

#### CHILD CARE AND DEVELOPMENT FUND PLAN

#### FOR

#### FFY 2006-2007

This Plan describes the CCDF program to be conducted by the State for the period 10/1/05 - 9/30/07. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

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

Public reporting burden for this collection of information is estimated to average 162.57 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

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

(Form ACF 118 Approved OMB Number: 0970-0114 expires 05-31-2006)

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#### AMENDMENTS LOG Child Care and Development Services Plan for For the period: 10/1/05 -- 9/30/07

SECTION AMENDED	EFFECTIVE/ PROPOSED EFFECTIVE DATE	DATE SUBMITTED TO ACF	DATE APPROVED BY ACF

**Instructions:** 

- 1) Lead Agency completes the first 3 columns and sends a photocopy of this Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional contact. A copy of the Log, showing the latest amendment pending in ACF, is retained in the Lead Agency's Plan.
- 2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
- **3)** The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.
- Note: This process depends on repeated subsequent use of the <u>same</u> Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and

pending in ACF. The Lead Agency is advised to retain those "old" plan pages that are superseded by amendments in a separate appendix to its Plan.

#### PART 1 ADMINISTRATION

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

#### **<u>1.1</u>** Lead Agency Information (as designated by State chief executive officer)

Name of Lead Agency:	Colorado Department of Human Services		
Address of Lead Agency:	1575 Sherman Street		
	Denver, CO 80203		
Name and Title of the Lead Agency's Chief Executive Officer:			
	Marva Livingston Hammons, Executive Director		
Phone Number:	(303) 866-5096 <b>Fax Number</b> : (303) 866-4214		
E-Mail Address:	<u>Marva.Hammons@state.co.us</u>		
Web Address for Lead Age	<b>ncv</b> (if anv): http://www.cdhs.state.co.us		

#### **<u>1.2</u>** State Child Care (CCDF) Contact Information (day-to-day contact)

Name of the State Child Care Contact (CCDF):Steve BatesTitle of State Child Care Contact:State Child Care AdministratorAddress:Colorado Department of Human ServicesDivision of Child Care1575 Sherman St., 1st FloorDenver, CO 80203Fax Number: (303) 866-5943F-Mail Address:Steve.Bates@state.co.us

Name of the State Child Care Contact (CCDF):Leslie BuliczTitle of State Child Care Contact:Child Care Programs AdministratorAddress:Colorado Department of Human ServicesDivision of Child Care1575 Sherman St., 1st FloorDenver, CO 80203Fax Number: (303) 866-4556F-Mail Address:Leslie.Bulicz@state.co.us

**Phone Number for child care subsidy program information (for the public) (if any):** *Public should contact county department of human/social services in which they reside.* 

For child care subsidy program information (for the public) (if any):

#### **1.3 Estimated Funding**

The Lead Agency <u>estimates</u> that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2005 through September 30, 2006. (§98.13(a))

CCDF: \$ 58,200,000 Federal TANF Transfer to CCDF: \$ 30,000,000 Direct Federal TANF Spending on Child Care: \$ unknown State CCDF Maintenance of Effort Funds: \$ 8,900,000 State Matching Funds: \$ 24,000,000 Total Funds Available: \$ 121,100,000

#### 1.4 Estimated Administration Cost

The Lead Agency <u>estimates</u> that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed 5 percent): \$\_2,400,000\_(2.2\%). (658E(c)(3), §§98.13(a), 98.52)

#### 1.5 Administration of the Program

Does the Lead Agency directly administer and implement <u>all</u> services, programs and activities funded under the CCDF Act, <u>including</u> those described in Part 5.1 – Activities & Services to Improve the Quality and Availability of Child Care, Quality Earmarks and Set-Aside?



Yes. Skip questions 1.6 and 1.7. Go to Section 1.8.

No, and the following describes how the Lead Agency maintains overall control when services or activities are provided through other agencies: (658D(b)(1)(A), §98.11)

The Colorado Department of Human Services (CDHS), Division of Child Care is responsible for supervision of the 64 Colorado counties and their administration of the Colorado Child Care Assistance Program (CCCAP). Under the CCCAP umbrella, CCDF funds are used to provide direct services. Annually, CCDF funds along with state funds are allocated to counties for TANF and low-income child care. Every two years counties must report to the State utilizing the approved county plan for the administration of those funds and agree to comply with both state and federal laws and regulations.

The Colorado Board of Human Services adopts regulations to which the counties must adhere in the administration of the child care program. Under these regulations, counties are given flexibility to set county-specific policies that do not conflict with state or federal regulations. State CCCAP staff monitor counties through on-going review of county policies to ensure program compliance, throughout the year. CDHS auditors periodically audit county human service programs including CCCAP. These audits include financial and case reviews. Irregularities are reported and corrective action may result. In addition, state CCCAP staff provides both program training and technical assistance to county child care staff, supervisors and administrators.

The Division of Child Care contracts with, oversees and maintains ongoing contacts with other agencies providing CCDF-funded services described in Part 5. All agencies providing the CCDF-funded services described in Part 5 are required to submit monthly billings based on their approved budgets and contract stipulations. All of these agencies are also required to submit quarterly or semi-annual programmatic progress reports and annual programmatic summary reports describing accomplishments and outcomes of the activities included within their contracts. The Division of Child Care meets with these agencies monthly as needed and is involved in routine committee meetings, conferences, forums and sub-contractor selection decisions as needed to monitor the work being completed by these agencies.

All agencies providing CCDF-funded services described in Part 5 must certify that federal regulations and Lead Agency guidelines are followed as part of the contract signature and approval process and that these same requirements will be included in any sub-contracts. All contracts for CCDF-funded services include the Child Care and Development Fund Final Rule as a contract exhibit. All of these contracts also include specific contractor work plans that stipulate performance indicators, outcome measures, products, deliverables, and standards to be followed in performing the contractual work. The performance indicators and outcomes all tie directly to the purpose of the CCDF: increasing the quality, availability and/or affordability of child care. Contractors must report on their contract performance indicators, outcome measures, status of products, deliverables and benchmarks in their quarterly/semi-annual progress reports, annual reports and applications for contract renewal, where appropriate.

The Division of Child Care follows State of Colorado and Department of Human Services procurement rules and guidelines in developing and monitoring contracts for CCDFfunded services. These guidelines include requirements and stipulations on when and how competitive processes through Request for Proposals (RFPs) or Requests for Qualified Offerers must occur. They also specify when sole source procurements may be made and for how long a sole source procurement may be used, along with specifications on when interagency agreements, memoranda of understanding, purchase of service agreements and other procurement methods may be used. The Division of Child Care annually reviews contractor performance, funding availability and alternative procurement methods, including the possibility of using competitive award processes, prior to deciding whether or not new competition or contract renewal are in the best interests of the State and federal government. With the exception of the School Readiness Subsidization project, the Division of Child care does not use multi-year contracts for services described in Part 5.

The content of Division of Child Care contracts, interagency agreements, memoranda of understanding and Purchase of Services agreements is determined by the Colorado Procurement Code as implemented by the Colorado Department of Human Services Contracts Management Unit. In addition to requiring contractors to adhere to the stipulations in the CCDF Final Rules, all contracts and interagency agreements include the following:

- ⇒ Contractor work plan—activities, timelines, products, performance measures, responsibilities for performing work; contractor reporting and billing/payment procedures;
- ⇒ Procedures for discussing and resolving problems that occur between the State and the contractor;
- ⇒ *Requirements that all federal and state rules and regulations applicable to the contract be complied with;*
- ⇒ Procedures for making contract and budget changes; contract extension and termination procedures;
- ⇒ A line item budget and budget narrative; compensation and maximum payable *specifications; and*
- $\Rightarrow$  Designated contract representatives in the contracting agencies.

State general provisions included in contracts contain specific requirements related to:

- $\Rightarrow$  Federal funds contingency;
- $\Rightarrow$  Independent contractor requirements;
- $\Rightarrow$  Contract beneficiary;
- $\Rightarrow$  Contractor insurance requirements;
- $\Rightarrow$  Contractor license/approval and insurance requirements;
- $\Rightarrow$  *Records maintenance, confidentiality, retention and availability;*
- $\Rightarrow$  Requirements;
- $\Rightarrow$  *Performance monitoring;*
- $\Rightarrow$  Audit requirements;
- $\Rightarrow$  Conflicts of interest;
- ⇒ Required conformance with all applicable federal and state laws and regulations, including discrimination and lobbying restrictions;
  - $\Rightarrow$  Assignment, delegation and subcontracting requirements;
- $\Rightarrow$  Litigation, dispute resolution, remedies, and severability;
- $\Rightarrow$  Integration of understandings;
- $\Rightarrow$  *Proprietary information;*
- $\Rightarrow$  Discrimination complaints;
- $\Rightarrow$  Press releases;
- $\Rightarrow$  Debarment certifications;
- $\Rightarrow$  *Prohibition against software piracy;*
- $\Rightarrow$  Rights in data and copyright (federal reserved rights); and
- $\Rightarrow$  *Exhibits-interpretation, venue, and vendor offset requirements.*

Special Provisions required by State Fiscal Rule 3-1are included in all contracts andinclude:State Controller approval requirements;<br/>Fund availability after the current fiscal year;<br/>Bond requirements;<br/>Indemnification;<br/>Discrimination and affirmative action requirements; and<br/>Colorado labor preference.

#### 1.6 <u>Determining Eligibility</u>

For child care services funded under §98.50 (e.g., certificates, vouchers, grants/contracts for slots based on individual eligibility), does the Lead Agency itself: (§98.11)

- Determine individual eligibility of non-TANF families?
- No. If no, identify the name and type of agency that determines eligibility of non-TANF families for child care:

County departments of human services or their contract agencies determine non-TANF eligibility. At least three counties have contracted with an agent for eligibility services. Two counties have contracted with a Aspen Family Services, a private for-profit independent agency specializing in child care services. One county contracts with Goodwill Industries, a non-governmental community organization.

- Determine individual eligibility of TANF families?
  - Yes.
  - $\boxtimes$

 $\boxtimes$ 

No. If no, identify the name and type of agency that determines eligibility of TANF families for child care:

County departments of human services or their agents, see above, determine TANF eligibility.

- Assist parents in locating child care?
  - **Yes.** 
    - No. If no, identify the name and type of agency that assists parents:

County departments of human services or their agents provide tools to aid parents in locating and selecting child care providers. Resource and referral agencies also provide these services and others to parents.

Make payments to providers and/or parents?
 Yes.

No. If no, identify the name and type of agency that makes payments:

County departments of human services or their agents make payments to providers through the state automated system.

