

# Child Care and Development Fund (CCDF) Plan For Colorado FFY 2022-2024

---

## 1 Define CCDF Leadership and Coordination with Relevant Systems

This section identifies the leadership for the CCDF program in each Lead Agency and the entities and individuals who will participate in the implementation of the program. It also identifies the stakeholders that were consulted to develop the Plan and who the Lead Agency collaborates with to implement services. Respondents are asked to identify how match and maintenance-of-effort (MOE) funds are used. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems and describe their efforts on their disaster preparedness and response plans to support continuity of operations in response to emergencies.

### 1.1 CCDF Leadership

The Governor of a state or territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency office to represent the state or territory as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto (658D; 658E(c)(1) and 98.16 (a)). Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.

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

Identify the Lead Agency or joint interagency office designated by the state or territory. ACF will send official grant correspondence, such as grant awards, grant adjustments, Plan approvals, and disallowance notifications, to the designated contact identified here (658D(a) and 98.16(a)).

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Colorado Department of Human Services (CDHS)

Street Address: 1575 Sherman Street

City: Denver

State: Colorado

ZIP Code: 80203

Web Address for Lead Agency: [www.colorado.gov](http://www.colorado.gov)

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Michelle

Lead Agency Official Last Name: Barnes

Title: Executive Director

Phone Number: 303-866-3475

Email Address: [Michelle.Barnes@state.co.us](mailto:Michelle.Barnes@state.co.us)

### 1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or territory's CCDF program. ACF will send programmatic communications, such as program announcements, program instructions, and data collection instructions, to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the Co-Administrator or the person with administrative responsibilities and include his or her contact information.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Tamara

CCDF Administrator Last Name: Schmidt

Title of the CCDF Administrator: Director, Colorado Child Care Assistance Program

Phone Number: 720-768-8287

Email Address: Tamara.Schmidt@state.co.us

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

CCDF Co-Administrator First Name: Carin

CCDF Co-Administrator Last Name: Rosa

Title of the CCDF Co-Administrator: Director, Child Care Licensing

Description of the Role of the Co-Administrator: The Co-Administrator sits within the Division of Early Care and Learning and leads all aspects of child health and safety requirements and oversees the Background Investigation Unit.

Phone Number: 720-470-8028

Email Address: Carin.Rosa@state.co.us

## 1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or public or private local agencies as long as the Lead Agency retains overall responsibility for the administration of the program (658D(b) and 98.16 (d)(1)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

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

**counties or workforce boards (98.16(i)(3)). Check one.**

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

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

- A. State or territory

Identify the entity:

Colorado Department of Human Services

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

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

County Departments of Human Services can determine the following policies:

1. Orientation for new applicants
2. Cooperation with Child Support Services
3. Pre-eligibility determination for county offices
4. Use of Protective Services Child Care
5. Post-Secondary Education as an eligible activity at application

- C. Other.

Describe:

ii. Sliding-fee scale is set by the:

- A. State or territory

Identify the entity:

CDHS sets the sliding fee scale.

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

If checked, identify the entity and describe the sliding fee scale policies the local entity(ies) can set.

County departments of human services may set the following policies:

1. The waiving of teen parent(s) co-payments may be granted on a case-by-case basis.
2. Setting a co-payment at five dollars (\$5.00) on a case-by-case basis if the family is experiencing hardship.

C. Other.

Describe:

iii. Payment rates and payment policies are set by the:

A. State or territory

Identify the entity:

CDHS sets the regular daily reimbursement rates for providers.

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

If checked, identify the entity and describe the payment rates and payment policies the local entity(ies) can set.

Counties may set the following payment rates:

1. Payment for registration, activity, and transportation fees
2. Payment for absences and holidays above the required state minimum
3. Pay higher reimbursement rates for children with disabilities
4. Pay higher reimbursement rates for non-traditional care hours (evening, overnight, or weekend care)
5. Reimbursement rates for qualified exempt providers
6. Use of slot contract rates

C. Other.

Describe:

iv. Licensing standards and processes are set by the:

A. State or territory

Identify the entity:

The Colorado Department of Human Services, Office of Early Childhood includes the Child Care Licensing Unit which is responsible for licensing standards and

processes.

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

If checked, identify the entity and describe the type of licensing standards and processes the local entity(ies) can set.

- C. Other.

Describe:

v. Standards and monitoring processes for license-exempt providers are set by the:

- A. State or territory

Identify the entity:

The Colorado Department of Human Services, Office of Early Childhood includes the Colorado Child Care Assistance Program Unit which is responsible for standards and monitoring processes for non-relative license-exempt providers.

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

If checked, identify the entity and describe the type of standards and monitoring processes for license-exempt providers the local entity(ies) can set.

- C. Other.

Describe:

vi. Quality improvement activities, including QRIS are set by the:

- A. State or territory

Identify the entity:

The Colorado Department of Human Services, Office of Early Childhood includes the Child Care Quality Initiatives Unit which is responsible for the Colorado Shines Quality Rating and Improvement System and the business rules and quality improvement activities to support continuous quality improvement within licensed child care settings.

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

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

- C. Other.

Describe:

vii. Other. List and describe any other program rules and policies that are set at a level other than the state or territory level:

**1.2.2 The Lead Agency has broad authority to operate (i.e., implement activities) through other agencies, as long as it retains overall responsibility. Complete the table below to identify which entity(ies) implements or performs CCDF services.**

a. Check the box(es) to indicate which entity(ies) implement or perform CCDF services.

Who conducts eligibility determinations?

- CCDF Lead Agency  
 TANF agency  
 Local government agencies  
 CCR&R  
 Community-based organizations

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

- CCDF Lead Agency  
 TANF agency  
 Local government agencies  
 CCR&R  
 Community-based organizations

Who issues payments?

- CCDF Lead Agency
- TANF agency
- Local government agencies
- CCR&R
- Community-based organizations

Who monitors licensed providers?

- CCDF Lead Agency
- TANF agency
- Local government agencies
- CCR&R
- Community-based organizations

Who monitors license-exempt providers?

- CCDF Lead Agency
- TANF agency
- Local government agencies
- CCR&R
- Community-based organizations

Who operates the quality improvement activities?

- CCDF Lead Agency
- TANF agency
- Local government agencies
- CCR&R
- Community-based organizations

b. Other. List and describe any other state or territory agencies or partners that implement or perform CCDF services and identify their responsibilities.

The Colorado Department of Human Services, Office of Early Childhood partners with the following external partners to implement CCDF services:

1. Clayton Early Learning - Rating Administrator and Inter-rater Reliability efforts for the Colorado Shines Quality Rating and Improvement System - Clayton Early Learning
2. Early Childhood Councils - Local child care resource and referral agencies and Colorado Shines quality improvement activities and supports, and Expanding Quality for Infant and Toddler Care activities
3. Mile High United Way - supports the centralized Colorado Shines statewide call



center to support families seeking high-quality child care and other resources needed by the family

4. Healthy Child Care Colorado - Child care health consultant application review and technical assistance
5. Colorado Department of Education - Early Childhood Professional Credential application review and training alignment process
6. Red Rocks Community College - child care licensing
7. Mesa County Public Health - child care licensing
8. Summit County Department of Human Services - child care licensing
9. Garfield County Department of Human Services - child care licensing
10. The City and County of Denver - child care licensing
11. Discover Goodwill of Southern and Western Colorado - child care licensing

**1.2.3 Describe the processes the Lead Agency uses to oversee and monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.1 and 1.2.2 (98.16(b)). In the description include:**

Written agreements. Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project but must include at a minimum the elements below (98.11(a)(3)).

--Tasks to be performed

--Schedule for completing tasks

--Budget which itemizes categorical expenditures in accordance with CCDF requirements

--Monitoring and auditing procedures

--Indicators or measures to assess performance of those agencies

Any other processes to oversee and monitor other agencies.

The Colorado Department of Human Services (CDHS), as the Lead Agency, retains overall responsibility for the administration of the Child Care Development Fund (CCDF) activities and determines basic usage and priorities for CCDF expenditures. The CDHS utilize extensive data collection and performance measures to gauge progress toward goals such as increasing equal access to high quality child care.

In cases where implementation responsibilities are undertaken by agencies other than CDHS, the resulting formal, written agreement includes a statement of work which outlines tasks to be performed, a schedule for completing tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements, and indicators or metrics to assess performance as outlined in CRS 26-2-715 for the Colorado Child Care Assistance Program (CCCAP), Colorado's child care subsidy program.

The CDHS conducts monitoring to ensure that all agencies through which programs are administered operate according to the rules established for the program and to ensure that contractors and subrecipients comply with the approved Colorado CCDF State Plan and all Federal requirements. Fiscal monitoring is also conducted to ensure the expenditure of funds by subrecipients and contractors are in accordance with 75 CFR parts 351 and 353.

The CDHS Division of Early Care and Learning maintains responsibility for core monitoring of subrecipients as outlined in the CDHS Subrecipient Monitoring Procedures to include monitoring subrecipients' activity, ensuring subrecipients meet the audit requirements, and ensuring fidelity in the administration of CCDF services. Core activities include but are not limited to performing applicable risk assessments, monitoring plans, subrecipient monitoring, and ensuring compliance with program requirements and may include but is not limited to an assessment of the documentation provided by the subrecipient, data maintained by the subrecipient, information obtained through observations, or formal monitoring plans to determine the subrecipient's level of compliance with federal and OEC expectations.

Additional methods of monitoring conducted by CCCAP based on assessed risk, specific subrecipient attributes, and program resources include but are not limited to risk-based reports, audit reviews, prior approval for high-risk activities, technical assistance and training, and collaboration with other county and state agencies.

The Office of Early Childhood also utilizes three different levels of county monitoring reviews to include monthly, random case file reviews at the county-level to ensure eligibility determinations and subsidy payments are accurate based on CCCAP regulations and policies, CDHS monthly reviews of client case files to ensure accuracy and alignment with CCCAP regulations, and supervisory reviews of eligibility determinations and compliance with CCCAP regulations, child care authorizations, provider payments, and parent fees as

part of county monitoring reviews. The findings of each review are summarized for the county and areas of concern identified by CDHS staff are clearly documented and followed up on by CCCAP staff to ensure the case under review is corrected and to prevent future errors. All of the reviews are conducted utilizing standardized definitions, review elements, review processes, and review tools to ensure consistency in reviews and accurately reflect errors and trends. The results from these reviews are compiled by the Colorado Child Care Assistance Program staff and are used to monitor county performance, identify error trends and opportunities for improvement, and develop strategies to rectify or prevent ongoing violations.

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

**Assure by describing how the Lead Agency makes child care information systems (e.g., subsidy, registry, and QRIS systems) available to public agencies in other states.**

The Colorado Department of Human Services (CDHS) maintains code base repositories for the system development (custom code) developed on the software-as-a-service products used for CCDF funded technology systems. Additionally, developer tools can enable a local system copy to be produced for sharing that also reflects configuration on products that did not require code. Upon request, both code bases and local copies may be produced to share with public agencies.

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

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

The Colorado Department of Human Services (CDHS) maintains a Data Stewards Workgroup charged with monitoring the data governance maturity of offices within the agency. As part of their responsibilities, the group oversees the development of data sharing agreements and ongoing revisions to agreement standards which define the allowable disclosure of shared data. This programmatic governance is also paired with the State policy set by the Governor's Office of Information Technology on IT system access control, security standards, and alignment with NIST/PCI standards. Lastly, based on guidance from the U.S. Department of Health and Human Services, Office of Civil Rights, HIPAA covered entities are required to protect all personally-identifiable information like personal health information. As a result, the CDHS engaged in the process of reviewing and revising all data sharing agreements to meet these stricter standards for the disclosure and use of child and family data. Data sharing agreements stipulate pertinent federal and state policies that protect use of shared data. If shared data is not already aggregated, these agreements additionally define conditions for de-identification and review before aggregate results may be shared beyond the receiving party

### 1.3 Consultation in the Development of the CCDF Plan

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

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

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

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

#### Consultation

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

**1.3.1 Describe the Lead Agency's consultation efforts in the development of the CCDF Plan. Note: Lead Agencies must describe in a - c. consultation efforts with required partners listed in Rule and Statute. ACF recognizes that there is great value in consulting with other entities and has provided element d. for Lead Agencies to identify consultation efforts with other agencies or organizations.**

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

Consultations with general purpose local governments are conducted continuously throughout the year in multiple venues with county departments of human services through the Colorado Child Care Assistance Rule Rewrite Committee, the Colorado Child Care Assistance Allocation Committee, Early Childhood Policy Advisory Subcommittee (Sub-PAC), Finance Advisory Subcommittee and the Policy Advisory Committee (PAC). Consultative topics include state program regulations that inform the State Plan and have a direct impact on the Colorado Child Care Assistance Program (CCCAP), Colorado's child care subsidy program. The groups identified above address human services policy issues throughout the year. As such, ongoing discussion will occur as the need for policy changes arise during the plan period.

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

Consultations with the Early Childhood Leadership Commission (ECLC), the State

Advisory Council for Colorado, are conducted continuously throughout the year. The Commission's scope is to align, coordinate and improve the efficiency of programs and services for all early childhood programs in the state.

c. Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for states to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many states and tribes have consultation policies and procedures in place. A consultation meeting was held with the Southern Ute Tribe of Colorado. The consultation focused on areas of the State Plan that address issues identified as critical to the tribal communities, including high staff turnover, access to training, high cost of living, and low wages. Additionally, the consultation addressed the universal need for social emotional and behavioral health support and training for both staff, families, and children.

The Ute Mountain Ute Tribe of Colorado declined the consultative meeting.

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

No other entities were formally consulted on the CCDF plan.

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

Reminder:

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

a) Date of the public hearing. 05/12/2021

Reminder: Must be no earlier than January 1, 2021, which is 9 months prior to the October 1, 2021, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g., the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in a. 04/01/2021

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

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

The information was shared with stakeholders by email. Additionally, information was posted on the Colorado Department of Human Services (CDHS), Office of Early Childhood website (

[https://www.coloradoofficeofearlychildhood.com/OEC\\_Resources?p=Resources&s=StatePlans&lang=en](https://www.coloradoofficeofearlychildhood.com/OEC_Resources?p=Resources&s=StatePlans&lang=en)).

d) Hearing site or method, including how geographic regions of the state or territory were addressed. A webinar was broadcast statewide.

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

The content of the draft Colorado CCDF State Plan was made available on the Office of Early Childhood website for 60 days and at least 20 days prior to the public hearing. Hard copies were available upon request.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? Information provided by the public was considered and integrated, as appropriate, into the Colorado CCDF State Plan. Some suggestions were added into the draft child care center rule package that is currently in State Board of Human Services rule making process. Other suggestions were addressed in the Colorado Child Care Assistance emergency rules. The Department has addressed comments concerning the background check process by hiring additional FTE in the Background Investigation Unit and changing its processing of inter-state background checks.

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

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

[https://www.coloradoofficeofearlychildhood.com/OEC\\_Resources?p=Resources&s=StatePlans&lang=en](https://www.coloradoofficeofearlychildhood.com/OEC_Resources?p=Resources&s=StatePlans&lang=en)

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

Working with advisory committees.

Describe:

The Colorado CCDF State Plan and major plan amendments are made available to relevant advisory committees through ongoing participation in these committees.

Working with child care resource and referral agencies.

Describe:

Child Care Resource and Referral agencies receive notification through ongoing communication from the Lead Agency.

Providing translation in other languages.

Describe:

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

Describe:

Providing notification to stakeholders (e.g., parent and family groups, provider groups, advocacy groups). Describe:



Describe:

All licensed child care programs, provider groups, parent groups, other State Departments, Early Childhood Councils, county departments of human services, county commissioners and other stakeholders receive notification through the mail.

Working with statewide afterschool networks or similar coordinating entities for out-of-school time.

Other.

Describe:

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

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

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

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

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

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

- extending the day or year of services for families;
- smoothing transitions for children between programs or as they age into school;

- enhancing and aligning the quality of services for infants and toddlers through school-age children;
- linking comprehensive services to children in child care or school age settings; or
- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

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

a. The Lead Agency is required to coordinate with the following agencies. Provide a description for how coordination occurred.

i. Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals, processes, and results:

Coordination with general purpose local governments occurs continuously throughout the year in multiple venues with county departments of human services through the Colorado Child Care Assistance Rule Rewrite Committee, the Colorado Child Care Assistance Allocation Committee, Early Childhood Policy Advisory Subcommittee (Sub-PAC), Finance Advisory Subcommittee and the Policy Advisory Committee (PAC). Consultative topics include state program regulations that inform the State Plan and have a direct impact on the Colorado Child Care Assistance Program (CCCAP), Colorado's child care subsidy program. The groups identified above address human services policy issues throughout the year. As such, ongoing discussion will occur as the need for policy changes arise during the plan period. The output as a result of this coordination and consultation has resulted in rule and policy changes to the Colorado Child Care Assistance Program (CCCAP) to enhance the quality of services for families receiving subsidy.

ii. State Advisory Council on Early Childhood Education and Care or similar coordinating body (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe the coordination goals, processes, and results:

Coordination with the State Advisory Council, the Early Childhood Leadership Commission, occurs regularly through bi-monthly meetings and sub-committee meetings. The Director of the Commission is also embedded within the Colorado Department of Human Services, Office of Early Childhood, which helps to facilitate additional coordination throughout the year. Coordination goals include interagency effort to

improve the status of the early childhood workforce based on CCDF related goals, program quality and alignment, data and working on a comprehensive strategy to address parent engagement and communication. The output as a result of this coordination and consultation has resulted in county waivers and child care licensing rules changes for Early Childhood Teacher qualifications to create the workforce necessary for additional child care slots available to families, including those in underserved communities.

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

iii. Indian tribe(s) and/or tribal organization(s), at the option of individual tribes. Describe the coordination goals, processes, and results, including which tribe(s) was (were) consulted:

Coordination meetings occur with the Indian tribes in Colorado on an as needed basis as determined by the tribes or tribal organizations. The tribal liaison located within the Colorado Department of Human Services meets regularly with the tribal organizations and informs the Office of Early Childhood of tribal concerns. Coordination goals revolve around providing access to resources and providing technical assistance. Goals of the most recent coordination meetings with the Southern Ute Tribe included sharing information on SafeCare, Promoting Safe and Stable Families, Home Visiting Task Force, the new five year prior state of residence background check processes and CCDF related to the Child Care Assistance Program. The Colorado Department of Human Services (CDHS) plans to offer technical assistance to the tribes in these areas and provide ongoing coordination and support throughout the plan period upon request. The output of this consultation was achieved and the information was provided to the Southern Ute Tribe, they were able to ask questions and request additional information.

The Ute Mountain Ute Tribe declined the most recent coordination.

N/A-Check here if there are no Indian tribes and/or tribal organizations in the state.

iv. State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities

Education Act (Part C for infants and toddlers and Part B, Section 619 for preschool).

Describe the coordination goals, processes, and results:

Coordination with Early Intervention Colorado (Part C of IDEA) within the Colorado Department of Human Services, Office of Early Childhood includes goals related to consumer education and professional development.

Coordination goals with the P-3 Office within the Teaching and Learning Unit at the Colorado Department of Education include supporting training development for professionals working with children at-risk and those with special needs to address social emotional development and learning, trauma informed care, challenging behavior/suspension and expulsions, and implicit bias. Additionally, there is a goal to develop a guidance document for providers to determine the best possible programming and layering of funding for children who are at-risk.

Collaboration to develop more inclusive professional development opportunities is ongoing. For example, most recently, the following courses were published and available on the Colorado Shines Professional Development Information System: Introduction to the Early Intervention and Preschool Special Education Programs and Supporting Young Children Through Inclusive Care. The output as a result of the consultation is the Introduction to the Early Intervention and Preschool Special Education Programs course was added to the draft center rule package as a required training for all staff members to assist with ensuring families have quality child care options to serve their children with needed supports or services.

v. State/territory office/director for Head Start state collaboration. Describe the coordination goals, processes, and results:

Coordination with the director for Head Start State Collaboration Office resulted in identifying the following ongoing coordination goals: 1) Facilitate Communication to encourage the layering of funds, including parent fees, between child care subsidy, Head Start, preschool special education, and the Colorado Preschool Program so that families have access to full day/full year calendar services. Federal resources, such as the National Center for Quality Assurance and the National Center on Child Care Subsidy for Innovation and Accountability, may inform this content. The resulting guidance will be incorporated into consumer education materials to ensure families and the general public are informed. This information may be considered for an online self-paced e-learning

training module on the Colorado Shines Professional Development Information System (PDIS) that will support business practices.; 2) Colorado Child Care Assistance Program (CCCAP) eligibility - Continue to reinforce and clarify the alignment of the 12-month eligibility with the Head Start enrollment period to ensure both providers, local county government, and families are aware of this rule so that families will benefit from access and continuity of care. 3) Early Learning and Development Guidelines (ELDG) -Ensure the Colorado Early Learning and Development Guidelines align with Head Start Early Learning Outcomes Framework (ELOFT). A crosswalk was conducted to ensure alignment with the Head Start ELOFT. While it was determined that the two resources are aligned, recommendations were developed to inform the refresh of the ELDG based on the Preschool Development Grant Needs Assessment, new research and data; 4) Colorado Shines Quality Rating And Improvement System (QRIS) - The Colorado Department of Human Services, Office of Early Childhood will continue to coordinate with the Head Start Collaboration Office Director to address Alternative Pathway and the process to review Head Start program level information to flag new programs and programs that are in the designation renewal system. 5) Preschool Development Grant Birth-through 5 (PDG B-5)-Leading activities for the Office of Early Childhood to ensure the alignment and coordination for children, senders and receivers are equipped for a smooth transition into kindergarten.

