

#### CHILD CARE AND DEVELOPMENT FUND PLAN

#### FOR: <u>Colorado</u>

#### FFY 2010-2011

This Plan describes the CCDF program to be conducted by the State/Territory for the period 10/1/09 - 9/30/11. 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 162.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

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

Form ACF 118 Approved OMB Number: [INSERT NUMBER] expires [INSERT DATE]

#### TABLE OF CONTENTS

#### **AMENDMENTS LOG**

#### PART 1 ADMINISTRATION

- 1.1 Lead Agency Information
- 1.2 State/Territory Child Care (CCDF) Contact Information
- **1.3 Estimated Funding**
- **1.4 Estimated Administration Cost**
- **1.5** Administration of the Program
- 1.6 Funds Used to Match CCDF
- **1.7** Improper Payments

#### PART 2 DEVELOPING THE CHILD CARE PROGRAM

- 2.1 Consultation and Coordination
- 2.2 Public Hearing Process
- 2.3 Public-Private Partnerships

#### PART 3 CHILD CARE SERVICES OFFERED

- **3.1 Description of Child Care Services**
- **3.2** Payment Rates for the Provision of Child Care
- 3.3 Eligibility Criteria for Child Care
- 3.4 Priorities for Serving Children and Families
- **3.5** Sliding Fee Scale for Child Care Services

#### PART 4 PARENTAL RIGHTS AND RESPONSIBILITIES

- 4.1 Application Process / Parental Choice
- 4.2 **Records of Parental Complaints**
- 4.3 Unlimited Access to Children in Child Care Settings
- 4.4 Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain Child Care

#### PART 5 ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE

- 5.1 Quality Targeted Funds and Set-Asides
- 5.2 Early Learning Guidelines and Professional Development Plans

#### PART 6 HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS (50 States & District of Columbia only)

- 6.1 Health and Safety Requirements for Center-Based Providers
- 6.2 Health and Safety Requirements for Group Home Child Care Providers
- 6.3 Health and Safety Requirements for Family Child Care Providers
- 6.4 Health and Safety Requirements for In-Home Child Care Providers
- 6.5 Exemptions to Health and Safety Requirements
- 6.6 Enforcement of Health and Safety Requirements

#### 6.7 Exemptions from Immunization Requirements

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

- 7.1 Health and Safety Requirements for Center-Based Providers in the Territories
- 7.2 Health and Safety Requirements for Group Home Child Care Providers in the Territories
- 7.3 Health and Safety Requirements for Family Child Care Providers in the Territories
- 7.4 Health and Safety Requirements for In-Home Child Care Providers in the Territories
- 7.5 Exemptions to Territorial Health and Safety Requirements
- 7.6 Enforcement of Territorial Health and Safety Requirements
- 7.7 Exemptions from Territorial Immunization Requirements

#### **APPENDIX 1 -- PROGRAM ASSURANCES AND CERTIFICATIONS**

#### **APPENDIX 2 -- ELIGIBILITY AND PRIORITY TERMINOLOGY**

#### **APPENDIX 3 -- ADDITIONAL CERTIFICATIONS**

#### **REQUIRED ATTACHMENTS**

- 2.1.3 Early Childhood Program Coordination Strategic Plan
- 2.2 Public Comments Summary
- 3.2.1 Payment Rates for the Provision of Child Care
- 3.2.3 Market Rate Survey
- **3.5.1 Sliding Fee Scale for Child Care Services**
- **4.1.1 Application for Services**
- **5.2.1 Voluntary Early Learning Guidelines**
- **5.2.5 Plan for Professional Development**

#### AMENDMENTS LOG

#### CHILD CARE AND DEVELOPMENT FUND PLAN FOR: <u>COLORADO</u> FOR THE PERIOD: 10/1/09 – 9/30/11

Lead Agencies must submit plan amendments within 60 days of the effective date of an amendment (§98.18 (b)).

**Instructions for Amendments:** 

- 1) Lead Agency completes the first 3 columns of the Amendment Log and sends a photocopy of the Log (showing the latest amendment sent to ACF) <u>and</u> the amended section(s) to the ACF Regional Office contact. Lead Agency also should indicate the Effective Date of the amended section in the footer at the bottom of the amended page(s). A copy of the Log, showing the latest amendment pending in ACF, is retained as part of the Lead Agency's Plan.
- 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 "old" plan pages that are superseded by amendments in a separate appendix to its Plan. This is especially important as auditors will review CCDF Plans and examine effective date of changes.

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

#### 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/Territory 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:			
	Karen L. Beye, Executive Director		
Phone Number:	(303) 866-5096 <b>Fax Number:</b> (303) 866-4214		
E-Mail Address:	Karen.Beye@state.co.us		
Web Address for Lead Agency (if any): <u>http://www.cdhs.state.co.us</u>			

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

Name of the State/Territory Child Care Contact (CCDF):Rosemarie AllenTitle of State/Territory Child Care Contact:State Child Care AdministratorAddress:Colorado Department of Human ServicesDivision of Child Care1575 Sherman St., 1<sup>st</sup> FloorDenver, CO 80203Phone Number:(303) 866-5093 Fax Number: (303) 866-4453E-Mail Address:Rosemarie.Allen@state.co.us

Name of the State/Territory Child Care Contact (CCDF):Leslie BuliczTitle of State Child/Territory Care Contact:Child Care Programs AdministratorAddress:Colorado Department of Human ServicesDivision of Child Care

1575 Sherman St., 1<sup>st</sup> Floor Denver, CO 80203

Phone Number:(303) 866-4556Fax Number:(303) 866-4453E-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.* 

Web Address for child care subsidy program information (for the public) (if any): http://www.cdhs.state.co.us/childcare/cccap\_home.htm

#### 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, 2009 through September 30, 2010. (§98.13(a))

CCDF: \$ 63,000,000

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: \$ 27,000,000 Total Funds Available: \$ 128,900,000

#### **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):  $\frac{4.4\%}{1.4\%}$ . (658E(c) (3), §98.13(a), 98.52)

#### **1.5** Administration of the Program

1.5.1 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 Targeted Funds and Set-Aside?

$\square$	

No. If no, use Table 1.5.1 below to identify the name and type of agency that delivers services and activities. If more than one agency performs the task, identify all agencies in the box under "Agency," and indicate in the box to the right whether each is a non-government entity.

Service/Activity	Agency	Non-Government Entity (see Guidance for definition)
Determines individual eligibility:		
a) TANF families	County Depts. of Human/Social Services	Yes No
b) Non-TANF families	County Depts. of Human/Social Services	☐ Yes ⊠ No
Assists parents in locating care	Qualistar Early Learning – Child Care Resource & Referral Service	Yes No

#### Table 1.5.1: Administration of the Program

Service/Activity	Agency	Non-Government Entity (see Guidance for definition)
Makes the provider payment	County Depts. of Human/Social Services	Yes No
Quality activities	County Depts. of Human/Social Services	Yes No
Quality activities	Community College of Denver	Yes No
Quality activities	Colorado Department of Education	Yes No
Quality activities	Qualistar Early Learning	Yes No
Other:		Yes No

# **1.5.2.** Describe how the Lead Agency maintains overall internal control for ensuring that the CCDF program is administered according to the rules established for the program (§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;
- $\Rightarrow$  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;
- $\Rightarrow$  *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 3-1 are included in all contracts and include:

- $\Rightarrow$  State Controller approval requirements;
- $\Rightarrow$  Fund availability after the current fiscal year;
- $\Rightarrow$  Bond requirements;
- $\Rightarrow$  Indemnification;
- $\Rightarrow$  Discrimination and affirmative action requirements; and
- $\Rightarrow$  Colorado labor preference.

1.5.3. Describe how the Lead Agency ensures adequate personnel, resources, systems, internal controls, and other components necessary for meeting CCDF reporting requirements (658K, §98.67, §§98.70 & 98.71, §§98.100 to 102), including the Lead Agency's plans for addressing any reporting deficiencies, if applicable. <u>At a minimum</u>, the description should address efforts for the following reporting requirements:

#### a) Fiscal

The Colorado Board of Human Services have processes in place that provide reasonable assurance that transactions are properly recorded and accounted for to permit the preparation of reliable financial statements and Federal reports, maintain accountability over assets, and demonstrate compliance with laws, regulations, and other compliance requirements as required in A-133, Part 6.

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.

The state of Colorado is required to use the ACF-696 to report estimates and expenditures for the Mandatory Fund, the Matching Fund, and the Discretionary Fund. The Program Accountant prepares the quarterly report of all expenditures for the child care program to create the ACF-696 report. The report is verified by the Lead Program Accountant for Child Care, then certified by the Deputy Controller and submitted to ACF.

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 State of Colorado and the Division of Child Care are in the process of replacing the Child Care Automated Tracking System (CHATS) currently in use. CHATS is the data system that supports the department and all counties within Colorado in managing the core business functions of the child care program. This replacement will be complete in April 2011. The replacement of the CHATS data system with EBT technology will track time and attendance and prevent and identify improper payments by providing an accurate and real-time record of the time and physical location of the child care services, will eliminate errors related to manual paperwork, including vouchers, invoices and attendance sheets, and reduce errors related to issuing checks by using automated payments.

#### b) Data

The Lead Agency is responsible for providing the ACF-800 Aggregate Data Report, to provide unduplicated annual counts of children and families served through the CCDF, and the ACF-801 Case Level Report to provide case-level data on the families and children served during the month of the report, and other demographic information; both reports are generated from Child Care Automated Tracking System (CHATS), the system of record for eligibility and payment.

#### c) Error Rate

The Lead Agency is responsible for providing the ACF-400 Record Review Sheet, and ACF-401Data Entry Form. These reports are required to measure, calculate, and report improper authorizations for payments as well as identify strategies for reducing future improper authorizations for payments. Nationally, each state is in a reporting cycle, Colorado is in "Cycle Year One" and uses data from the CHATS system to get data related to all cases reviewed, does desktop case reviews and compiles the data to create the ACF-402 report, which is submitted once every three years.

#### **1.6 Funds Used to Match CCDF**

**1.6.1** Will the Lead Agency use <u>public funds</u> to meet a part of the CCDF Match requirement pursuant to §98.53(e)(1)?

Yes, describe the activity and source of funds: <u>Direct Services - State</u> <u>General Fund; Quality Activities - State General Fund</u>

No.

**1.6.2** Will the Lead Agency use <u>private donated funds</u> to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2)?

Yes. If yes, are those funds: (check one below)

**Donated directly to the State?** 

Donated to a separate entity or entities designated to receive private donated funds?

a) How many entities are designated to receive private donated funds? 1

b) Provide information below for each entity:

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

1.6.3 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF maintenance of effort (MOE) requirement?