#### 1.7 <u>Non-Governmental Entities</u>

Is any entity named in response to section 1.6 a non-governmental entity? (658D(b), §§98.10(a), 98.11(a))

 $\boxtimes$ 

Yes, and the following entities named in 1.6 are non-governmental:

Resource and referral agencies and the agents of the county departments of human services identified previously.

No.

#### **<u>1.8 Use of Private Donated Funds</u>**

Will the Lead Agency use private donated funds to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2) and (f)?



Yes, The name and type of entity designated to receive private donated funds is:

Name:	Mile High United Way
Address:	2505 18 <sup>th</sup> Street, Denver, CO 80211
Contact:	Cecilia Broder, Director
Type:	Non-governmental community organization

No.

#### **1.9** Use of State Pre-Kindergarten (Pre-K) Expenditures for CCDF-Eligible Children

- **1.9.1** During this plan period, will State expenditures for PreK programs be used to meet <u>any</u> of the CCDF maintenance of effort (MOE) requirement?
  - **Yes, and:**

( ) The State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to §98.53(h)(1).

(%) Estimated % of the MOE requirement that will be met with pre-K expenditures.

If the State uses Pre-K expenditures to meet more than 10% of the MOE requirement, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

#### No.

- **1.9.2** During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF Matching Fund requirement? (§98.53(h))
  - Yes, and

( 20 %) Estimated % of the Matching Fund requirement that will be met with pre-K expenditures.

If the State uses Pre-K expenditures to meet more than 10% of the Matching Fund requirement, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

The State is working through county quality and availability improvement grants and Consolidated Child Care Pilot programs to coordinate its pre-K and child care services to expand the availability of child care, including full-year care services.

] No.

# **1.9.3** If the State answered yes to 1.9.1 or 1.9.2, the following describes State efforts to ensure that pre-K programs meet the needs of working parents: (§98.53(h)(2))

The state-funded Colorado Pre-school Program requires that local programs and parents create an agreement on how family needs will be met. Legislation allows two slots to be used per child if needed to provide full-day care.

#### **1.10** Improper Payments

#### 1.10.1 How does the Lead Agency define improper payments?

Definitions are included in multiple sections of the State Rules and Regulations. Two specific references state:

1) A "recovery" is the receipt of repayment for excess public assistance paid for which a recipient was not entitled (ref. Staff Manual 3.810.11)

2) Counties shall take whatever action is necessary to recover payments when recipients and/or providers owe money to the State because of overpayments, ineligibility and/or failure to comply with applicable state laws, rules or procedures. The county department may seek to recover overpayment through the offset (intercept) of the client's state income tax refund. Recoveries shall be done in accordance with Sections 3.810 and 3.811 under those rules that apply to Colorado Works recoveries (ref. Staff Manual 3.921.H)

### **1.10.2** Has your State developed strategies to prevent, measure, identify, reduce and/or collect improper payments? (§98.60(i), §98.65, §98.67)

#### Yes, and these strategies are:

• Trainings/meetings for providers on rules and responsibilities: Some counties conduct orientations for providers giving them detailed information on billing etc. Additionally, the state provides a handbook that counties can send to providers with training information.

• Training for agency staff on correct implementation of rules and responsibilities: Training is provided at the yearly Child Care Training Conference on program implementation. Significant time was spent in October 2003 on the topic of Fraud and Recovery. The state also offers a monthly user group to discuss program rules, regulations and implementation issues

• Clear communication with parents on rules and responsibilities: Clients must complete and sign a client responsibility agreement as part of the eligibility process (low-income). The agreement outlines reporting requirements.

• Use of information technology: The CDHS Division of Child Care Website provides information to parents and providers on how the program works. Additionally, all child care workers throughout the State may attend training on the Child Care Automated Tracking System (CHATS). Training is offered for beginners as well as intermediate users.

• Other: State staff provides ongoing technical assistance to users via phone, fax and email.

No. If no, are there plans underway to determine and implement such strategies?

Yes.

- **1.10.3** Has your State developed strategies to identify errors in the determination of client eligibility?
  - ] Yes, and these strategies are:
  - No. If no, are there plans underway to determine and implement such strategies?

Yes.

No.

#### PART 2 **DEVELOPING THE CHILD CARE PROGRAM**

#### **Consultation and Coordination** 2.1

Lead Agencies are required to *consult* with appropriate agencies and 2.1.1 coordinate with other Federal, State, local, tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)). Indicate the entities with which the Lead Agency has consulted or coordinated (as defined below), by checking the appropriate box(es) in the following table.

> *Consultation* involves the participation of an appropriate agency in the development of the State Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments (noted by the asterisk in the chart below).

Coordination involves the coordination of child care and early childhood development services, including efforts to coordinate across multiple entities, both public and private (for instance, in connection with a State Early Childhood Comprehensive System (SECCS) grant or infant-toddler initiative). At a minimum, Lead Agencies must coordinate with (1) other Federal, State, local, Tribal (if applicable), and/or private agencies responsible for providing child care and early childhood development services, (2) public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health), (3) employment services / workforce development, (4) public education, and (5) Temporary Assistance for Needy Families (TANF), and (5) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

\* Required

	loted by the asterisks in the chart below).	t Delow). · Required	
		Consultation	Coordination
•	<b>Representatives of local government</b>	* 🖂	
•	Indian Tribes/Tribal Organizations, when	$\square$	
	such entities exist within the boundaries of the		
	State		
•	Other Federal, State, local, Tribal (if		*
	applicable), and private agencies providing child		
	care and early childhood development services.		
•	State/Tribal agency (agencies) responsible		
	for		
	• Public health		*
	• Employment services / workforce		*
	development		
	• Public education		*
	• TANF		*
	• State pre-kindergarten programs		$\square$
	• Head Start programs		
	• <b>Programs that promote inclusion</b>		

		Consultation	Coordination
	for children with special needs		
•	Other: (See guidance):		$\square$

For each box checked above, (a) identify the agency providing the service and (b) describe the consultation and coordination efforts, if any. Descriptions must be provided for any consultation or coordination required by statute or regulation.

Consultations occurred through public hearings described further in Section 2.2 and through regular and special meetings with a diverse group of child care stakeholders. In a series of statewide meetings and consultations with early childhood system stakeholders in regularly scheduled meetings over the past six months, the Division of Child Care consulted with approximately 100 people in preparing this plan. Some other stakeholders requested overviews of the state plan and/or provided written input. Further consultation was achieved through use of a survey tool to gain input from stakeholders including counties, providers, foundations/funders, and parents.

Groups with which the Division consulted included: working parents, parent advocacy groups, other child care advocates, community colleges, higher education, public schools and public health representatives, county department of human services staff, workforce development, center, school age and family home providers and provider organizations, state and local resource and referral agency representatives, family resource centers, child welfare, Part C agencies serving infants/toddlers with disabilities, and representatives from the Colorado Early Childhood Summit. The Summit is a collaborative group, including the state's major early childhood membership organizations. Examples of these membership organizations include the Colorado Association for the Education of Young Children (CAEYC), Colorado Association of Family Child Care (CAFCC), the Colorado Child Care Association (CCCA) and the Colorado Head Start Association (CHSA). All of these groups provided input on parent needs, quality and licensing issues, provider rates and policies, parental fee schedules, child care capacity concerns, and administrative policies.

The Division of Child Care consulted on an ongoing basis throughout the year with the members of the Colorado Early Childhood Summit, which regularly meets to identify and collaboratively address and make recommendations on a range of child care policy and program issues.

In addition, meetings were held with state and county representatives to allow for direct input from county directors and administrators, including employment services/workforce development, county commissioners and with child care stakeholders and TANF staff at the state level.

In the Department of Human Services, State staff from the TANF, Child Welfare, Accounting and Budget divisions were consulted. The State Department of Education was consulted in the areas of early childhood care and education, infant/toddler needs, school age issues, provider training, and increasing quality and capacity generally.

Colorado continues to work on enhancing communications with the two Colorado tribes – Ute Mountain Ute and the Southern Ute. Efforts are focused on expanding child care capacity and quality, blending funds with the tribes' Head Start programs, as appropriate, and increasing the number of licensed child care providers.

- 2.1.2 State Plan for Early Childhood Program Coordination. Good Start, Grow Smart encourages States to develop a plan for coordination across early childhood programs. Indicate which of the following best describes the current status of the State's efforts in this area.
  - Planning. Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
  - **Developing.** A plan is being drafted. The draft is included as Attachment  $\underline{H}$
  - Developed. A plan has been written but has not yet been implemented. The plan is included as Attachment \_\_\_\_
  - **Implementing.** A plan has been written and is now in the process of being implemented. The plan is included as Attachment \_\_\_\_\_
  - **Other** (describe):

Describe the progress made by the State planning for coordination across early childhood programs since the date of submission of the 2004-2005 State Plan.

Coordination between the Department and partners was achieved through the work of the State Early Childhood Comprehensive System (SECCS) grant held in the Colorado Department of Public Health and Environment, with the creation of a strategic plan based goals set by the Colorado Child Care Commission in the Blueprint document and associated work. This work is progressing past the planning phase and moving into the implementation phase with specific goals and tools being set and created that will move coordination to a higher level.

Indicate whether there is an entity that is responsible for ensuring that such coordination occurs. Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination.

The Colorado Department of Public Health and Environment is responsible for the work of coordination between entities through the Prevention Leadership Council (PLC) on initiatives related to prevention and intervention. Five state agencies, including the state's lead agency for CCDF, are represented on the council through a formal agreement. In addition to this council, the work under the SECCS grant directs coordination related to a systems approach to addressing the needs of children and

families. The Colorado Preschool Program, the Colorado Child Care Assistance Program, Head Start grantees, and early intervention services in the Colorado Department of Education are working on increased coordination for direct services to children. The Department of Human Services, Division of Child Care, is also working closely with the Department of Education (CDE) on a consolidated child care pilot program. The program focuses on moving families from welfare to work. Seventeen communities are currently designated as consolidated child care pilot sites. As part of this effort, the pilot sites have the opportunity to apply for waivers of state regulations and for resources to address pilot project planning and implementation costs. Some areas of focus for the pilots include creating and implementing early childhood councils; grants/loans to providers to assist in meeting state/local standards, such as creating fullday, full-year programs; developing and implementing new licensing models; and meeting staff development needs through pilot testing a state credential and the development of local staff development plans. The consolidated pilots are also combining funding streams, including state funds from the Colorado Pre-school Program, federal CCDF funds and Head Start funds where allowable. Ongoing evaluation is a key feature of the expanded program. The Consolidated Child Care Pilot Program has allowed communities statewide to identify and shape policy issues to improve child care for children and their families.

#### Describe the results or expected results of this coordination. Discuss how these results relate to the development and implementation of the State's early learning guidelines, plans for professional development, and outcomes for children.