[vi. State/territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals, processes, and results:](#)

Coordination with the Colorado Department of Public Health and Environment (CDPHE) revolves around goals related to child care rules regulated by both departments. Specifically, goals and processes to address immunization requirements and how the length of the grace period reasonably supports the enrollment of children experiencing homelessness. Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C.11434a), defines homeless children and youths as those who lack a fixed, regular, and adequate nighttime residence. In Colorado, the grace period for children experiencing homelessness for meeting school-entry immunization requirements is 90 days, as established by the Colorado Board of Health. While inspections include a review of immunization records to ensure requirements are being met, the two agencies will continue to work to determine whether additional technical assistance or training is needed in this area. Another output of this coordination, is the requirement in the Colorado Department of Human Services child care licensing rules for all staff members

involved in the collection of immunizations to complete the immunization course developed and offered by CDPHE.

vii. State/territory agency responsible for employment services/workforce development.

Describe the coordination goals, processes, and results:

Coordination with the Colorado Department of Labor and Employment revolves around goals related to Colorado's Early Childhood Workforce. Specifically, goals and processes to: 1) Explore various workforce approaches to address identified local workforce needs; 2) Engage with local workforce councils in determining local workforce demand for early childhood workers; and, 3) Encourage the inclusion of early childhood issues in local workforce operation plans and later with the state workforce plan.

viii. State/territory agency responsible for public education, including Prekindergarten (PreK). Describe the coordination goals, processes, and results:

Coordination with the P-3 Office within the Teaching and Learning Unit at the Colorado Department of Education include the following goals: 1) Development of a finance guidance document to clarify funding and program requirements between State funded Preschool (Colorado Preschool Program and Preschool Special Education (Section 619)), Early Head Start/Head Start and the Colorado Child Care Assistance Program (CCCAP), Colorado's child care subsidy program; and 2) Increasing the number of programs that receive Colorado Preschool Program funding that are at high quality levels (Levels 3-5) within the Colorado Shines Quality Rating And Improvement System. The output for this collaboration and coordination was that a finance guidance document was created and there were increased program participating in the Colorado Preschool Program rated at high quality.

ix. State/territory agency responsible for child care licensing. Describe the coordination goals, processes, and results:

Child Care Licensing is housed at the Colorado Department of Human Services, Office of Early Childhood. Close coordination is an ongoing priority between the Colorado Child Care Assistance Program (CCCAP), Child Care Licensing and Child Care Quality Initiatives. The goal of this coordination is to create streamlined support and services for customers (including children and families) and to ensure that child care licensing supports quality improvement efforts, such as providing guidance to those providers pursuing a Level 2 quality rating level. The output of this coordination is our rules and

policies for child care programs are aligned throughout the three programs.

x. State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals, processes, and results:

The Office of Early Childhood coordinates with the Child and Adult Care Food Program (CACFP) located in the Colorado Department of Health and Environment to expand the use of the program in both licensed home and center providers through better communication and education efforts. The output of this collaboration and coordination is that CACFP meal patterns are imbedded in the CDHS child care licensing rules. The Office of Early Childhood also coordinates communication to child care programs on CACFP opportunities.

xi. McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination goals, processes, and results:

Coordination with the McKinney-Vento state coordinator focuses on providing increased access to child care and coordination between state and local organizations for children and families experiencing homelessness in Colorado. Strategies include: 1) Strengthening connections for families experiencing homelessness with infants and toddlers to services; 2) Evaluating and strengthening trainings for CCCAP caseworkers working with families experiencing homelessness; 3) Reevaluate policies to incorporate the needs of homeless parents relative to engaging in job search, employment or training, in order to establish a stabilization period necessary for families to engage in eligible activities and provide required documentation. One output of this collaboration and coordination is that child care licensing aligns its rules on health care requirements including immunizations to the Colorado Department of Public Health and Environment regulations in compliance with McKinney-Vento.

xii. State/territory agency responsible for the Temporary Assistance for Needy Families (TANF) program. Describe the coordination goals, processes, and results:

Coordination goals with the Division of Employment and Benefits at Colorado Department of Human Services, which oversees the TANF program, include: extensive work on the alignment of rule and policy to ameliorate the eligibility and referral process for families participating in TANF and the Colorado Child Care Assistance Program

(CCCAP); joint work to develop an automated referral process to eliminate inefficiencies that exist in the current child care referral process; joint training for county Colorado Child Care Assistance Program eligibility staff, Colorado Works eligibility staff and Employment Coaches. The Divisions of Early Care and Learning and Employment and Benefits continue to build on work conducted by a third party consultant that analyzed the referral and application process for families who are TANF eligible and BCA eligible. The output of this coordination and collaboration that the information from this analysis was used to simplify categorical eligibility reporting requirements so that the application becomes more of an interface between programs.

**xiii. Agency responsible for Medicaid and the state Children's Health Insurance Program. Describe the coordination goals, processes, and results:**

The Office of Early Childhood at CDHS and the Department of Health Care, Policy And Finance, which oversees the Medicaid and Children's Health Insurance Program(CHIP), meet regularly through the Early Childhood Policy Advisory Subcommittee, where intersections of policy and procedures for both programs are addressed. Goals Include strengthening consumer education around Medicaid and CHIP and outreach to early childhood professionals who may be eligible for Medicaid and/or CHIP.

**xiv. State/territory agency responsible for mental health. Describe the coordination goals, processes, and results:**

The Early Childhood Mental Health (ECMH) Program is located at the Colorado Department of Human Services, Office of Early Childhood within the Fostering Well-being Unit. Coordination focuses on increasing access to mental health consultants for child care providers and families as well as increased access to professional development and remote or in-person coaching for providers on social-emotional development and behaviors adults find challenging. Specific outputs include a dedicated webpage, Early Childhood Mental Health Consultation, where early childhood providers and caregivers can find information on ECMH consultative services and request services through the online referral. Webpage content includes brief program description, toolkits, as well as links to the EarlyChildhoodMentalHealthCO.org site where customizable print materials, videos and ready-to-post social media graphics that address mental health related topics (stigma, asking for help, etc.) can be accessed by community partners. The Professional Development Information System (PDIS) also houses a variety of trainings related to social emotional development and ECMH consultation, including



"Working with an Early Childhood Mental Health Consultant" and "Recognizing the Impact of Bias in Mental Health Consultation." Additionally, as a means of aligning efforts to reduce suspension and expulsion, the ECMH Program hosts Office of Early Childhood (OEC) discussion panels and intentionally networks early childhood support professionals to ensure that a child's social and emotional needs are identified and addressed early. The program is in the process of creating parent- and provider-facing facts sheets that outline the breadth of services available through consultation and resources that specifically address suspension and expulsion, available in multiple languages.

xv. [Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination goals, processes, and results:](#)

Coordination meetings with local child care resource and referral agencies are held every other month. Coordination goals include supporting the recruitment and retention of qualified professionals and programs, particularly in areas considered to be child care deserts. The output of this coordination and collaboration is increased numbers of licensed child care programs in underserved areas to ensure families have safe and quality child care options to meet their families needs.

xvi. [Statewide afterschool network or other coordinating entity for out-of-school time care \(if applicable\). Describe the coordination goals, processes, and results:](#)

Coordination goals established with the Colorado Afterschool Partnership (CAP) include improving access for school-age providers to a variety of professional development trainings, maximizing the use of the Colorado Shines Professional Development Information System, as well as mixed-delivery trainings. The CDHS is also partnering with CAP to provide baseline data for a statewide needs assessment on school-aged care. The output is a stronger collaborative relationship with CAP including participation in the child care licensing rules re-write stakeholder process.

xvii. [Agency responsible for emergency management and response. Describe the coordination goals, processes, and results:](#)

The Child Care Licensing Unit at the Colorado Department of Human Services (CDHS), Office of Early Childhood regularly coordinates with the CDHS Emergency Manager who coordinates with the Colorado Office of Homeland Security and the Governor's Office.

The Child Care Licensing Unit also works with the Emergency Manager at the Office of Emergency Preparedness and Response at the Colorado Department of Public Health and Environment (CDPHE), the Pediatric Disaster Coordinator for the Office of Emergency Preparedness at CDPHE and the Community Health and Safety Inclusion Coordinator also at (CDPHE), to ensure the output of this coordination results in awareness and appropriate implementation for the Disaster Preparedness and Response Plan.

On an annual basis, the State Advisory Council, the Early Childhood Leadership Commission (ECLC), is informed of updates and communication strategies. Representatives from CDHS are also a part of the CDPHE Community Inclusion workgroup and participate in the CDPHE Office of Emergency Preparedness and Response Functional exercises. Ongoing participation will continue throughout the duration of the plan to ensure appropriate coordination and communication strategies are in place and implemented when deploying emergency management procedures.

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

b. The following are examples of optional partners a state might coordinate with to provide services. Check which optional partners the Lead Agency coordinates with and describe the coordination goals, processes and results.

i. State/territory/local agencies with Early Head Start - Child Care Partnership grants.

Describe

ii. State/territory institutions for higher education, including community colleges

Describe

Intersection with the higher education community is occurring through various work groups focused on the LINC Project in partnership with the Colorado Evaluation and Action Lab. Additional coordination is ongoing with institutions of higher education and community colleges to inform qualifications and recruitment and retention strategies to

support the child care licensing workforce.

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

Describe

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

Describe

The Maternal and Child Home Visitation programs are located within the Office of Early Childhood at the Colorado Department of Human Services. Coordination goals include assessing the ways in which components of the Home Visiting model as well as the HIPPY model can be incorporated to support improved provider-child-parent interaction at licensed home and license-exempt providers.

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

Describe

- vi. State/territory agency responsible for child welfare.

Describe

- vii. Provider groups or associations.

Describe

- viii. Parent groups or organizations.

Describe

- ix. Other.

Describe

### Optional Use of Combined Funds:

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

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

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

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

- No (If no, skip to question 1.5.2)
- Yes. If yes, describe at a minimum:
  - a) How you define "combine"

The Colorado Department of Human Services, Office of Early Childhood allows for the

"combination" or layering of Head Start and Child Care Development Funds at the county level. County departments of human services have the option to pay full-time rates in order to maximize access, full-day services and quality alignment for dually enrolled children.

**b) Which funds you will combine**

County departments of human services are encouraged to allow the blending of HeadStart and Child Care Development Funds by authorizing based on the child's need for care regardless of the child's Head Start or Early Head Start enrollment status, in order to provide seamless services to children dually enrolled in these programs.

**c. What is your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care, or developing the supply of child care for vulnerable populations? Note: Responses should align with the goals, processes and results describe in 1.4.1.**

To increase access and full-day comprehensive services for dually enrolled children in Head Start and the Colorado Child Care Assistance Program.

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

County departments of human services will authorize Child Care Development Funds to cover full-day tuition for dually enrolled children.

**e) How are the funds tracked and method of oversight**

The Colorado Department of Human Services Child Care Automated Tracking System(CHATS) will track dually enrolled children in Head Start/Early Head Start and the Colorado Child Care Assistance Program (CCCAP), Colorado's child care subsidy program.

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

Note:

Lead Agencies that use Prekindergarten funds to meet matching requirements must check Prekindergarten funds and public and/or private funds.

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

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

a. N/A - The territory is not required to meet CCDF matching and MOE requirements

b. Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.

i. If checked, identify the source of funds:

County share of Colorado Child Care Assistance Program (CCCAP) expenditures are used to meet the MOE requirements. State funding from the Colorado Department of Education, Early Childhood Special Education is used to meet CCDF matching requirements.

c. Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be

counted for match purposes (98.53(f)).

i. If checked, are those funds:

A. Donated directly to the State?

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

ii. If checked, identify the name, address, contact, and type of entities designated to receive private donated funds:

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

If checked, provide the estimated percentage of the matching fund requirement that will be met with Prekindergarten expenditures (not to exceed 30 percent): 3

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

The percentage is less than 10%.

ii. Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the needs of working parents:

The Colorado Department of Human Services works with the Colorado Preschool Program to address issues such as layering of funding to ensure families accessing part-time preschool programs have the ability to access child care subsidy funding to accommodate full-day care.

e. State expenditures for Prekindergarten programs are used to meet the CCDF maintenance-of-effort requirements. If checked,

i. Assure by describing how the Lead Agency did not reduce its level of effort in full-day/full-year child care services, pursuant to 98.55(h)(1) and 98.15(a)(6).

ii. Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the needs of working parents:

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

iv. If the percentage is more than 10 percent of the MOE requirement, describe how the state will coordinate its Prekindergarten and child care services to expand the availability of child care:

f. The same funds are used to meet at least some of the CCDF MOE and TANF MOE requirements.

i. If known, what percent of funds used to meet CCDF MOE also is used to meet TANF MOE requirements?

## 1.6 Public-Private Partnerships

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

**1.6.1 Identify and describe any public-private partnerships encouraged by the Lead Agency to leverage public and private resources to further the goals of the CCDBG Act. Include in the response any public-private partnerships that have emerged from the response to the COVID-19 pandemic (98.16(d)(2)) and if applicable, how those partnerships will be continued post-pandemic.**

### **State Level Public-Private Partnerships**

#### **Early Childhood Leadership Commission**

**The Early Childhood Leadership Commission (ECLC) was established in 2010 through Colorado Senate Bill 10-195 to "promote the coordination of policies and procedures that affect the health and well-being of Colorado children." The ECLC was reauthorized in 2013, and then again in 2017 by HB17-1106, which extended the**



**ECLC in statute through 2023. The ECLC serves as Colorado's State Advisory Council for early childhood, per the federal Head Start Act, and provides recommendations to the General Assembly, the Governor's Administration, and the state agencies that interact with early childhood systems and supports. Through data gathering, policy development and community engagement, the ECLC has worked to advance all domains of the Early Childhood Colorado Framework: Family Support and Education, Health and Well-Being, and Learning and Development.**

**The ECLC consists of 20 Commissioners representing a full spectrum of advocates and leaders, including parents, early childhood professionals, Head Start, school districts, local municipalities, foundations, nonprofits, businesses and five state departments: Education, Health Care Policy and Financing, Higher Education, Human Services, and Public Health and Environment.**

**Statutory duties of the ECLC include advising the Colorado Department of Human Services, Office of Early Childhood; identifying opportunities for, and barriers to, the alignment of standards, rules, policies, and procedures across programs and agencies that support young children; and assisting public and private agencies in coordinating efforts on behalf of pregnant women and children, including securing funding and additional investments for services and supports for children and their families.**

**The ECLC has four subcommittees: Program Quality and Alignment; Data; Workforce Development; and Communications. The Program Quality and Alignment Subcommittee addresses the coordination of state standards, rules, policies and procedures across programs and agencies. There are three working groups that report to the Program Quality and Alignment Subcommittee, focusing on 1) advancing the Colorado Early Childhood Framework through an interactive website and 2) Young Child Wellness Council/Project LAUNCH support and oversight. Evaluation and advocacy for appropriate collection and use of data is addressed within the Data Subcommittee. The Early Childhood Workforce Development Subcommittee is an innovative, public-private partnership to advance the Early Childhood Workforce. The Communications Committee supports the strategic communication plan to reinforce the importance of early childhood and why quality matters during the early years.**

## **County Level Public-Private Partnerships**

### **Colorado Department of Human Services Policy Advisory Committee**

**The Colorado Department of Human Services Policy Advisory Committee (PAC) addresses human services policy issues through collaboration, cooperation and effective communication between the state and counties to improve the delivery of services for children, families and adults across the state of Colorado. The Committee Submits recommendations to the Executive Director of the Colorado Department of Human Services (CDHS).**

**The Early Childhood Sub-PAC advises and makes recommendations for the following:**

- 1. Continued review of the State rules to ensure alignment with Child Care Development Block Grant Reauthorization requirements.**
- 2. Development of policies and procedures to reduce fraudulent use of Child Care Development Block Grant funds.**
- 3. Increased county-level access to data collected and used by the CDHS.**
- 4. Local implementation of the Colorado Shines Quality Rating and Improvement System.**
- 5. Alignment and sustainability of state and federally funded programs for child development, child care and other early childhood education programs and services.**

### **Early Head Start Partnership Grants**

**Early Head Start Child Care Partnership (EHS-CCP) grants have been awarded to five grantees in Colorado, serving partnership programs in multiple counties throughout the state. Each partnership grantee has identified their own goals and methods of reaching the overarching goals of improving quality, leveraging resources and increasing the number of early learning placements for infants and toddlers. The partnerships include both family child care homes and centers. Most partnerships expect to exceed the 25% minimum grant requirement for shared enrollees with the Colorado Child Care Assistance Program (CCCAP), Colorado's child care subsidy program. It's anticipated that the partnerships will develop best practices for dually enrolled children, increase infant and toddler capacity and support high quality environments for children. The EHS-CCP demonstrates a commitment on layering funding, increasing business practices, elevating families, and ensuring a strong foundation for school readiness.**

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

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

If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency:

- Provide parents in the state with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act.
- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State.
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

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

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, describe what services are provided and how it is structured. Use subsection 7.5 to address the services provided by the local or regional child care resource and referral agencies and the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

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

- No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.
- Yes. The state/territory funds a CCR&R organization(s) with all the responsibilities outlined above. If yes, describe the following:

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

To ensure efficient and effective delivery of child care information and resources to families and programs, Colorado utilizes a regional resource and referral network.

These agencies:

1. Provide families with information on a full range of child care options in their local area or region, including enhanced referrals to families with unique needs, children with special health and behavioral concerns, and additional resources for families at risk to ensure families have the information they need to make informed choices regarding the services that best suit their needs.
2. Work directly with families who receive child care subsidies to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality, as determined by the Colorado Shines Quality Rating and Improvement System.
3. Collect data and provide information on the coordination of services and supports including services provided through the Individuals with Disabilities Education Improvement Act (IDEA) for children with disabilities.
4. Recruit new licensed providers, particularly in areas of the state that have been identified as child care deserts.
5. Collect data and provide information on the supply of and demand for child care services in local areas of the State.
6. Work to develop partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply

and quality of child care services in Colorado.

7. Provide technical assistance and resources to eligible child care programs, to ensure optimal awareness and engagement in statewide initiatives, such as the Colorado Shines Quality Rating and Improvement System, Professional Development Information System, and Colorado Child Care Assistance Program (CCCAP).
8. Coordinate their activities with the activities of the Colorado Department of Human Services, Office of Early Childhood and/or local agencies that implement Child Care And Development Fund activities.
9. Adhere to the requirements of the Colorado Child Care Disaster Plan.

Additionally, the Department has included a plan for the use of the Child Care and Development Funds, as appropriated through the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act to support Early Childhood Councils to improve child care resource and referral, expand inclusive care environments and expand support for families seeking access to high-quality providers. Activities will include:

1. Conduct outreach and report real-time availability of child care slot openings through stronger resource and referral services and grow the licensed provider population, with an emphasis on infant and toddler care;
2. Support a mixed-delivery system and strong child care business practices through family child care home navigators; and
3. Provide training and grants for inclusive and universally designed environments for children with developmental delays, disabilities, and special needs.

**How are CCR&R services organized? Include how many agencies, if there is a statewide network, and if the system is coordinated:** All child care resources and referral activities are secured through contract. Statewide, centralized call center supports the resource and referral activities for families. Local Early Childhood Councils support all other services offered through the child care resource and referral system. These services are supported by 34 local agencies. The Colorado Department of Human Services coordinates the statewide network through the Office of Early Childhood, Division of Early Care and Learning.

## 1.8 Disaster Preparedness and Response Plan

In past disasters, and in response to the COVID-19 pandemic, the provision of emergency child care services and rebuilding and restoring of child care infrastructure has emerged as an essential service. Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children - including the need for safe child care before, during, and after a state of emergency declared by the Governor, or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122) - through a Statewide Disaster Plan. The effective date for the establishment of this Statewide Disaster Plan was October 1, 2018.

**1.8.1 Did you make any updates to the Statewide Disaster Plan since the FY 2019-2021 CCDF Plan was submitted? Please consider any updates that were made as a result of the Lead Agency's experiences in responding to the COVID-19 pandemic. (Note: It is a Lead Agency decision on how often a plan should be updated and which entities, if any, should be collaborated with in the updating process.)**

No

Yes

If yes, describe the elements of the plan that were updated: [Click or tap here to enter text.](#)

As each community has varying disaster impacts, The OEC State Disaster Plan's purpose is to provide a framework for response, while being flexible and responsive to each community's unique needs. Generally, child care services may need help moving to another location or might ask for a waiver to allow the facility to operate with alternate ratios. This is usually small scale and geographically determined. However, the COVID-19 pandemic affected every child care facility in the state. Based on the unprecedented need, OEC implemented the following COVID-19 practices:

1. Convened a large stakeholder group to allow for all aspects of emergency child care to be addressed and resolved. Topics for discussion included continuity of payments, supply chains (essential baby supplies, health orders, and the best way to match families with child care services).
2. The stakeholder group included representatives from agencies and organizations identified in the Disaster Plan.

3. OEC coordinated with CDPHE to make sure that any open facilities were compliant with health orders. This provision is key to ensure all public health orders issued by CDPHE were followed and that the guidance is understood for the safety of both the children and childcare service workers.