Yes
Y es

(respond to 1.6.5), and:

a) 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 percentage of the MOE requirement that will be **b**) ( met with Pre-K expenditures. (Not to exceed 20%.)

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

 $\square$ No.

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

 $\square$ Yes (respond to 1.6.5), and

> (30%) Estimated percentage of the Matching Fund requirement that will be met with pre-K expenditures. (Not to exceed 30%.)

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 Early Childhood Council programs to coordinate pre-K and child care services to expand the availability of child care, including full-year care services. The availability of state-funded pre-k through a separate lead agency extends the child care assistance funding that would otherwise have been used for those same hours of care for eligible children.

No.

**1.6.5** If the Lead Agency indicated "yes" to 1.6.3 or 1.6.4, describe Lead Agency 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 in response to the needs of working families.

**1.6.6** Will the Lead Agency use any other funds to meet a part of the CCDF Match requirement pursuant to §98.53(e)(1)?

**Yes, describe the activity and source of funds:** 

No.

#### **<u>1.7</u>** Improper Payments

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

An improper payment is any payment made for services that prove to be erroneously or fraudulently obtained or provided.

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

Yes, and these strategies are:

*The State will promulgate rules to provide clarity to clients, providers,* and county workers where it has been found that current rule creates inconsistencies within the program, leading to authorization errors. An example of this is specifying in rule that leaving a field blank in an application constitutes an error in the case. The State is in the process of developing a CHATS Replacement automated system, due to the identified weaknesses in the current system. That system build is expected to be in place by June 30, 2010 if not sooner. The State has written business requirements to be included in the new system that will result in reduced worker errors related to authorization and to payment. It will include a *real-time and attendance component to track care received and ensure* proper State provider reimbursement. The system will also have interfaces with other state systems that house verification information related to eligibility, like place of residence and employment. While this information is currently required, it isn't real-time and relies on the client producing documentation.

• 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. 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, and these planned strategies are:

No.

#### PART 2 DEVELOPING THE CHILD CARE PROGRAM

#### 2.1 Consultation and Coordination

2.1.1 Lead Agencies are required to *consult* with appropriate agencies and *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 a) consulted and b) coordinated (as defined below), by checking the appropriate box(es) in Table 2.1.1.

*Consultation* involves the meeting with or otherwise obtaining input from an appropriate agency in the <u>development of the State Plan</u>. <u>At a minimum, Lead</u> <u>Agencies must consult with representatives of general purpose local governments</u> (noted by the asterisk in the chart below).

*Coordination* involves the <u>coordination of child care and early childhood</u> <u>development services</u>, 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). <u>At a minimum</u>, <u>Lead Agencies must coordinate with (1)</u> 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 (6) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

Agency	a) Consultation in Development of the Plan	b) Coordination with Service Delivery
Representatives of local government		
Other Federal, State, local, Tribal (if applicable), and/or private agencies providing child care and early childhood development services.		*
Public health	$\square$	*
Employment services / workforce development		⊠ *
Public education	$\square$	*

**Table 2.1.1 Consultation and Coordination** 

Agency	a) Consultation in Development of the Plan	b) Coordination with Service Delivery
TANF	$\square$	*
Indian Tribes/Tribal Organizations, when such entities exist within the boundaries of the State		*
State/Tribal agency (agencies) responsible for:		
State pre-kindergarten programs		$\square$
Head Start programs		$\square$
Programs that promote inclusion for children with special needs		$\square$
Other (See guidance):		

\* Required.

For each box checked in Table 2.1.1, (a) identify the agency(ies) providing the service and (b) describe the consultation and coordination efforts. 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. The Division of Child Care consulted with early childhood system stakeholders in regularly scheduled meetings over the past six months 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, private 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, and Part C agencies serving infants/toddlers with disabilities.

The Division of Child Care consulted on an ongoing basis throughout the year with the members of 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.

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 was consulted. The State Department of Education was consulted in the areas of early childhood care and education, infant/toddler needs, prekindergarten/preschool, school age issues, inclusive child care, 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 Emergency Preparedness and Response Plan for Child Care and Early Childhood Programs. Lead Agencies are encouraged to develop an emergency preparedness and response plan for child care and other early childhood programs operating in the State/Territory. The plan should include provisions for continuity of services and child care assistance payments to families and providers in the event of an emergency or disaster. Indicate which of the following best describes the current status of you efforts in this area. <u>Check only ONE</u>.

- 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 will be coordinated with other emergency planning efforts within the State/Territory.
- Developing. A plan is being drafted. Include the plan as Attachment
   2.1.2, if available.
- Developed. A plan has been written but has not yet been implemented. Include the plan as Attachment 2.1.2, if available.
- Implementing. A plan has been written and is now in the process of being implemented. The plan is included as Attachment 2.1.2.
- **Other. Describe:**

The Division of Child Care's Licensing Unit currently requires each child care facility to develop their own policy and procedures for responding to emergencies. This is implemented through rules & regulations for the specific facility type at the time of the original facility visit. This policy is reviewed again during supervisory visits thereafter.

# a) Describe the progress made by the State/Territory in planning for an emergency or disaster event with regards to the operation of child care and early childhood education programs.

The Division of Child Care is looking at introducing a rule under the General Rules For Operations for all facility types that would address the Continuity of Operations/Disaster Recovery Plan (COOP) and Pandemic Planning during the next revision.

### b) Describe provisions the Lead Agency has in place for the continuation of core child care functions during and after a disaster or emergency.

Currently the Division's COOP and Pandemic Plan allows for an emergency waiver process. The child care facility affected can call the Division requesting a waiver to any rule, receive a verbal approval and would later follow through with a written request. This would allow the facility to operating until the emergency has passed.

#### c) Describe efforts the Lead Agency has undertaken to provide resources and information to families and child care providers about ways to plan and prepare for an emergency or disaster situation.

Resources are currently listed at the Colorado Department of Human Services web page <u>http://www.cdhs.state.co.us/</u> along with the Division of Child Care web page <u>http://www.cdhs.state.co.us/childcare/</u> offering resources and current updated on COOP and Pandemic preparedness.

d) Describe how the Lead Agency is coordinating with other State/Territory agencies, private, and/or non-profit charitable organizations to ensure that child care and early childhood programs are included in planning, response, and recovery efforts.

The Office of Children, Youth & Family Services (Division of Child Care, Division of Child Welfare and Division of Youth Corrections) is completing its COOP and Pandemic Planning Guide. The guide allows for communicating and reporting to the appropriate "Lead" agencies as established by the Governor of Colorado. Information sharing and facilitating resources with the licensed providers (Private Sector) will be established as allowed by the Private Sector.

**2.1.3** Plan for Early Childhood Program Coordination. Lead Agencies are encouraged to develop a plan for coordination across early childhood programs. Indicate which of the following best describes the current status of your efforts in this area. Note: <u>Check only ONE</u>.

Planning. Are there steps under way to develop a plan?

**Ves, and 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.** 

- No.
- Developing. A plan is being drafted. Include the draft as Attachment 2.1.3 if available.
- Developed. A plan has been written but has not yet been implemented. Include the plan as Attachment 2.1.3 if available.
- Implementing. A plan has been written and is now in the process of being implemented. Include the plan as Attachment 2.1.3.
  - Other (describe):

#### a) Describe the progress made by the State/Territory in planning for coordination across early childhood programs since the date of submission of the 2008-2009 State Plan.

Coordination between the Lead Agency and partners continues through the work of the Early Childhood Comprehensive System (ECCS) grant held in the Colorado Department of Public Health and Environment, and administered in the Office of the Lieutenant Governor, with the creation of a strategic plan. This work has moved into the implementation phase with specific goals and tools being set and created that will move coordination between agencies to a higher level. Implementation is being phased in with differing timelines for different aspects. Changes to this work since the 2008-2009 State Plan are primarily reflected in the focus the Lieutenant Governor has brought to the work since assuming the administration of the ECCS grant in that office.

#### b) Indicate whether there is an entity that is, or will be, 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 ECCS 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, coordinates services with the Department of Education (CDE) on an Early Childhood Councils initiative that includes thirty councils that represent 90% of the state's counties and 99.4% of the state's population. The councils have the opportunity to apply for waivers of state regulations that create barriers to best service delivery for families, and to access resources to address council project planning and implementation costs. Some areas of focus for the councils include creating and implementing community coordination through effective collaborations; grants/loans to providers to assist in meeting state/local standards, such as creating full-day, full-year programs; developing and implementing new licensing models; and meeting staff development needs through a state credential and the development of local staff development plans. The councils are able to braid funding streams, including state funds from the Colorado Preschool and Kindergarten Program, federal *CCDF* funds and *Head* Start funds where allowable. Ongoing evaluation is a key feature of the expanded program. The Early Childhood Councils initiative has allowed communities statewide to identify and shape policy issues to improve child care for children and their families. Partners in councils include advocacy organizations, business / private sector entities, child care resource and referral agencies, community Organizations, economic development entities, emergency preparedness officials or experts, faith-based programs, foundations / trusts, Head Start associations, local school districts, medical groups / physicians, nonprofits / charitable organizations / United Way, parent organizations, representatives of federal programs, such as Child and Adult Care Food Program (Food and Nutrition Service, Department of Agriculture), Head Start Programs and/or Collaboration Offices (Office of Head Start, Department of Health and Human Services), and Healthy Child Care America (Department of Health and Human Services), representatives of other State Programs and Offices, such as higher education programs and institutions, infant / toddler programs, juvenile justice programs, the Office of the Governor, Office of the Lieutenant, school-age programs, child support enforcement agencies, TANF, and child welfare.

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

The work under the ECCS grant has not yet addressed the further development and implementation of the State's early learning guidelines. The Lead Agency, however, has created an Office of Professional Development that addresses systems work related to professional development of child care staff. Continued expected results of this work are that partners are engaged in the design and development of the comprehensive early childhood system Colorado is building.

# d) Describe how the State/Territory'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 ECCS grant. 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 (CCR&R), 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. Changes are not anticipated in the plan at this time.

