thoroughly and individually evaluates the criminal backgrounds of new and existing child care staff, licensees, and Trustline providers. When an individual applies for a child care license, employment in a licensed child care facility, or inclusion in the Trustline registry the California Department of Social Services reviews a copy of their California Record of Arrests and Prosecutions (RAP) sheet, their FBI RAP sheet, and their presence or absence in the California Child Abuse Central Index (CACI). The FBI RAP sheet contains records of arrests and prosecutions from other states.

Furthermore, CDSS receives RAP back services from the California Department of Justice, which requires the California Department of Justice to send to the California Department of Social Services updated RAP sheets anytime additional criminal history information is received on an individual who is registered on Trustline, or employed by or licensed to operate a child care facility. If a RAP back indicates that a child care provider has additional criminal history information, then the individual may be excluded from licensed facilities and/or removed from the Trustline Registry and required to go through the rigorous criminal record exemption process. Legislation is required to implement this requirement.