The work under the SECCS grant has not yet addressed the further development and implementation of the State's early learning guidelines. The Professional and Workforce Development Task Force, however, is planning for an Office of Professional Development that will address systems work related to professional development and the Outcomes and Evaluations Task Force is working on issues directly related to outcomes for children. Expected results of this work are that partners are engaged in the design and development of the comprehensive early childhood system Colorado is building.

### Describe how the State's plan supports or will support continued coordination among the programs. Are changes anticipated in the plan?

The work of these partner agencies and organization is ongoing and represented in the Early Childhood State Systems Team. A reference to the specifics of the coordination between the Lead Agency and each of the organizations is throughout the state plan under the topic area of focus. Other partners to the process, captured in the narrative above are Qualistar Early Learning, county departments of human services, Family Resource Centers, Head Start-State Collaboration Office, Bright Beginnings. The work of coordination under the PLC will continue as outlined in statute. Coordination among programs under the SECCS grant will be included in a state plan being developed. Changes are not anticipated in the plan at this time.

#### 2.2 Public Hearing Process

Describe the Statewide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. (658D(b)(1)(C), §98.14(c)) At a minimum, the description must provide:

#### Date(s) of statewide notice of public hearing:

April 14, 2005 – The Denver Newspaper Agency (statewide distribution) April 14, 2005 – Montrose Daily Press (local distribution April 16, 2005 – Greeley Daily Tribune (local distribution)

#### Manner of notifying the public about the statewide hearing:

Public notice was given through the newspapers listed above. In addition to those public notice postings, notice was given for each of the four community forums (Montrose, La Junta, Greeley, Denver through our partner, Qualistar Early Learning's 17 local agencies. Notice was also given through the Early Childhood Summit and the Colorado Consolidated Child Care Pilots electronic listserv, which combined represent over 68,000 members and contact, through the listserv for the Early Childhood State Systems Team (SECCS grant), county departments of social/human services, and licensing specialist.

#### **Date(s) of public hearing(s)**:

*Tuesday, May 3, 2005 Wednesday, May 4, 2005 Thursday, May 5, 2005 Tuesday, May 10, 2005* 

#### **Hearing site(s)**:

Montrose, CO - Tuesday, May 3, 2005 (west section of state) La Junta, CO - Wednesday, May 4, 2005 (southeast section of state) Greeley, CO - Thursday, May 5, 2005 (north/northeast section of state) Denver, CO - Tuesday, May 10, 2005 (central section of state)

### How the content of the plan was made available to the public in advance of the public hearing(s):

The state plan was accessible in its entirety through the Internet, or by request from the Division of Child Care. A handout was available prior to the forums, and was distributed at the forums, that gave the major components of the state plan.

A brief summary of the public comments from this process is included as Attachment <u>I</u>.

#### 2.3 Public-Private Partnerships

• Describe (1) the activities, including planned activities; to encourage public-private partnerships that promote private-sector involvement in meeting child care needs, <u>and (2) the results or expected results of these activities</u>. (658D(b)(1), §98.16(d))

Colorado plans to continue to encourage public-private partnerships that promote private-sector involvement in meeting child care needs.

The Division of Child Care will continue to provide guidance to communities and contractors at the state level to reach out to and involve the private sector in child care and infant/toddler quality and availability improvement initiatives. An example is the Division of Child Care's county contracts to develop collaborative public-private partnerships to build child care capacity and increase the availability of affordable, quality early care and education and school-age programs for low-income families. Grants and/or loans to providers to assist them in meeting state and local standards are a part of these grants. The intent of these grants is to continue to assist the state in meeting the State's and the local communities' child care needs under welfare reform. A factor in awarding infant/toddler quality and availability improvement grants includes the level of involvement of the private sector in grant-funded activities.

The philanthropic community in Colorado fills many gaps in service and quality initiatives throughout the state. Partnerships include the Daniels Fund, Temple Hoyne Buell Foundation, Mile High United Way, Piton Foundation, Rose Foundation, and Donnell Kay, to name the main benefactors, all of which are non-governmental community entities. The results of these partnerships will be quality expansion in select communities as well as scholarships provided to families for direct services.

Qualistar Early Learning, a non-governmental community entity, is an example of a public-private partnership that is amplifying current CCDF-funded efforts. Qualistar Early Learning began in the fall of 1997 when a coalition of business, philanthropic, religious and political leaders came together to plan ways to enhance the early child care and education system in Colorado. Qualistar Early Learning's vision is to provide a universal system of high-quality, child centered care. Several counties are serving as pilots, and over the next few years, replication in other counties is expected. In October 1998, the Colorado Trust awarded a five-year, \$7.4 million grant so Qualistar Early Learning could begin to implement this plan. The Division of Child Care will continue to collaborate closely with Qualistar Early Learning toward the mutually shared goals of quality care for all children within this state plan period. The expected results are an increase in the number of child care facilities that are working from quality improvement plans established through ratings for a more purposeful approach to increased quality.

The Qualistar Early Learning administers the T.E.A.C.H. (Teacher Education and Compensation Helps) Early Childhood program. The T.E.A.C.H. program provides educational scholarship opportunities for child care professionals. The costs of the T.E.A.C.H. program are shared by the sponsoring child care program, the participant and T.E.A.C.H. Scholarship recipients commit to one year of employment at the sponsoring child care program upon completion of the certificate. Some corporations and counties are also participating in supporting scholarships for child care providers in the areas where they are located. CCDF funds will continue to be used to support this initiative and expected results are increased professional development in the early care and education field.

#### PART 3 CHILD CARE SERVICES OFFERED

#### 3.1 Description of Child Care Services

#### 3.1.1 Certificate Payment System

### Describe the overall child care certificate process, including, at a minimum: (1) a description of the form of the certificate (98.16(k));

A certificate is generated after the parent has selected a provider. The certificate is child specific and establishes payment rates, the number of monthly units of child care for each child, start and end dates, and amount of parental fees. The parent keeps one copy and another is sent directly to the provider (Attachment  $\underline{J}$ ).

# (2) a description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to choice of the provider; (658E(c)(2)(A)(iii), 658P(2), 98.2, 98.30(c)(4) & (e)(1) & (2)) and

Parents are informed of child care services and options through community Resource and Referral agencies, county departments of human services, agencies such as employment and training, child care providers, and other parents. Parents are informed of their options through written materials, individual consultations, and group orientations. At a minimum, all parents receive written materials in all counties.

Parents select providers before certificates are issued. Parents may select from licensed or legally exempt providers, relatives and non-relatives. Once the choice is made and the certificate completed, the parent and provider receive copies.

(3) if the Lead Agency is also providing child care services through grants and contracts, estimate the <u>mix of §98.50 services available through</u> <u>certificates versus grants/contracts</u>, and explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (98.30(a) & (b)) This may be expressed in terms of dollars, number of slots, or percentages of services.

Parents make their own decisions about child care providers under the certificate or contract methods. Parents are not required to use contracted sites and receive the same services regardless of whether the placement is a contract site or a certificate site. It is estimated that the mix of services is 99% certificates, 1% contracts.

### **3.1.2** In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?

Yes, and the following describes the types of child care services, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

Counties are able to establish the needed number of contracts, and the grant or contract process, as they make local decisions relative to need and capacity across all licensed provider type. Parental choice will not be impacted, as parents will continue to select the provider of their choice. While most contracts are developed with centers, a few will be developed with family child care homes for infants and non-traditional hour care.

- No
- **3.1.3** The Lead Agency must allow for in-home care but may limit its use. Does the Lead Agency limit the use of in-home care in any way?
  - Yes, and the limits and the reasons for those limits are: (§§98.16(g)(2), 98.30(e)(1)(iv))

No No

**3.1.4** Are all of the child care services described in **3.1.1** above (including certificates) offered throughout the State? (658E(a), §98.16(g)(3))



Yes

No, and the following are the localities (political subdivisions) and the services that are not offered:

#### 3.2 Payment Rates for the Provision of Child Care

The statute at 658E(c)(4) and the regulations at 98.43(b)(1) require the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care.

These rates are provided as Attachment <u>A</u>. The attached payment rates were or will be effective as of <u>October</u>, 2005.

The following is a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

• The month and year when the local market rate survey(s) was completed: (§98.43(b)(2)) May, 2005

- A copy of the Market Rate Survey instrument and a summary of the results of the survey are provided as Attachment <u>B</u>, which includes the methodology and county by county data; data is based on the use of the NACCRRAware database, maintained by Qualistar Early Learning, child care resource and referral service, as the survey instrument.
- How the payment rates are adequate to ensure equal access based on the results of the above noted local market rate survey (i.e., the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))

Based on Colorado statute, counties are given authority to set their reimbursement rates for all types of care based on guidance provided by the state market rate survey. Some counties have conducted market rate surveys for providers in their respective counties prior to establishing their rate ceilings. Other counties have opted to pay the private pay rate providers charge. Counties are provided the results of the state market rate survey to be used as a guide to set payment rates that will afford families equal access. The state monitors this through the county child care assistance plan submitted to the state every two years and amended by counties at time of any changes. County-set provider reimbursement rates range from 72 – 197% of the 75<sup>th</sup> percentile.

- Additional facts that the Lead Agency relies on to determine that its payment rates ensure equal access include: (§98.43(d))
- If the payment rates do <u>not</u> reflect individual rates for the <u>full</u> range of providers -- center-based, group home, family and in-home care -- explain how the choice of the full range of providers is made available to parents.
- At what percentile of the current Market Rate Survey is the State rate ceiling set? If it varies across categories of care, please describe.

Colorado sets the state ceiling guideline at the 75<sup>th</sup> percentile of the Market Rate Survey. Counties utilize this information to set their own rates or as a guideline to set rates based on local conditions.

• Does the State have a tiered reimbursement system (higher rates for child care centers and family child care homes that achieve one or more levels of quality beyond basic licensing requirements)?

Yes. If yes, describe:

Colorado does not establish nor require tiered reimbursement systems but counties in Colorado may use tiered reimbursement rate systems to promote higher quality. To date, one county, Denver, has established tiered reimbursement rates across all provider types.

#### 3.3 Eligibility Criteria for Child Care

3.3.1 <u>Complete column (a) and (b) in the matrix below</u>. Complete Column (c) <u>ONLY IF</u> the Lead Agency is using income eligibility limits <u>lower</u> than 85% of the SMI).