#### 2.2 Public Hearing Process

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

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

May 13, 2009 – The Denver Newspaper Agency (statewide distribution) May 13, 2009 – Freedom Colorado Information, Inc. (El Paso County)

**b)** Manner of notifying the public about the public 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 (Durango, Glenwood Springs, Colorado Springs, Denver Metro held in Aurora) through our partner, Qualistar Early Learning's 15 local network agencies. Notice was also given through the Early Childhood Summit (with members and contacts of over 68,000), the statewide Early Childhood Councils electronic listserv, the listserv for the ECCS grant work administered in the Office of the Lieutenant Governor, county departments of social/human services, and licensing specialists.* 

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

Wednesday, May 13, 2009 Thursday, May 28, 2009 Tuesday, June 2, 2009 Tuesday, June 9, 2009

#### d) Hearing site(s):

Durango (Wednesday, May 13, 2009) Glenwood Springs (Thursday, May 28, 2009) Colorado Springs (Tuesday, June 2, 2009) Denver Metro – Aurora (Tuesday, June 9, 2009)

e) 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 survey was conducted addressing components of the plan to inform and to gather public input after the public hearings period.

f) Attach a brief summary of the public comment process as Attachment 2.2.

#### 2.3 Public-Private Partnerships

Does the Lead Agency conduct or plan to conduct activities to encourage publicprivate partnerships that promote private-sector involvement in meeting child care needs?  $\boxtimes$ 

- Yes. If yes, describe these activities or planned activities, including the results or expected results.
- No.

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 1995, under the name of Educare, 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. 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.

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. <u>Describe</u> the overall child care certificate process, including, <u>at a minimum</u>:

- a) a description of the form(s) 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.
- b) a description of how the certificate 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))

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-relative; in center based, group home (which is large family child care home in Colorado), family child care home and/or inhome care. Once the choice is made and the certificate completed, the parent and provider receive copies.

c) If the Lead Agency is also providing child care services through grants and contracts, estimate the proportion of §98.50 services available through certificates versus grants/contracts (this may be expressed in terms of dollars, number of slots, or percentages of services), and explain how the Lead Agency ensures that parents offered child care services are given the option of receiving a child care certificate. (§98.30(a) & (b)). 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 99.5% certificates, .5% contracts. d) Attach a copy of your eligibility worker's manual, policy handbook, administrative rules or other printed guidelines for administering the child care subsidy program as Attachment 3.1.1.

Note: If these materials are available on the web, the Lead Agency may provide the appropriate Web site address in lieu of attaching hard copies to the Plan. http://www.cdhs.state.co.us/childcare/cccap\_home.htm

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

Yes, and describe the type(s) of child care services available through the grant or contract, 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 types. Parental choice will not be impacted, as parents will continue to select the provider of their choice. While most contracts are developed with centers, they may be developed with family child care homes for infants and non-traditional hour care.

No.

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

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

**3.1.4** The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. 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.

#### 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.

**3.2.1** Provide a copy of your payment rates as Attachment <u>3.2.1</u>. The attached payment rates were or will be effective as of: *June 2009*.

**3.2.2** Are the attached payment rates provided in Attachment **3.2.1** used in <u>all</u> parts of the State/Territory?

- Yes.
- No, and other payment rates and their effective date(s) are provided as Attachment 3.2.3.

**3.2.3** Provide 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:

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

Completed January 2009, adopted June 2009

b) A copy of the Market Rate Survey instrument and a <u>summary of the</u> <u>results</u> of the survey are provided as Attachment 3.2.3. At a minimum, this summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

3.2.4 Does the Lead Agency use its <u>current</u> Market Rate Survey (a survey completed within the allowable time period -10/1/07 -9/30/09) to set payment rates?

**Yes.** 

 $\square$ 

**No.** The state used the current MRS to set State recommended guidelines for use by counties. The State does not set payment rates.

### 3.2.5 At what percentile of the <u>current</u> Market Rate Survey is the State payment rate ceiling set?

Colorado sets the state recommended guideline at the average 75<sup>th</sup> percentile of the Market Rate Survey, by like-county designator, type of provider and age of child. Counties utilize this information as a reference to set rates based on local conditions. The state mandated rate ceiling is that regardless of county-set reimbursement rates, no provider may be paid above that provider's market rate.

Note: If you do not use your current Market Rate Survey to set your rate ceilings or your percentile(s) varies across categories of care (e.g., type of setting, region, or age of children), describe and provide the range of variation in relation to your current survey.

Currently there are 80 rate types/age ranges in the state's 64 counties. The ranges in rate are by types of setting, age of children, hours of care provided, and types of care. County rates have not been adjusted to the market rate survey adopted in June 2009, thus a comparison of rates to the 75<sup>th</sup> cannot be assessed. Historically, counties have served families while reimbursing well below the 75<sup>th</sup> percentile as well as well above the 75<sup>th</sup> percentile for differing rates. It is expected that practice will continue. (See Market Rate Survey, Attachment 3.2.3 for variances in the 75<sup>th</sup>.)

# **3.2.6** Describe the relationship between the attached payment rates and the market rates observed in the current survey, including at a minimum how payment rates are adequate to ensure equal access to the full range of providers based on the results of the above noted local market rate survey: (§98.43(b))

Based on Colorado statute, counties are given authority to set their reimbursement rates for all provider 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 rates are varied to respond to family needs for care by type of care and age of children. Colorado has counties with higher costs of living that pay well above the guideline rate in order to increase accessibility for families in high quality settings. The county rates are the set maximum rate that will be paid, but no provider is paid above that provider's market rate.

### **3.2.7** Does the Lead Agency consider any additional facts to determine that its payment rates ensure equal access? (§98.43(d))

Yes. If, yes, describe.

No.

#### 3.2.8 Does the State have any type of tiered reimbursement or differential rates?

- Yes. If yes, describe:
- No. Colorado does not establish rates, but counties in Colorado may use tiered reimbursement rate systems to promote higher quality. Two large counties currently use tiered reimbursement.

### **3.2.9** Describe how the Lead Agency ensures that payment rates do not exceed the amount paid by the general public for the same service. (§98.43(a))

As part of the Fiscal Agreement that the provider signs with the county, all providers are required to provide a copy of their private pay rates to ensure that the county does not pay a rate that exceed the amount paid by the general public.

#### 3.3 Eligibility Criteria for Child Care

#### 3.3.1 Age Eligibility

a) 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 self-care? (658E(c)(3)(B), 658P(3), \$98.20(a)(1)(ii))

- Yes. If yes, define physical and mental incapacity in Appendix 2, and provide the upper age limit through age 18
- No.

b) 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.

#### **3.3.2 Income Eligibility**

<u>Complete columns (a) and (b) in Table 3.3.2 below based upon initial entry</u> <u>into the CCDF program</u>. Complete Columns (c) and (d) <u>ONLY IF</u> the Lead Agency is using income eligibility limits <u>lower</u> than 85% of the SMI.

Table 3.3.2 Income Eligibility

			IF APPLICABLE	
	(a)	(b)	Income Level if lower than 85% SMI	
Family Size	100% of State Median Income (SMI) (\$/month)	85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	(c) \$/month	(d) % of SMI [Divide (d) by (a), multiply by 100]
1	N/A	N/A		
2	\$4,294	\$3,650		
3	\$5,304	\$4,509		
4	\$6,315	\$5,367		
5	\$7,325	\$6,226		

Note: Table 3.3.2 should reflect maximum eligibility upon initial entry into the CCDF program.

a) Does the Lead Agency have "tiered eligibility" (i.e., a separate income limit for remaining eligible for the CCDF program)?

☐ Yes. If yes, provide the requested information from Table 3.3.2 and describe. . Note: This information can be included in a separate table, or by placing a "/" between the entry and exit levels.

🛛 No.

b) If the Lead Agency does not use the SMI from the most current year, indicate the year used: 2009

c) These eligibility limits in column (c) became or will become effective on:  $\underline{N\!/\!A}$ 

#### d) How does the Lead Agency define "income" for the purposes of eligibility? Provide the Lead Agencies definition of "income" for purposes of eligibility determination. (§§98.16(g)(5), 98.20(b))

For purposes of eligibility, income is determined by measuring the countable family income and size against eligibility guidelines. (See Section 3.920 in Rule for full definition.)

e) Is any income deducted or excluded from total family income (e.g., work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments)?

### Yes. If yes, describe what type of income is deducted or excluded from total family income.

A full list of income deducted or exclude from total family income can be accessed in Rule. Refer to section 3.920 <u>http://stateboard.cdhs.state.co.us:8008/CDHS/rule\_display\$.DisplayVolum</u> <u>e?p\_vol\_num=3</u>

No.

### f) Describe whose income is excluded for purposes of eligibility determination.

Earnings of a child are excluded unless they are a teen parent.

#### 3.3.3 Work/Job Training or Educational Program Eligibility

a) How does the Lead Agency define "working" for the purposes of eligibility? Describe the specific activities that are considered "working" for purposes of eligibility determination, including minimum number of hours. (§§98.16(f)(6), 98.20(b))

Working for the purposes of eligibility is defined as - Earning income in a full time, part time, temporary or self-employment basis. Job search for up to 180 days in a consecutive 12-month period is included under the work definition for Low-Income families, but not for TANF families.

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program?

☑ Yes. If yes, how does the Lead Agency define "attending job training or educational program" for the purposes of eligibility? Describe, the specific activities that are considered "job training and/or educational program", including minimum number of hours. (§§98.16(f)(3), 98.20(b))

> Attending job training or educational program for the purposes of eligibility is defined as - Enrollment in an educational institution or participation in a job training program such as on-the-job training, work experience, employer sponsored training. Educational programs included high school diploma, ESL, brush up basic skills or GED, and up to 48 months for post-secondary education that can include a certificate program or up to the first Bachelor's Degree. For TANF participants, job training and educational programs are considered work activities.

No.
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3.3.4 Eligibility	Based Upon	<b>Receiving or</b>	Needing to 1	<b>Receive</b> Pr	otective Services
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a) Does the Lead Agency provide child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

Yes. If yes, provide a definition of "protective services" in Appendix 2. Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

Yes	
No.	

No.

b) Does the Lead Agency 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 Lead Agency considers these children to be in protective services.)
- No.

#### 3.3.5 Additional Conditions for Determining CCDF Eligibility

Has the Lead Agency established any additional eligibility conditions for determining CCDF eligibility? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

- Yes, and the additional eligibility conditions are:(Terms mustbe defined in Appendix 2)
- No.

#### 3.4 Priorities for Serving Children and Families

**3.4.1** At a minimum, CCDF requires Lead Agencies to give priority for child care services to children with special needs, or in families with very low incomes. Complete Table 3.4.1 below regarding eligibility priority rules. For columns (a)

through (c), check only one box if reply is "Yes". Leave blank if "No". Complete column (e) only if you check column (d).