OEC implemented the following technology resources:

1. The Child Care Reopening Portal is an online tool that supports collaboration among states, providers, and families. The portal facilitated the capture and sharing of key information around new child care facility reopening guidelines. The portal also enabled reporting of opening/closure statuses and provided a dashboard for families to see a list of care centers' rates and services. State agencies are able to use the Child Care Reopening Portal to track enrollment and disease surveillance with the goal of preventing infected staff or children from enrolling or visiting other child care centers.
2. OEC also put together a COVID-19 Resources page online to help providers update their practices during a flu pandemic.
3. A Status Portal was implemented on Colorado Shines to allow providers to directly inform the state what their current predicament was as it related to all disasters.

The Office of Early Childhood recognized that these elements may be useful in any complex, multi-jurisdictional event, and incorporated each of these items into all statewide child care disaster planning.

**1.8.2 To demonstrate continued compliance with the required elements in the Statewide Disaster Plan, certify by checking the required elements included in the current State Disaster Preparedness and Response Plan.**

- a. The plan was developed in collaboration with the following required entities:
  - i. State human services agency
  - ii. State emergency management agency
  - iii. State licensing agency
  - iv. State health department or public health department
  - v. Local and state child care resource and referral agencies
  - vi. State Advisory Council on Early Childhood Education and Care or similar coordinating body

- b. The plan includes guidelines for the continuation of child care subsidies.
- c. The plan includes guidelines for the continuation of child care services.
- d. The plan includes procedures for the coordination of post-disaster recovery of child care services.
- e. The plan contains requirements for all CCDF providers (both licensed and license-exempt) to have in place:
  - i. Procedures for evacuation
  - ii. Procedures for relocation
  - iii. Procedures for shelter-in-place
  - iv. Procedures for communication and reunification with families
  - v. Procedures for continuity of operations
  - vi. Procedures for accommodations of infants and toddlers
  - vii. Procedures for accommodations of children with disabilities
  - viii. Procedures for accommodations of children with chronic medical conditions
- f. The plan contains procedures for staff and volunteer emergency preparedness training.
- g. The plan contains procedures for staff and volunteer practice drills.

**1.8.3 If available, provide the direct URL/website link to the website where the statewide child care disaster plan is posted:**

<https://dhsem.colorado.gov/emergency-management/plans/state-eop>

## 2 Promote Family Engagement through Outreach and Consumer Education

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



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

This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals, or policy issuances. See the Introduction on page 4 for more detail.

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

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

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

- a. Application in other languages (application document, brochures, provider notices)

- b. Informational materials in non-English languages
- c. Website in non-English languages
- d. Lead Agency accepts applications at local community-based locations
- e. Bilingual caseworkers or translators available
- f. Bilingual outreach workers
- g. Partnerships with community-based organizations
- h. Collaboration with Head Start, Early Head Start, and Migrant Head Start
- i. Home visiting programs
- j. Other.

Describe:

Over-the-phone interpretation using a language line service.

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

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

Describe:

## 2.2 Parental Complaint Process

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

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

Parents can make a complaint about child care providers by calling 303-866-5958 Monday through Friday between 8 a.m. and 5 p.m. In cases where parents are calling outside of business hours, they may leave a message and are asked to include name, telephone number and mailing address. The caller will receive a call back if the investigator needs more specific information about the complaint, if the investigator received contradictory or unclear information during the investigation, and to receive information regarding the results of the investigation. Colorado requires that a witness or someone who has first-hand knowledge of the abuse must make the complaint. An anonymous complaint can be made only if the complaint is about an unlicensed child care provider. All parent and child information is kept confidential.

For Qualified Licensed Exempt Colorado Child Care Assistance(CCCAP) providers, the same process as outlined above applies but in addition, parents may report complaints to county CCCAP offices as well.

The Department does not establish reporting processes for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

**2.2.2 For complaints regarding all providers, including CCDF providers and non-CCDF providers, describe the Lead Agency's process and timeline for screening, substantiating, and responding to complaints. Describe whether the process includes monitoring, and highlight any differences in processes for CCDF and non-CCDF providers and licensed and license-exempt providers:**

A substantiated parental complaint is where the investigating party has found a preponderance of evidence to support the complaint. The Colorado Department of Human Services, Office of Early Childhood, investigates parental complaints that involve a licensed facility and do not include allegations of child abuse and neglect. Parental complaints that include allegations of abuse and neglect against facilities that are either licensed, license exempt or providing illegal care occur in coordination with the Office of Children, Youth and Families, Division of Child Welfare. Complaint timeframes for investigation are based on the severity of the allegations. The Frequency of monitoring visits are determined based on the severity of the complaint and the licensing history of the provider. Colorado utilizes the same process for screening, substantiating and responding to complaints for non-CCDF providers as it does for CCDF providers.

In addition, for Licensed Exempt CCCAP providers, complaints shall be referred to the Colorado Department of Human Services, Division of Early Care and Learning Licensing staff or appropriate contracted agencies the same day as it is received by the county when the complaint is about a qualified exempt child care provider, who is alleged to be providing illegal care or the complaint is related to issues with a qualified exempt child care provider such as violation of non- discrimination laws or denial of parent access (does not include investigation of illegal care).

The Department does not establish processes for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

**2.2.3 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints. Highlight any differences in processes for CCDF and non-CCDF providers and licensed and license-exempt providers:**

The Colorado Department of Human Services retains records of substantiated parental complaints for illegal care, child abuse, or licensing violations on an imaging system. These records do not have an expiration date.

For Qualified Licensed Exempt CCCAP providers county departments of human services retain records of substantiated parental complaints.

The Department does not maintain records for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

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

Child care licensing reports of inspection (ROI), complaints made against the program, investigations following child abuse/neglect assessments (stage II), investigations of reported injuries at the program and actions impacting the status of the program license (adverse action) are all available on the Colorado Shines website ([www.coloradoshines.com](http://www.coloradoshines.com)) and display within the program search results. This information is also made available through a Colorado Open Records Act (request).

Child Care Assistance Program Qualified Exempt Providers are specific individuals (family, friends or neighbors) requested by a CCCAP family to provide care for their child that they have an established relationship with. To date, the Department has not received a substantiated parental complaint on a Qualified Exempt Provider. If a substantiated complaint is received it will be posted in the same location as the ROI's by provider identification number.

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

C.R.S. 26-6-108.5 (2) and (3), 7.701.55 12 CCR 2509-8, Child Care Licensing Standard Operating Procedures (internal staff working documents) C-1 through C-6, 3.914.3 (A)(1-2) 9 CCR 2503-9

## 2.3 Consumer Education Website

States and territories are required to provide information to parents, the general public, and when applicable, child care providers through a state website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III) and 98.33 (a)). The website must include information to assist families in understanding the Lead Agency's policies and procedures, including licensing child care providers. The website information must also include monitoring and inspection reports for each provider, and the quality of each provider (if such information is available for the provider) (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on the aggregate number of deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To help families access additional information on finding child care, the website must include contact information for local child care and resource referral organizations. It must also include information on how parents can contact the Lead Agency and other organizations to better understand the information on the website.

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the direct URL/website link to the consumer education website in 2.3.11.

Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved will require a CCDF Plan amendment.

**2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible. (Note: While there is no Federal CCDF definition for easily accessible, Lead Agencies may consider easily accessible websites to be searchable, simple to navigate, written in plain language, and easy to understand.):**

The Colorado Department of Human Services, Office of Early Childhood maintains two consumer friendly websites for families, child care providers, early childhood professionals, and other stakeholders interested in statewide efforts for early care and learning: [www.coloradoshines.com](http://www.coloradoshines.com) and [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com). These websites include user-based navigation and an optimized search-engine, allowing for more intuitive access to information. Additionally, a site search function is incorporated into the Office of Early Childhood to aid site navigation. Finally, the sites utilize plain-language accessible trowsers at various reading levels. Both websites provide pathways to search for child care providers, with Colorado Shines.com providing more specific program-level detail on quality child care searches and licensing history of providers. These searches are combined and hosted at [www.coloradoshines.com](http://www.coloradoshines.com). Consumer-friendly guidance is integrated within each section of the search result to help users read reports of inspection and understand the severity of complaints assigned to facilities. Coloradoshines.com is available in English and Spanish languages (Spanish URL: [www.coloradoshines.com/es](http://www.coloradoshines.com/es)). The child care search on this site provides multiple criteria for users to search for providers, and uses informational pop-ups to help define terms or provide more information about the search features.

Consumer-friendly guides and worksheets provide additional information to families, child care providers, and early childhood professionals. These guides clarify state level processes, such as how to become licensed and the requirements for personnel qualifications. These documents are hosted on both consumer websites.

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

The Office of Early Childhood website (Spanish URL: <http://coloradoofficeofearlychildhood.force.com/oec/home?lang=es>) and the Colorado Shines website (Spanish URL: [www.coloradoshines.com/es](http://www.coloradoshines.com/es)) are available in both English and

Spanish languages. A Language Line or Google Translate can be utilized when translation support is needed for other languages.

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

The Colorado Department of Human Services, Office of Early Childhood website is ADA accessible at a level of AA and is 508 compliant.

### **2.3.4 Provide the specific website links to the descriptions of the Lead Agency's processes related to child care.**

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

- a. Provide the direct URL/website link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in subsection 5.2

[http://coloradoofficeofearlychildhood.force.com/oec/OEC\\_Providers?p=providers&s=Child-Care-Licensing-and-Administration&lang=en](http://coloradoofficeofearlychildhood.force.com/oec/OEC_Providers?p=providers&s=Child-Care-Licensing-and-Administration&lang=en)

- b. Provide the direct URL/website link to the processes for conducting monitoring and inspections of child care providers, as described in subsection 5.4:

[http://coloradoofficeofearlychildhood.force.com/oec/OEC\\_Providers?p=Providers&s=Rules-and-Regulations&lang=en](http://coloradoofficeofearlychildhood.force.com/oec/OEC_Providers?p=Providers&s=Rules-and-Regulations&lang=en)

Our internal Standard Operating Procedures, specifically L-7, requires the monitoring and inspection of child care programs prior to licensure and no less frequently than annually once licensed.



c. Provide the direct URL/website link to the policies and procedures related to criminal background checks for staff members of child care providers, as described in 5.5.2.  
[http://coloradoofficeofearlychildhood.force.com/oec/OEC\\_Providers?p=Providers&s=Background-Checks&lang=en](http://coloradoofficeofearlychildhood.force.com/oec/OEC_Providers?p=Providers&s=Background-Checks&lang=en)

d. Provide the direct URL/website link to the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in questions 5.5.4:  
[http://coloradoofficeofearlychildhood.force.com/oec/OEC\\_Providers?p=Providers&s=Background-Checks&lang=en](http://coloradoofficeofearlychildhood.force.com/oec/OEC_Providers?p=Providers&s=Background-Checks&lang=en)

### **2.3.5 How does the Lead Agency post a localized list of providers searchable by zip code on its website?**

The consumer education website must include a list of all licensed providers (98.33 (a)(2)). At the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt, can be included. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.

a. Provide the website link to the list of child care providers searchable by ZIP code:  
<https://www.coloradoshines.com/home>

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

- i. License-exempt center-based CCDF providers
- ii. License-exempt family child care (FCC) CCDF providers
- iii. License-exempt non-CCDF providers
- iv. Relative CCDF child care providers
- v. Other.

## Describe

c) Identify what informational elements, if any, are available in the searchable results.  
Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

### All Licensed Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver
- Quality Information
- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

### License-Exempt CCDF Center-based Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver
- Quality Information
- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

### License-Exempt CCDF Family Child Care Home Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver

- Quality Information
- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

#### License-Exempt Non-CCDF Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver
- Quality Information
- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

#### Relative CCDF Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver
- Quality Information
- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

2.3.5 How does the Lead Agency post a localized list of providers searchable by zip code on its website?

The consumer education website must include a list of all licensed providers (98.33 (a)(2)). At the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt, can be included. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.

d. Other information included for:

i. All Licensed providers.

Describe

Additional information included for licensed providers include the following: 1) License issue date (unless this is the same as years in operation); 2) If the program participates in Head Start; 3) Type of child care setting; 4) Any child special needs the program meets; and 5) If the program is accepting new children.

ii. License-exempt CCDF center-based providers.

Describe

iii. License-exempt CCDF family child care providers.

Describe

iv. License-exempt, non-CCDF providers.

Describe

v. Relative CCDF providers.

Describe

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

a. What information does the Lead Agency provide on the website to determine quality ratings or other quality information?

i. Quality rating and improvement system

ii. National accreditation

- iii. Enhanced licensing system
- iv. Meeting Head Start/Early Head Start Program Performance Standards
- v. Meeting Prekindergarten quality requirements
- vi. School-age standards, where applicable
- vii. Other.  
Describe

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

- i. Licensed CCDF providers.

Describe the quality information:

Information about licensed programs (CCDF and non-CCDF) that have been quality rated. Is publicly available on the Colorado Shines website, [www.coloradoshines.com](http://www.coloradoshines.com). Content for this website targets parents and families of young children to help them search for quality-rated providers for their young children and promotes the benefits of quality early care and education. This resource offers messages with easy-to-understand plain language, including defining what is meant by "quality" child care and education. Quality levels achieved by child care programs are posted on this website which contains a child care facility search for parents and the public. The website also provides parents and families with information to help them support their child's learning and development.

- ii. Licensed non-CCDF providers.

Describe the quality information:

Information about licensed programs (CCDF and non-CCDF) that have been quality rated. Is publicly available on the Colorado Shines website, [www.coloradoshines.com](http://www.coloradoshines.com). Content for this website targets parents and families of young children to help them search for quality-rated providers for their young children and promotes the benefits of quality early care and education. This resource offers messages with easy-to-understand plain language, including defining what is meant by "quality" child care and education. Quality levels achieved by child care programs are posted on this website which contains a child care facility search for parents and the public. The website also provides parents and families with information to help them support their child's learning and development.

iii. License-exempt center-based CCDF providers.

Describe the quality information:

iv. License-exempt FCC CCDF providers.

Describe the quality information:

v. License-exempt non-CCDF providers.

Describe the quality information:

vi. Relative child care providers.

Describe the quality information:

vii. Other.

Describe

**2.3.7 Lead Agencies must post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services. These reports must include the results of required annual monitoring visits, and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. A full report covers everything in the monitoring visit, including areas of compliance and non-compliance. If the state does not produce any reports that include areas of compliance, the website must include information about all areas covered by a monitoring visit (e.g., by posting a blank checklist used by monitors).**

The reports must be in plain language or provide a plain language summary, as defined by the state or territory, and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports.

Certify by responding to the questions below:

a. Does the Lead Agency post? (check one):

- i. Full monitoring reports that include areas of compliance and non-compliance.
- ii. Monitoring reports that include areas of non-compliance only, with information about all areas covered by a monitoring visit posted separately on the website (e.g., a blank checklist used by monitors). Note: This option is only allowable if the state/territory does not produce monitoring reports that include both areas of compliance and non-compliance.

If checked, provide a direct URL/website link to the website where a blank checklist is posted.

The Colorado Department of Human Services, Office of Early Childhood, Child Care Licensing unit monitors facilities for all rules and regulations related to their specific program type. Deficiencies to rule and regulations are listed on the programs Report of Inspection (ROI) and posted on the Colorado Shines website (www.coloradoshines.com). The rules and regulations for each program type are listed on the Colorado Office of Early Childhood website at

[https://www.coloradoofficeofearlychildhood.com/OEC\\_Providers?p=Providers&s=Rules-and-Regulations&lang=en](https://www.coloradoofficeofearlychildhood.com/OEC_Providers?p=Providers&s=Rules-and-Regulations&lang=en) on the Office of Early Childhood website under Health and Safety Requirements  
[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Health-Safety&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Health-Safety&lang=en)

b. Check to certify that the monitoring and inspection reports and, if necessary, their plain language summaries include:

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

Describe how these health and safety violations are prominently displayed:

The Colorado Department of Human Services, Office of Early Childhood utilizes the Colorado Shines website ( www.coloradoshines.com) to educate and direct users to the " Colorado Child Care Facility Search." Results generated from this search detail provider-specific summaries that list any health and safety violations, including fatalities or serious injuries. The reports for serious injuries, deaths and substantiated cases of child abuse that have occurred in child care settings can be

found at

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Resources?p=Resources&s=Reports-and-Data&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Resources?p=Resources&s=Reports-and-Data&lang=en) under the reports tab.

These reports of inspection (ROI) are publicly accessible through the Colorado Shines child care provider search at [www.coloradoshines.com](http://www.coloradoshines.com). The reports are organized by type, allowing consumers to select reports specifically related to health and safety violations, complaints made against the program, investigations following child abuse/neglect assessments (stage II), investigation of reported injuries at the program and actions impacting the status of the program license (adverse action).

**Non-Relative Qualified Exempt Providers:** The final reports of inspection (ROI) are posted to the Office of Early Childhood Website within 10 calendar days of receipt from the provider. Counties shall maintain a copy of the non-relative qualified exempt provider's health and safety report of inspection in the provider file. The report of inspection shall be made available to the client upon request to the county or the State Department.

The Department posts links to ROIs for DoD providers or for child care centers located out of state. The links are to ROIs that are conducted by the DoD or the state in which the provider is licensed.

[Corrective action plans taken by the state and/or child care provider.](#)

[Describe:](#)

Where appropriate, information for any adverse action or enforcement actions (corrective actions) affecting the status of the program license is displayed within the search result of a child care provider. These reports would include the observation, the rule citation and the corrective action that must be taken by the provider. Types of adverse actions taken by the state included on the search would include:

1. Probation: When a child care license is in probationary status, the program agrees to conditions that they must follow while on probation. The conditions are unique to each program. Probation usually lasts for a period of six (6) months, and begins on the final outcome date. When probation occurs, parents/guardians of children currently enrolled in the program will receive a



letter from the Colorado Department of Human Services, Office of Early Childhood describing the reason for probation.

2. Revocation: When a child care program consistently violates regulations, or when a serious licensing violation occurs, the Colorado Department of Human Services, Office of Early Childhood may request the revocation of the child care license. This legal action requires a hearing before an administrative law judge.
3. Summary Suspension: When the Colorado Department of Human Services, Office of Early Childhood receives information that there is imminent danger to children, a program's child care license may be summarily suspended. This is an emergency action.
4. Fines: In addition to other sanctions allowed by Colorado Law, any applicant, licensee or person providing child care without the required license is violating Colorado Law. Fines may also be issued for very serious violations of the rules and regulations for intentionally making any false statement or report to the Department or to any agency delegated by the Department to make an investigation or inspection. The fine is considered a civil penalty.
5. Settlement Agreement: A settlement agreement may be offered by the Colorado Department of Human Services, Office of Early Childhood when a child care program has satisfactorily corrected all violations which created the adverse action recommendation. The program also implements processes above and beyond licensing requirements to ensure that the violations will not occur again.

The Licensing Specialist reviews all reports of inspection (ROI) at time of inspection/investigation onsite with the program prior to obtaining program representative signature. The Licensing Specialist submits the ROI within five calendar days of completion for Licensing Supervisor review. The Licensing Supervisor reviews the ROI for accuracy within five calendar days of receipt from the Licensing Specialist. If the ROI is accepted it is posted to the public Colorado Shines website. If it is rejected for any inaccuracies it is amended, reviewed, and signed by the program, re-reviewed by the Licensing Supervisor, and posted to the Colorado Shines website within 10 calendar days.

For Non-Relative Qualified Exempt Providers, the provider shall correct any health and safety inspection standards within thirty (30) days after the inspection unless the results identify standards that must be corrected immediately. If the Non-Relative Qualified Exempt Provider fails to comply with any of the requirements, the county shall deny or terminate a fiscal agreement.

A minimum of 3 years of results, where available.

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

i. Provide the direct URL/website link to where the reports are posted.

[https://www.coloradoshines.com/program\\_details?id=001o000000JBEFTA5](https://www.coloradoshines.com/program_details?id=001o000000JBEFTA5)

CCCAP Exempt from Licensing reports are posted on the OEC Website under Information For Families at:

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Families?p=Family&s=Colorado-Child-Care-Assistance-Program&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Families?p=Family&s=Colorado-Child-Care-Assistance-Program&lang=en)

ii. Describe how the Lead Agency defines timely posting of monitoring reports.

The Colorado Department of Human Services, Office of Early Childhood adheres to defined procedures to ensure reports of inspection are posted in a timely manner. The Licensing Specialist must provide the report of inspection (ROI) to the facility either immediately at the time of inspection, but no more than three calendar days from time of inspection. The Licensing Specialist must submit the signed ROI to the Licensing Supervisor for review within five calendar days of completion.

For Non-Relative Qualified Exempt Providers, the final ROI is posted to the public Office of Early Childhood Website within 10 calendar days of receipt from the provider.

The Department does not determine the timeframe for posting ROIs for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

d. Monitoring and inspection reports or the summaries must be in plain language to meet the CCDF regulatory requirements (98.33 (a)(4)).

i. Provide the Lead Agency's definition of plain language.

Easy for individuals to understand.

ii. Describe how the monitoring and inspection reports or the summaries are in plain language.

[https://www.coloradoshines.com/program\\_details?id=001o000000JBEFTAA5](https://www.coloradoshines.com/program_details?id=001o000000JBEFTAA5)

e. Describe the process for correcting inaccuracies in reports (98.33 (a)(4)).