			IF APPLICABLE	
Family	(a) 100% of State Median	(b) 85% of State Median Income	(c) Income Level, lower than 85% SMI if used to limit eligibility	
Size	Income (SMI) (\$/month)	(SMI) (\$/month) [Multiply (a) by 0.85]	(d) \$/month	(e) % of SMI [Divide (d) by (a), multiply by 100]
1	N/A	N/A	N/A	N/A
2	\$4055	\$3447	\$2,406	59%
3	\$5009	\$4258	\$3,017	60%
4	\$5963	\$5069	\$3,628	61%
5	\$6917	\$5879	\$4,239	61%

If the Lead Agency does not use the SMI from the most current year, indicate the year used:

If applicable, the date on which the eligibility limits detailed in column (b) became or will become effective: *October*, 2005

3.3.2 How does the Lead Agency define "income" for the purposes of eligibility? Is any income deducted or excluded from total family income, for instance, work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments? Is the income of all family members included, or is the income of certain family members living in the household excluded? Please describe and/or include information as Attachment <u>C</u>. (§§98.16(g)(5), 98.20(b))

For purposes of eligibility, gross family income is used. Gross income sources from employment, child support and other sources of income with the exception of SSI are used. Any employment earnings of children in the household are not used. Colorado does not use any expense or resource information to determine eligibility. Only one deduction exists in the program and this is for parents who verify child support payments made to children outside of the household.

**3.3.3** Has the Lead Agency established additional eligibility conditions or priority rules, for example, income limits that vary in different parts of the State, special eligibility for families receiving TANF, or eligibility that differs for

families that include a child with special needs? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

Yes, and the additional eligibility criteria are: (<u>Terms must be defined</u> <u>in Appendix 2</u>)

Each county has the ability to set their own income eligibility limits within state set guidelines. Counties may serve families whose income levels are up to 225% of the Federal Poverty Level with notification to the State, which is a level that does not exceed CCDF eligibility limits. A table of eligibility levels by county is included in Attachment <u>D</u>. Additionally, under the Consolidated Child Care Pilot program, counties are able to receive waivers of the state policies when they impede best practice in services to children in that locale but are not able to exceed CCDF eligibility limits.

- **No**
- 3.3.4 Has the Lead Agency elected to waive, on a case-by-case basis, the fee and income eligibility requirements for cases in which children receive, or need to receive, protective services, as defined in Appendix 2? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

Yes, and the additional eligibility criteria are: (<u>Terms must be defined</u> <u>in Appendix 2</u>)

No

🖾 Not

Not applicable. CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.

3.3.5 Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are physically and/or mentally incapable of selfcare? (Physical and mental incapacity must then be defined in Appendix 2.) (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))



Yes, and the upper age is <u>18</u>. No

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



Yes, and the upper age is \_\_\_\_. No

- 3.3.7 Does the State choose to provide CCDF-funded child care to children in foster care whose foster care parents are <u>not</u> working, or who are <u>not</u> in education/training activities? (§§98.20(a)(3)(ii), 98.16(f)(7))
  - Yes. (NOTE: This means that for CCDF purposes the State considers these children to be in protective services.)
  - 🛛 No
- 3.3.8 Does the State choose to provide child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B)) Yes
  - 🛛 No

#### 3.4 Priorities for Serving Children and Families

3.4.1 Describe how the State prioritizes service for the following CCDF-eligible children: (a) children with special needs, (b) children in families with very low incomes, and (c) other. Terms must be defined in Appendix 2. (658E(c)(3)(B))

Priority is given to families below 130% of the Federal Poverty Level, to children of teen parents and to children with special needs. In Colorado Statute, counties must provide child care assistance to families whose income is not more than 130% of poverty; and, counties may provide assistance to families above 130% of poverty. Additional priority is given to families transitioning from TANF child care to Low-Income child care.

3.4.2 Describe how CCDF funds will be used to meet the needs of: (a) families receiving Temporary Assistance for Needy Families (TANF), (b) those attempting to transition off TANF through work activities, and (c) those at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

(a) Under state law, TANF families and all families with income under 130% of the federal poverty guidelines are the first priority. In addition, individual counties may set eligibility limits up to 225% of poverty guidelines.

(b) Child care assistance is not time limited, to ensure adequate support for families transitioning off TANF into employment. Regulations are in place to provide an automatic transition for TANF families with incomes below a county's eligibility ceiling. A low-income application does not need to be completed for a family to transitions from TANF to Low-Income Child Care.

(c) Child Care is a supportive service provided to families to assist them in work related activities and is not allowed if the parent is not participating in an activity leading toward self-sufficiency.

#### 3.4.3 Does the Lead Agency maintain a waiting list?

- Yes. If yes, for what populations? Is the waiting list maintained at the State level? Are certain populations given priority for services, and if so, which populations? What methods are employed to keep the list current?
- No. If no, does the Lead Agency serve all eligible families that apply?
  - No No

Are there other ways that the Lead Agency addresses situations in which funding is not sufficient to serve all families that are technically eligible under State policies? If so, describe.

Waiting list are implemented at the county level. When it is necessary for counties to implement and manage waiting lists, Colorado supplies all counties with direction on waiting list implementation and provides technical assistance to each county with an established waiting list.

#### 3.5 Sliding Fee Scale for Child Care Services

3.5.1 A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on <u>income and the size of the family</u>. A copy of this sliding fee scale for child care services and an explanation of how it works is provided as Attachments <u>*E and F*</u>.

The attached fee scale was or will be effective as of <u>October 2005</u>. Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))



Yes, and the following <u>describes</u> any additional factors that will be used:

] No

Families who have all their children in care on a part-time basis, defined as fewer than 13 full-time units of care, pay a fee that is 55% of the full-time fee set out in the parental fee schedule. Full-time units of care are defined as five hours of care per day or more.

The parental sliding fee schedule is based on \$50 income increments, to accommodate the automated system limitations, and favors the parents with the lower parental fee in each incremental breakpoint. (Denoted on Attachment E by double lines.)

*County option that can be extended to families as a plan to mitigate the "cliff effect" as families become ineligible for care -*

For families who become ineligible because their income exceeds the gross monthly income as set by the county, but who meet the guidelines as outlined in Section 3.904.1H, and whose household income does not exceed 85% of the State median income;

• the fee for the first child in care is within the range of 12% to 25% of the household income.

• the fee will be increased by \$40 for each additional child in care; the fees shall be increased incrementally as outlined by the individual family transition plan up to the six month limit.

- 3.5.2 Is the sliding fee scale provided in the attachment in response to question 3.5.1 used in <u>all</u> parts of the State? (658E(c)(3)(B))
  - Yes Yes
    - No, and other scale(s) and their effective date(s) are provided as Attachment \_\_\_\_.
- 3.5.3 The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: \$\_1,350/month (the Lead Agency uses increments of \$50.00, reflected in Attachment E. The actual poverty level for a family of three is \$1341/month.).

The Lead Agency must elect ONE of these options:

- ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.
- ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The following describes these families:

• TANF families who are in training and educational activities are not required to pay parental fees. Low-income (non-TANF) teen parents attending high school are also exempt.

• Several pilots under the Consolidated Child Care Pilots program have been issued waivers to exclude all families under 100% of poverty from parental fee requirements. The pilot program provides comprehensive child care services to Head Start, Colorado Preschool Program, and Colorado Child Care Assistance Program families.

**3.5.4** Does the Lead Agency have a policy that prohibits a child care provider from charging families any unsubsidized portion of the provider's normal fees (in

#### addition to the contributions discussed in 3.5.1)? (§98.43(b)(3)) Xes. Please describe:

Providers signing fiscal agreements with CCCAP affirm that they will not charge families any unsubsidized portion of the providers' normal fees, in addition to the amounts discussed in 3.5.1. Providers who choose to participate in the Colorado Child Care Assistance Program, including both licensed and legally exempt providers, must sign fiscal agreements.

No.

### **3.5.5** The following is an explanation of how the copayments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

The parental fee schedule is based on the following formula:

a. For families whose household income is below 50% of the Federal poverty levels, the fee is equal to 7% of the household income.

b. For families whose house hold income is at least 50% and below 75% of the Federal poverty levels, the fee is equal to 8% of the household income.

c. For families whose household income is at least 75% and below 100% of the Federal poverty level;

• the fee for the first child is equal to 9% of the household income;

• the fee will be increased by \$5 for each additional child in care.

*d.* For families whose household income is at least 100% and below 130% of the Federal poverty levels;

• the fee for the first child in care is equal to 10% of the household income;

• the fee will be increased by \$15 for each additional child in care

e. For families whose household income is a t least 130% and below 160% of the Federal poverty levels;

• the fee for the first child in care is equal to 11% of the household income.

• the fee will be increased by \$25 for each additional child in care.

*f.* For families whose household income is at least 160% and below 185% of the Federal poverty levels;

• the fee for the first child in care is equal to 12% of the household income;

• the fee will be increased by \$35 for each additional child in care.

g. For families whose household income is at least 160% and below 185% of the Federal poverty levels;

• the fee for the first child in care is equal to 12% of the household income;

• the fee will be increased by \$40 for each additional child in care.

*h.* For families whose household income is at least 205% and at or below 225% of the Federal poverty levels;

• the fee for the first child in care is equal to 14% of the household income;

• the fee will be increased by \$40 for each additional child in care.

*i.* For families who become ineligible because their income exceeds the gross monthly income as set by the county, who meet the guidelines as outlined in Section 3.904.1H, and whose household income does not exceed 85% of the State median income;

• the fee for the first child in care is within the range of 12% to 25% of the household income.

• the fee will be increased by \$40 for each additional child in care; the fees shall be increased incrementally as outlined by the individual family transition plan up to the six month limit.

#### PART 4 PROCESSES WITH PARENTS

#### 4.1.1 Application Process/Parental Choice

The following describes the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a) through (e)). If the process varies for families based on eligibility category, for instance, TANF versus non-TANF, please describe. The description should include:

### • How parents are informed of the availability of child care services and about child care options

Parents are informed of child care services and options through community Resource and Referral agencies, county departments of human services, agencies such as employment and training, child care providers, and other parents. Parents are informed of their options through written materials, individual consultations, and group orientations. At a minimum, all parents receive written materials in all counties.

#### • Where/how applications are made

Applications are made at local counties. In a few counties, the resource and referral agency provides intake and application services. Counties with Head Start programs may accept the Head Start application in lieu of the low-income child care application for those children enrolled in the Head Start program. In addition, Head Start eligibility and redetermination criteria may be applied to dually eligible Head Start/Low-Income Child Care families.

#### • Who makes the eligibility determination

Child care workers in counties make eligibility determinations. In a few counties, resource and referral staff or other county agents determine eligibility as set forth above. For families ending their participation in the Colorado Works Program due to employment or training, a low-income child care application is not required until after the first six months. Initial eligibility information shall be obtained from the Colorado Works Program. These families are still required to complete and sign a client responsibility form.