	.4.1 Priorities for Serving Children         How does the Lead Agency prioritize the eligibility categories in Column 1?         CHECK ONLY ONE         (a)       (b)       (c)         Priority       Same       Guaranteed		CHECK ONLY IF APPLICABLE (d) (e) Is there a How		
Eligibility Categories	over other CCDF- eligible families	priority as other CCDF- eligible families	subsidy eligibility	time limit on the priority or guarantee?	long is time limit?
Children with special needs*	$\square$				
Children in families with very low incomes*					
Families <u>receiving</u> Temporary Assistance for Needy Families (TANF)			$\boxtimes$		
Families transitioning from TANF					
Families at risk of becoming dependent on TANF					

Table 3.4.1 Priorities for Serving Children	<b>Table 3.4.1</b>	Priorities	for Serving	Children
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\* Required

**3.4.2 Describe how the Lead Agency prioritizes service for the following CCDFeligible 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)) Dependent upon appropriation, priority is given to serve a) children with special needs, which is described as children of teen parents, as well as b) children in families with income levels below 130% of the Federal Poverty Guideline.** 

**3.4.3** 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 given priority.

(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. Individual counties may set eligibility limits up to 85% of state median income, as well as transition families beyond the county set limit up to six months after they become ineligible, but not to exceed the 85% of SMI. This may provide a buffer of the real cost of child care for a period that will lower the risk of becoming dependent on TANF.

# **3.4.4** Has the Lead Agency established additional priority rules that are not reflected in the table completed for Section 3.4.1? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

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

No.

3.4.5 Does the Lead Agency serve all eligible families that apply?

Yes.

**No.** As a county-administered program, there may be times in a year that all eligible families in a given county are not served. This would only be true if the county has put a waiting list into effect due to lack of funding in that county.

**3.4.6** Does the Lead Agency have a waiting list of eligible families that they are unable to serve?

Yes. If yes, describe. At a minimum, the description should indicate:

a) Whether the waiting list is maintained for all eligible families or for certain populations?

### b) Whether the waiting list is maintained for the entire State/Territory or for individual localities?

#### c) What methods are employed to keep the list current?

**No.** Waiting lists are implemented at the county level. When it is necessary for counties to implement and manage waiting lists, the State supplies all counties with direction on waiting list implementation (Agency Letter #CC-09-08-P) and provides technical assistance to each county with an established waiting list. Counties determine if a certain population will be given priority for services. It is up to parents to maintain their name on a waiting list, keeping contact information current.

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

**3.5.1** The statute and regulations require Lead Agencies to establish a sliding fee scale that varies based on <u>income and the size of the family</u> to be used in determining each family's contribution (co-payment) to the cost of child care (§98.42).

a) Attach the sliding fee scale as Attachment 3.5.1.

b) Describe how the sliding fee scale is administered, including how the family's contribution is determined and how the co-payment is assessed and collected:

The co-payment is assessed by the eligibility worker based on the sliding fee schedule set by the Lead Agency. The parent contribution is collected by the provider. Refer to Section 3.905 of Rule for full schedule of sliding fee schedule. http://stateboard.cdhs.state.co.us:8008/CDHS/rule\_display\$.DisplayVolume?p\_v ol\_num=3

c) The attached sliding fee scale was or will be effective as of \_*October 2009* 

d) Does the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

Yes, and describe those additional factors: 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 by using the lower parental fee in each incremental breakpoint. (Denoted on Attachment 3.5.1 by double lines.)

There is also a 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 CCR 3.905(B)(11)(i.), 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.

No.

3.5.2 Is the sliding fee scale provided as Attachment 3.5.1 used in <u>all</u> parts of the State? (658E(c)(3)(B))

Yes.



No, and other scale(s) and their effective date(s) are provided as Attachment 3.5.2.

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:

\$1,550/month (the Lead Agency uses increments of \$50.00, reflected in Attachment 3.5.1. The actual poverty level for a family of three is \$1526/month.)

The Lead Agency must select 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. Describe 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.*

**3.5.4** Does the Lead Agency allow providers to charge parents the difference between the maximum reimbursement rate and their private pay rate?

Yes.

No. 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 and supported in Attachment 3.5.1. Providers who choose to participate in the Colorado Child Care Assistance Program, including both licensed and exempt family child care home providers, must sign fiscal agreements.

### **3.5.5** Describe how the co-payments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

The adopted parental fee schedule (included in its entirety as Attachment 3.5.1) is considered affordable for families as it keeps the fee at or below 10% of income for over 87% of families (those living at or below 130% of federal poverty guideline) on child care assistance, and then for those families whose income is above 130% of the federal poverty guideline it graduates up to 14% of income to mitigate the cliff effect to some extent, though it doesn't ever reach the total cost of market rate for these families. The full parent fee schedule can be accessed in section 3.905 at – http://stateboard.cdhs.state.co.us:8008/CDHS/rule display\$.DisplayVolume?p\_vol\_num=3

#### PART 4 PARENTAL RIGHTS AND RESPONSIBILITIES

#### 4.1 Application Process / Parental Choice

4.1.1 Describe 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)). At minimum, describe:

a) How parents are informed of the availability of child care services under CCDF (i.e., parental choice of child care services through a certificate or grant of contract) 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.

**b) How parents can apply for CCDF services** *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 and apply the Head Start redetermination period to those families.*.

**c)** What documentation parents provide as part of their application to determine eligibility *Parents must provide documentation of their income, work and/or school schedule, immunization information, and children's citizenship status. Some counties require cooperation with child support enforcement to maintain eligibility for Child Care Assistance.* 

d) 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.

### e) What steps the Lead Agency 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.

**f**) Attach a copy of your parent application for the child care subsidy program as Attachment 4.1.1. *Attachment 4.1.1 can be accessed at* <u>http://www.cdhs.state.co.us/childcare/Documents/4.1.1 Application For Services.doc</u>

### 4.1.2 Is the application process different for families receiving TANF?

**Yes, and describe how the process is different:** *TANF recipients do not complete an additional child care application, the Single Purpose Application that recipients completed to receive TANF assistance is used for child care eligibility also. A referral for child care assistance is completed by the TANF case manager and sent to Child Care staff so that Child Care Assistance can be provided. When a TANF recipient's case closes due to over income or being in training, a signed Statement of Responsibility Form is the only required form to receive child care for up to six months after leaving the TANF program.* 

## No.

**4.1.3 What is the length of eligibility period upon initial authorization of CCDF services?** *There is no limit to the length of eligibility; however, eligibility is redetermined every six months.* 

a) Is the initial authorization for eligibility the same for all CCDF eligible families?

- Yes.
- No and describe any variations that relate to the services provided (e.g., through collaborations with Head Start or pre-kindergarten programs or differences for TANF families):

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 or have been granted a waiver from the six-month period.

**4.1.4 Describe how the Lead Agency ensures that parents are informed about their ability to choose from among family child care and group home child 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 whom they would 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.

**4.1.5 Describe how the Lead Agency reaches out and provides services to eligible families with limited English proficiency, including how the Lead Agency overcomes language barriers with families and providers.** Some counties have forms in Spanish available for families who need them. For other languages, clients are referred by counties to their local refugee services for assistance in completing the application.

### 4.2 Records of Parental Complaints

**Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. (658E(c)(2)(C), §98.32))** Substantiated 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.

Substantiated complaints concerning exempt family child care home providers (those not required to be licensed and providing services to subsidized families) are completed by county departments of human services in coordination with the Division of Child Care. Substantiated complaints are kept in the Division of Child Care and made available to the public and counties upon request.

### 4.3 Unlimited Access to Children in Child Care Settings

**Provide a detailed description of the Lead Agency procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds.** (658E(c)(2)(B), §98.31)) *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 Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain Child Care

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: <u>Colorado Department of Human Services</u>

- "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 Targeted Funds and Set-Asides

Federal appropriations law has targeted portions of the CCDF for quality improvement and for services for infants and toddlers, child care resource and referral (CCR&R) and school-age child care. For each targeted fund, provide the following information.

#### 5.1.1 Infants and Toddlers:

Note: For the infant and toddler targeted funds, the Lead Agency must provide the maximum age of a child who may be served with such targeted funds (not to exceed 36 months).

### a) Describe the activities provided with these targeted funds Expanding Quality Infant Toddler Initiative (EOIT)- (Partially funded by ARRA through SFY 2010) Under a contract with the Colorado Department of Education, the Expanding Quality in Infant Toddler Initiative continues to be further developed and enhanced, steadily working towards the ongoing goal of increasing the quality and availability of infant toddler care throughout the state. The full-time EQIT Statewide Coordinator and six part-time EQIT Specialists provide training and technical assistance to child care providers, the EQ Community Teachers/Coaches, Touchpoints trainers, and Ounce Scale trainers. In addition, there are approximately 75 Infant Toddler trainers who conduct training in their local communities and are supported by the EQIT Statewide Coordinator and EQIT specialists. EQ activities are directly connected with local Early Childhood Councils and work with the Councils to increase awareness of infant toddler issues, identify needs and provide technical assistance is ongoing. we developed and began implementing Brazelton Touchpoints as an integral component at both the community and statewide level; and we added two infant toddler specialists to our EO system.

<u>EQ 48-hour Training - (Partially funded by ARRA through SFY 2010)</u> A core component of the EQ Initiative is the EQ 48-hour course of training, based on the work of the Program for Infant/Toddler Care (PITC), the Colorado Core Knowledge and Standards, and current evidence-based practice. This course is available and free of charge to center-based and family child care providers in 28 local communities across Colorado. Successful completion of this course meets licensing requirements for infant nursery supervisor and the specialized family child care licenses. The EQ course of training and course materials are available in Spanish. Through collaboration with local community colleges, college course credit is available to individuals enrolled in the EQ course, with additional assignments. This is an important "first-step" for many infant toddler caregivers who have had no formal higher education. Participants in EQ training also are able to access coaching, using the EQ RELATE coaching tool. This provides additional support to the caregivers in their workplace.

# EQ Training of Trainers (TOT) - (Partially funded by ARRA through SFY 2010)

EQ training and coaching is provided by EQ Community Teachers who have completed the 70-hour EQ Training of Trainers course. The EQ-TOT course is available to qualified individuals and teams from local communities, community college faculty, licensing specialists, and others interested in improving their knowledge and skills in infant toddler development and care. Many of these individuals also participate in the EQ Advanced Infancy Certification course, a 12-credit hour online graduate-level course that builds on the EQ Training of Trainers course material. Upon completion of the EQ Training of Trainers, individuals are able to replicate the EQ course in their local communities. Those who attend the 15-hour specialized training in the EQ RELATE Coaching Tool are also able to provide coaching for caregivers. A minimum of 4 additional advanced level professional development events is offered each year to those who complete the EQ TOT.