The Licensing Supervisor Reviews the ROI within five calendar days of receipt from the Licensing Specialist. If the ROI is accepted it is posted to the public Colorado Shines website. If it is rejected for any inaccuracies it is amended, reviewed and signed by the program, re-reviewed by the Licensing Supervisor and posted to the Colorado Shines website within ten calendar days.

For Non-Relative Qualified Exempt Providers, the ROI is reviewed by the CCCAP Program Services Manager within 5 calendar days. If it is accepted it is posted publicly on the OEC website within 10 calendar days. If it is rejected for any inaccuracies, it is amended, reviewed and signed by the program, re-reviewed by the CCCAP Program Services Manager and posted to the OEC website within 10 calendar days.

f. Describe the process for providers to appeal the findings in reports. Description of the process should include the time requirements and timeframes for:

-- filing the appeal

-- conducting the investigation

-- removal of any violations from the website determined on appeal to be unfounded.

Filing the appeal:

If a program feels a rule was applied too stringently, the program has 60 days to file an appeal. The appeal can be submitted through the Provider Hub on the Colorado Shines website.

Conducting the investigation:

The appeal is submitted to the appeals and waiver committee along with a copy of the report of inspection, and reviewed by an independent panel appointed by the Executive Director of the Department of Human Services.

Removal of any violations from the website determined on appeal to be unfounded:

If a program successfully appeals a violation the licensing specialist is required to amend the report of inspection removing the violation within 10 days, and the an amended report of inspection is posted on the Colorado Shines website.

Non-Relative Qualified Exempt Providers who are denied a fiscal agreement or whose fiscal agreement is terminated due to the department's decision regarding adherence to health and safety standards may appeal the decision to the executive director of the state department of human services or his/her designee in writing within 15 days of the county's decision. The executive director's decision is a final agency decision subject to judicial review by the state district court under §24-4-106, C.R.S.

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

The Colorado Department of Human Services, Office of Early Childhood maintains monitoring reports or reports of inspection (ROI) on the website for three years. The website manages the number of years these reports are posted by automatically removing an ROI at three years from the initial post date.

For Non-Relative Qualified Exempt Providers, the Colorado Department of Human Services, Office of Early Childhood maintains monitoring reports or reports of inspection (ROI) for three years.

The Department does not determine the timeframe for posting ROIs for DoD providers or for child care centers located out of state; the Office of Early Childhood reviews the links to the ROIs annually for accuracy.

**2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted by Lead Agencies on the consumer education website (98.33(a)(5)). The serious incident aggregate data should include information about any child in the care of a provider eligible to receive CCDF, not just children receiving subsidies.**

This aggregate information on serious injuries and deaths must be separated by category of care (e.g. centers, family child care homes, and in-home care) and licensing status (i.e. licensed or license-exempt) for all eligible CCDF providers in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. Information should also include the total number of children regulated to be cared for by provider type and licensing status (81 FR, p. 67477), so that families can view the serious injuries, deaths, and substantiated cases of abuse data in context. The aggregate report should not include individual provider-specific information or names.

a. Certify by providing:

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

The Colorado Department of Human Services, Office of Early Childhood utilizes an online Injury Reporting System through the provider hub found on [Coloradoshines.com](http://Coloradoshines.com). Child care providers must complete a report when a child in care has received emergency medical attention, has been hospitalized or if there has been a fatality.

Child care providers are required to complete the online Injury Report through the provider hub within 24 hours of an incident. If a provider is unable to access the online system, they must use the paper form, and submit the form to the Office of Early Childhood, Division of Early Care and Learning within 24 hours of the incident.

Other injuries not requiring medical attention can be documented using the Accident/Injury Report Form developed by each provider. Child care providers must ensure parents are notified of all injury or accident reports.

In some cases, the local Child Protective Services office is notified when an injury occurs. Examples include unexplained injuries, injuries that were not observed by an adult, a near drowning, or burns.

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

"Substantiated child abuse" means that there is a preponderance of evidence that the

abuse (or neglect) occurred.

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

An injury is considered to be a "serious injury" when a child in care has received emergency medical attention or has been hospitalized.

b. Certify by checking below that the required elements are included in the Aggregate Data Report on serious incident data that have occurred in child care settings each year.

- i. the total number of serious injuries of children in care by provider category/licensing status
- ii. the total number of deaths of children in care by provider category/licensing status
- iii. the total number of substantiated instances of child abuse in child care settings
- iv. the total number of children in care by provider category/licensing status

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

[https://dcfs.my.salesforce.com/sfc/p/#410000012srR/a/4N000000a8sz/3F02jFA\\_wgiPVLbJxAeGOaNIGTHxAiu1OMNCQ3zYYnl](https://dcfs.my.salesforce.com/sfc/p/#410000012srR/a/4N000000a8sz/3F02jFA_wgiPVLbJxAeGOaNIGTHxAiu1OMNCQ3zYYnl)

The Department does not post this information for DoD providers or for child care centers located out of state. These are posted by the DoD or the state in which the provider is licensed.

**2.3.9 The consumer education website must include contact information on referrals to local child care resource and referral organizations (98.33 (a)(6)). How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information:**

The Colorado Department of Human Services, Office of Early Childhood utilizes a two pronged strategy to support consumer education efforts. Individuals have the option to access information on the Colorado Shines or Office of Early Childhood websites to access

information for resources related to child care or other needed resources ( [http://coloradoofficeofearlychildhood.force.com/oec/OEC\\_Families?p=family&s=Find-Child-Care&lang=en](http://coloradoofficeofearlychildhood.force.com/oec/OEC_Families?p=family&s=Find-Child-Care&lang=en) and <https://www.coloradoshines.com/families>). In cases where it is more useful to speak directly with a Child Care Resource and Referral expert to discuss their needs, a toll free number is posted on these websites and within printed material. This Service is available through a statewide call center and available in English and Spanish.

**2.3.10 The consumer education website must include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website (98.33 (a)(7)). Describe and include a website link to this information:**

Both the Colorado Shines website and the Office of Early Childhood website include "contact us" information where parents or other stakeholders can direct questions or request additional support in order to understand information included on the website. The following are links to this information: <http://coloradoshines.force.com/contact> and [http://coloradoofficeofearlychildhood.force.com/oec/OEC\\_Resources?p=resources&s=Contact-Us&lang=en](http://coloradoofficeofearlychildhood.force.com/oec/OEC_Resources?p=resources&s=Contact-Us&lang=en).

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

[www.coloradoshines.com](http://www.coloradoshines.com) and [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)

## 2.4 Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

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

The Colorado Department of Human Services (CDHS) deploys a multi-pronged approach to communicate the availability of child care services provided through CCDF and other programs for which the family may be eligible, as well as the need for and value of quality early care and education to parents of eligible children, providers and the general public.

Coloradoshines.com provides information about the availability and diverse offerings of child care services to support informed choices. This site also provides information regarding the availability of child care assistance and quality of child care providers. Finally, this site provides research and best practices to support child development, and points users to [www.earlylearningco.org](http://www.earlylearningco.org) for more comprehensive information. Parents and families of young children also receive information about quality-rated programs. The Colorado Shines website, [www.coloradoshines.com](http://www.coloradoshines.com), targets parents and families of young children to help them search for quality-rated providers for their young children and promotes the benefits of quality early care and education. The website offers messages with easy-to-understand plain



language, including defining what is meant by "quality" child care and education. Quality levels achieved by child care programs are posted on the website and contain a child care facility search for parents and the public. The website also provides information to help parents and families support their child's learning and development and gain access to other needed supports, including, but not limited to, Temporary Assistance for Needy Families, Head Start/Early Head Start, Low-Income Energy Assistance Program, Supplemental Nutrition Assistance Program, Women, Infants and Children program, Child and Adult Care Food Program, and Medicaid and State Children's Health Insurance Program, Early Intervention Services (IDEA, Part C) and preschool special education (IDEA, Part B). The website also offers content specific to Colorado policies and resources regarding the social-emotional behavioral health of young children, including child care licensing regulations and the availability of early childhood mental health specialists. This content is also available on [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com).

A brochure is distributed by the state and local partners to provide parents and the general public with resources that allow these audiences to access information on the availability and diversity of child care services, child care assistance, early childhood development research and best practices, a menu of additional early childhood programs including Individuals with Disabilities Education Improvement Act (IDEA) services, and additional programs for which families applying for the Colorado Child Care Assistance Program (CCCAP) may be eligible. The brochure is also distributed through county departments of human/social services, who are mandated to distribute.

Communication targeting providers offer information about the Colorado Shines quality rating process, how it works, and what the benefits are, such as financial incentives and professional development. Ongoing communications occur to inform providers about the process and offer information and materials that can be used by the providers to promote their quality rating to their community and to the families they serve and seek to serve. Providers are able to add content to their profile on the Colorado Shines website to market their business. Communication to the public raises the awareness and understanding of the value of early care and learning in improving education and creating long term economic benefits, the investments being made in Colorado to raise the quality of child care, and to report on the progress of Colorado Shines in increasing the number of children attending higher quality programs. Colorado supports three websites: [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com), [www.coloradoshines.com](http://www.coloradoshines.com) and

[www.earlylearningco.org](http://www.earlylearningco.org). The websites are aligned and utilize best practices to be consumer friendly and direct parents, early childhood professionals (providers) and the general public to the information they are seeking.

Lastly, providers, parents and the general public can sign up for the Office of Early Childhood and Colorado Shines monthly newsletters to stay up to date with new resources and additional information.

The Colorado Department of Human Services, Office of Early Childhood provides information about the availability of child care services provided through CCDF and other programs for which the family may be eligible, including the Colorado Shines Quality Rating and Improvement System utilizing multiple methods: website, direct communications with e-newsletters and mail, written materials (e.g., brochures, flyers, and pamphlets), mass media, and social media. An earned-media strategy is utilized to establish ongoing communication with reporters covering education, parenting, and children's issues in the state. The earned-media strategy supports online word of mouth through the practice of 'viral' tendencies, mentions, shares, re-posts, reviews, recommendation, or content picked up by third party sites.

**2.4.2 How does the Lead Agency provide the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers? Certify by describing for each program listed below, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences. Include any partners who assist in providing this information.**

a. **Temporary Assistance for Needy Families program:**

The Universal Application, Program Eligibility and Application Kit (COLORADOPEAK), screens applicants for Temporary Assistance for Needy Families (TANF) eligibility and families may complete TANF applications online. At the local level, county departments of human services screen and/or provide Colorado Child Care Assistance Program applicants with information on TANF. Information is also shared

on the Office of Early Childhood website ( [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)) with the parents of eligible children, the general public, and where applicable, providers.

**b. Head Start and Early Head Start programs:**

The Universal Application, Program Eligibility and Application Kit (COLORADOPEAK), screens applicants for Head Start and Early Head Start Programs and families are able to complete Head Start applications online. At the local level, county departments of human services screen and/or provide Colorado Child Care Assistance Program applicants with information on Head Start and Early Head Start if available. At this time, screening and on-line applications for Head Start are not available in all areas of the state. Information is also shared on the Office of Early Childhood website [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com) with the parents of eligible children, the general public, and where applicable, providers.

**c. Low Income Home Energy Assistance Program (LIHEAP):**

The Universal Application, Program Eligibility and Application Kit (COLORADOPEAK), screens applicants for Low Income Energy Assistance Program (LEAP). At the local level, county departments of human services screen and/or provide Colorado Child Care Assistance Program applicants with information on LEAP. Information is also shared on the Office of Early Childhood website ( [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)) with the parents of eligible children, the general public, and where applicable, providers.

**d. Supplemental Nutrition Assistance Programs (SNAP) Program:**

The Universal Application, Program Eligibility and Application Kit (COLORADOPEAK), screens applicants for the Colorado Food Assistance Program and families are able to complete Supplemental Nutrition Assistance Programs (SNAP) applications online. At the local level, county departments of human services screen and/or provide Colorado Child Care Assistance Program (CCCAP) applicants with information on the food assistance program. Information is also shared on the Office of Early Childhood website ( [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)) with the parents of eligible children, the general public, and where applicable, providers.

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

The Universal Application, Program Eligibility and Application Kit (COLORADOPEAK), screens applicants for Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). At the local level, county departments of human services screen and/or provide Colorado Child Care Assistance Program applicants with information on WIC. Information is also shared on the Office of Early Childhood website ( [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)) with the parents of eligible children, the general public, and where applicable, providers.

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

Information is coordinated between the Child and Adult Care Food Program (CACFP) program in the Department of Public Health and Environment and the Office of Early Childhood, Department of Human Services. At the local level, county departments of human services screen and/or provide Colorado Child Care Assistance Program applicants with information on CACFP. Online training modules for child care providers are developed in coordination with CACFP and Child Care Licensing. Information on CACFP is also posted on the Office of Early Childhood website ( [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)) with the parents of eligible children, the general public, and where applicable, providers.

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

Families are able to apply for Medicaid through the Universal Application, Program Eligibility and Application Kit (PEAK). Families are screened and able to apply for the CHP+ program in Colorado through the Universal Application, Program Eligibility and Application Kit (COLORADO PEAK). At the local level, county departments of human services screen and/or provide Colorado Child Care Assistance Program applicants with information on CHIP. Information is also shared on the Office of Early Childhood website ( <http://www.coloradoofficeofearlychildhood.com>) with the parents of eligible children, the general public, and where applicable, providers.

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

The Universal Application, Program Eligibility and Application Kit (COLORADOPEAK), screens applicants for both Parts C and B Individuals with Disabilities Education Improvement Act (IDEA). At the local level, county departments of human services

screen and/or provide Colorado Child Care Assistance Program applicants with information on these programs. Information is also shared on the Office of Early Childhood website ( [www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)) with the parents of eligible children, the general public, and where applicable, providers.

**2.4.3 Describe how the Lead Agency makes information available to parents, providers and the general public on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity and information about successful parent and family engagement. The description should include:**

- what information is provided
- how the information is provided
- how the information is tailored to a variety of audiences, including:
  - parents
  - providers
  - the general public
- any partners in providing this information

**Description:**

The Colorado Shines website, [www.coloradoshines.com](http://www.coloradoshines.com), focuses on the quality rating and improvement system, provides resources, and addresses the importance of quality. This website includes a family section that outlines resources available to families and information for how families can best support their child's development and early learning. This section directly links to the website, [www.earlylearningco.org](http://www.earlylearningco.org) , the central resource for parents, providers and partners to learn more about the Colorado Early Learning and Development Guidelines in English and Spanish.

The Colorado Early Learning and Development Guidelines describe the path of children's learning and development from birth to eight years old. They are designed so that everyone

who cares for young children can play an important part in giving Colorado's children a strong start. The Guidelines are based on research and bring together widely accepted strategies to help children develop successfully. Links to national organizations, such as ZERO to THREE and the National Association for the Education of Young Children (NAEYC), are included on the Colorado Shines website. The website [www.earlylearningco.org](http://www.earlylearningco.org) offers resources that offer practical tips and points of reference that anyone can use to help children grow and learn. These resources are utilized and distributed by early learning partners across the state.

The Colorado Department of Human Services, Office of Early Childhood utilizes early childhood mental health consultants and Early Childhood Councils to make information about research and best practices in child development available at the local level.

**2.4.4 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include**

- what information is provided,
- how the information is provided, and
- how information is tailored to a variety of audiences, and
- include any partners in providing this information.

**Description:**

Parents and families of young children regularly receive information about quality rated programs through various channels. The Colorado Shines website, [www.coloradoshines.com](http://www.coloradoshines.com), targets parents and families of young children to assist them in their search for quality-rated providers and promotes the benefits of quality early care and

education. This resource offers messages with easy-to-understand plain language, including defining what is meant by "quality" child care and education. Quality levels achieved by child care programs are posted on this website which contains a child care facility search for parents and the public. The website also provides parents and families with information to help support their child's learning and development.

The Colorado Department of Human Services utilizes local delivery partners to support the dissemination of information to families. These partners include county departments of human services, local agencies offering child care resource and referral services and support, the centralized call center that supports child care resource and referral activities, early childhood mental health specialists and Early Childhood Councils. Family information is also available at the following websites: Colorado Shines Quality Rating and Improvement System website ([www.coloradoshines.com](http://www.coloradoshines.com)), Colorado Early Learning and Development Guidelines website ([www.earlylearningco.org](http://www.earlylearningco.org)), and the Office of Early Childhood website ([www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)). Specifically, the following information is provided:

1. Information about the availability of the full diversity of child care services that will promote informed child care choices. This information is currently available through county departments of human services on their Colorado Child Care Assistance Program (CCCAP) websites. In addition, families who need assistance in selecting child care programs and information about different types of child care options are referred to Resources and Referral agencies.
2. Availability of child care assistance. County departments of human services post information on their websites describing eligibility criteria and requirements for CCCAP. Community based organizations, such as the Resource and Referral agencies and Early Childhood Councils, also contribute in the effort of informing families about CCCAP. The Office of Early Childhood website contains a section devoted to CCCAP which includes an overview of child care assistance.
3. Quality of child care providers. The Colorado Shines Quality Rating and Improvement System website includes information on how to find quality child care and posts ratings for individual child care programs. This website also contains a link to the Colorado Child Care Assistance Program (CCCAP), Colorado's child care subsidy program.
4. Research and best practices in child development, including all domains, and parent and family engagement: While some of this information exists on the Colorado Shines website (<http://coloradoshines.force.com/ColoradoShines>) and the Colorado Early Learning and Development Guidelines website (<http://earlylearningco.org>), more in-depth information will be added over time as a course of regular content development and maintenance for these sites.
5. Information regarding policies on expulsion of preschool-aged children.
6. Policies regarding the social-emotional/behavioral and early childhood mental health of young children. Child Care Licensing regulations require child care centers to have

procedures in place to provide individualized social/emotional intervention supports and to utilize early childhood mental health consultants. Additionally, Colorado provides materials, social media content, messaging, and training videos specifically for providers to support young children and families on topics related to mental health at [www.earlychildhoodmentalhealthCO.org](http://www.earlychildhoodmentalhealthCO.org).

Communication targeting providers offer information about the Colorado Shines quality rating process, how it works, and what the benefits to them are, such as financial incentives and professional development. Ongoing communications occur to inform providers about the process and offers information and materials that can be used by the providers to promote their quality rating to their community and to the families they serve and seek to serve. Providers are able to add content to their profile on the Colorado Shines website to market their business.

Colorado provides information about the Colorado Shines Quality Rating and Improvement System utilizing multiple methods: website, direct communications with e-newsletters and mail, written materials (e.g., brochures, flyers, and pamphlets), mass media, and social media. An earned-media strategy is utilized to establish ongoing communication with reporters covering education, parenting, and children's issues in the state. The earned-media strategy supports online word of mouth through the practice of 'viral' tendencies, mentions, shares, re-posts, reviews, recommendation, or content picked up by third party sites.

Specifically, these mediums support messages related to the following:

1. Information regarding policies on expulsion of preschool-aged children.
2. Policies regarding the social-emotional/behavioral and early childhood mental health of young children. Child Care Licensing regulations require child care centers to have procedures in place to provide individualized social/emotional intervention support and to utilize early childhood mental health consultants.

Information is posted on the Colorado Shines Quality Rating and Improvement System Website ([www.coloradoshines.com](http://www.coloradoshines.com)), Colorado Early Learning and Development Guidelines website ([www.earlylearningco.org](http://www.earlylearningco.org)), and the Office of Early Childhood website ([www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)). The Colorado Shines Professional Development Information System offers training modules that address the social-emotional/behavioral and early childhood mental health of young children and the important resource it is for professionals, families, and advocates who care for and about children. Information on early mental health specialists, located throughout the state, is available on the Office of Early Childhood website. Additionally, Colorado provides materials, social media content, messaging, and training videos specifically for providers to support young children and families on topics related to mental health at [www.earlychildhoodmentalhealthCO.org](http://www.earlychildhoodmentalhealthCO.org).



Communication to the public intends to raise the awareness and understanding of: 1) the value of early care and learning in improving education and creating long term economic benefits 2) the investments being made in Colorado to raise the quality of child care; 3) to ensure the policies on expulsion of preschool-aged children are understood; and, 4) reinforce the importance of social-emotional/behavioral and early childhood mental health of young children.

The Colorado Department of Human Services, Office of Early Childhood leverages a statewide help desk, licensing specialists, quality rating assessors and local delivery system partners who routinely interact with providers (local agencies providing child care resource and referral services and supports, Early Childhood Councils, quality improvement coaches, early childhood mental health consultants, infant-toddler specialists), county department of human services, the state advisory council (Early Childhood Leadership Commission), and other statewide early childhood organizations to assist in the communications about Colorado Shines.

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

The Colorado Department of Human Services, Office of Early Childhood requires through rule that programs must give the parent(s)/guardian(s) the program policies and procedures, and provide the opportunity to ask questions. Written copies must be available either electronically or in hard copy. The program must obtain a signed document stating that the parent(s)/guardian(s) have received the policies and procedures, and by signing the policies and procedures document, the parent(s)/guardian(s) agree to follow, accept the conditions of, and give authorization and approval for the activities described in the policies and procedures, including procedures on guidance, positive instruction, supporting positive behavior, discipline and consequences, including how the provider will:

1. Cultivate positive child, staff and family relationships;
2. Create and maintain a socially and emotionally respectful early learning and care

environment;

3. Implement teaching strategies supporting positive behavior, pro-social peer interaction, and overall social and emotional competence in young children;
4. Provide individualized social and emotional intervention support for children who need them, including methods for understanding child behavior, and developing, adopting and implementing a team-based positive behavior support plan with the intent to reduce challenging behavior and prevent suspensions and expulsions; and,
5. Access an early childhood mental health consultant or other specialist as needed.  
(Child Care Centers - 7.702.31 (H) (1-5) 12 CCR 2509-8. Family Child Care Homes - 7.707.41(B)(19) 12 CCR 2509-8. School Age Programs 7.712.31(A)(9) 12 CCR 2509-8.)