### • How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4

Parents receiving TANF benefits must be informed, by county child care workers, about the penalty exception including the criteria and definitions for determining whether an inability to obtain child care has been demonstrated; the state's procedures for determining a family's inability to obtain child care such as fair hearings, and the fact that the exception does not extend the time limit for receiving Federal assistance. These definitions must be made available in written form to each family in a form understandable to the participant so they can determine whether or not to apply for the exemption.

# • Length of eligibility period including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs

There is no limit to the length of eligibility; however, eligibility is redetermined every six months. In some communities eligibility may be redetermined every 12 months where children are enrolled in Head Start and the county has informed the State as part of their county plan. Each county must develop criteria to address when child care is unavailable. These policies must be submitted to the State Department and must be given to the participant in written form with a copy retained in the participant's file.

### • Any steps the State has taken to reduce barriers to initial and continuing eligibility for child care subsidies

The State has taken steps to reduce barriers to initial and continuing eligibility for child care subsidies through giving the counties the ability to continue assistance for 6 months for families who exceed the county's eligibility limits, by not requiring a Low Income application in the transition from Colorado Works (TANF), and accepting the Head Start application in substitution for the Colorado Child Care Assistance Program application.

#### 4.1.2 <u>The following is a detailed description of how the State ensures that parents are</u> informed about their ability to choose from among family and group home care, center-based care and in-home care including faith-based providers in each of these categories.

At time of application as well as throughout participation in the program, parents are provided information on provider types, child care options and choosing quality child care. Parents are supplied information on all provider types, including those listed above and with no distinction made as to faith-based or not, and choose who will provide their care. Should parents not know who they will use to provide care they are referred to their local child care resource and referral program to obtain referral information written materials, individual consultations, and group orientations. Each child care resource and referral program provides information on all provider types to each parent who utilizes their services.

#### 4.2 <u>Records of Parental Complaints</u>

The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding such parental complaints available to the public on request. (658E(c)(2)(C), \$98.32))

Complaints on licensed providers are retained in the Division of Child Care imaging system, which contains the files of all licensed child care facilities. The public has access to this information in the electronic licensing histories maintained for all facilities, which can be distributed to local child care resource and referral agencies. These histories contain information on all licensing functions. Complaints concerning legally exempt providers (those not required to be licensed) are completed by county departments of human services in coordination with the Division of Child Care. Complaints are kept in the Division of Child Care and made available to the public and counties upon request.

#### 4.3 <u>Unlimited Access to Children in Child Care Settings</u>

The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), \$98.31))

Counties provide child care assistance families with written information on their rights to unlimited access to their children. Providers sign Fiscal Agreements that outline the same rights. A Provider Handbook, issued to counties for distribution to all CCDF providers also includes this information.

#### 4.4 <u>Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain</u> <u>Child Care</u>

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age.

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 Child Care 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. The TANF agency that established these criteria or definitions is:

*The Colorado Department of Human Services (see Attachment <u>G</u> for the Colorado TANF State Plan).* 

#### • "appropriate child care":

Care and supervision that maintains the health and safety of the child while encouraging growth and development. Appropriate care should strive to meet the developmental, physical, mental and emotional needs of the child, as defined by the county in the county Colorado Works and Child Care Assistance Plan.

#### "reasonable distance":

Distance between the child's home and the child care setting or the parent's place of employment and the child care setting that, when traveled using transportation resources available to the family, still allows the family to perform basic daily routines including meal preparation, personal care and grooming and meet the need for basic sleep, as defined by the county in the county Colorado Works and child Care Assistance Plan.

#### • "unsuitability of informal child care":

Care provided in a legally exempt setting that endangers the health or safety of the child or that hinders the growth and development of the child, as defined by the county in the county Colorado Works and Child Care Assistance Plan.

#### • "affordable child care arrangements":

Care for which the cost to the parent does not exceed 14% of the family's earned income, and as may be further defined in the county Colorado Works and Child Care Assistance Plan.

#### PART 5

#### ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE

#### 5.1 Quality Earmarks and Set-Asides

5.1.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities. The following describes the activities; identifies the entities providing the activities; and describes the expected results of the activities. For the infant and toddler earmark, the State must note in its description of the activities what is the maximum age of a child who may be served with such earmarked funds.

The Division of Child Care's planning process draws on a variety of resources to determine policy and program direction. Research and evaluation comprise one set of tools to determine the effectiveness and desirability of a particular program and its associated outcomes. However, formal tools such as these generally provide only a portion of the information the Division uses to ascertain program success or failure, direction, and/or outcomes. Other methodologies used include

- $\Rightarrow$  Observation through monitoring and technical assistance activities;
- ⇒ Communication with local, state, and federal agencies, non-profits, and for-profit stakeholders;
- $\Rightarrow$  Collaboration and networking with stakeholders; and,
- $\Rightarrow$  Continual adjustments of program practices and procedures.

Changes in policies and procedures are typically implemented in an incremental fashion based on a variety of factors including program objectives, program outcomes, state policy, and available resources. Therefore, broad program objectives; e.g., training, professional development, and consumer awareness, are not normally erased on a yearly basis. Rather, the Division of Child Care will scale back certain programs while, perhaps, increasing funding for other programs based on outcomes produced in a given program, the programs' success, and changes in Division objectives. It is rare when a program is completely de-funded in a single year. The more common practice is to scale a program back and increase technical assistance to give the program a chance to produce results. However, barring improvement in a particular program's performance, the Division of Child Care would work with other organizations and/or modify program objectives to obtain desired results.

#### Infants and toddlers:

The following describes the activities funded to improve the quality of care for infants/toddlers, defined in licensed care as children up to the age of 36 month, and identifies the entity/entities providing them:

Under a contract with the Colorado Department of Education, a curriculum for infant/toddler supervisor training continues to be enhanced and offered. The program, entitled the Expanding Quality(EQ) in Infant/Toddler Care, is an intensive 48-clock hour training for individuals interested in becoming qualified as infant/toddler supervisors in child care facilities or as an intensive learning experience for those; e.g., licensing specialists, who work closely with children or otherwise have an interest in child care development. The EQ program not only includes direct training from CDE personnel and other early childhood experts, but also a "train-the-trainer" component for people interested in becoming locally based providers of the curriculum and mentors to interested infant/toddler providers. Over 1,755 people have completed the full training course since 2000 with an additional 200 individuals completing some of the coursework. Another 111 people have become certified trainers in the course for communities around the state. Currently, there are 27 active EQ training sites around the state. The expected results are that approximately 1200 additional trainees will complete the EQ training in the plan period.

Additional Infant/Toddler Earmark funds are being used to fund a variety of quality expansion activities for infants and toddlers through the Consolidated Child Care Pilot communities. In these pilot communities, faith-based organizations, private, local public entities, and other non-profits are a part of the consortiums. The primary focus of these activities is to encourage and incubate new methodologies for instituting long-term, systemic increases in quality care practices for infants and toddlers in these Pilot communities. It should also be noted that these activities are embedded within the broader work of early childhood systems development in those communities. Further, the Division of Child Care continues to work with its state-level partners to translate successful local practices gleaned from Consolidated Child Care Pilot experiences to state-level practices. The expected results for the plan period includes innovation at the local level in the pursuit of higher quality care for children; and creation of a methodology for taking successful practices to other communities around the state.

#### **Resource and referral services:**

*The following describes child care resource and referral activities funded and identifies the entity/entities providing them:* 

Qualistar Early Learning, child care resource and referral service, coordinates and oversees community-based resource and referral agencies statewide. The state is divided into sixteen service delivery areas, with services provided in all areas. In some service delivery areas, satellite offices connected to the main service delivery resource and referral agency office also exist. Resource and referral agencies provide information on licensing and regulatory requirements, complaint procedures, options available to parents through certificates, selecting quality child care, and child care issues, policies

and practices in the State. The expected results in the plan period in resource and referral is for the resource and referral network to assist CCCAP families--through referral to providers, parental education, and referrals of low-income families for CCCAP assistance, assist with provider recruitment and training statewide, make referrals related to inclusive care when needed.

Child care resource and referral activities funded using the earmarked resource and referral funds will be conducted under contract with the Qualistar Early Learning, child care resource and referral service. The earmarked resource and referral funds will be used to support the expanded availability of quality care, inclusive child care and schoolage care services in Colorado through the dependent/inclusive care portion of Qualistar Early Learning's activities. This particular program offers expanded referral and support services to families having children with special care needs and works directly with families and providers to identify and address barriers to the inclusion of children with special care needs in generic child care and school-age care settings. The Dependent/Inclusive care program connects families and providers directly to community resources that can supply the hands-on, on-site training, consultation and other supports that make inclusive child care a reality. The program will continue to help increase child care options for families in order to support family stability by making it possible for parents to work and by alleviating family stress resulting from the inability to find appropriate child care when needed. Qualistar Early Learning, child care resource and referral service, is also responsible for overseeing Healthy Child Care Colorado that is aimed at bringing necessary health and safety resources to Colorado's child care providers. The expected results under this plan period are that the full-time Nurse Consultant will work with both local communities and local providers about various resources, information, regulations, and practices necessary for the child care community to provide the most up-to-date care health and safety practices.

**School-age child care:** The following describes school-aged child care activities funded and identifies the entity/entities providing them. School-age activities will be conducted under an Interagency Agreement with the Colorado Department of Education. Earmarked funds will be used to:

 $\Rightarrow$  support professional development opportunities for providers,

 $\Rightarrow$  develop a state-wide infrastructure to support the development of quality "out-of-school-time" programs,

 $\Rightarrow$  develop written information to demonstrate how these programs can support the academic success of students,

 $\Rightarrow$  develop and implement a grant process to distribute grant dollars to communities to expand the quality and availability of school-age before school, after school and summer programs; and,

 $\Rightarrow$  Actively work with the Colorado Afterschool Network, a non-profit, nongovernmental entity, in creating a strategic plan for high-impact, out-of-school time programs.

The expected results of this work is that these programs will create greater public awareness of the need for school-age programs, develop a unified philosophy of what
makes school-age programs successful, and facilitate better integration of developmentally appropriate practices for school-age children between existing child care facilities and school-based programs

5.1.2 The law requires that <u>not less than 4%</u> of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency <u>estimates</u> that the following amount and percentage will be used for the quality activities (not including earmarked funds):

\$ <u>4,400,000</u> (4%)

5.1.3 Check either "Yes" or "No" for each activity listed to indicate the activities the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h))

	Yes	No
Comprehensive consumer education	$\boxtimes$	
• Grants or loans to providers to assist in meeting State and local standards	$\boxtimes$	
• Monitoring compliance with licensing and regulatory requirements	$\boxtimes$	
• Professional development, including training, education, and technical assistance	$\boxtimes$	
• Improving salaries and other compensation for child care providers	$\boxtimes$	
• Activities in support of early language, literacy, pre- reading, and early math concepts development		$\boxtimes$
• Activities to promote inclusive child care	$\boxtimes$	
• Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children		
• Other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1) and (2))	$\boxtimes$	

# **5.1.4** Describe each activity that is checked "Yes" above, identify the entity(ies) providing the activity, and describe the expected results of the activity.