### Touchpoints - (Partially funded by ARRA through SFY 2010)

Funding and support is provided for Touchpoints training in three Colorado communities and to targeted statewide groups through the Touchpoints Specialty training team. This training is focused on strengthening parent-child relationships, building the knowledge and skills of the infant toddler workforce while strengthening connections among infant toddler professionals from a variety of disciplines and strengthening parent-child relationships. The EQ statewide coordinator and all Infant Toddler Specialists are trained in Touchpoints and intentionally infuse this philosophy in their ongoing work with caregivers, trainers, and community groups.

<u>Ounce Scale Assessment - (Partially funded by ARRA through SFY 2010)</u> The Ounce Scale Assessment for Infants and Toddlers is an important tool for infant toddler caregivers and is identified as an approved tool for use by Results Matter, Colorado's statewide assessment system for children birth-5. CCDF funds support a yearly Training of Trainers and ongoing training and technical assistance provided by EQ Infant Toddler Specialists for individuals, centers, family child care homes, and community groups who are using the Ounce Scale. An evaluation of results in the last plan period was that 21 individuals completed the Ounce Scale Training of Trainers and 540 individuals/programs received training and technical assistance in the use of this tool.

## b) Identify the entities providing the activities

Colorado Department of Education Local Early Childhood Councils

### c) Describe the expected results of the activities.

Expanding Quality Infant Toddler Initiative (EQIT) The expected results for 2010-2011 plan period are that the EQ Coordinator and the Infant Toddler Specialists will intentionally develop and implement a plan to expand their work with 30 local Early Childhood Councils and other statewide groups to coordinate quality efforts for infants and toddlers. A minimum of 2 trainings will be conducted for Early Childhood Councils on increasing quality in infant toddler care.

### <u>EQ 48-hour Training</u>

An evaluation of results in the last plan period was that 1060 additional trainees completed the full EQ 48-hour course of training, with 42 of those individuals completing the course in Spanish. Over 5000 hours of coaching were provided to local participants. The expected results in the 2010-2011 plan period are that approximately 1100 infant toddler caregivers will complete the full course of training and a minimum of 6000 hours of coaching will be conducted in the plan period.

### EQ Training of Trainers (TOT)

The expected result in this 2010-2011 plan period is that 50 individuals will complete the EQ Training of Trainers, with 40 of these individuals conducting EQ training in their local communities. The 10 others will infuse new learnings in their professional practice with infant toddler caregivers. Eight additional Advanced Level training, including EQ RELATE Coaching training, will be offered in the plan period, with approximately 240 individuals attending.

### **Touchpoints**

The expected results in the 2010-2011 plan period are that a minimum of seven Touchpoints Individual Level trainings (ILT) will be offered each year with approximately 150 individuals completing the full Touchpoints ILT. Information sessions on Touchpoints will continue to be offered to communities and statewide groups.

### Ounce Scale Assessment

The expected results in the 2010-2011 plan period are that a minimum of 20 individuals will complete the Ounce Scale Training of Trainers and approximately 40 individuals/programs will receive training and technical assistance in the use of this tool.

### 5.1.2 Resource and Referral Services:

# a) Describe the activities provided with these targeted funds - <u>(Partially</u> <u>funded by ARRA through SFY 2010)</u>

*Child care resource and referral activities using the targeted funds will be* conducted under contract with Qualistar Early Learning. Qualistar Early Learning, child care resource and referral service agency, coordinates and oversees community-based resource and referral agencies statewide. The state is divided into fifteen 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, and options available to parents through certificates, selecting quality child care, and child care issues, policies and practices in the State. An evaluation of results in the last plan period was that 38,195 referrals were made via phone and web usage to Colorado families with approximately 78% of surveyed respondents (n=829) indicating that the quality of the counseling and referrals was of "high quality". The targeted funds resource and referral funds will be used to support the expanded availability of quality care, inclusive child care and school-age 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. An evaluation of results in the last plan period was that 532 trainings and presentations were made across Colorado to assist local communities and health care providers more effectively engage with child care providers and children in the child care provider's care. 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-todate care health and safety practices.

#### b) Identify the entities providing the activities

Qualistar Early Learning

### c) Describe the expected results of the activities.

The expected results for resource and referral in the 2010-2011 plan period are 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.

The expected results under the 2010-2011 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.

### 5.1.3 School-Age Child Care:

- a) Describe the activities provided with these targeted funds 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. Individual EC Councils will use funds to support a variety of school age activities in addition to the development of a locally based early childhood systems capable of supporting and enhancing quality "out-of-school-time" programs. Some local EC Councils will be providing activities that
  - a. support professional development opportunities for providers;
  - b. develop written information to demonstrate how these programs can support the academic success of student

Some EC Councils will work with local and/or state-level school-age programs; for example, the Colorado Afterschool Network, a non-profit, nongovernmental entity, to continue to build effective communication and collaboration between "out-of-school time" programs and early childhood providers and programs.

### b) Identify the entities providing the activities

*Colorado Department of Education Local EC Councils* 

### c) Describe the expected results of the activities.

The expected result in the plan period is that a systems approach in collaboration with the existing infrastructure; e.g., Colorado Afterschool Network, EC Councils, 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 providers of early childhood services and school-based programs.

5.1.4 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 targeted funds) during the 1-year period: October 1, 2009 through September 30, 2010:

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

5.1.5 Check each activity in Table 5.1.5 that 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 targeted funds for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h)). CHECK ALL THAT APPLY.

Activity	Check if undertaking /will undertake	Name and type of entity providing activity	Check if non- governmen tal entity
Comprehensive consumer education	$\boxtimes$	Qualistar Early Learning, Child Care Resource and Referral Service	$\boxtimes$
Grants or loans to providers to assist in meeting State and local standards		CO Department of Education, Non-TANF State/County Agency	
Monitoring compliance with licensing and regulatory requirements		Lead Agency	
Professional development, including training, education, and technical assistance	$\boxtimes$	Community College of Denver, Non-TANF State/County Agency	
Improving salaries and other compensation for child care providers	$\boxtimes$	Qualistar Early Learning, Child Care Resource and Referral Service	$\boxtimes$
Activities to support a Quality Rating System		Qualistar Early Learning, Child Care Resource and Referral Service	

 Table 5.1.5 Activities to Improve the Availability and Quality of Child Care

Activity	Check if undertaking /will undertake	Name and type of entity providing activity	Check if non- governmen tal entity
Activities in support of early language, literacy, pre- reading, and early math concepts development		CO Department of Education, Non-TANF State/County Agency	
Activities to promote inclusive child care		Qualistar Early Learning, Child Care Resource and Referral Service	
Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children		Qualistar Early Learning, Child Care Resource and Referral Service	
Other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1) and (2))			
School Readiness     Quality Improvement     Program			
<ul> <li>Center for Social Emotional Learning in Young Children</li> <li>Early Childhood Council Advisory</li> </ul>		Lead Agency; Office of the Lieutenant Governor, Other –	
Team	$\square$	Executive Branch	$\boxtimes$

**5.1.6** For each activity checked in Table 5.1.5, a) describe the expected results of the activity. b) If you have conducted an evaluation of this activity, describe the results. If you have not conducted an evaluation, describe how you will evaluate the activities.

*Overview:* The Colorado Division of Child Care continues to work closely with other state-level and local stakeholders developing a systems-based to increase the quality of early care and education services to children and families. The systems-based approach

diverges from a program-based focus and begins to address the underlying issues that plague many, if not all, local communities in building effective, efficient, and sustainable quality services for children. A systems-based philosophy begins to address capacity issues that local communities must address before any long-term gains are made in the raising the quality of services to constituents and/or improved outcomes for children and families. More specifically, this approach is developmental in nature; communities are assessed through an application process and a menu of technical assistance and resources is made available to a particular community determined by the needs identified through the assessment. There are a variety of goal areas that each community must address over the course of its development; e.g., program quality, program availability, organizational, structure, governance, accountability, funding and finance, parent and family engagement, and professional development and marketing/communications. These communities must also produce strategic plans that address early childhood needs. *High functioning EC Councils have begun developing strategic plans that cross the four* early childhood domains: early care and education, health, mental health and family support. The long-term goal is to create and elevate local capacities to determine, develop, implement and evaluate effective, efficient early childhood programs that produce positive child outcomes on a community-wide basis and to reduce and/or outright eliminate issues of access based on affordability or geography. The Division of Child Care, in close partnership with the Colorado Department of Education and other state-level and local partners, will continue its work on developing a guide for early childhood communities that lists each component necessary for successfully addressing and developing an early childhood system. These "system components" are a "nuts and bolts" guide for taking a nascent early childhood community to a community that can easily demonstrate the connection between its efforts and an increased level of positive outcomes for its children.

This "needs-based" approach, based on a systems development philosophy, has changed the methodology that the Division of Child Care will be using to address quality issues in the State of Colorado. The Division of Child Care will continue to use its quality funds to support this work two different ways. First, the Division of Child Care is supporting the development of early childhood systems with direct funding to local Early Childhood Councils. This is administered and overseen in partnership with the Colorado Department of Education. Second, the Division of Child Care is providing funding for a variety programs that provide direct, complementary services and supports to the development of these local early childhood systems efforts. Those programs include, in no particular order: 1) child care resource and referral, 2) Healthy Child Care Colorado 3) TEACH Scholarships; 4) Quality ratings for child care facilities; 5) Shared services program model for EC Councils; 6) Expanding Quality Infant/Toddler program; 7) Touchpoints; 8) Ounce Scale Assessment; 9) Center for Social Emotional Development for Young Children; 10)) professional development through the Colorado Office of Professional Development; and, 11) the Colorado School Readiness program which is administered directly by the Division of Child Care. Given this multi-faceted, systemsbased approach and its underlying context, it should be understood that all of the activities listed in the chart under 5.1.5 will be undertaken at some level by some

combination of communities as the need is identified and addressed by those communities.

<u>Comprehensive Consumer Education- (Partially funded by ARRA through SFY 2010)</u> a) Activities - 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 previous years indicates that communication is a key component of successful early childhood programs. 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 early childhood services are a dynamic population. Information about early childhood services must be updated frequently to ensure families are receiving relevant and timely information about services available to them.

Consumer education information is 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 Division of Child Care utilizes an 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.

Qualistar Early Learning publishes a parent guide to choosing quality child care, which is distribute broadly to parents. The statewide resource and referral system also works continually 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 in the plan period 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.

b) Results - An evaluation of results in the last plan period was that 46,418 referrals were made via phone and web usage to Colorado families. The expected results in the 2010-2011 plan period 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- (Partially</u> <u>funded by ARRA through SFY 2010)</u>

a) Activities - The Division of Child Care contracts with the Colorado Department of Education (CDE) for activities and resources intended to assist in meeting state or local standards. CDE, a state agency, continues to work closely with the Division of Child Care on the Early Childhood (EC) Councils program focused on the creation of locally based early childhood systems. There are 30 EC Council communities representing 55 counties (out of 64) in Colorado. Grant/loans to providers to assist in meeting state/local standards, such as creating full-day, full-year programs, and meeting staff development needs initiatives are included in some of the early childhood councils' work.