To assist providers in meeting this requirement, the Colorado Department of Human Services, Office of Early Childhood includes an Early Childhood Mental Health Consultation (ECMHC) Program. ECMHC is a no cost voluntary caregiver support program for parents and caregivers caring for children ages six years and under who desire extra support to foster the social-emotional development and mental health of the children in their care as a means to reduce suspensions and expulsions in early care and learning settings. This program compiles information on best practices and research for parents, providers and the general public. Best practice messaging about social emotional health and well-being is available statewide and online at Family and Provider Resources. The information can be accessed by child care providers to share with families and staff as well as by other community partners so that consistent, well-researched information is used by all.

## [2.5 Procedures for Providing Information on Developmental Screenings](#)

Lead Agencies are required to provide information on developmental screenings to parents, the general public and, when applicable, child care providers. Information should include: Existing resources and services that the state can use in conducting developmental screenings and providing referrals to services for children who receive child care assistance. Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). This information about the resources can include the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening

services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)). Information on developmental screenings, as other consumer education information, should be accessible for individuals with limited English proficiency and individuals with disabilities.

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

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

The Colorado Department of Human Services, Office of Early Childhood maintains public awareness materials that provide resources for families that are intended to help them find success and support the early learning and development of their children. This Information is also maintained on the Office of Early Childhood website ([www.coloradoofficeofearlychildhood.com](http://www.coloradoofficeofearlychildhood.com)) and the Colorado Shines website ([www.coloradoshines.com](http://www.coloradoshines.com)). Each website includes a link to the Colorado Early Learning and Development Guidelines website (<https://earlylearningco.org>) which provides practical tips and points of reference that anyone can use to help kids grow physically, intellectually and emotionally. This includes guidance for how a parent or other caregiver can access services available for conducting developmental screenings. Public Awareness materials and the websites are regularly maintained and reviewed by communications staff to ensure accuracy. These websites and resources are provided both in English and Spanish and are ADA and 508 compliant.

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

The Colorado Child Care Assistance Program (CCCAP) rules require county departments of human services to provide information and referrals for providers, parents and the general public on developmental screenings through the CCCAP application process and entered in the Child Care Automated Tracking System (3.911 (N)(4)(5) 9

CCR 2503-9) . This application includes a field for county staff to indicate cases where a family has a concern about their child's development and a referral or additional developmental screening information was provided. The Child Care Automated Tracking System collects and tracks data on these cases.

Additionally, three online, self-paced, e-learning modules have been developed to provide an overview of the importance of developmental screening and surveillance practices for all children, including children who receive subsidy, who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays. These modules are available on the Colorado Shines Professional Development Information System (Colorado Shines PDIS) and accessible free of charge to both professionals and family members and include:

The Ages and Stages Questionnaire (ASQ) in a Coordinated System of Care

1. Understanding Your Role in Child Development
2. Determining Your Role in a Coordinated Approach to Developmental Screening, Referral and Follow-up

The Ages and Stages Questionnaires (ASQ), along with informed clinical opinion, is used to assess the developmental status of a child birth to six years of age across five developmental areas: communication, gross motor, fine motor, problem solving, and personal-social. The ASQ:SE questionnaire is suggested to be used to check the social emotional development of a child. These modules reinforce the importance of a coordinated approach to developmental screening. These modules were developed in partnership with the Colorado Assuring Better Child Health and Development (ABCD) program that developed the Model Community Framework (MCF) inspired by "An Integrated Approach to Supporting Child Development" article that was published by Children's Hospital of Philadelphia. The ABCD program provides technical assistance to community partners, including health care providers, child care professionals, Early Intervention and Child Find teams, and all other stakeholders regarding the implementation of an American Academy of Pediatrics medical home model using the Model Community Framework. The Model Community Framework is based on the idea that screenings must happen as part of a spectrum of activities that include the following essential roles:

1. Monitoring and surveillance
2. Screening Referral Evaluation Parent Education; and,
3. Resources and support.

The goal of this model is to screen for developmental delay, referring children early when concerns exist, and evaluating and connecting children to services when appropriate. This includes referrals to Early and Periodic Screening, Diagnosis, and Treatment Program and developmental screening services available under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).

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

The Child Care Assistance Program (CCCAP) rules require county departments of human services to provide information and referrals for providers, parents and the general public on developmental screenings through the CCCAP application process and entered in the Child Care Automated Tracking System. (3.911 (N)(4)(5) 9 CCR 2503-9). The CCCAP application includes a field for county departments of human services to indicate whether a family requested more information or was referred for additional services, including Early and Periodic Screening, Diagnosis and Treatment or through the Individuals with Disabilities Education Improvement Act (IDEA). The Child Care Automated Tracking System collects and tracks data on these cases.

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

Families participating in the Colorado Child Care Assistance Program (CCCAP), Colorado's child care subsidy program, have access to developmental screening educational information for Early Periodic Screening, Diagnosis, and Treatment program and developmental screening services available through Early Intervention Colorado (Part C of the Individuals with Disabilities Education Improvement Act) and Preschool Special Education (Section 619). These resources are available on the Office of Early Childhood website, the Colorado Shines website and distributed by county staff working with families during the application process for child care subsidy.

The CCCAP application also includes questions regarding a family's current involvement with programs that provide support for a developmental screening or a developmental

evaluation in cases where there is a concern about their child's development. : Medicaid/CHP+ assistance, Early Periodic Screening, Diagnosis, and Treatment program and developmental screening services available through Early Intervention Colorado (Part C of the Individuals with Disabilities Education Improvement Act) and Preschool Special Education (section 619). Currently data are captured at a household and child level and allows for families to indicate if they would like more information. The county is also able to indicate whether a referral was facilitated. Currently these data can be analyzed manually. However, once launched, the Child Care Automated Tracking System will allow the county and State to query these data more readily to analyze the cross-program involvement and referral activity.

[e\) How child care providers receive this information through training and professional development.](#)

The Colorado Department of Human Services, Office of Early Childhood leverages the Learning Management System component of the Colorado Shines Professional Development Information System (Colorado Shines PDIS) to offer training opportunities to child care professionals. Currently, the PDIS includes three online, self-paced, e-learning modules to provide an overview of the importance of developmental screening and surveillance practices for all children, including children who receive subsidy, who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays. These modules are available to all child care providers in Colorado Focusing on the purpose, benefits, and different roles of developmental screening and monitoring, including how to develop a framework and processes to integrate into the flow of an early childhood program. The final module includes a program self-assessment, which walks the learner through a question and answer process to determine if their program is ready to implement developmental screening and monitoring and recommended next steps. These training modules are available through the Colorado Shines PDIS.

[f\) Provide the citation for this policy and procedure related to providing information on developmental screenings.](#)

3.912 (N)(4) 9 CCR 2503-9

## 2.6 Consumer Statement for Parents Receiving CCDF Funds

Lead Agencies must provide CCDF parents with a consumer statement in hard copy or electronically (such as referral to a consumer education website) that contains specific information about the child care provider they select (98.33 d). Please note that if the consumer statement is provided electronically, Lead Agencies should consider ensuring the statement is accessible to parents, including parents with limited access to the internet, and that parents have a way to contact someone to address their questions.

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

a. How and when the Lead Agency provides parents receiving CCDF funds with a consumer statement identifying the requirements for providers and the health and safety record of the provider they have selected.

County departments of human services refer parents to the Colorado Shines call center which supports child care resource and referral support statewide. Additionally, county departments of human services provide families eligible for child care subsidy services a consumer education brochure that refers users to a consumer education website that contains specific information about how to select a child care provider, and the provider they may select.

b. Certify by checking below the specific information provided to families either in hard copy or electronically. Note: The consumer statement must include the eight requirements listed in the table below.

- Health and safety requirements met by the provider
- Licensing or regulatory requirements met by the provider
- Date the provider was last inspected
- Any history of violations of these requirements
- Any voluntary quality standards met by the provider
- How CCDF subsidies are designed to promote equal access
- How to submit a complaint through the hotline

- How to contact a local resource and referral agency or other community-based organization to receive assistance in finding and enrolling in quality child care

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

Families eligible for child care subsidy services are provided a consumer education brochure once they become eligible for services per the guidance of the Colorado Department of Human Services:

[https://dcfs.my.salesforce.com/sfc/p/#410000012srR/a/41000000sdD2/hmK2seV6kY035.53uMCcG88gixe8S\\_hZq782j1F7i7g](https://dcfs.my.salesforce.com/sfc/p/#410000012srR/a/41000000sdD2/hmK2seV6kY035.53uMCcG88gixe8S_hZq782j1F7i7g).

Families are also directed to the Colorado Shines call center which supports child care resource and referral support statewide. Once a family consults with a tech at the Colorado Shines call center, a follow up communication is sent by electronic mail and/or provided in hard copy with a list of referred providers, online resources, and information on health and safety requirements for child care providers, how to seek the licensing history of a child care provider, child care quality ratings, the complaint hotline, and information on financial assistance to pay for child care services. Information on other local resources that may support families is also included. These resources are provided in both English and Spanish.

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

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

In providing child care assistance to families, Lead Agencies are required to implement these policies and procedures: a minimum 12-month eligibility and redetermination period, a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for a job search of no fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. In addition, the Lead Agency is also required to describe procedures for the enrollment of children experiencing homelessness and, if applicable, children in foster care.

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond



12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local Prekindergarten, and other collaborative programs to finish the program year or, similarly, parents enrolled in school can have eligibility extended to allow parents to finish their school year. This type of policy promotes continuity for families receiving services through multiple benefit programs.

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

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

### 3.1 Eligible Children and Families

#### 3.1 Eligible Children and Families

At the time when eligibility is determined or redetermined, children must (1) be younger than age 13; (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size and whose family assets do not exceed \$1,000,000 (as certified by a member of said family); and (3)(a) reside with a parent or parents who are working or attending a job training or educational program or (b) receives, or needs to receive, protective services and resides with a parent or parents not described in (3)(a.) (658P(4)); 98.20(a)).

##### **3.1.1 Eligibility criteria: Age of children served**

a) The CCDF program serves children

from Birth

(weeks/months/years)

through 12

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

b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care?(658E(c)(3)(B), 658P(3))

- No  
 Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity:

Physical or mental incapacity is defined as a child who has a physical or mental disability and is incapable of caring for himself or herself or who is under court supervision and who has additional care needs identified by an Individual Health Care Plan (IHCP), Individual Education Plan (IEP), physician's/professional's statement, or child welfare treatment plan. The additional care needs identified will require additional care by a provider based on a fee for service and/or require care for a child who is aged thirteen (13) up to the nineteenth (19th) birthday.

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

- No.  
 Yes

and the upper age is 18

(may not equal or exceed age 19)

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

i. "residing with":

"Residing with" means physically located with the eligible adult caretaker(s) or teen parent(s).

ii. "in loco parentis":

"In loco parentis" means a person who is assuming the parental obligations for a minor, including protecting his/her rights and/or a person who is standing in the role of

the parent of a minor without having gone through the formal adoption process. Parental obligations include, but are not limited to, attending parent teacher conferences, regularly picking up and dropping off children at child care, and regularly taking the child to doctor appointments.

### 3.1.2 Eligibility criteria: Reason for care

a. How does the Lead Agency define the following terms for the purposes of determining CCDF eligibility?

i. Define what is accepted as "Working" (including activities and any hour requirements):

"Working" means being employed or self employed as follows:"Employment" is a Low-Income Child Care eligible activity where the adult caretaker or teen parent is holding a part-time or full-time job for which wages, salary, in-kind income or commissions are received.

"Self-employment" is a Low-Income Child Care eligible activity where an adult caretaker or teen parent is responsible for all taxes and/or other required deductions from earned income.

In addition, adult caretakers or teen parents that have been determined eligible for Colorado Works, have entered into a current individualized plan, are participating in allowable work activities as defined in Colorado Works rule (9 CCR 2503-6) and have been referred for child care by the county Colorado Works worker shall be considered to be participating in an eligible activity and shall receive Colorado Works Child Care for at least twelve (12) months unless the adult caretaker or teen parent transitions to Low-Income Child Care prior to the end of the twelve (12) month period.

ii. Define what is accepted as "Job training" (including activities and any hour requirements):

Training includes vocational/technical job skills training when offered as secondary education and results in a diploma or certificate. Parents are eligible for a minimum of

two years. In addition, up to twelve months of assistance is allowable for a high school equivalency examination, high school diploma, English as a Second Language or adult basic education.

iii. Define what is accepted as "Education" (including activities and any hour requirements):

"Education" means a regionally accredited post-secondary training program for a Bachelor's degree or less. Parents are eligible for a minimum of two years and a maximum of four years.

"Basic education" is a Low-Income Child Care eligible activity where an adult caretaker or teen parent is in high school education programs working towards a high school diploma or high school equivalency; Adult Basic Education (ABE); and/or, English as a Second Language (ESL).

iv. Define what is accepted as "Attending" (a job training or educational program) (e.g. travel time, hours required for associated activities such as study groups, lab experiences, time for outside class study or completion of homework):

There is not a set number of hours required to be considered "attending" job training or education.

3.1.2 Eligibility criteria: Reason for care

b. Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training without additional work requirements?

Yes

No,

If no, describe the additional work requirements.

3.1.2 Eligibility criteria: Reason for care

c. Does the Lead Agency provide child care to children who receive, or need to receive protective services?

No.

Yes. If yes:

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

Protective Services is when a child has been placed by the county in foster home care, kinship foster home care, or non-certified kinship care and has an open child welfare case. At the option of the county, the county may provide Protective Services Child Care utilizing child care development funds (CCDF). Protective Services households are considered to be a household of one for purposes of determining income eligibility. The only countable income for a Protective Services household is the income that is received by the child that has been placed in kinship or foster care. Protective Services households are not subject to eligible activity requirements.

*Note:* Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are not working or are not in education/training activities, but this provision should be included in the protective services definition above.

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

No

Yes

iii. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (98.20 (a)(3)(ii)(A))?

No

Yes

iv. Does the Lead Agency waive the eligible activity (e.g., work, job training, education, etc.) requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis?

No

Yes

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

No

Yes

### 3.1.3 Eligibility criteria: Family Income Limits

Note: The questions in 3.1.3 relate to initial determination. Redetermination is addressed in 3.1.8 and 3.2.5.

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

The definition of "income" includes gross taxable wages, unearned income, and in-kind income.

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

	(i) 100% of SMI(\$/Month)	(ii) 85% of SMI (\$/Month) [Multiply (a) by 0.85]	(iii) (IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	(iv) IF APPLICABLE) (% of SMI) [Divide (iii) by (i), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	\$4366.27	\$3711.33	N/A	N/A
2	\$5709.73	\$4853.27	\$3232.50	56.61%
3	\$7053.20	\$5995.22	\$4072.50	57.73%
4	\$8396.67	\$7137.17	\$4912.50	58.50%
5	\$9740.13	\$8279.11	\$5752.50	59.05%

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

Entry eligibility is set by the state department for each county at a level based on the self-sufficiency standard, not to be set below one hundred eighty-five percent (185%) of the federal poverty level. There are three eligibility tiers that counties have been placed in based on their self-sufficiency standard; 185% FPG, 225% FPG or 265% FPG. Exit income eligibility is 85% of the SMI. The State income eligibility limits are updated in State rules October 1st of every year to coincide with Federal State Median Income effective dates.

d. SMI source and year. <https://www.acf.hhs.gov/ocs/resource/liheap-im-2020-02-state-median-income-estimates-for-optional-use-fy2020-and-mandatory-use-fy2021>

*Reminder:* Reminder: Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census (98.20(a)(2)(i)) even if the federal poverty level is used in implementing the program. SMI guidelines are available at:

[https://www.acf.hhs.gov/ocs/resource/liheap-im-2020-02-state-median-income-estimates-for-optional-use-fy2020-and-mandatory-use-fy2021?utm\\_medium=rss](https://www.acf.hhs.gov/ocs/resource/liheap-im-2020-02-state-median-income-estimates-for-optional-use-fy2020-and-mandatory-use-fy2021?utm_medium=rss).

e. Identify the most populous area of the state (defined as the area serving the highest number of CCDF children) used to complete the chart in 3.1.3 b.

Denver County

f. What is the effective date for these eligibility limits reported in 3.1.3 b? 10/01/2020

g. Provide the citation or link, if available, for the income eligibility limits.

[https://docs.google.com/spreadsheets/d/1WzobLnLoxGbN\\_JfTuw3jUCZV5N7IA\\_0uvwEkIoMt3Wk/edit#gid=1350122430](https://docs.google.com/spreadsheets/d/1WzobLnLoxGbN_JfTuw3jUCZV5N7IA_0uvwEkIoMt3Wk/edit#gid=1350122430)

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

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

Families self declare assets as part of the initial application and eligibility redetermination for the Colorado Child Care Assistance Program (CCCAP).

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

No.

Yes.

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

A protective services household is considered to be a household of one for the purposes of determining income eligibility. The only countable income for a protective services household is that of the child(ren) (3.907.1(A) 9 CCR 2503-9). Counties have the option to waive the income requirement for Protective Services households on a case-by-case basis (3.907.1 (C) 9 CCR 2503-9).

### 3.1.5 Describe any additional eligibility conditions or rules, which are applied by the Lead Agency (98.20(b)) during:

#### a. eligibility determination.

The following additional eligibility requirements are applied at application:

- Counties may optionally require cooperation with Child Support Services.
- Adult caretaker(s) or teen parent(s) shall verify that his/her gross income divided by the number of hours worked equals at least the current federal minimum wage.
- Self-employed individuals must not have business expenses that exceed their average income.
- Current (not in arrears), court-ordered child support payments for children not living in the household are deducted from monthly gross income.
- If a wait list is in place, counties can choose to prioritize vulnerable populations such as: households below 130% FPG, teen parents, children with additional care needs, families experiencing homelessness, and other segments of the population as defined by the county based upon local need.

#### b. eligibility redetermination.

The following additional eligibility requirements are applied at re-determination:

- Counties that optionally require cooperation with Child Support Services will confirm continued cooperation at the time of re-determination.



- Adult caretaker(s) or teen parent(s) shall verify that his/her gross income divided by the number of hours worked equals at least the current federal minimum wage.
- Self-employed individuals must not have business expenses that exceed their average income.
- Current (not in arrears), court-ordered child support payments for children not living in the household are deducted from monthly gross income.
- Changes that are not required to be reported during the eligibility period must be reported and verified at the time of re-determination.

**3.1.6 Lead Agencies are required to take into consideration children's development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Lead Agencies are reminded that authorized child care services are not required to be strictly based on the work, training, or education schedule of the parent (98.21 (g)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.**

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

Describe:

Child care is authorized on verified need by establishing an authorization to cover the

maximum amount of units needed to ensure care is available based on the adult caretaker or teen parent's participation in an eligible activity, and shall not be linked directly to the adult caretaker or teen parent's activity schedule and should be based on the child's need for care.

### 3.1.7 Fluctuation in earnings.

Check the processes that the Lead Agency uses to take into account irregular fluctuations in earnings.

- Average the family's earnings over a period of time (i.e. 12 months).
- Request earning statements that are most representative of the family's monthly income.
- Deduct temporary or irregular increases in wages from the family's standard income level.
- Other.

Describe:

**3.1.8 Lead Agencies are required to have procedures for documenting and verifying that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)). Lead Agencies should note that there are no federal requirements for specific documentation or verification procedures. Check the information that the Lead Agency documents and verifies at initial determination and redetermination and describe, at a minimum, what information is required and how often. Check all that apply.**

- Applicant identity.
- Required at Initial Determination
- Required at Redetermination

Describe:

For Low-Income Child Care, when a primary adult caretaker is declaring the identity of

his/her child due to the child not having identification as part of the application, a picture ID of the primary adult caretaker or teen parent is needed to verify the adult caretaker's identity. Verification Documents are maintained in the client's file.

Applicant identity is verified once, at the time of application.

For Colorado Works Child Care, the Colorado Works Program verifies identity as a part of program eligibility and the child care referral form is used as verification for child care assistance.

For Protective Services Child Care, Child Welfare verifies the identity of the adult caretaker and no further verification is required for child care assistance.

Applicant's relationship to the child.

Required at Initial Determination

Required at Redetermination

Describe:

For Low-Income Child Care, any unrelated individual who is acting as a primary adult caretaker for an eligible child is required to obtain verification from the child's biological or adoptive parent, legal guardian, or a court order which identifies the unrelated individual as the child's adult caretaker. Applicant's relationship to the child is verified once, at the time of application.

For Colorado Work Child Care, the Colorado Works Program identifies the relationship to the child as a part of program eligibility and the child care referral form is used as verification for child care assistance.

For Protective Services Child Care, Child Welfare verifies the adult caretaker's relationship to the child and no further verification is required for child care assistance.

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

Required at Initial Determination

Required at Redetermination

**Describe:**

The Colorado Child Care Assistance Program (CCCAP) utilizes the preponderance of evidence as the program's standard of verification for a child's age and citizenship status, only requiring additional documentation if the information received is questionable.