### Comprehensive Consumer Education

The Division of Child Care continues to fund comprehensive consumer education for two reasons: 1) All research and evaluation performed on any of the programs funded under the CCDF and administered by the Division of Child Care in the last three years (and in prior years) indicates that communication is a key component of any successful child care program. The Division of Child Care views consumer education as a basic element of communication and thus necessary to building quality child care in the state; and, 2) Consumers of child care are a dynamic population and child care information must be continually made available to new families.

Consumer education information is being made available to parents and the general public within the state concerning licensing and regulatory requirements, complaint procedures, the options available to parents through certificates and various contractors, and policies and practices relative to child care services within the state.

The Qualistar Early Learning, child care resource and referral service, publishes a parent guide to choosing quality child care, which is distributed, broadly to parents. The statewide resource and referral system also works on an ongoing basis to create an awareness of the overall educational and economic issues related to childhood care and education in order to develop public demand for quality, affordable, available care and education services. Expected results are increased consumer awareness of the importance of quality early childhood care will create higher consumer knowledge and expectations of the level of care offered by child care facilities.

Local resource and referral agencies statewide have trained referral specialists who work with all families seeking child care to offer consumer education, consultation and problem solving regarding affordability and options that may meet their needs, facilitating each family's child care search. Resource and referral agencies provide CCCAP families with referral to providers and parental education, and they refer lowincome families for CCCAP assistance. They also offer child care referrals and parental education to families having children or youth with special needs. Expected results are that families who access resource and referral services will have a better chance of obtaining higher quality child care services because of the information parents received from resource and referral offices.

<u>Grants or Loans to Providers to Assist in Meeting State and Local Standards</u> The Division of Child Care contracts with the Department of Education for activities and resources intended to assist in meeting state or local standards. The Division of Child Care also intends to contract directly with local entities for activities and resources to assist in meeting state and local standards. Recent examples have included grants to improve playgrounds to comply with safety standards and funds for supplies, equipment and professional development. The Department of Education (CDE), a state agency, continues to work closely with the Division of Child Care on the Consolidated Child Care

Pilot program focused on moving families from welfare to work. Seventeen communities are designated as Consolidated Child Care Pilot sites. Consolidated Child Care Pilot sites have a variety of fiscal agents that include community and junior colleges (state agencies), non-profit, non-governmental community organizations, county agencies, and school districts. As part of this effort, the pilot sites have the opportunity to apply for resources to address planning and implementation costs. Some of these costs potentially include grants/loans to providers to assist in meeting state/local standards, such as creating full-day, full-year programs, and meeting staff development needs, or creating and implementing early childhood councils. Expected results are that the Division of Child Care and CDE will continue to rely on the Consolidated Pilots to provide critical information on best methodological practices and to identify barriers that must be surmounted necessary to increase the quality of child care locally and statewide.

CDE will also address infant/toddler care issues by providing training and technical assistance to directors at selected child care centers. All centers will receive grants to address quality and training/resource needs identified and addressed during the training. All contractors selected by CDE in consultation with the Division of Child Care are expected to demonstrate a commitment to increasing quality and collaborating with other community services.

The Division of Child Care also plans to contract with local entities to build child care capacity and increase the availability of affordable, quality early care and education and school-age programs for low-income families. Grants and/or loans to providers to assist them in meeting state and local standards are a part of these activities. Under this program, known as the Child Care Quality Expansion Grants, activities to create new child care capacity and/or to expand existing capacity to accommodate more children are allowed. This includes making minor renovations, meeting initial personnel and supply/equipment costs, funding local early childhood "learning clusters", training and professional development activities, such as mentoring; and working with the Colorado Preschool Programs funded through local school districts and others. Grantees for 2006-2007 will include county agencies, state agency community and junior colleges, school districts, and non-governmental state-level and community-based organizations. The expected results include:

- increased consumer awareness of quality practices;
- an increase in the number of facilities rated by with an approved child care assessment instrument; e.g., Environmental Rating Scales, Qualistar Early Learning Rating system, NAEYC accreditation;
- *an increase in the number of child care providers that offer good to high quality child care; and,*
- a decrease in the number of child care providers offering marginal or poor child care services.

As a result of legislation in 2001, a child care provider loan repayment program was established at the state level. The implementation is done in partnership with the Colorado Student Obligation Bonding Authority, state agency, and the Colorado

Department of Human Services. Due to a lack of requests from eligible child care providers, this program has been reduced to a minimal level (\$5,000) for FY 2006. The expected results of this program are that two students will access the funds and that the program will not be renewed in SFY 2007.

Related activities are also described in the Training and Technical Assistance Section following the Monitoring of Compliance with Licensing and Regulatory Requirements Section.

Improving the Monitoring of Compliance with Licensing and Regulatory Requirements State Licensing is part of the Division of Child Care. Inspection and monitoring of all child care facilities is conducted by Licensing staff. Licensing staff inspect facilities on a variable visit schedule. Visit schedules are determined by past histories of child care facilities. Complaints are responded to as they are reported. Because the Colorado Child Care Assistance Program (CCCAP) and Licensing are co-located, monitoring of facilities is closely coordinated. By state law, child care centers are also inspected and monitored by local departments of health, fire departments and/or county sanitarians. Expected results are that child care facilities should, at a minimum, meet certain health and safety criteria necessary to ensure that children are not in danger of mistreatment, accidents, or illness.

### Training, Education and Technical Assistance

The Division of Child Care is involved in a cross-systems effort to coordinate training, education and technical assistance statewide. This approach is beneficial for the following reasons: 1) information is centralized, 2) identification of gaps in training is easier, and 3) providers receive a listing of all available training.

As part of this effort, the Division of Child Care contracts with the Colorado Department of Education to develop and support the ongoing operation of a network of approximately 35 grassroots training and technical assistance units (early childhood learning clusters) across the state. The clusters bring people together in each community to assess learning needs, develop and implement a plan to meet those needs, disseminate information on training, policies and practices to the early childhood care and education community, and increase community capacity through better relationships, cooperation and collaboration. Funded communities offer workshops and courses, scholarships for workshops and conferences; develop resources and support mentorship, peer coaching and visits to other programs.

Other activities supported through the early childhood statewide training and technical assistance coordinated effort include: two summer symposia for providers and others active in early childhood education; responsive training and technical assistance for providers (including assistance with infant/toddler and school-age quality and training resource issues); leadership training and network development for school-age car; statewide training calendar published by Qualistar Early Learning, the child care resource and referral service.

Colorado is continuing its work on training and professional development for child care providers in coordination with other service systems. An early childhood career development system is evolving, including distance learning, on-line early childhood certificates and an associate degree, along with a comprehensive range of training options, including non-credit training. This effort is based in part on Colorado's Core Knowledge and Standards: A Guide for Early Childhood Professional Development, developed collaboratively in 1995, as the result of a three-year collaborative effort and joint funding by the Division of Child Care, the Department of Education's Prevention Initiatives Unit, the Governor's Office and the Colorado Community College and Occupational Education System (Tech Prep, Consumer and Family Studies, and Gender Equity). The Core Knowledge and Standards: A Guide for Early Childhood Professional Development was expanded in 2005 for use in school-age programs. The materials are undergoing a formal formatting process at this time. The intended result of this system is improved quality of care through support for the development of skills, professional qualifications, and employment opportunities for early childhood practitioners in all settings.

The Division of Child Care and the Colorado Early Childhood Professional Credential Office at Community College of Denver, a state agency, work closely on training development, including implementing a voluntary credential as part of a professional career development system. This system begins on an entry level and progresses to other levels as knowledge, competencies and experience increase. The system is based on the two levels of Colorado's <u>Core Knowledge and Standards: A Guide for Early Childhood</u> <u>Professional Development</u>. This system also includes the development of distance learning courses, diversity planning and leadership development. In FY 2006-2007, the voluntary credential program will be made available statewide. Expected results are that the many more child care providers around the state will now be able to improve quality over the long-term through participation in the credential.

The Division of Child Care's Training Advisory Committee consider and recommend trainings required of early childhood professionals in order to meet the Division of Child Care licensing rules and regulations. These trainings include pre-licensing, CPR, and first aid. Expected results are availability of required trainings through qualified trainers.

The Division of Child Care holds an annual state conference on child care. The conference attendees for 2006 and for 2007 will be county department of human services CCCAP and technical support staff as well as licensing staff. The intent of the conference is to facilitate and expedite communication between state and county staff on changes in licensing rules and regulations, best practices in CCCAP and technical systems administration, and best practices in the provision of activities associated with the licensing and monitoring of child care facilities. Expected results are that county and state staff will increase their knowledge of specific rules and practices and will be better able to provide more effective and efficient services to child care facilities.

Improving Salaries and Other Compensation for Child Care Providers

The Division of Child Care is supporting improved compensation for child care providers through activities to promote the early childhood credential described previously and through support for the T.E.A.C.H. (Teacher Education and Compensation Helps) Early Childhood program. The T.E.A.C.H. program provides educational scholarship opportunities for child care professionals. Participants receive scholarships to earn Early Childhood Education Credentials, an Early Childhood Associates Degree, or an Early Childhood Bachelors Degree. The costs of the T.E.A.C.H. program are shared by the sponsoring child care program, the participant and T.E.A.C.H. Scholarship recipients commit to one year of employment at the sponsoring child care program upon completion of the certificate. Qualistar Early Learning, a non-governmental community organization, administers the T.E.A.C.H. program. Expected results are increased professionalism of the field through higher education.

### Activities to promote inclusive child care

A program through Qualistar Early Learning, child care resource and referral service, offers expanded referral and support services to families having children with special care needs and works directly with families and providers to identify and address barriers to the inclusion of children with special care needs in generic child care and school-age care settings. The Dependent/Inclusive care program connects families and providers directly to community resources that can supply the hands-on, on-site training, consultation and other supports that make inclusive child care a reality. Expected results in the plan period are increased child care options for families in order to support family stability by making it possible for parents to work and by alleviating family stress resulting from the inability to find appropriate child care when needed.

### <u>Healthy Child Care America and other health activities including those designed to</u> promote the social and emotional development of children

Qualistar Early Learning, child care resource and referral service, is also responsible for overseeing Healthy Child Care Colorado that is aimed at bringing necessary health and safety resources to Colorado's child care providers. The expected results under this plan period are that the full-time Nurse Consultant will work with both local communities and local providers about various resources, information, regulations, and practices necessary for the child care community to provide the most up-to-date care health and safety practices.