*b)* Evaluation Plan - The expected results in the 2010-2011 plan period include:

- Increased number of facilities rated by with an approved child care assessment instrument; e.g., Environmental Rating Scales, Qualistar Early Learning Rating system, NAEYC accreditation;
- Increased number of child care providers that offer good to high quality child care; and,
- Decreased number of child care providers offering marginal or poor child care services.
- *CDE* will address infant/toddler care issues by providing training and technical assistance to child care providers at facilities around the state.

### Improving the Monitoring of Compliance with Licensing and Regulatory Requirements

a) Activities - 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 inspects 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 colocated, 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.

b) Results - An evaluation of results in the last plan period was that child care facilities were inspected as scheduled. Expected results in the 2010-2011 plan period 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.

### <u>Training, Education and Technical Assistance- (Partially funded by ARRA through SFY</u> 2010)

a) Activities - 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, and as was previously noted, the Division of Child Care contracts with the CDE to develop, implement, and support the creation of EC Councils across the state. At least a portion of each EC Council's work is focused on developing and/or improving training and professional development opportunities for child care providers and families in their communities. Local EC Council activities include developing a strategic plan for professional development, coordinating and/or presenting workshops and courses, providing scholarships for workshops and conferences; developing 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: responsive training and technical assistance for providers (including assistance with infant/toddler and training resource issues); 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 <u>Core Knowledge and Standards: A Guide for Early Childhood Professional Development</u>, developed collaboratively over a three-year period, and published in 1995, by the Division of Child Care, CDE'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 <u>Core Knowledge and</u> <u>Standards: A Guide for Early Childhood Professional Development</u> was expanded in 2005 for use in school-age programs. This system is designed to improve 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 Office of Professional Development 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 was made available statewide. An evaluation of results in the last plan period was that as of May 2009, 2,467 individuals had received an Early Childhood Professional Credential. The expected results in the plan period 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. An evaluation of results in the last plan period was that child care providers were able to access required training. The expected results in the plan period are continued availability of required trainings through qualified trainers.

The Division of Child Care typically holds an annual state conference on child care. Conference attendees are, at a minimum, 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. An evaluation of results in the last plan period was that county and state staff received three days of training.

b) Results – (Results in last plan period are referenced by activities for this section.) The expected results in the 2010-2011 plan period 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 Colorado families and child care facilities.

# Improving Salaries and Other Compensation for Child Care Providers - (Partially funded by ARRA through SFY 2010)

a) Activities - 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.

b) Results - An evaluation of results in the last plan period was that there were a total of 118 enrollees carrying 561 credit hours in 16 different higher education institutions around the state for FFY 2008. The results for FFY 2009 were 117 recipients carrying 610 credit hours in 15 different higher education institutions. The expected results in the 2010-2011 plan period are increased professionalism of the field through higher education.

### Activities to support a Quality Rating System

The Division of Child Care continues to be one of the strongest proponents of quality rating activities in Colorado. DCC policies and programs directly support three quality ratings based activities.

• a) Activity - The School Readiness Quality Improvement Program will continue to use the Qualistar Rating System as the metric for measuring program improvement within child care facility classrooms.

*b) Results - Evaluation of program results will continue to rely on number of participants and overall improvement- based on quality ratings – over the course of the 3 year program;* 

• a) Activity - ARRA funds will be used over the next year to support quality ratings for marginal child care facilities; "marginal" being nominally defined as facilities in danger of not meeting licensing requirements. A process for reviewing and recommending particular facilities for the quality rating system is still in development.

b) Results - Evaluation of program results will be based, at a minimum, on number of facilities that participate, number of facilities that improve performance over time (via an initial and a follow-up quality rating), and number of facilities that cease providing care (either voluntarily or through adverse action on the part of DCC Licensing staff.)

• a) Activity - The DCC will also be piloting a new program in FFY 2010 in partnership with Qualistar Early Learning and the Merage Foundation. The project will identify and develop more efficient processes for managing both information and work activities between entities involved in licensing, quality ratings and quality improvement. At a minimum, this pilot project will include child care licensing, early childhood councils, resource and referral agencies, and quality ratings providers in two different early childhood council communities in Colorado; though it is expected that there will be a number of other stakeholders involved in this project.

b) Result - Evaluation parameters will consist of demonstrable connection between currently discrete processes; e.g., licensing and quality ratings, demonstrably direct impacts on participating child care facilities (the following areas might offer indicators of positive indicators – though these indicators have yet to be determined):

- *improved quality and availability of technical assistance,*
- standards for facility participation in program,
- > increased consistency in expectations for programs to improve quality,
- creation of "critical" indicators that trigger immediate response from partners to assist participating facilities.
- Develop and implement a triage approach that defines how, who, and when technical assistance will be provided to participating providers by partner organizations.

Activities in support of early language, literacy, pre-reading, and early math concepts development

These activities are described in Section 5.2 of this plan.

Activities to promote inclusive child care

- a) Activities 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.
- b) Results An evaluation of results in the last plan period was that program was being operated in one large Service Delivery Area (SDA) in Colorado but was assisting with salary costs for the Inclusion Specialist and resource visits. The SDA is now able to provide limited "mini inclusion scholarships". The scholarships are available to assist with purchase of materials, equipment, or training relative to a child's special needs. The family member works with the child care provider to determine best use of the funds and to complete the application, which is made jointly on behalf of the child, with the resource following the child when possible. 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

a) Activity - 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.
b) Results - An evaluation of results in the last plan period was that that 494 trainings and presentations were made across Colorado to assist local communities and health care providers more effectively engage with child care providers and children in the child care provider's care. 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

• School Readiness Quality Improvement Program (SRQIP) -

a) Activity 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 an annual 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. b) Results - An evaluation of results in the last plan period determined that seventy-six percent (76%) of the participating sites were rated high quality by the third rating period. This is compared to only thirty-seven (37%) who were rated high quality when the program began. The expected results in the plan period 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.

• Center for the Social Emotional Learning in Young Children -

a) Activities - The Colorado Department of Human Services through its Division of Behavioral Health, in partnership with the Divisions of Child Care and Development Disabilities, is developing a center that will provide a centralized point of contact, coordination, and technical support for early childhood social-emotional services to families. The primary work of the center will be based on two national initiatives currently being implemented in Colorado:

 The Pyramid Model Approach for Promoting Social and Emotional Development of Infants and Young Children; and,
 The SpecialQuest Birth-Five Approach to Early Childhood Inclusion.

b) Results - At a minimum, the center will be responsible for the following activities:
 o Promote early childhood social and emotional competence and inclusive practices in early care and learning environments.

• Integrate the SpecialQuest and Pyramid Model approaches in order to provide more effective and responsive social-emotional to families with young children;

• Provide technical assistance and support to early care and learning programs in order to both include and, effectively meet the needs of, children with special needs. These efforts should have an emphasis on children with social and emotional challenges. This technical assistance and support shall be provided, but not be limited to, the following types of programs:

- Headstart;
- Child Care;
- *Early Intervention/Part C; and,*
- Preschool.

c) Evaluation - The Center will collect child and program outcome data including the use of the Social Skills Rating Scale (SSRS) and other relevant child and program outcomes. The Center will also be responsible for

> Developing a voluntary data system for all programs using the Pyramid Model.

Collecting and analyzing data from program sites regularly.

> Providing training and technical assistance to programs and communities on collecting, interpreting and using data.

> Developing additional data that support the effectiveness of the Pyramid Model and SpecialQuest Approaches

• Early Childhood Council Advisory Team -

The Early Childhood Councils Advisory Team, created with the passage of HB-1062 in 2007, provides yet another independent stakeholder group to assist Early Childhood (EC) Councils in Colorado. The primary responsibility of the ECCAT is to provide policy insight and recommendations to the Department specific to Early Childhood Councils. Its initial work has focused on overseeing and improving the waiver process for EC Councils, making recommendations for the EC Council application process, providing additional feedback and expert advice on the provision of technical assistance to EC Councils, and the creation of a work plan for evaluating the effectiveness of EC Councils. The ECCAT meets monthly. Monthly meetings are augmented by work in the Waiver Review, Technical Assistance, Evaluation, and Steering committees respectively. ECCAT makes recommendations to the Department on a timely basis based on input from EC Council stakeholders, committee work, and consensus of the ECCAT members.

#### 5.2 Early Learning Guidelines and Professional Development Plans

5.2.1 Status of Voluntary Early Learning Guidelines. Indicate which of the following best describes the current status of the State's efforts to develop, implement, or revise research-based early learning guidelines (content standards) for <u>three-to-five year-olds</u>. NOTE: Check only one box that best describes the status of your State/Territory's three-to-five-year-old guidelines.

- Planning. The State is planning for the development of early learning guidelines. Expected date of plan completion: \_\_\_\_\_If possible, respond to questions 5.2.2 through 5.2.4.
- Developing. The State is in the process of developing early learning guidelines. Expected date of completion: \_\_\_\_\_ If possible, respond to questions 5.2.2 through 5.2.4.
- 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 5.2.1, if available.
- 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 5.2.1.
- **Revising.** The State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as Attachment 5.2.1.

The Colorado Department of Education is in the process of finalizing the revised early learning guidelines. The draft ELG, as well as the original Building Blocks document that was used as a base for the revised

guidelines, can be accessed at -

http://www.cde.state.co.us/early/EarlyLearningStandards.htm Throughout the standards revision process it has been important that the P-3 standards in each of the 13 content areas (Reading, writing and Communicating, Mathematics, Science, Music, History, Economics, Geography, Civics, World Languages, Health and Physical Education, Dance, Theatre and Visual Arts) connect to the following:

The 21<sup>st</sup> century skills of problem solving/critical thinking, information management, collaboration, self-direction, and innovation. The five developmental/learning domains:

- Social and emotional development
- Language development and communication
- Approaches to learning
- o Cognitive development
- *Physical well-being and motor development*

The draft School Readiness Indicators (based on Colorado's Building Blocks)

The revision process included an exhaustive amount of feedback and involvement. A Colorado stakeholder group included Dr. Ginger Maloney and Charlotte Brantley to advise on the overall process and later, thirteen content specific subcommittees. Each group included at least one early childhood representative. The P-3 subcommittee of the P-20 Council served in an advisory role to these work groups. The subcommittees received a copy of the Building Blocks and the draft School Readiness Indicators as resources.