For Low-Income Child Care, the signature of the adult caretaker on the completed application or redetermination form attests to the citizenship status and date of birth of the child.

For Colorado Works Child Care, the Colorado Works Program verifies citizenship and age of the child as a part of program eligibility and the child care referral form is used as verification of citizenship and age for child care assistance.

For Protective Services Child Care, verification of citizenship and identity must be obtained within the six month grace period by the county.

**Work.**

**Required at Initial Determination**

**Required at Redetermination**

**Describe:**

For Low-Income Child Care:

- Verification of employment includes paycheck stubs, completion of a county form, or a signed statement from the employer or employer's authorized designee, stating employment start date, hourly wage or gross salary amount, work schedule (if requesting overnight, evening, or weekend care), payment frequency, date of first paycheck and verifiable employer contact information. Verification Documents are maintained in the client's file. If written documentation is not available at time of eligibility determination, verbal verification from the employer or other person issuing the payment may be obtained. Counties shall document the collateral contact verification in the case file to include the date that the information was received, who provided the information, and a contact phone number
  
- Verification of self-employment may include a ledger, completion of a county form, or other documentation that lists their income and work-related expenses. All expenses must be verified or they will not be allowed. Self-employed caretakers must also provide an expected work schedule that includes approximate work

hours so that the county can confirm that the individual is meeting federal minimum wage and that their expenses do not exceed their income. Lastly, if an individual self-employment endeavor is less than twelve (12) months old, may be granted child care for six (6) months or until their next re-determination, whichever is longer, to establish their business. At the end of the launch period, adult caretakers shall provide documentation of income, verification of expenses and proof that they are making at least federal minimum wage for the number of hours worked. Projected income for the launch period shall be determined based upon the federal minimum wage times the number of declared number of hours worked.

For Colorado Works Child Care, the Colorado Works Program identifies the approved activity. Adult caretakers or teen parents that have been determined eligible for Colorado Works, have entered into a current individualized plan, are participating in allowable work activities as defined in Colorado Works.

Protective services households are not subject to eligible activity requirements

[Job training or educational program.](#)

[Required at Initial Determination](#)

[Required at Redetermination](#)

[Describe:](#)

For Low-Income Child Care, verification of job training or education may include an enrollment letter, a schedule, or other document that shows that the individual is actively enrolled in the job training or education program. Verification documents are maintained in the client's file. If written documentation is not available at time of eligibility determination, verbal verification from the job training or educational program may be obtained. Counties shall document the collateral contact verification in the case file to include the date that the information was received, who provided the information, and a contact phone number.

For Colorado Works Child Care, participation in a job training or educational program is determined by the Colorado Works Program for child care assistance.

Protective services households are not subject to eligible activity requirements.

[Family income.](#)

Required at Initial Determination

Required at Redetermination

Describe:

Low-Income Child Care:

For earned or unearned income, the income received during the prior thirty (30) day period shall be used in determining eligibility unless, on a case-by-case basis, the prior thirty (30) day period does not provide an accurate indication of anticipated income, in which case, a county can require verification of up to twelve (12) of the most recent months of income to determine a monthly average. The adult caretaker(s) or teen parent(s) may also provide verification of up to twelve (12) of the most recent months of income if he/she chooses to do so if such verification more accurately reflects a household's current income level.

- For earned income, the individual must be able to verify that they are earning at least federal minimum wage. If the individual is self-employed, they must also be able to show that they have maintained an average income that exceeds their business expenses.
- Verification of current (not in arrears), court-ordered child support payments for children not living in the household are to be provided by the adult caretaker or teen parent in order to have the amount deducted from monthly gross income. This is verified at the time of application and re-determination or if the adult caretaker or teen parent begins making these payments during the eligibility period.

For Colorado Works Child Care, earned income is verified by the Colorado Works Program as a part of program eligibility and is identified on the child care referral form for child care assistance.

Protective services households are considered to be a household of one for purposes of determining income eligibility. The only countable income for a protective services household is the income that is received by the child(ren) that have been placed in kinship or foster care. Child support income shall not be included as income.

Protective services households shall be allowed up to sixty (60) days to provide verification of the child(ren)'s income. As determined by the Child Welfare worker, the income requirement for protective services households may be waived on a case by case basis.

Household composition.

Required at Initial Determination

[Required at Redetermination](#)

[Describe:](#)

For Low-Income Child Care, households with two adult caretakers or teen parents that need child care, where one adult caretaker or teen parent is engaged in a low-income eligible activity and the other adult caretaker or teen parent is incapacitated such that, according to a physician or licensed psychologist, they are unable to care for the child(ren) must provide verification of said incapacitation.

For Colorado Works Child Care, household composition is determined by the Colorado Works Program as a part of program eligibility and the child care referral form is used as verification of household composition for child care assistance.

For Protective Services Child Care, Child Welfare verifies household composition and no further verification is required for child care assistance.

[Applicant residence.](#)

[Required at Initial Determination](#)

[Required at Redetermination](#)

[Describe:](#)

For Low-Income Child Care, county residency verification is required. Applicants and recipients must live in the county where the applicant is applying for child care assistance. Verification Documents are maintained in the client's file. This is verified once at the time of application, once at re-determination if a change in residence is reported, and if the family reports a change during the eligibility period.

For Colorado Works Child Care, the Colorado Works Program determines applicant residence as a part of program eligibility and the child care referral form is used as verification of residence for child care assistance.

Protective Services Child Care households are not subject to residency verification. The county with the open child welfare case is considered the county of residence.

[Other.](#)

Required at Initial Determination

Required at Redetermination

Describe:

For Low-Income Child Care, adult caretakers or teen parents must provide current immunization records for children who receive child care from qualified exempt providers not related to the child(ren), where care is provided outside of the child's home and the children are not school age. Verification documents are maintained in the client's file. This is verified once at the time of application and once at re-determination.

For Colorado Works Child Care, Immunization verification for child(ren) who receive child care from qualified exempt child care providers not related to the child(ren), where care is provided outside of the child's home and the child(ren) are not school age must be provided to the child care technician and shall be maintained in the child care case file.

Protective services households must be allowed up to sixty (60) days to provide verification of immunization if child care is provided by a qualified exempt child care provider not related to the child where care is provided outside of the home.

**3.1.9 Which strategies, if any, will the Lead Agency use to ensure the timeliness of eligibility determinations upon receipt of applications? Check all that apply.**

Time limit for making eligibility determinations

Describe length of time:

County departments of human services must make a decision to approve or deny an application within fifteen calendar days of the date the applicant completed the application.

Track and monitor the eligibility determination process

Other.



Describe:

None

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

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

Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child younger than age 6 (98.16(v); 98.33(f)).

Lead Agencies must coordinate with TANF programs to ensure that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the state/territory TANF agency in accordance with Section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care.

Note: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a. Identify the TANF agency that established these criteria or definitions: Employment and Benefits Division, Office of Economic Security, Colorado Department of Human Services

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

i. "Appropriate child care":

As a county administered model for TANF delivery, counties have the flexibility to define appropriate child care that at minimum maintains the health and safety of the child. Appropriate care should strive to meet the physical, mental and emotional

developmental needs of the child, as defined by the county.

ii. "Reasonable distance":

As a county administered model for TANF delivery, counties have the flexibility to define what constitutes a reasonable distance.

iii. "Unsuitability of informal child care":

As a county administered model for TANF delivery, counties have the flexibility to define unsuitability which at minimum includes settings that endanger the health or safety of the child or that hinders the growth and development of the child.

iv. "Affordable child care arrangements":

As a county administered model for TANF delivery, counties have the flexibility to define affordability.

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

- i. In writing
- ii. Verbally
- iii. Other.

Describe:

As a county administered model for TANF delivery, counties implement their own policies in order to inform families of their child care options such as during the TANF interview process.

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

Department of Human Services, Income Maintenance (Volume 3), Colorado Works Program, 9 CCR 2503-6 3.608.4.B.

## 3.2 Family Contribution to Payments

### 3.2 Family Contribution to Payments

Lead Agencies are required to establish and periodically revise a sliding-fee scale for CCDF families that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF funds (658E(c)(5)). In addition to income and the size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. Questions 3.2.1 through 3.2.4 address co-payments during the initial/entry-eligibility period.

To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. Question 3.2.5 addresses co-payments during the graduated phase-out period.

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

- a. Complete the chart based on the most populous area of the state or territory (defined as the area serving the highest number of CCDF children, aligned to the response provided in 3.1.3 e).

	(a)	(b)	(c)	(d)	(e)	(f)
<b>Family Size</b>	<b>Lowest initial or First Tier Income Level where family is first charged co-pay (greater than \$0)</b>	<b>What is the monthly co-payment for a family of this size based on the income level in (a)?</b>	<b>What percentage of income is this co-payment in (b)?</b>	<b>Highest initial or First Tier Income Level before a family is no longer eligible.</b>	<b>What is the monthly co-payment for a family of this size based on the income level in (d)?</b>	<b>What percentage of income is this co-payment in (d)?</b>
1	N/A	N/A	N/A	N/A	N/A	N/A
2	100	\$1.00	1%	\$3,232.50	\$283.00	8.75%
3	100	\$1.00	1%	\$4,072.50	\$357.00	8.76%

	(a)	(b)	(c)	(d)	(e)	(f)
4	100	\$1.00	1%	\$4,912.5 0	\$431.00	8.77%
5	100	\$1.00	1%	\$5,752.5 0	\$477.00	8.55%

b. If the sliding-fee scale is not statewide (i.e., county-administered states):

i. N/A. Sliding fee scale is statewide

ii. Identify the most populous area of the state (defined as the area serving the highest number of CCDF children) used to complete the chart above.

iii. Describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

c. What is the effective date of the sliding-fee scale(s)? 07/01/2021

d. Provide the link(s) to the sliding-fee scale:

Under pay your parent fees here:

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Families?p=Family&s=Colorado-Child-Care-Assistance-Program&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Families?p=Family&s=Colorado-Child-Care-Assistance-Program&lang=en)

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

Check all that apply under a. or b.

a. The fee is a dollar amount and (check all that apply):

i. The fee is per child, with the same fee for each child.

ii. The fee is per child and is discounted for two or more children.

iii. The fee is per child up to a maximum per family.

iv. No additional fee is charged after certain number of children.

v. The fee is per family.

vi. The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

vii. Other.

Describe:

b. The fee is a percent of income and (check all that apply):

i. The fee is per child, with the same percentage applied for each child.

ii. The fee is per child, and a discounted percentage is applied for two or more children.

iii. The fee is per child up to a maximum per family.

iv. No additional percentage is charged after certain number of children.

v. The fee is per family.

vi. The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

vii. Other.

Describe:

Copays are assessed based upon a marginal rate increase of fourteen percent (14%) for every dollar of gross countable household income above one hundred percent (100%) of the federal poverty guidelines (FPG).

1. Eligible households with countable income that is at or below the one hundred percent (100%) of the FPG have a copay assessed at one percent (1%) of their income.
2. Eligible households with countable income that is above one hundred percent (100%) of the FPG have a copay assessed at one percent (1%) of their income plus a marginal rate increase of fourteen percent (14%) for every dollar of gross countable household income above one hundred percent (100%) of the FPG.
3. An additional fifteen dollar (\$15) fee shall be added to the copay for each additional child when households are requesting care for more than one child and have income above one hundred percent (100%) of the FPG. If care is only requested for one (1) child, the additional fifteen dollar (\$15) fee does not apply.

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

No.

Yes, check and describe those additional factors below.

a. Number of hours the child is in care.

Describe:

The copay is assessed at 55% of the calculated full-time fee for part-time care.

Part-time care is defined as an average of less than 13 full-time equivalent units of care per month.

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

Describe:

A reduced copay is applied for children attending high quality care, which is defined as child care programs that have attained a Colorado Shines quality rating of Level 3, 4, or 5.

c. Other.

Describe:

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

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

Yes, the Lead Agency waives family contributions/co-payments. If yes, identify and describe which families have their family contributions/co-payments waived.

a. Families with an income at or below the Federal poverty level for families of the same size.

Describe the policy and provide the policy citation.

b. Families who are receiving or needing to receive protective services on a case-by-case basis, as determined by the Lead Agency for purposes of CCDF eligibility.

Describe the policy and provide the policy citation.

At the option of the county, the county may provide protective services child care utilizing child care development funds (CCDF). Protective services households are considered to be a household of one for purposes of determining income eligibility. The only countable income for a protective services household is the income that is received by the child that has been placed in kinship or foster care which may be waived on a case-by-case basis based upon the county's Protective Services Child Care policy. If the income is waived, the Protective Services household will not have a copay.

c. Families meeting other criteria established by the Lead Agency. Describe Describe the policy.

One- or two-teen parent households who are in middle/junior high, high school, GED, or vocational/technical training activity and for whom payment of a fee produces a hardship, the copay may be waived entirely and documented in the case file. The Parent fee waiver shall be reviewed during each redetermination.

In addition, the Department passed a permanent change to the Colorado Child Care Assistance Program rule effective April 1, 2020, that allows counties the ability to waive parent fees in the event of a declared state or local disaster or emergency for up to twelve (12) months for households impacted by such disaster or emergency (9CCR 2503-9 3.911 (H)(8)) . This policy allows local county departments to waive parent fees on a case by case basis, in the event of a declared state or local disaster or emergency.

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

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

Lead Agencies that establish initial family income eligibility below 85 percent of state median income (SMI) are required to provide a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income (98.21 (b)(1)). Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy program as income increases, and supports long-term self-sufficiency for families.

Lead Agencies that provide a graduated phase-out must implement a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

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

A family eligible for services via the graduated phase-out of assistance is considered eligible under the same conditions as other eligible families with the exception of the co-payment restrictions, which do not apply to a graduated phase-out. To help families transition off of child care assistance, Lead Agencies may gradually adjust copay amounts for families whose children are determined eligible under a graduated phase-out and may require additional reporting on changes in family income. However, Lead Agencies must still ensure that any additional reporting requirements do not constitute an undue burden on families.



**Lead Agencies that establish initial family income eligibility below 85 percent of state median income (SMI) are required to provide a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income (98.21 (b)(1)). Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy program as income increases, and supports long-term self-sufficiency for families.**

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

N/A. The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and therefore, is not required to provide a graduated phase-out period. (If checked, skip to subsection 3.3)

The Lead Agency sets the second tier of eligibility at 85 percent of SMI.

A. Describe the policies and procedures.

State statute and rule require that, once a family has been determined eligible, CCDF Child Care assistance may not be terminated for changes in income during a 12-month period if a family's income remains under 85% of the state median income level.

B. Provide the citation for this policy or procedure.

9 CCR 2503-9, 3.912 (O)(1), C.R.S. 26-2-805

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

A. Provide the income level for the second tier of eligibility for a family of three:

B. Describe how the second eligibility threshold:

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

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

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

4. Provide the citation for this policy or procedure related to the second eligibility threshold:

3.2.5 b. To help families transition from assistance, does the Lead Agency gradually adjust co-payments for families eligible under the graduated phase-out period?

No

Yes

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

ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? (*Note: Additional reporting requirements are also discussed in section 3.4.3 of the plan.*)

No.

Yes.

Describe:

### 3.3 Increasing Access for Vulnerable Children and Families

#### 3.3 Increasing Access for Vulnerable Children and Families

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

Note:

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

### 3.3.1 Describe how the Lead Agency defines:

a) "Children with special needs":

A child who has a physical or mental disability and is incapable of caring for himself or herself or who is under court supervision and who has additional care needs identified by an Individual Health Care Plan (IHCP), Individual Education Plan (IEP), physician's/professional's statement, or child welfare treatment plan.

b) "Families with very low incomes":

Families with incomes under 130% of poverty, including families receiving Temporary Assistance for Needy Families (TANF).

### 3.3.2 Identify how the Lead Agency will prioritize or target child care services for the following children and families:

Note: If waiving co-payments is checked, Lead Agencies will need to provide further information in question 3.2.4. Paying higher rates for accessing higher quality care is addressed in 4.3.3 and using grants or contracts to reserve spots is addressed in 4.1.6.

a) Indicate how the identified populations are prioritized or targeted.

i. Indicate how services are prioritized for children with special needs. Check all that apply:

- Prioritize for enrollment in child care services
- Serve without placing on waiting list
- Waive co-payments (on a case-by-case basis). As described in 3.2.4
- Pay higher rate for access to higher quality care

- Using grants or contracts to reserve spots

ii. Indicate how services are prioritized for families with very low incomes. Check all that apply:

- Prioritize for enrollment in child care services
- Serve without placing on waiting list
- Waive co-payments (on a case-by-case basis). As described in 3.2.4
- Pay higher rate for access to higher quality care
- Using grants or contracts to reserve spots

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

- Prioritize for enrollment in child care services
- Serve without placing on waiting list
- Waive co-payments (on a case-by-case basis). As described in 3.2.4
- Pay higher rate for access to higher quality care
- Using grants or contracts to reserve spots

iv. Indicate how services are prioritized, for families receiving TANF, those attempting to transition off TANF, and those at risk of becoming dependent on TANF (98.16(i)(4)). Check all that apply:

- Prioritize for enrollment in child care services
- Serve without placing on waiting list
- Waive co-payments (on a case-by-case basis). As described in 3.2.4
- Pay higher rate for access to higher quality care
- Using grants or contracts to reserve spots

b. If applicable, identify and describe any other ways the identified populations in the table above are prioritized or targeted.

Families experiencing homeless are provided a minimum 60-day stabilization period where no verifications are required. Counties may offer a stabilization period that is greater than 60 days.

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

Counties have the option to identify segments of population based on local needs such as teen parents, children in foster care, or other county identified priority populations. Currently, there are no counties that have established county defined target populations.

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

As with all the other priority groups, counties have the option to prioritize enrollment, serve without placing the identified population on a waiting list or by using contracts for slots.

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

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

The Colorado Child Care Assistance Program (CCCAP) application and redetermination forms allow families to identify if they are experiencing homelessness. Households that meet the definition of "families experiencing homelessness" receive authorization for child care subsidy during a stabilization period of at least sixty (60) consecutive calendar-days, within a twelve (12) month period, to allow the household the opportunity to submit documentation, including immunization records if care is provided outside of the child's home by a non-relative qualified exempt provider., (3.909 9 CCR 2503-9).

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

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

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

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

Note:

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

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

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

In consultation with the Colorado Department of Public Health and Environment, licensed providers have a grace period of at least 90 days to gather documentation of immunizations for children experiencing homelessness in their care. Currently, the grace period for families experiencing homelessness in license-exempt care is less than 60 days and was developed with input from the Colorado McKinney- Vento state coordinator for homeless education and other agencies providing services for children

experiencing homelessness.

[Provide the citation for this policy and procedure.](#)

9 CCR 2503-9 3.909(B)

[ii. Children who are in foster care.](#)

The Colorado Child Care Assistance Program (CCCAP) protective services households shall be allowed up to sixty (60) days to provide verification of immunization if child care is provided by a qualified exempt child care provider not related to the child where care is provided outside of the home. This procedure was developed with input from protective child services.

[Provide the citation for this policy and procedure.](#)

9 CCR 2503-9 3.907.1

[b\) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements \(98.41\(a\)\(1\)\(i\)\(C\)\(4\)\).](#)

The Lead Agency offers a grace period that allows children experiencing homelessness and in foster care to receive CCDF assistance while the family is taking the necessary actions to comply with immunization and other health and safety requirements. Where possible, the Lead Agency collects verification from other eligibility programs where the family has provided the required information. Additionally, collateral contact is used to verify required information. Families are also referred to county health departments, and other partners when needed, in order to attain the required documentation.

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

No.

Yes.

[Describe:](#)

## 3.4 Continuity for Working Families

### **3.4.1 Minimum 12-month eligibility.**

#### 3.4.1 Minimum 12-month eligibility.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period:

regardless of changes in income. Lead Agencies may not terminate CCDF assistance during the minimum 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold but not the federal threshold of 85 percent of state median income (SMI), regardless of temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)). The Lead Agency may not terminate assistance prior to the end of the minimum 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. Any temporary change cannot have a time limit (e.g. 60 days, 90 days, etc.). A temporary change in eligible activity includes, at a minimum:

any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the minimum 12-month eligibility period (except as described in 3.1.1); any changes in residency within the state, territory, or tribal service area

- a. Describe the Lead Agency's policies and procedures related to providing a minimum 12-month eligibility period at initial eligibility determination and redetermination and provide a citation for these policies or procedures.

State statute and CCCAP rules requires that CCDF Child Care assistance may not be terminated during a 12-month period if a family's income remains under 85% of the state median income level (C.R.S. 26-2-805) (9 CCR 2503-9, 3.912 (O)(1)). Child Care rule also dictates that counties shall not terminate assistance prior to the end of a 12-month eligibility level if a family experiences a temporary job loss or a change in participating in



a training or education activity (3.905.2 (C)). Once determined eligible, households should remain eligible for a minimum of twelve (12) months except in limited circumstances that would require immediate case closure.