# Other Quality Activities that Increase Parental Choice and Improve the Quality and Availability of Child Care

The Division of Child Care has developed a new imaging system for storage and retrieval of its facility licensing files that has been integrated with its licensing databases. The Division has also developed a means of electronically distributing to local child care resource and referral agencies individual licensing histories of all licensed child care facilities. This provides parents with quick and easy access to licensing information that can help them make informed decisions about child care for their children.

The School-Readiness Quality Improvement Program provides grants and technical assistance to participating child care sites, whose eligibility is defined in legislation,

HB05-1238. Participating sites receive a Qualistar Early Learning Quality Performance Rating and assistance in improving the quality of care through the use of enhanced educational materials, specialized teacher training, and increased parent involvement. The expected results for this program are that participating child care providers will increase their capacity to provide high-quality care for children; and children who receive this high-quality care will be more ready for school and for life than if they had not received these high quality child care services.

# 5.1.5 Is any entity identified in sections 5.1.1 or 5.1.4 a non-governmental entity?

 Yes, the following entities named in this part are non-governmental: Name: Qualistar Early Learning Type: Non-governmental community organization, child care resource and referral service

No.

#### 5.2 Good Start, Grow Smart Planning and Development

This section of the Plan relates to the President's *Good Start, Grow Smart* initiative which is envisioned as a Federal-State partnership that creates linkages between CCDF, including funds set-aside for quality, and State public and private efforts to promote early learning. In this section, each Lead Agency is asked to assess its State's progress toward developing voluntary guidelines on language, literacy, pre-reading, and early math concepts and a plan for the education and training of child care providers. The third component of the President's *Good Start, Grow Smart* initiative, planning for coordination across at least four early childhood programs and funding streams, was addressed in Section 2.1.2.

- 5.2.1 Status of Voluntary Guidelines for Early Learning. Indicate which of the following best describes the current status of the State's efforts to develop research-based early learning guidelines (content standards) regarding language, literacy, pre-reading, and early math concepts for three to five year-olds.
  - Planning. The State is planning for the development of early learning guidelines. Expected date of plan completion:
  - Developing. The State is in the process of developing early learning guidelines. Expected date of completion:
  - Developed. The State has approved the early learning guidelines, but has not yet developed or initiated an implementation plan. The early learning guidelines are included as Attachment \_\_\_\_
  - Implementing. In addition to having developed early learning guidelines, the State has embarked on implementation efforts, which may include dissemination, training or embedding guidelines in the professional development system. The guidelines are included as Attachment <u>not attached, but can be accessed at:</u> www.cde.state.co.us/earlychildhoodconnections/early.htm
  - Revising. A State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as Attachment \_\_\_\_\_
  - Other (describe):

# Describe the progress made by the State in developing voluntary guidelines for early learning since the date of submission of the 2004-2005 State Plan.

The state voluntary early learning guidelines are not under the purview of the state CCDF lead agency. The Colorado Department of Education (CDE) is the creator and implementation state agency for the voluntary early learning guidelines. Since the date of submission of the 2004-2005 state plan, CDE has translated the early learning guidelines into Spanish and have created policy briefs that inform programs on the research-based approach in the guidelines, and how the use of

the guidelines in the child care setting can improve quality and school-readiness for children. The purpose of creating the briefs was to expand the voluntary use of the guidelines beyond Colorado Preschool Program settings and early childhood state-funded special education for individual children.

### If developed, are the guidelines aligned with K-12 content standards?

# Yes. If yes, describe.

The process began with a belief that the early learning guidelines would be aligned with the K-12 standards. This work is seen as a continuum of lifetime learning for our children. The Early Childhood Foundations correlate directly to each of the K-12 content standards. Building Block activities are defined and designed for use in an age-appropriate setting and through age-appropriate methods.

No.

Please attach a copy of the guidelines. If the guidelines are available on the web, provide the appropriate Web site address: www.cde.state.co.us/earlychildhoodconnections/early.htm

- 5.2.2 Domains of Voluntary Guidelines for Early Learning. Do the guidelines address language, literacy, pre-reading, and early math concepts?
  - Yes Yes

Do the guidelines address domains not specifically included in *Good Start*, *Grow Smart*, such as social/emotional, cognitive, physical, health, creative arts, or other domains?

Yes. If yes, describe.

The domains of social, emotional, cognitive, linguistic and physical are embedded within each of the guidelines through the age-appropriate activities.

No No

Have guidelines been developed for children in age groups not specifically included in *Good Start, Grow Smart* (children other than those aged three to five)?

☐ Yes. If yes, describe.⊠ No

5.2.3 Implementation of Voluntary Guidelines for Early Learning. Describe the process the State used or expects to use in implementing its early learning

guidelines. How are (or will) community, cultural, linguistic and individual variations, as well as the diversity of child care settings (be) acknowledged in implementation? Materials developed to support implementation of the guidelines are included as Attachment <u>(Train the Trainer materials are used for implementation by CDE and cannot be attached.)</u>

The lead agency for the early learning guidelines is the Colorado Department of Education (CDE). The early learning guidelines were formatted with implementation in mind. Training modules and train-the-trainer were designed into the plan and addressed community, cultural, linguistic and individual variations in the range of child care settings, including for use by parents. Trainings were held in partnership with the Colorado Association for the Education of Young Children (CAEYC) through the summer symposium, through learning clusters, where the a community determines training needs at the local level, and through links with other partner group, included in the Early Childhood State Systems work, see Attachment H. The guidelines are voluntary at this time, but widely used currently in Colorado Preschool Program settings and early childhood state-funded special education for individual children. Further implementation plans will be developed through the stakeholder group that will be convened to further this work. As one stakeholder, the Department of Human Services is beginning a discussion with the CDE of how to expand the use of the guidelines beyond the Colorado Preschool Program and into other child care settings.

- 5.2.4 Assessment of Voluntary Guidelines for Early Learning. As applicable, describe the State's plan for assessing the effectiveness and/or implementation of the guidelines. Written reports of these efforts are included as Attachment (*This is in the development phase by CDE and cannot be attached.*)
- 5.2.5 State Plans for Professional Development. Indicate which of the following best describes the current status of the State's efforts to develop a professional development plan for early childhood providers that includes all the primary sectors: child care, Head Start, and public education.
  - Planning. Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
  - Developing. A plan is being drafted. The draft is included as Attachment \_\_\_\_
  - Developed. A plan has been written but has not yet been implemented. The plan is included as Attachment
  - Implementing. A plan has been written and is now in the process of being implemented. The plan is included as Attachment \_\_\_\_\_
  - **Other (describe):**

# Describe the progress made by the State in a plan for professional development since the date of submission of the 2004-2005 State Plan.

This work is being led by the Colorado Department of Public Health through the SECCS grant, Early Childhood State System Team's Professional and Workforce Development Task Force. It is an ongoing work with expectations that in SFY 2006 an Office of Professional Development will be created, through an RFP, and within that office scope of work, a plan will be developed. Specific timelines have not been attached to the plan as yet. Other reference to professional development work that is ongoing in the state is covered in 5.1.3 and 5.1.4 within this state plan submission. It is premature to give information related to a formal professional plan for the state at this time.

If your State has developed a plan for professional development, does the plan include: No plan has been developed.	Yes	No
A link to Early Learning Guidelines		
Continuum of training and education to form a career path		
Articulation from one type of training to the next		
Quality assurance through approval of trainers		
Quality assurance through approval of training content		
A system to track practitioners' training		
Assessment or evaluation of training effectiveness		
State Credentials – Please state for which roles (e.g. infant and toddler credential, directors' credential, etc.)		
Specialized strategies to reach family, friend and neighbor caregivers		

For each Yes response, reference the page(s) in the plan and briefly describe the Lead Agency's efforts. *See above.* 

For each No response, indicate whether the Lead Agency intends to incorporate these components. *See above.* 

Are the opportunities available: See above.	Yes	No	
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Statewide	
To Center-based Child Care Providers	
To Group Home Providers	
To Family Home Providers	
To In-Home Providers	
Other (describe):	

**Describe how the plan addresses early language, literacy, pre-reading, and early math concepts development.** *See previous page.* 

Are program or provider-level incentives offered to encourage provider training and education? *No plan developed, see previous page.* 

- Yes. Describe, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts.
- No. If no, is there any plan to offer incentives to encourage provider training and education?

What are the expected outcomes of the State's professional development plan and efforts to improve the skills of child care providers? As applicable, how does (or will) the State assess the effectiveness of its plan and efforts? If so, how does (or will) the State use assessment to help shape its professional development plan and training/education for child care providers?

It is premature to give information related to a formal professional plan for the state at this time. See previous page that defines state's approach to the development of a plan within the scope of work covered in an RFP for the Office of Professional Development being established in 2006.

### PART 6

# HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(Only the 50 States and the District of Columbia complete Part 6.)

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: http://nrc.uchsc.edu/.

- 6.1 Health and Safety Requirements for Center-Based Providers (658E(c)(2)(F), \$§98.41, \$98.16(j))
  - 6.1.1 Are all <u>center-based</u> providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation?
    - $\boxtimes$

Yes. Answer 6.1.2, skip 6.1.3, and go to 6.2.

**No.** Describe which center-based providers are exempt from licensing under State law and answer 6.1.2 and 6.1.3.

6.1.2 Have center licensing requirements as relates to staff-child ratios, group size, or staff training been modified since approval of the last State Plan? (§98.41(a)(2)&(3))



Yes, and the changes are as follows: No

- 6.1.3 For center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training

- 6.2 Health and Safety Requirements for Group Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))
  - 6.2.1 Are all <u>group home</u> providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:
    - $\boxtimes$
- Yes. Answer 6.2.2, skip 6.2.3, and go to 6.3.

**No.** Describe which group home providers are exempt from licensing under State law and answer 6.2.2 and 6.2.3.

6.2.2 Have group home licensing requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))



Yes, and the changes are as follows: No

- 6.2.3 For group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training
- 6.3 Health and Safety Requirements for Family Providers (658E(c)(2)(F), §§98.41, 98.16(j))
  - 6.3.1 Are all <u>family</u> child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

Yes. Answer 6.3.2, skip 6.3.3, and go to 6.4.

No. Describe which family child care providers are exempt from licensing under State law and answer 6.3.2 and 6.3.3.

A family care home in which less than 24-hour care is given for only one child or two or more children who are siblings from the same family household at any one time is exempt from licensing.