These subcommittees worked with their constituents from around the state over the course of eight months to create these standards. This year, the process included city tours seeking public feedback. Over 21 cities have been included in the conversation. Listening logs that invite line by line edits have been employed and are still being used. It is believed to be one of the most inclusive processes in the nation.

### Other. Describe:

a) Describe the progress made by the State/Territory in developing, implementing, or revising early learning guidelines for early learning since the date of submission of the 2008-2009 State Plan. Efforts to develop early learning guidelines for children birth to three or older than five may be described here.

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.

Effective July 15, 2007, the CDE has adopted the Rhode Island Early Learning Guidelines in their entirety. CDE has obtained permission to disseminate these standards statewide under the title "Colorado Building Blocks to the K-12 Content Standards". The initial document will include the early learning guidelines, now referred to as the Building Blocks, and the "expectations" for each Building Block. Over the next 12 to 18 months, the CDE will develop expanded documents for each domain which model the original Colorado Building Blocks format including expanded descriptions of how adults and the environments support each early learning guideline and several examples of each. Training curriculum will be developed to support the implementation and linkages to state outcomes measurements work.

b) If developed, are the guidelines aligned with K-12 content standards or other standards (e.g., Head Start Child Outcomes, State Performance Standards)?

### Yes. If yes, identify standards:

The new Colorado Building Blocks have been crosswalked to the Colorado Model Content Standards for K-12, the Head Start Child Outcomes and the OSEP Child Outcomes. They have also been linked to curricula commonly used in Colorado and to statewide assessments being used for child outcomes measurement and reporting.

### No.

### c) If developed, are the guidelines aligned with early childhood curricula?

**Yes. If yes, describe:** The new Building Blocks have been cross walked to curricular goals of curricula commonly used in Colorado including The Creative Curriculum and the High/Scope Curriculum.

No.

d) Have guidelines been developed for children in the following age groups:

Birth to three. Guidelines are included as Attachment 5.2.1

Birth to five. Guidelines are included as Attachment 5.2.1 Five years or older. Guidelines are included as Attachment 5.2.1

If any of your guidelines are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan): http://www.cde.state.co.us/early/EarlyLearningStandards.htm

**5.2.2** Domains of Voluntary Early Learning Guidelines. Do the guidelines for three-to-five-year-olds address language, literacy, pre-reading, and early math concepts?

- Yes.
- No.

a) Do the guidelines for children three-to-five-year-olds address other domains such as social/emotional, cognitive, physical, health, or creative arts?

- Yes. If yes, describe.
  - Approaches to Learning
  - Social and Emotional Development
  - Language Development and Communication
  - Literacy
  - Mathematics
  - Science
  - Creativity
  - Physical Health and Development
  - No.

### 5.2.3 Implementation of Voluntary Early Learning Guidelines.

a) Indicate which strategies the State used, or expects to use, in implementing its early learning guidelines.

Check all that apply:

**Disseminating materials to practitioners and families** 

**Developing training curricula** 

**Partnering with other training entities to deliver training** 

Aligning early learning guidelines with licensing, core

competencies, and/or quality rating systems

Other. Describe: Policy and training curriculum will be developed to support linkages between the use of the Building Blocks and Colorado Results Matter that requires ongoing assessment and reporting of child outcomes data.

b) Indicate which stakeholders are, or are expected to, actively support(ing) the implementation of early learning guidelines:

**Check all that apply:** 

**Publicly funded (or subsidized) child care** 

Head Start

**Education/Public pre-k** 

**Early Intervention** 

Child Care Resource and Referral

Higher Education

- **Parent Associations**
- **Other. Describe:**

c) Indicate the programs that mandate or require the use of early learning guidelines

**Publicly funded (or subsidized) child care** 

**Head Start** 

**Education/Public pre-k** 

**Early Intervention** 

Child Care Resource and Referral

\_\_\_\_\_ Higher Education

**Parent Associations** 

Other. Describe:

# d) Describe how cultural, linguistic and individual variations are (or will be) acknowledged in implementation.

The new Building Blocks are developmentally appropriate and allow for individual variations in rates of development. Building Blocks materials, including professional development materials, will be made available in English and Spanish. The content of the new Building Blocks has been reviewed for cultural sensitivity. Cultural competence goals will be embedded in training content as will considerations regarding inclusion and support of children with developmental disabilities.

# e) Describe how the diversity of child care settings is (or will be) acknowledged in implementation.

The expanded Building Blocks documents will include descriptions of how adults and the environment support each expectation as well as examples. This content will reflect a variety of child care settings.

Materials developed to support implementation of the guidelines are included as Attachment 5.2.3. If these are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

Math: http://www.cde.state.co.us/early/downloads/MathBB.pdf

Literacy: http://www.cde.state.co.us/early/downloads/building\_blocks4-26.pdf

### 5.2.4 Assessment of Voluntary Early Learning Guidelines. As applicable, describe the State's plan for:

a) Validating the content of the early learning guidelines

Partners in the Rhode Island early childhood system completed an extensive review in order to establish validity of the early learning guidelines content. The CDE selected the Rhode Island Early Learning Guidelines for use in Colorado as a result of the apparent validity of the contents as established within the general field of early childhood as well as a determination that the content met Colorado's needs specifically.

- b) Assessing the effectiveness and/or implementation of the guidelines A long-term plan will be developed within the next 24 months to assess the effectiveness of the guidelines.
- c) Assessing the progress of children using measures aligned with the guidelines

*Through Colorado Results Matter*, 30,000 children served in licensed early care and education sites throughout the state are currently being assessed using a choice of three assessment systems that are aligned with the new Building Blocks.

d) Aligning the guidelines with accountability initiatives

Through Results Matter, data is being collected and reported regarding the efficacy of Colorado's early care and education programs including Head Start, the Colorado Preschool and Kindergarten Program and preschool special education. This information will represent an integration of child progress data, family outcomes information and program quality analysis.

Written reports of these efforts are included as Attachment 5.2.4. If these are available on the web, provide the appropriate Web site address (reports must still be attached to Plan): The Colorado Department of Education does not have written reports of these efforts.

5.2.5 Plans for Professional Development. Indicate which of the following best describes the current status of the Lead Agency'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. NOTE: Check ONLY ONE box that best describes the status of your State's professional development plan.

Planning. Are steps underway to develop a plan?

Yes, and describe the entities involved in the planning process, 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.

No.

- Developing. A plan is being drafted. The draft or planning documents are included as Attachment 5.2.5, if applicable.
- Developed. A plan has been written but has not yet been
- \_\_\_\_\_ implemented. The plan is included as Attachment 5.2.5, if applicable.
- Implementing. A plan has been written and is now in the process of being implemented, or has been implemented. The plan is included as Attachment 5.2.5.
- Revising. The State previously developed a professional development plan and is now revising that plan, or has revised it since submitting the 08-09 State Plan. The revisions or the revised plan are included as Attachment 5.2.5.
- Other. Describe:

#### a) Describe the progress made by the State in planning, developing, implementing, or revising the professional development plan since the date of submission of the 2008-2009 State Plan.

The state professional development plan is not under the purview of the state CCDF lead agency. Based on recommendations of the now defunct Early Childhood State System Team's Professional and Workforce Development Task Force, an RFP was issued in SFY 2006. The Community College of Denver applied for and received the competitive grant to be the Colorado Office of Professional Development. Implementation began in March 2006. The attached Professional Development Work Plan (Attachment 5.2.5) delineates goals, objectives, and scope of work including projects, tasks, activities, and timelines associated with the work of the Office of Professional Development for the 2010-11 State Plan.

b) If developed, does the plan include (Check EITHER yes or no for each item):

	Yes	No
Specific goals or desired outcomes	$\square$	
A link to Early Learning Guidelines		$\boxtimes$
Continuum of training and education to form a career path	$\square$	
Articulation from one type of training to the next		$\square$
Quality assurance through approval of trainers	$\square$	
Quality assurance through approval of training content	$\square$	
A system to track practitioners' training		$\boxtimes$
Assessment or evaluation of training effectiveness		$\boxtimes$
State Credentials – Please state for which roles (e.g. infant and toddler credential, directors' credential, etc.)		

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**x** 7

# Specialized strategies to reach family, friend and neighbor caregivers

$\square$

# c) For each Yes response, reference the page(s) in the plan and briefly describe.

<u>Specific goals or desired outcomes</u>: The Office of Professional Development is charged with implementing the following goals: 1) Develop and support use of early learning standards by families, programs and\professionals - page 1 of Plan; 2) Develop promote and support high quality professional development and formal education for adults working with children – page 2 of Plan; 3) Improve financial sustainability and governing efficiency of early learning programs and infrastructure – page 3 of Plan; 4) Build and support partnerships – page 4 of Plan; 5) Fund and invest – page 4 of Plan; 6) Change Policy – page 4 of Plan; 7) Build Public Engagement – page 4 of Plan; 8) Share Accountability – page 5 of Plan; 9) Generate Education and Leadership Opportunities – page 5 of Plan.

<u>Continuum of training and education to form a career path</u>: 1) Early Childhood Professional Credentials provide a career path –page 1 of Plan and on our website <u>www.coloradoofficeofprofressionaldevelopment.org</u> 2) Managing online learning and developing appropriate courses help providers access the training needed along the pathway – page 2 of the Plan; 3) Work on seamless articulation from two year to four year colleges will enhance the career path – page 3 of Plan; 4) distribution of the Office's Career Pathways brochure promotes available in Colorado – page 5 of the Plan and a PDF on website www.coloradoofficeofprofressionaldevelopment.org.

Quality assurance through approval of trainers:

Colorado has a voluntary trainer approval system with 131 trainers having been approved to date. This work will continue through June 2011 - page 5 & 6 of the Plan.

<u>Quality assurance through approval of training content:</u> This work has begun and will be expanded SFY 2010 and SFY 2011 – page 5 & 6 of the Plan.

<u>State Credentials</u>: Colorado established a tiered voluntary early childhood professional credential, which is issued by the Office of Professional Development and the Colorado Department of Human Services. The second level of the Credential is equal to the required director qualifications; there is an infant and toddler endorsement. SFY 2010, the interdisciplinary social emotional specialist credential will be implemented based the developed social and emotional body of core knowledge and standards – page 1 of the Plan and on website

 $\underline{http://coloradoofficeofprofessionaldevelopment.org/index.cfm?PID=1332\&ID=5}{454,20142,0}$ 

# d) For each No response, indicate any plans the Lead Agency has to incorporate these components.

The Lead Agency does not have plans to incorporate components into the Prof. Dev. Plan due to the fact that this work is not under the purview of the Lead Agency. However, the Office of Professional Development has identified plans here for these components that are not a part of the plan at this time.