Adult caretakers or teen parents that have been determined eligible for Colorado Works, have entered into a current individualized plan, are participating in allowable work activities as defined in Colorado Works rule (9 CCR 2503-6) and have been referred for child care by the county Colorado Works worker shall be considered to be participating in an eligible activity and shall receive Colorado Works Child Care for at least twelve (12) months unless the adult caretaker or teen parent transitions to Low-Income Child Care prior to the end of the twelve (12) month period. (3.906.1)

Counties shall transition households that are no longer eligible for the Colorado Works Program and are participating in a low-income eligible activity as defined in 3.903 to Low-Income Child Care without requiring the household to complete the low-income child care application. The household's eligibility shall be re-determined no earlier than twelve (12) months after the transition as outlined in 3.905.3. (3.906.2)

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period

b. Describe and provide the citation for each of the minimum required elements listed below that are included in the Lead Agency's definition of "temporary change".

- i. Any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness.

Describe or define your Lead Agency's policy:

Families are not required to report a temporary break due to the need to care for a family member or an illness so long as the temporary break does not exceed twelve (12) weeks. Child care is granted during this 12-week period.

Citation:

3.905.2 (C) (2)

- ii. Any interruption in work for a seasonal worker who is not working.

Describe or define your Lead Agency's policy:

Families are not required to report a temporary break due to absence from seasonal employment so long as the temporary break does not exceed twelve (12) weeks. Child care is granted during this 12-week period.

Citation:

3.905.2 (C)(1)

- iii. Any student holiday or break for a parent participating in a training or educational program.

Describe or define your Lead Agency's policy:

Families are not required to report a temporary break due to absence from an education or training activity due to holidays or scheduled breaks so long as the temporary break does not exceed twelve (12) weeks. Child care is granted during this 12-week period.

Citation:

3.905.2 (C)

- iv. Any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program.

Describe or define your Lead Agency's policy:

There is no hourly activity requirement. As a result, families are not required to report a reduction in hours. If a reduction in work hours results in a reduction in income, the family's copay would be adjusted based upon the reported change.

Citation:

3.911 (B)(2)

- v. Any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency.

Describe or define your Lead Agency's policy:

Families are not required to report any temporary change in an eligible activity as long as the temporary break does not exceed twelve (12) weeks.

Citation:

3.905.2 (C)

- vi. A child turning 13 years old during the minimum 12-month eligibility period (except as described in 3.1.1).

Describe or define your Lead Agency's policy:

Children that turn 13 during the eligibility period are eligible until redetermination. Children that are over the age 13 that have verified additional care needs are eligible to receive child care until their 19th birthday.

Citation:

3.905.4 (B)

- vii. Any changes in residency within the state, territory, or tribal service area.

Describe or define your Lead Agency's policy:

If the adult caretaker(s) or teen parent(s) moves out of the county in which they are actively receiving Low-Income Child Care assistance benefits during the twelve (12) month eligibility period; remains below eighty-five percent (85%) of the state median income; and, remains in a low-income eligible activity as defined in the originating county's county plan, the originating county shall maintain the case, authorization(s), and fiscal responsibility until the redetermination date that was previously determined.

Citation:

3.912 (DD)

c. Provide any other elements included in the state's definition of "temporary change", including those implemented during the pandemic, and provide the citation.

N/A

**3.4.2 Continuing assistance for "job search" and a Lead Agency's option to discontinue assistance during the minimum 12-month eligibility period.**

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

**3.4.2 Continuing assistance for "job search" and a Lead Agency's option to discontinue assistance during the minimum 12-month eligibility period.**

Lead Agencies have the option, but are not required, to discontinue assistance during the minimum 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity.

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

No.

Yes.

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

Job search child care is available to eligible adult caretakers or teen parents at application for no fewer than thirteen (13) weeks of child care. During the eligibility period, Job Search is provided for each instance of non-temporary cessation of activity.

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

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

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

i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:

Once determined eligible, households are to remain eligible for at least twelve (12) months unless the household's income exceeds 85% SMI or if the caretaker or teen parent is no longer in a qualifying eligible activity for the reasons that do not constitute as a temporary break in activity. The CDHS does not define "non-temporary" change but considers it to be any change in eligible activity that exceeds the temporary break in eligible activity threshold of 12 weeks.

ii. Describe what specific actions/changes trigger the job-search period after each such loss or cessation:

Once determined eligible, households are to remain eligible for at least twelve (12) months unless the household's income exceeds 85% SMI or if the caretaker or teen parent is no longer in a qualifying eligible activity for the reasons that do not constitute as a temporary break in activity. The CDHS does not define "non-temporary" change but considers it to be any change in eligible activity that exceeds the temporary break in eligible activity threshold of 12 weeks.

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

Job search is to be approved for a minimum of thirteen (13) weeks for each instance of job loss; however, counties have the option to offer more than thirteen (13) weeks. Counties have the flexibility at a local level per current State Statute and State Regulations to offer more than the minimum 13 weeks of job search time.

iv. Provide the citation for this policy or procedure.

C.R.S. Section 26-2-805(7)(f)(III)

CCR 2503-9 3.905.2 (C), 3.905.1 (G)(3)(a)

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

i. Not applicable.

ii. Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

A. Define the number of unexplained absences identified as excessive:

If the child has had twenty-two (22) or more unexplained absences from authorized care within a thirty (30) day period and two (2) failed documented attempts to contact the adult caretaker or teen parent have been made. The thirty (30) day period must account for temporary breaks or reported breaks in care.

B. Provide the citation for this policy or procedure:

3.905.4 (A)(5) 9 CCR 2503-9

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

Provide the citation for this policy or procedure:

Child care authorizations and/or cases shall be terminated if the Adult Caretaker or Teen Parent is no longer a resident of the state. 3.905.4 (A)(2) 9 CCR 2503-9.

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

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

"Intentional Program Violation (IPV)" means an act committed by an adult caretaker(s) or teen parent(s) who has intentionally made a false or misleading statement or misrepresented, concealed or withheld facts for the purpose of

establishing or maintaining a Colorado Child Care Assistance Program household's eligibility to receive benefits for which they were not eligible; or has committed or intended to commit any act that constitutes a violation of the child care assistance program regulations or any state statute related to the use or receipt of CCCAP benefits for the purpose of establishing or maintaining the household's eligibility to receive benefits. 3.903 9 CCR 2503-9, 3.916 9 CCR 2503-9

### 3.4.3 Change reporting during the minimum 12-month eligibility period.

#### 3.4.3 Change reporting during the minimum 12-month eligibility period.

The Lead Agency must describe the requirements for parents to report changes in circumstances during the 12-month eligibility period and describe efforts to ensure that such requirements do not place an undue burden on eligible families, which could impact the continuity of care for children and stability for families receiving CCDF services (98.21 (e)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.2.5 b.

Families are required to report a change to the Lead Agency at any time during the 12-month eligibility period if the family's income exceeds 85 percent of the state median income, taking into account irregular fluctuations in income (98.21(e)(1)). If the Lead Agency chooses the option to terminate assistance, as described in section 3.4.2 of the Plan, they may require families to report a non-temporary change in work, training or educational activities (otherwise known as a parent's eligible activity).

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

No

Yes

b. Any additional reporting requirements during the 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., income changes over 85 percent of state median income (SMI)) or that impact the Lead Agency's ability to contact the family

or pay the child care providers (e.g., a family's change of address, a change in the parent's choice of child care provider).

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

- i. Additional changes that may impact a family's eligibility during the 12-month period.

Describe:

Adult caretaker(s) or teen parent(s) have the responsibility to report and verify changes to income, only if the household's income exceeds eighty-five percent (85%) of the State median income, in writing, within ten (10) calendar-days of the change. Also, if the adult caretaker(s) or teen parent(s) is no longer in his/her qualifying eligible activity, this shall be reported in writing within four (4) calendar weeks pursuant to C.R.S. 26-2-805(1)(e)(III), this does not include a temporary break in eligible activity such as a temporary job loss from the qualifying eligible activity or temporary change in participation in a training or education activity (3.905.2 (C) 9 CCR 2503-9).

- ii. Changes that impact the Lead Agency's ability to contact the family.

Describe:

- iii. Changes that impact the Lead Agency's ability to pay child care providers.

Describe:

Adult Caretakers or teen parents shall report changes in child care providers prior to the change. 3.905.2 (F) 9 CCR 2503-9

c. Any additional reporting requirements that the Lead Agency chooses to require from parents during the minimum 12-month eligibility period, shall not require an additional office visit. In addition, the Lead Agency must offer a range of notification options to accommodate families. How does the Lead Agency allow families to report changes to ensure that reporting requirements are not burdensome and to avoid an impact on continued eligibility between redeterminations? Check all that apply.

- i. Phone

- ii. Email



- iii. Online forms
- iv. Extended submission hours
- v. Postal Mail
- vi. FAX
- vii. In-person submission
- viii. Other.

Describe:

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

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

Families may report changes that are beneficial to the household which include, but are not limited to: an increase in authorized care; changes that would result in the reduction of a parent fee; a change in child care provider, changes in the household composition due to an additional child requesting care; and a change in mailing address.

ii. Provide the citation for this policy or procedure.

3.905.2 (C), 3.912 (CC) 9 CCR 2503-9

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

3.4.4 Prevent the disruption of employment, education, or job training activities.

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

(658E(c)(2)(N)(ii); 98.21(d)).

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

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

- i. Advance notice to parents of pending redetermination
- ii. Advance notice to providers of pending redetermination
- iii. Pre-populated subsidy renewal form
- iv. Online documentation submission
- v. Cross-program redeterminations
- vi. Extended office hours (evenings and/or weekends)
- vii. Consultation available via phone
- viii. Other.

Describe:

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

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care, or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable

to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. In addition to generally building the supply of child care for all families, this effort also supports equal access for CCDF eligible children to the priced child care market.

This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each state/territory identifies and defines its own categories and types of care. The OCC does not expect states/territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

## 4.1 Maximize Parental Choice and Implement Supply Building Mechanisms

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling their child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll their child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead Agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider, or faith-based provider, etc.) (98.15 (a)(5)).

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

A child care certificate, otherwise known as an Authorization Notice, is provided to parents once an eligible child care provider has been chosen by the family. The Authorization Notice includes provider specific information such as provider name, provider ID, provider address

and provider phone number as well as child specific information such as child's name, State ID, primary adult caretaker, case number, authorization begin date, authorization end date and authorization notes. In addition, the Authorization Notice includes the days that the child is authorized, full time or part time care status and the co-payment amount. Families who have not already selected a provider when applying for child care assistance are referred to the statewide Colorado Shines Child Care Resource and Referral call center or a local child care resource and referral agency for consumer education and referral services. Child care program choices are driven by a family's needs. If a family's choice coincides with a child care program that has an active contract with the county, the resource and referral agency will inform the family.

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

- a. Certificate provides information about the choice of providers
- b. Certificate provides information about the quality of providers
- c. Certificate is not linked to a specific provider, so parents can choose any provider
- d. Consumer education materials on choosing child care
- e. Referrals provided to child care resource and referral agencies
- f. Co-located resource and referral staff in eligibility offices
- g. Verbal communication at the time of the application
- h. Community outreach, workshops, or other in-person activities
- i. Other.

Describe:

Information on child care options is posted on state and county websites and through the statewide child care resource and referral call center.

**4.1.3 A core principle of CCDF is that families receiving CCDF-funded child care should have equal access to child care that is comparable to that of non-CCDF families (658E(c)(4)(A) and 98.45(a)).**

a. Describe how parents have access to the full range of providers eligible to receive CCDF:

Any licensed provider, as well as any license-exempt provider that meets the required health and safety standards, are eligible to participate in the Colorado Child Care Assistance Program (CCCAP), the CCDF subsidy program.

b. Describe state data on the extent to which eligible child care providers participate in the CCDF system:

As of July 2021, 2252 (48.61%) of the states eligible (licensed) child care providers are able to participate in the CCDF system and can provide child care to CCDF eligible children. CDHS launched an effort in the fall of 2019 to work with local county departments of human services and Early Childhood Councils to increase the number of eligible providers participating in the CCDF system. The percentage of providers able to participate in the CCDF system continues to grow as a result of this coordinated work.

c. Identify any barriers to provider participation, including barriers related to payment rates and practices - including for family child care and in-home providers - based on provider feedback and reports to the Lead Agency:

Despite the CDHS's effort to reimburse providers at competitive rates, many providers still may charge a private pay rate that is higher than the CCCAP reimbursement rate, and for these providers, rates present a barrier to participation or as a reason for limiting their participation. Additionally, providers have expressed that payment based on attendance vs on a child's enrollment is a barrier to participation and some providers cite the added administrative burden that accompanies CCDF subsidies as a barrier. Finally, there is insufficient ongoing funding at the State and Federal levels to fully cover the cost of high quality care for all interested and eligible families. This presents a barrier to providing access to the entire population in need of subsidized care.

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

The provider contract (Fiscal Agreement), between a child care program and a county, requires providers to allow parents unlimited access to their children. The unlimited access requirement for parents is also addressed under Child Care Licensing regulations.

**4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use (98.16(i)(2)). Will the Lead Agency limit the use of in-home care in any way?**

- No.
- Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.
  - a. Restricted based on the minimum number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements.  
Describe:
  - b. Restricted based on the provider meeting a minimum age requirement.  
Describe:  
Providers must be 18 years of age or older.
  - c. Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours).  
Describe:  
Care provided must be less than 24 hour care.
  - d. Restricted to care by relatives. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2)).

Describe:

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

Describe:

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

Describe:

- g. Other.

Describe:

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

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots (658A(b)(1))? Note: Do not check 'yes' if every provider is simply required to sign an agreement to be paid in the certificate program.

- No. If no, skip to 4.1.7.

- Yes, in some jurisdictions but not statewide.

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

Under the Colorado Child Care Assistance Program (CCCAP), each county has the option of developing contracts for slots with licensed child care centers and family child care homes. No counties are currently offering contracts for slots.

- Yes, statewide. If yes, describe:

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

ii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers) and how grants or contracts are promoted by the Lead Agency:

iii. How rates for contracted slots are set through grants and contracts and if they are viewed by providers as a vehicle for stabilizing payments.

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

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

No

Yes. If yes, does the Lead Agency use grants or contracts to increase the supply and/or quality of child care programs serving the populations below? Check all that apply.

i. Grants or Contracts are used in Child Care Programs that serve Children with disabilities:

To increase the supply of care

To increase the quality of care

ii. Grants or Contracts are used in Child Care Programs that serve Infants and toddlers:

To increase the supply of care

To increase the quality of care

iii. Grants or Contracts are used in Child Care Programs that serve School-age children:

To increase the supply of care

To increase the quality of care

iv. Grants or Contracts are used in Child Care Programs that serve Children needing non-traditional hour care:

To increase the supply of care

To increase the quality of care

v. Grants or Contracts are used in Child Care Programs that serve Children experiencing homelessness:



- To increase the supply of care
- To increase the quality of care

vi. Grants or Contracts are used in Child Care Programs that serve Children with diverse linguistic or cultural backgrounds:

- To increase the supply of care
- To increase the quality of care

vii. Grants or Contracts are used in Child Care Programs that serve Children in underserved areas:

- To increase the supply of care
- To increase the quality of care

viii. Grants or Contracts are used in Child Care Programs that serve Children in urban areas:

- To increase the supply of care
- To increase the quality of care

ix. Grants or Contracts are used in Child Care Programs that serve Children in rural areas:

- To increase the supply of care
- To increase the quality of care

x. Grants or Contracts are used in Child Care Programs that serve Other populations, please specify :

- To increase the supply of care
- To increase the quality of care

Describe

Counties have the ability to select the child care programs and populations they choose to target when implementing the use of contracts that may include i-ix as selected above.

**4.1.7 Lead Agencies must identify shortages in the supply of high-quality child care providers that meet parents' needs and preferences. List the data sources used to identify any shortages and declines in the supply of care types that meet parents' needs. Also describe the method of tracking progress to support equal access and parental**

## choice (98.16(x)).

### a. In child care centers.

The Colorado Department of Human Services uses census defined county subdivisions to approximate communities and tracks a variety of data by these geographies, including the supply of quality child care related to the potential demand. To get a sense of the approximate degree of shortages across the state, the analysis of the aggregate licensed capacity for Centers, Homes and Preschools compared to the population of children under five years old (aggregate licensed capacity/population under age 5). This provides a ratio of licensed capacity to population within each of Colorado's 209 communities, and a sense of the communities with greater degrees of shortage of available licensed care. These data can also be tracked for high quality providers only to provide a sense of relative shortage of care rated as high quality. The data is reviewed regularly to track progress over time in the supply of high quality licensed care.

### b. In child care homes.

The Colorado Department of Human Services uses census defined county subdivisions to approximate communities and tracks a variety of data by these geographies, including the supply of quality child care related to the potential demand. To get a sense of the approximate degree of shortages across the state, the analysis of the aggregate licensed capacity for Centers, Homes and Preschools compared to the population of children under five years old (aggregate licensed capacity/population under age 5). This provides a ratio of licensed capacity to population within each of Colorado's 209 communities, and a sense of the communities with greater degrees of shortage of available licensed care. These data can also be tracked for high quality providers only to provide a sense of relative shortage of care rated as high quality. The data is reviewed regularly to track progress over time in the supply of high quality licensed care.

### c. Other.

N/A

**4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.**

a) Children in underserved areas. Check and describe all that apply.

i. Grants and contracts (as discussed in 4.1.6).

Describe:

The Colorado Department of Human Services, Office of Early Childhood, contracts with Early Childhood Councils to recruit and retain providers as well as support quality improvement-particularly in underserved areas. Additionally, under the Colorado Child Care Assistance Program (CCCAP), each county has the option of developing contracts for slots with licensed child care centers and family child care homes. Contracts for slots serve the purposes of increasing supply, quality and serving vulnerable and underserved families.

ii. Targeted Family Child Care Support such as Family Child Care Networks.

Describe:

The Department has included a plan for the use of the Child Care and Development Funds, as appropriated through the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act to support a mixed-delivery system and strong child care business practices through family child care home navigators.

iii. Start-up funding.

Describe:

The Colorado Department of Human Services offers the Emerging and Expanding Child Care Grant Program to, in part, recruit new licensed providers, particularly in areas of the state that have been identified as child care deserts. Funding from this

grant program can be used to support start-up funding to support emerging programs in underserved areas.

[iv. Technical assistance support.](#)

[Describe:](#)

The Colorado Department of Human Services provides technical assistance through Child Care Licensing to all providers, particularly those in underserved areas, rural areas and those with unique challenges. In addition, the Office of Early Childhood contracts with Early Childhood Councils to provide technical assistance to all existing programs particularly those in underserved areas. Early Childhood Councils are charged with providing technical assistance to providers pursuing higher levels of quality within the Colorado Shines Quality Rating and Improvement System, particularly in underserved areas.

[v. Recruitment of providers.](#)

[Describe:](#)

The Colorado Department of Human Services contracts with Early Childhood Councils to recruit new licensed programs and provide technical assistance to existing programs statewide but particularly in child care deserts, which is inclusive of infant and toddler care.

[vi. Tiered payment rates \(as in 4.3.3\).](#)

[Describe:](#)

The Colorado Department of Human Services sets tiered rates to programs participating in the Colorado Shines Quality Rating and Improvement System based on the quality level achieved by the programs in all areas of the state, including those in underserved areas.

[vii. Support for improving business practices, such as management training, paid sick leave, and shared services.](#)

[Describe:](#)

LEADING EDGE™ is a training offered to child care providers helps both licensed child care providers (home and center-based) and start-ups. The program assists child care providers to strengthen business practices when coping with the

challenges of COVID-19 and the ever changing landscape of the Colorado workforce. A primary objective of this effort is to strengthen the child care provider business model and enhance business owner skills so that these critically important services can continue to support our local economies.

[viii. Accreditation supports.](#)

Describe:

N/A

[ix. Child Care Health Consultation.](#)

Describe:

Licensed child care centers are required by rule to consult with a Department approved child care health consultant with knowledge and experience in maternal and child health at least once a month at the child care facility. The monthly consultation must be specific to the needs of the program and address some of the following topics: training, delegation and supervision of medication, administration and special health procedures, health care, hygiene, disease prevention, equipment safety, nutrition, interaction between children and adult caregivers, and normal growth and development. For those underserved areas that struggle with access to a child care health consultant, the Office of Early Childhood allows for periodic telehealth sessions in place of some of the required in-person visits.

[x. Mental Health Consultation.](#)

Describe:

The Colorado Department of Human Services, Office of Early Childhood requires through rule that child care centers develop procedures on guidance, positive instruction, supporting positive behavior, discipline and consequences, including how the program will access an early childhood mental health consultant or other specialist as needed. The Office contracts with early childhood mental health consultants to provide consultation to providers statewide, particularly in underserved areas. With funds appropriated through the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, the Department's Early Childhood Mental Health program will be expanded to respond to the mental health needs of children and child care providers impacted by COVID-19 by addressing

trauma, grief, loss, emotional distress, and fostering healthy adult-child relationships. While the strategy is limited to supporting children and child care providers within the child care setting through the pandemic.

xi. Other.

Describe:

N/A

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

b. Infants and toddlers. Check and describe all that apply.

i. Grants and contracts (as discussed in 4.1.6).

Describe:

The Colorado Department of Human Services contracts with Early Childhood Councils to recruit and retain providers as well as support quality improvement statewide, with infant and toddler care as an identified priority area. Additionally, under the Colorado Child Care Assistance Program (CCCAP), each county has the option of developing contracts for slots with licensed child care centers and family child care homes. Contracts for slots serve the purpose of increasing supply and quality and serving vulnerable and underserved families.

ii. Family Child Care Networks.

Describe:

N/A

iii. Start-up funding.