6.3.2 Have family child care provider requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

$\times$	

Yes, and the changes are as follows: No

- 6.3.3 For family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)

Legally-exempt providers caring for children from counties that do not collect immunization information as a part of the eligibility process are required to maintain immunization information on the children in their care, and sign a Self-Assurance form that addresses the prevention and control of infectious disease. Relatives (in accordance with the State Agency Letter CC-99-4-A) caring for related children are exempt from this requirement.

• Building and physical premises safety

Legally exempt providers and parents sign a Self-Assurance form that addresses building and physical premises safety. Parents are responsible for monitoring.

# • Health and safety training

*Providers and parents sign a Self-Assurance form that addresses health and safety training. Parents are responsible for monitoring.* 

#### 6.4 Health and Safety Requirements for In-Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

- 6.4.1 Are all <u>in-home</u> child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation referenced above?

Yes. Answer 6.4.2, skip 6.4.3, and go to 6.5.

No. Describe which in-home child care providers are exempt from licensing under State law and answer 6.4.2 and 6.4.3.

A family care home in which less than 24-hour care is given for only one child or two or more children who are siblings from the same family household at any one time is exempt from licensing.

6.4.2 Have in-home health and safety requirements that relate to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

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Yes, and the changes are as follows: No

- 6.4.3 For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including ageappropriate immunizations)

Legally-exempt providers caring for children from counties that do not collect immunization information as a part of the eligibility process are required to maintain immunization information on the children in their care, and sign a Self-Assurance form that addresses the prevention and control of infectious disease. Relatives (in accordance with the State Agency Letter CC-99-4-A) caring for related children are exempt from this requirement.

# • Building and physical premises safety

Legally exempt providers and parents sign a Self-Assurance form that addresses building and physical premises safety. Parents are responsible for monitoring.

# • Health and safety training

*Providers and parents sign a Self-Assurance form that addresses health and safety training. Parents are responsible for monitoring.* 

### 6.5 Exemptions to Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) may be exempted from health and safety requirements. (658P(4)(B), §98.41(a)(1)(ii)(A)) Indicate the Lead Agency's policy regarding these relative providers:

- All relative providers are subject to the same requirements as described in sections 6.1 6.4 above, as appropriate; there are no exemptions for relatives or different requirements for them.
  - All relative providers are exempt from <u>all</u> health and safety requirements.
  - Some or all relative providers are subject to <u>different</u> health and safety requirements from those described in sections 6.1 6.4. The following describes those requirements and identifies the relatives they apply to:

 $\square$ 

*Relative providers are not required to maintain immunization records on the relative children for whom they provide care.* 

# 6.6 Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements.  $(658E(c)(2)(E), \S\$98.40(a)(2), 98.41(d))$  The following is a description of how health and safety requirements are effectively <u>enforced</u>:

- Are child care providers subject to <u>routine</u> unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?
  - Yes, and the following indicates the providers subject to routine unannounced visits and the frequency of those visits:

Large/group family child care homes, family child care homes, child care centers, school-age child care centers, and part-day preschools are visited on average every other year, or upon receipt of a complaint. Centers are visited every one to two years by different regulatory agencies. Unannounced visits are conducted by licensing staff on a risk-based model. Visits occur on a time interval from once a month to once every 3 years.

**No** 

• Are child care providers subject to background checks?

Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):

Criminal background checks are required and enforced for all licensed facilities. All adults living in the family child care home over 18 years of age are subject to a criminal background check. All staff working in a child care facility are subject to a criminal background check.

Effective August 2001, a double criminal background check has been implemented. Colorado has used the fingerprint-based Colorado Bureau of Investigation (CBI) check for many years. In addition, providers who live in the state less than 2 years are checked through FBI records. The newly implemented additional background check combines CBI and court disposition information through the judicial system's database. Criminal Background Unit staff of the Office of Performance Improvement conducts the check on disposition information. This requirement was passed in the 2001 legislative session, after a 3 county pilot demonstrated that a CBI/FBI check alone was not sufficient. Licensing specialists monitor background check information as part of their unannounced monitoring visits. In addition, CBI conducts a "flagging system", which identifies individuals' arrests subsequent to the initial criminal background check investigation.

Colorado does not require criminal background checks of legally exempt providers. County departments of human services may conduct criminal background checks, however very few do.



• Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)



Yes, and the following describes the State's reporting requirements and how such injuries are tracked (if applicable):

Licensed providers must report injuries where a child receives medical treatment at a medical facility, within 24 hours of the incident. The report is made to the state licensing administrator and the licensing specialist for the facility. The report is maintained in the facility file. These injuries are not tracked at this time.

# ] No

# • Other methods used to ensure that health and safety requirements are effectively enforced:

A child care center must complete the following requirements before a license is issued: 1) the facility is inspected by a Department of Human Services licensing specialist, 2) is inspected by the local health department, 3) is inspected by the local fire department, 4) meets local building and zoning codes.

Licensing Specialists complete an evaluation checklist, which is part of the inspection. Centers are evaluated on staff qualifications, age appropriateness and safety of equipment, indoor space (size and safety), outdoor space (size and safety), records of children and staff, center's written policies.

Criminal background checks and Child Abuse checks are also conducted. Information concerning chronic health problems must also be submitted. Parents must submit immunization information on children.

Each staff must be trained in fire safety and emergency procedures; staff must be trained in universal precautions; at least one staff on duty in the preschool area, toddler area,

and in each infant-nursery room must have a current Red Cross First Aid and infant and child CPR certificate. In addition, all staff must complete a prescribed level of ongoing training each year.

*Centers are visited every one to two years by different regulatory agencies. Licensing* staff conduct unannounced visits, determined by a risk based model. Visits occur on a time interval from once a month to once every 3 years.

A family child care home provider is not licensed until the facility is inspected by a Dept of Human Services Licensing Specialist and meets local building and zoning codes.

Licensing Specialists complete an evaluation checklist that is part of the inspection. The areas of inspection include staff qualifications, age appropriateness and safety of equipment, indoor space (size and safety), outdoor space (size and safety), records of children and staff, written policies.

Fingerprint based criminal records checks and Child Abuse checks are completed.

Homes are visited on a drop in, unannounced basis by Licensing staff on a risk-based schedule.

#### **6.7 Exemptions from Immunization Requirements**

The State assures that children receiving services under the CCDF are ageappropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the State public health agency. (§98.41(a)(1))

The State exempts the following children from immunization (check all that apply):

- $\square$ Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).  $\mathbb{X}$ 
  - Children who receive care in their own homes.
    - Children whose parents object to immunization on religious grounds.
  - Children whose medical condition contraindicates immunization.

#### PART 7 HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

(Only the Territories complete Part 7.)

7.1 Health and Safety Requirements for Center-Based Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

For all <u>center-based</u> care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training
- 7.2Health and Safety Requirements for Group Home Providers in the Territories<br/>(658E(c)(2)(F), §98.41(a), §98.16(j))

For all <u>group home</u> care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

### 7.3 Health and Safety Requirements for Family Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

For all <u>family child care</u>, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training
- 7.4 Health and Safety Requirements for In-Home Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

For all <u>in-home</u> care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

#### 7.5 Exemptions to Territorial Health and Safety Requirements

At Lead Agency option, the following relatives may be exempted from health and safety requirements: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care). (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency's policy regarding these relative providers:

- All relative providers are subject to the same requirements as described in sections 7.1 7.4 above, as appropriate; there are no exemptions for relatives or different requirements for them.
  - All relative providers are exempt from <u>all</u> health and safety requirements.
    - Some or all relative providers are subject to <u>different</u> health and safety requirements from those described in sections 7.1 7.4 and the following describes those different requirements and the relatives they apply to:

#### 7.6 Enforcement of Territorial Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements.  $(658E(c)(2)(E), \S\$98.40(a)(2), 98.41(d))$  The following is a description of how Territorial health and safety requirements are effectively <u>enforced</u>:

Are child care providers subject to <u>routine</u> unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?

Yes, and the following indicates the providers subject to routine
unannounced visits and the frequency of those visits:
No

Are child care providers subject to background checks?

Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):
 No

Does the Territory require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)



Yes, and the following describes the Territory's reporting requirements and how such injuries are tracked (if applicable): No Other methods used to ensure that health and safety requirements are effectively enforced:

### 7.7 Exemptions from Territorial Immunization Requirements

The Territory assures that children receiving services under the CCDF are ageappropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the Territorial public health agency. (\$98.41(a)(1))

The Territory exempts the following children from immunization (check all that apply):

- Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles). Children who receive care in their own homes.
- Children whose parents object to immunization on religious grounds.

Children whose medical condition contraindicates immunization.

#### APPENDIX 1 PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures that:

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable.
  (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (6) that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 106-554)

The Lead Agency also certifies that:

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

### APPENDIX 2 ELIGIBILITY AND PRIORITY TERMINOLOGY

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must define the following italicized terms. (658P, 658E(c)(3)(B))

• attending (a job training or educational program; include minimum hours if applicable) –

Verification of enrollment at an educational institution or participation in a job training program is required. Verification is required every six months. Under TANF, attendance and conditions of attendance are defined in the participant's Individual Responsibility Contract.

# • in loco parentis –

An unrelated individual who is taking the place of a parent and has obtained an affidavit from the child's biological parent or legal guardian which identifies the unrelated individual as the child's primary caretaker.

# • job training and educational program -

Enrollment in an educational institution or participation in a job training program such as onthe-job training, work experience, employer sponsored training. Educational programs include high school diploma, ESL, brush up basic skills or GED. For TANF participants, job training and educational programs are considered work activities.

- physical or mental incapacity (if the Lead Agency provides such services to children age 13 and older) –
- *a) A developmental disability which is attributed to mental retardation, cerebral palsy, epilepsy, autism, or a neurological impairment and is verified by a professional.*
- *b) A physical handicap, substantiated by a medical professional or the County, which puts extra and exhausting demands on parents.*
- *c) A psychological disorder that is documented by a psychologist, psychiatrist, or qualified mental health professional.*
- **d**) *A severe behavioral problem that places exhaustive demands on parents and is verified by a professional or the County.*

### • protective services –

N.A.

# • residing with –

A parent (or parents) who meets eligibility guidelines and is either a biological parent, relative caretaker, legally appointed guardian, or an unrelated individual who is acting in the role of a parent and providing financial support to the household of the child. This definition is different for TANF families.

#### • special needs child –

*Same as physical or mental incapacity – (See above)* 

#### • very low income –

Families with very low incomes are those whose incomes are at or below 130% of the federal poverty level.

### • working (include minimum hours if applicable) -

Earning income in a full time, part time, temporary or self-employment basis. Job search is included under the work definition for Low-Income families, but not for TANF families.

• Additional terminology related to conditions of eligibility or priority established by the Lead Agency:

Group Home - Group home in CCDF is what Colorado calls "large family child care" licensing category of family child care homes.