<u>A link to Early Learning Guidelines:</u> The Office of Professional Development will develop a crosswalk between Colorado's Core Knowledge and Standards and the Colorado Department of Education's Early Leaning Guidelines once they are revised.

<u>A system to track practitioners' training</u>: The Office of Professional Development is working with the Colorado Department of Public Health and Environment to build out a web-based training platform that would track training for early childhood providers.

<u>Assessment or evaluation of training effectiveness</u>: Due to the fact that funding levels are not adequate to provide for assessment, there are no plans to do so at this time.

<u>Specialized strategies to reach family, friend and neighbor caregivers:</u> Due to the fact that funding levels are not adequate to provide for expansion into this arena, there are no plans to do so at this time.

# e) Are the professional development opportunities described in the plan available:

	Yes	No
Statewide	$\square$	
To Center-based Child Care Providers	$\square$	
To Group Home Providers	$\square$	
To Family Home Providers	$\square$	
To In-Home Providers	$\square$	
<b>Other (describe): ):</b> Early Childhood Stakeholders, Early Childhood Social/Emotional Specialists, Resource and Referral Specialists		

Note: Check <u>either</u> yes or no for each item):

# f) Describe how the plan addresses early language, literacy, pre-reading, and early math concepts development.

*Through a collaborative effort the Office of Professional Development has developed (1996) and revised (2007) <u>Colorado's Core Knowledge and Standards:</u>* 

<u>A Guide for Early Childhood Professional Development</u>. The standards cover the following areas: Child Growth and Development; Health Nutrition and Safety; Developmentally Appropriate Practices; Guidance; Family and Community Relationships, Cultural and Individual Diversity; Professionalism; and Administration and Supervision. Early language, literacy, pre-reading, and early math concepts development are included in the Core Knowledge and Standards.

g) Are program or provider-level incentives offered to encourage provider training and education?

- Yes. Describe, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts. Colorado established a voluntary early childhood professional credential, which is issued by the Office of Professional Development and the Colorado Department of Human Services. This tiered credential system is based on Colorado's Core Knowledge and Standards. The Credentials recognize increased knowledge and experience. Ongoing professional development is needed to renew credentials every five years. Many of the Early Childhood Councils provide financial incentives for providers who achieve a professional credential.
- No. Describe any plans to offer incentives to encourage provider training and education, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts?

h) As applicable, does the State assess the effectiveness of its professional development plan, including the achievement of any specified goals or desired outcomes?

- Yes. Describe how the professional development plan's effectiveness/goal is assessed.
- No. Describe any plans to include assessments of the professional development plan's effectiveness/goal achievement. Due to the fact that funding levels are not adequate to provide for assessment, there are no plans to do so at this time.

# i) Does the State assess the effectiveness of specific professional development initiatives or components?

Yes. Describe how specific professional development initiatives or components' effectiveness is assessed.

No. Describe any plans to include assessments of specific professional development initiatives or components' effectiveness. Due to the fact that funding levels are not adequate to provide for assessment, there are no plans to do so at this time.

j) As applicable, does (or will) the State use assessment to help shape or revise its professional development plan?

- Yes. Describe how assessment informs the professional development plan.
- No. Describe any plans to include assessment to inform the professional development plan. Due to the fact that funding levels are not adequate to provide for assessment, there are no plans to do so at this time.

## 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. Note: This database typically contains information on licensing requirements for meeting State or local law to operate (§98.40). This database does not contain *registration* or *certification* requirements specific only to participation in the CCDF program.

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/.

CCDF regulations (§98.2) define the following categories of care:

- Center-based child care provider: Provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.
- Group home child care provider: Two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.
- Family child care provider: One individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work.
- In-home child care provider: Individual who provides child care services in the child's own home.

### 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 per the NRCHSCC's compilation? Note: Some States use the term certification or registration to refer to their licensing regulatory process. Do not check "Yes" if center-based providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.
  - 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:

a) The prevention and control of infectious disease (including ageappropriate immunizations)

- b) Building and physical premises safety
- c) Health and safety training

d) Other requirements for center-based child care services provided under the CCDF

- 6.2 Health and Safety Requirements for Group Home Child Care 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? Note: Some States use the term certification or registration to refer to their licensing regulatory process. Do not check "Yes" if group home child care providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

- 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.

N/A. Group home child care is not a category of care in this State. Skip to Question 6.3.1

- 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:

a) The prevention and control of infectious disease (including ageappropriate immunizations)

- b) Building and physical premises safety
- c) Health and safety training

d) Other requirements for group home child care services provided under the CCDF

#### 6.3 Health and Safety Requirements for Family Child Care 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? Note: Some States use the term certification or registration to refer to their licensing regulatory process. Do not check "Yes" if family child care providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

- **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))
  - 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:

### a) 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.

### b) 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.

c) Health and safety training

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

# d) Other requirements for family care child care services provided under the CCDF

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

Note: Before responding to Question 6.4.1, check the NRCHSCC's compilation of licensing requirements to verify if <u>in-home child care</u> as defined by CCDF and your State is covered. If not, check no for 6.4.1. Do not check "Yes" if in-home child care providers simply must

*register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

- 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?
  - **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))
  - 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:

### a) 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.

### b) 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.

### c) Health and safety training

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

d) Other requirements for child care services provided under the CCDF

#### 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 a) describes those requirements and b) identifies the relatives they apply to: *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

6.6.1 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), \$\$98.40(a)(2), 98.41(d)) Describe how health and safety requirements are effectively enforced, including at a minimum:

a) 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 indicate the provider categories 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 three years.

<b>No</b>
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#### b) Are child care providers subject to background checks?

# Yes, and indicate the types of providers subject to background checks and 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 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 requires criminal background checks of exempt family child care home providers who are publicly-funded for services provided. These background check requirements are the same as for family child care homes.

# No.

c) 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 describe 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.
- d) Describe any 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 riskbased 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):

- 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.

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

(Only the Territories complete Part 7)

CCDF regulations (§98.2) define the following categories of care:

- Center-based care: Provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.
- Group home child care provider: Two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.
- Family child care provider: One individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work.
- In-home child care provider: Individual who provides child care services in the child's own home.
- 7.1Health and Safety Requirements for Center-Based Providers in the Territories(658E(c)(2)(F), §98.41(a), §98.16(j))
  - 7.1.1 For all <u>center-based</u> care, the following health and safety requirements apply to child care services provided under the CCDF for:

a) The prevention and control of infectious disease (including ageappropriate immunizations)

- b) Building and physical premises safety
- c) Health and safety training
- d) Other requirements for child care services provided under the CCDF

# 7.2Health and Safety Requirements for Group Home Child Care Providers in the<br/>Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

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

a) The prevention and control of infectious disease (including ageappropriate immunizations)

- b) Building and physical premises safety
- c) Health and safety training
- d) Other requirements for child care services provided under the CCDF
- 7.3 Health and Safety Requirements for Family Child Care Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))
  - 7.3.1 For all <u>family child care</u>, the following health and safety requirements apply to child care services provided under the CCDF for:

a) The prevention and control of infectious disease (including ageappropriate immunizations)

- b) Building and physical premises safety
- c) Health and safety training
- d) Other requirements for child care services provided under the CCDF
- 7.4 Health and Safety Requirements for In-Home Child Care Providers in the <u>Territories</u> (658E(c)(2)(F), §98.41(a), §98.16(j))
  - 7.4.1 For all <u>in-home</u> care, the following health and safety requirements apply to child care services provided under the CCDF for:

a) The prevention and control of infectious disease (including ageappropriate immunizations)

b) Building and physical premises safety

c) Health and safety training

d) Other requirements for child care services provided under the CCDF

#### 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

7.6.1 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), \$\$98.40(a)(2), 98.41(d)) Describe how health and safety requirements are effectively enforced, including at a minimum:

a) 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 indicate the provider categories subject to routine unannounced visits and the frequency of those visits:

	No.
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b) Are child care providers subject to background checks?

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

No.

c) 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 describe the Territory's reporting requirements and how such injuries are tracked (if applicable):

	No.
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d) Describe any 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 CCDF PROGRAM ASSURANCES AND CERTIFICATIONS

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

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable.
   (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (6) that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

(1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))

- (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/or priority for CCDF-funded child care services, Lead Agencies must define the following *italicized* terms. (658P, 658E(c)(3)(B))

- *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.
- *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) –

A developmental disability which is attributed to mental retardation, cerebral palsy, epilepsy, autism, or a neurological impairment and is verified by a professional. A physical handicap, substantiated by a medical professional or the County, which puts extra and exhausting demands on parents.

A psychological disorder that is documented by a psychologist, psychiatrist, or qualified mental health professional.

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 –

Low Income Cases – A child who resides 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.

TANF cases - A child who is a member of the TANF assistance unit Teen Parent Cases - A child of a teen parent who is in school to obtain their high school diploma

- *special needs child A child of a teen parent who is in school to obtain their high school diploma*
- *very low income* Families with very low incomes are those whose incomes are at or below 130% of the federal poverty level.
- List and define any additional terminology related to conditions of eligibility and/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.

## **APPENDIX 3: ADDITIONAL CERTIFICATIONS**

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

- 1. Assurance of compliance with Title VI of the Civil Rights Act of 1964: <u>http://www.hhs.gov/ocr/ps690.pdf</u>
- 2. Certification regarding debarment: http://www.acf.hhs.gov/programs/ofs/grants/debar.htm
- 3. Definitions for use with certification of debarment: http://www.acf.hhs.gov/programs/ofs/grants/debar.htm
- 4. HHS certification regarding drug-free workplace requirements: <u>http://www.acf.hhs.gov/programs/ofs/grants/drugfree.htm</u>
- 5. Certification of Compliance with the Pro-Children Act of 1994: http://www.acf.hhs.gov/programs/ofs/grants/tobacco.htm
- 6. Certification regarding lobbying: http://www.acf.hhs.gov/programs/ofs/grants/lobby.htm

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

## **REQUIRED ATTACHMENTS**

List all attachments included with this Plan.

- 2.1.3 Early Childhood Program Coordination Strategic Plan
- 2.2 Public Comments Summary
- 3.2.1 Payment Rates for the Provision of Child Care
- 3.2.3 Market Rate Survey
- 3.5.1 Sliding Fee Scale for Child Care Services
- 4.1.1 Application for Services
- 5.2.1 Voluntary Early Learning Guidelines
- 5.2.5 Plan for Professional Development