Describe:

The Colorado Department of Human Services offers the Emerging and Expanding Child Care Grant Program to, in part, recruit new licensed providers, particularly in

areas of the state that have been identified as child care deserts. Funding from this grant program can be used to support start-up funding to support emerging programs, as well as funding to support the expansion of an existing program to, in part, expand slots for infants and toddlers.

[iv. Technical assistance support.](#)

[Describe:](#)

The Colorado Department of Human Services provides technical assistance through Child Care Licensing to all providers including those serving infants. In Addition, the Office of Early Childhood contracts with Early Childhood Councils to implement the Colorado Shines quality improvement efforts which includes capital improvement grants to support quality and availability of infant and toddler slots specifically.

[v. Recruitment of providers.](#)

[Describe:](#)

The Colorado Department of Human Services contracts with Early Childhood Councils to recruit new licensed programs and provide technical assistance to existing programs statewide but particularly in underserved areas.

[vi. Tiered payment rates \(as in 4.3.3\).](#)

[Describe:](#)

The Colorado Department of Human Services sets tiered rates to programs participating in the Colorado Shines Quality Rating and Improvement System based on the quality level achieved by the programs in all areas of the state, including a higher base rate for infant and toddler care.

[vii. Support for improving business practices, such as management training, paid sick leave, and shared services.](#)

[Describe:](#)

LEADING EDGE™ is a training offered to child care providers helps both licensed child care providers (home and center-based) and start-ups. The program assists child care providers to strengthen business practices when coping with the challenges of COVID-19 and the ever changing landscape of the Colorado

workforce. A primary objective of this effort is to strengthen the child care provider business model and enhance business owner skills so that these critically important services can continue to support our local economies.

[viii. Accreditation supports.](#)

[Describe:](#)

N/A

[ix. Child Care Health Consultation.](#)

[Describe:](#)

The Colorado Department of Human Services, Office of Early Childhood requires through Child Care Rule that staff consult with a currently Colorado licensed registered nurse with knowledge and experience in maternal and child health, pediatric nurse practitioner, or a family nurse practitioner, or a pediatrician at least once a month at the child care facility. The monthly consultation must be specific to the needs of the facility and include some of the following topics: training, delegation and supervision of medication, administration and special health procedures, health care, hygiene, disease prevention, equipment safety, nutrition, interaction between children and adult caregivers, and normal growth and development.

[x. Mental Health Consultation.](#)

[Describe:](#)

The Colorado Department of Human Services, Office of Early Childhood requires through rule that Child Care Centers develop procedures on guidance, positive instruction, supporting positive behavior, discipline and consequences, including how the program will access an early childhood mental health consultant or other specialist as needed. The Office contracts with early childhood mental health consultants to provide consultation to providers statewide, including those that serve infants and toddlers. With funds appropriated through the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, the Department's Early Childhood Mental Health program will be expanded to respond to the mental health needs of children and child care providers impacted by COVID-19 by addressing trauma, grief, loss, emotional distress, and fostering healthy adult-child



relationships. While the strategy is limited to supporting children and child care providers within the child care setting through the pandemic.

xi. Other.

**Describe:**

The Colorado Department of Human Services, Office of Early Childhood implements an Infant Toddler Specialist Network through the Expanding Quality in Infant and Toddler Care Initiative as a training and professional development strategy to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers. The primary goal of the Expanding Quality in Infant Toddler Care (EQ) Initiative is to increase the quality and availability of responsive care for infants and toddlers throughout Colorado by: 1) Strengthening the skills and knowledge base of Early Childhood professionals working with infants and toddlers; 2) Building capacity and promoting systemic change to foster increased quality and availability of care and services; 3) Supporting leadership and collaboration at the community level; and 4) Facilitating Professional development for infant toddler professionals, particularly those who are teaching or coaching infant toddler teachers.

Colorado also leverages the Colorado Shines Professional Development Information System to offer a number of self-paced e-learning modules that reinforce best practices for providing developmentally appropriate services for infants and toddlers. The EQ Initiative Infant Toddler Specialist Network can also provide coaching and technical assistance to support individuals in implementing the knowledge gained through this coursework.

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

c. Children with disabilities. Check and describe all that apply.

i. Grants and contracts (as discussed in 4.1.6).

Describe:

The Colorado Department of Human Services, Office of Early Childhood, contracts with Early Childhood Councils to recruit and retain providers as well as support quality improvement statewide, which must include serving families with children with disabilities. Additionally, under the Colorado Child Care Assistance Program (CCCAP), each county has the option of developing contracts for slots with licensed child care centers and family child care homes. Contracts for slots serve the purpose of increasing supply and quality and serving vulnerable and underserved families.

ii. Family Child Care Networks.

Describe:

N/A

iii. Start-up funding.

Describe:

N/A

iv. Technical assistance support.

Describe:

The Colorado Department of Human Services, Office of Early Childhood, contracts with our Child Care Resource and Referral agencies to provide technical assistance for providers, including those serving children with special needs. In addition, through the Inclusion & Universal Design Project, CDHS-OEC contracts with the Center for Inclusive Design and Engineering at the University of Colorado to provide a cohort of child care programs intensive support on adapting materials and environments to ensure early learning is accessible for children with delays and disabilities. Cohort members are licensed family child care homes and centers that accept child care subsidy. Over six months, participating providers receive: a training on Inclusion and Universal Design; a training series addressing how to adapt materials and environments to address delays or disabilities in the various domains (i.e. communication, gross motor, etc.); reflection sessions and ongoing coaching to ensure lessons learned are incorporated into the program; a kit with

materials and instructions to create low-tech adaptations; and access to a lending library of low-tech assistive technology, materials, and resources.

v. Recruitment of providers.

Describe:

N/A

vi. Tiered payment rates (as in 4.3.3).

Describe:

N/A

vii. Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

LEADING EDGE™ is a training offered to child care providers helps both licensed child care providers (home and center-based) and start-ups. The program assists child care providers to strengthen business practices when coping with the challenges of COVID-19 and the ever changing landscape of the Colorado workforce. A primary objective of this effort is to strengthen the child care provider business model and enhance business owner skills so that these critically important services can continue to support our local economies.

viii. Accreditation supports.

Describe:

N/A

ix. Child Care Health Consultation.

Describe:

The Colorado Department of Human Services, Office of Early Childhood requires through Child Care Rule that staff consult with a currently Colorado licensed registered nurse with knowledge and experience in maternal and child health, pediatric nurse practitioner, or a family nurse practitioner, or a pediatrician at least once a month at the child care facility. The Child Health consultant must work with providers on a health plan that specifically accommodates enrolled children with

disabilities. The monthly consultation must be specific to the needs of the facility and include some of the following topics: training, delegation and supervision of medication, administration and special health procedures, health care, hygiene, disease prevention, equipment safety, nutrition, interaction between children and adult caregivers, and normal growth and development.

x. [Mental Health Consultation.](#)

[Describe:](#)

The Colorado Department of Human Services, Office of Early Childhood requires through rule that child care centers develop procedures on guidance, positive instruction, supporting positive behavior, discipline and consequences, including how the program will access an early childhood mental health consultant or other specialist as needed. The Office contracts with early childhood mental health consultants to provide consultation to providers statewide, including those with disabilities. With funds appropriated through the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, the Department's Early Childhood Mental Health program will be expanded to respond to the mental health needs of children and child care providers impacted by COVID-19 by addressing trauma, grief, loss, emotional distress, and fostering healthy adult-child relationships. While the strategy is limited to supporting children and child care providers within the child care setting through the pandemic.

xi. [Other.](#)

[Describe:](#)

Counties may opt to set higher reimbursement rates for care for children with special needs, including disabilities.

[4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services \(98.16 \(x\)\). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method\(s\) is \(are\) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.](#)

d. Children who receive care during non-traditional hours. Check and describe all that apply.

- i. Grants and contracts (as discussed in 4.1.6).

Describe:

Under the Colorado Child Care Assistance Program (CCCAP), each county has the option of developing contracts for slots with licensed child care centers and family child care homes. Contracts for slots serve the purpose of increasing supply and quality and serving vulnerable and underserved families.

- ii. Family Child Care Networks.

Describe:

N/A

- iii. Start-up funding.

Describe:

N/A

- iv. Technical assistance support.

Describe:

N/A

- v. Recruitment of providers.

Describe:

N/A

- vi. Tiered payment rates (as in 4.3.3).

Describe:

N/A

- vii. Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

LEADING EDGE™ is a training offered to child care providers helps both licensed child care providers (home and center-based) and start-ups. The program assists

child care providers to strengthen business practices when coping with the challenges of COVID-19 and the ever changing landscape of the Colorado workforce. A primary objective of this effort is to strengthen the child care provider business model and enhance business owner skills so that these critically important services can continue to support our local economies.

[viii. Accreditation supports.](#)

[Describe:](#)

N/A

[ix. Child Care Health Consultation.](#)

[Describe:](#)

N/A

[x. Mental Health Consultation.](#)

[Describe:](#)

The Colorado Department of Human Services, Office of Early Childhood requires through rule that child care centers develop procedures on guidance, positive instruction, supporting positive behavior, discipline and consequences, including how the program will access an early childhood mental health consultant or other specialist as needed. The Office contracts with early childhood mental health consultants to provide consultation to providers statewide, including those with disabilities. With funds appropriated through the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, the Department's Early Childhood Mental Health program will be expanded to respond to the mental health needs of children and child care providers impacted by COVID-19 by addressing trauma, grief, loss, emotional distress, and fostering healthy adult-child relationships. While the strategy is limited to supporting children and child care providers within the child care setting through the pandemic.

[xi. Other.](#)

[Describe:](#)

County departments of human services may opt to pay higher rates for care during non-traditional hours.

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

e. Other. Check and describe all that apply.

i. Grants and contracts (as discussed in 4.1.6).

Describe:

Under the Colorado Child Care Assistance Program (CCCAP), each county has the option of developing contracts for slots with licensed child care centers and family child care homes that increase the supply of care for other prioritized populations according to local need.

ii. Family Child Care Networks.

Describe:

N/A

iii. Start-up funding.

Describe:

N/A

iv. Technical assistance support.

Describe:

N/A

v. Recruitment of providers.

Describe:

N/A

vi. Tiered payment rates (as in 4.3.3).

Describe:

N/A

- vii. Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

N/A

- viii. Accreditation supports.

Describe:

N/A

- ix. Child Care Health Consultation.

Describe:

N/A

- x. Mental Health Consultation.

Describe:

N/A

- xi. Other.

Describe:

The Colorado Department of Human Services, Office of Early Childhood is planning to use the ARP Act Child Care Stabilization Grant funds to stabilize the child care sector through recurring grants to eligible child care providers for operational expenses, with bonus amounts added for providers meeting certain family needs, such as those providing infant-toddler care, operating non-traditional hours, or serving children with special needs. In addition, the Department is planning to use the Child Care Stabilization Grant funds to rebuild a more resilient child care sector through targeted subgrants designed to address systemic challenges. The Department is planning to post a simple application to its website for eligible providers to apply for recurring operational grants, which will be awarded through a formula based on licensed capacity and cost of quality. For the recurring operational grants and each of the targeted subgrants, the Department is



identifying data collection needs to measure the impact or results of the strategies on providers, staff, families, and the child care sector, in addition to how providers used the Child Care Stabilization Grant funds.

**4.1.9 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs (658 E(c)(2)(M); 98.16 (x);98.46(b)).**

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

The Colorado Department of Human Services defines significant concentrations of poverty and unemployment in alignment with programmatic needs, which often vary by case. However, among the most common is the portion of the population that falls under 185% FPL, which aligns with the Colorado Child Care Assistance Program (CCCAP) eligibility. This allows the CDHS to identify the portion of various communities that may be eligible for subsidies as a mechanism to provide access to high quality child care. The Department tracks progress in this area on a monthly basis.

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs

The Colorado Department of Human Services utilizes a rubric that considers high concentrations of poverty and unemployment in areas that lack high quality child care as a factor to inform the award of quality improvement funds. Specifically, the Quality Improvement Program Provider Selection Rubric takes into consideration a high needs score. The high need score is determined through the calculation of points for program level enrollment data and community level census data for high need categories. Enrollment data is self-reported within the profile for each program. Programs report enrollment counts for children receiving tuition support from one or more of the following funding sources: Colorado Child Care Assistance Program, Colorado Preschool Program, Head Start/Early Head Start. In addition, programs report enrollment counts for children receiving services and support through an Individualized Family Service Plan

(IFSP) or Individualized Education Program (IEP). Programs also receive points based on community level scores for the following high need categories:

1. Poverty
2. Dual Language Learners
3. Children residing on Tribal Land
4. Foreign Born

ACS Census data is uploaded to the Colorado Shines Quality Rating and Improvement System Database on an annual basis to inform the community level score for a program. The rubric also considers additional factors, such as the percentage of child care subsidy enrollments, years of operation, quality rating level (offering higher points to lower quality rating levels), whether a program utilizes a formal curriculum and/or child assessment approach, staff professional development (training) and planning time, and the capacity of the program to expand slots for children receiving child care subsidy. Early Childhood Councils, as the local implementation partner for the quality improvement programs, score the quality improvement applications received by programs in consideration of the rubric to determine the award of quality improvement funds.

## 4.2 Assess Market Rates and Analyze the Cost of Child Care

### 4.2 Assess Market Rates and Analyze the Cost of Child Care

Key principles of the CCDF are to: (1) provide equal access to childcare for children receiving childcare assistance; and (2) ensure parental choice by offering a full range of childcare services. Payment rates that are too low to support equal access undermine these principles. To establish subsidy payment rates that ensure equal access, Lead Agencies collect and analyze data through a number of tools. Lead Agencies have the option to conduct a statistically valid and reliable (1) market rate survey (MRS) reflecting variations in the price to parents of childcare services by geographic area, type of provider, and age of child or (2) an ACF pre-approved alternative methodology, such as a cost estimation model (CEM) (658E(c)(4)(B)). A cost estimation model estimates the cost of care by incorporating both data and assumptions to judge what expected costs would be incurred by childcare providers and parents under different scenarios. Another approach would be a cost study that collects cost data at the facility or program level to measure the costs (or inputs used) to deliver childcare services (CCDF-ACF-PI-2018-01).

Regardless of whether Lead Agencies conduct a MRS or an alternative methodology, they are required to analyze the cost of providing child services, known as the narrow cost analysis, that meet basic health/safety/quality and staffing requirements (base level care) (98.45(b)(3), (f)(1)(ii)(A), and (f)(2)(ii)), and higher-quality care at each level of quality, as defined by the Lead Agency (98.45(b)(4), (f)(1)(ii)(B), and (f)(2)(iii)). The analysis must identify the gaps between the cost of care and subsidy levels adopted by the state and then be considered as part of the rate setting process.

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

A MRS or an ACF pre-approved alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan (658E(c)(4)(B)(i) (98.45 (c)). Due to the COVID-19 pandemic, Lead Agencies may request a waiver for up to one additional year (until July 1, 2022) to complete the required MRS or an ACF pre-approved alternative methodology. Lead Agencies may also request the required Narrow Cost Analysis be waived for one year (until July 1, 2022). These waiver requests must include a justification linked to the COVID-19 pandemic.

#### 4.2.1 Completion of the MRS or ACF pre-approved alternative methodology.

Did the state/territory conduct a statistically valid and reliable MRS or ACF pre-approved alternative methodology?

Yes. If yes, please identify the methodology(ies) used below to assess child care prices and/or costs.

a. MRS.

When was your data gathered (provide a date range, for instance, September - December, 2019)?

b. ACF pre-approved alternative methodology.

Identify the date of the ACF approval and describe the methodology:

No, a waiver is being requested in Appendix A.

a. Please identify the Lead Agency's planned methodology(ies) to assess child care prices and/or costs.

i. MRS.

If checked, describe the status of the Lead Agency's implementation of the MRS.

The department has conducted initial data gathering on market rate prices and are in the process of procuring the vendor to conduct the cost analysis.

ii. ACF pre-approved alternative methodology.

If checked, describe the status of the Lead Agency's implementation of the ACF pre-approved alternative methodology, including if applicable, the date of the ACF approval and a description of the methodology:

b. If a waiver is requested, Lead Agencies will need to respond to questions 4.2.2- 4.5.2 based on data collected for the FY 2019-2021 CCDF Plan or any data collected since then. Identify the date of the Lead Agencies' most recent and complete Market Rate Survey or ACF pre-approved alternative methodology that will provide data to inform responses to questions 4.2.2 - 4.5.2. 05/31/2018

**4.2.2 Prior to developing and conducting the MRS, or conducting the ACF pre-approved alternative methodology, the Lead Agency is required to consult with (1) the State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities, and (2) organizations representing caregivers, teachers, and directors (98.45 (e)). Local child care program administrators may also be good informants to Lead Agencies on narrow cost analyses.**

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

The Colorado Department of Human Services consults in person with the the Early Childhood Leadership Council (Colorado's State Advisory Council) and solicits feedback via its Data Sub Committee on an ongoing basis. The most recent consultation was in

December 2020 to discuss the initial market rate/narrow cost analysis comparison report. The purpose of the Data Subcommittee is to promote the sharing and use of common data for planning and accountability by state programs and agencies that support young children as well as ensure the interagency data system infrastructure allows for statewide needs assessments concerning the quality and availability of early childhood services. The Subcommittee is charged with monitoring progress across early childhood systems, supporting continued collection of data, and evaluating progress on the Commission's strategic priorities in order to leverage and connect existing data efforts and encourage effective data use in decision-making.

**b) Local child care program administrators:**

Feedback is solicited regularly from counties, as local child care program administrators, through monthly public meetings, as well as standing workgroups, to inform how to effectively collect these data in order to ensure a strong, representative response.

**c) Local child care resource and referral agencies:**

The Colorado Department of Human Services solicited feedback from local Child Care Resource and Referral agencies and Early Child Councils to support initial market rate data collection in January and February 2020, as part of the Child Care Relief Grant application process. The department encouraged these agencies to conduct outreach to ensure providers were aware of the application process. Mile High United Way supports the centralized statewide call center to support child care resource and referral activities for families statewide. For the 2017-2018 MRS, this agency supported the final phase of the data collection process.

**d) Organizations representing caregivers, teachers, and directors:**

For the 2017-2018 MRS, the Colorado Department of Human Services solicited feedback in person from the Early Childhood Education Association of Colorado (ECEA) prior to launching its data collection efforts. This agency will be consulted again to facilitate data collection for the market rate survey.

**e) Other. Describe:**

No other entities have been formally consulted, but the department has been meeting regularly with the Subsidy Innovation and Accountability Center as well as other states to better understand challenges associated with rate setting.

**4.2.3 ACF has established a set of benchmarks, largely based on research, to identify the components of a valid and reliable market rate survey (81 FR, p. 67509). To be considered valid and reliable a Market Rate Survey or preapproved alternative methodology meets the following:**

- represents the child care market
- provides complete and current data
- uses rigorous data collection procedures
- reflects geographic variations
- analyzes data in a manner that captures other relevant differences

An MRS can use administrative data, such as child care resource and referral data, if it is representative of the market.

a. Describe how each of the benchmarks are met in either the MRS or ACF pre-approved alternative methodology.

i. Represent the child care market: [Click or tap here to enter text.](#)

Colorado conducted an initial survey as part of the Child Care Relief Grant application process in January 2021. The department received a total 3,521 surveys out of a total universe of approximately 4690 licensed providers, which is a 75% response rate overall. By provider type, 72% of centers (1827 responses); 85% of homes (1399 responses), and 55% of preschools (295 received).

The data that the department plans to collect in the future will include similar data points to the 2017-2018 Market Rate Survey related to provider type, age of children served and quality level. Colorado's 2017-2018 Market Rate Survey was designed to identify rates by four provider types: 1) Center, 2) Homes, 3) Preschools and 4) School-age. Each of these corresponds to a particular child care license type, or set of license types, in the state. The 2017-2018 Market Rate Survey was designed to identify age ranges based on the corresponding provider, or license, type. That is, the age bands for the MRS align with the most meaningful age bands based on licensing rules. These are as follows: Centers (0 to 5 years, 1.5 years to under 3 years, 3 years to under 6 years, and 6 years old and older); Homes (0 to 2 years, 2 years to under 6

years, 6 years and older); Preschools (any age in licensed preschool -- typically 3-4 years); and School-Age (any age in licensed school-age, typically 5-13). The 2017-2018 Survey data include a variety of variables including quality rating, licensed capacity, and Colorado Child Care Assistance Program (CCCAP) utilization.

**ii. Provide complete and current data:**

Colorado conducted an initial survey as part of the Child Care Relief Grant application process in January 2021. The department received a total 3,521 surveys out of a total universe of approximately 4690 licensed providers, which is a 75% response rate overall. By provider type, 72% of centers (1827 responses); 85% of homes (1399 responses), and 55% of preschools (295 received).

Colorado's 2017-2018 Market Rate Survey collected data in two phases. The first was a census effort in which Colorado made at least three attempts to collect data from every licensed provider in the State. In the second phase, Colorado targeted more intensive outreach efforts to County/Provider Type/Age combinations (e.g., Homes in a specific county) that did not have a large enough response rate in the sample to be statistically representative. Remaining gaps in the data (i.e., combinations of County/Type/Age that did not have sufficient data for representation after the second phase) were then filled in by bringing in the next nearest provider of that type/age in terms of travel time. This approach was verified using commutertime data to ensure that the provider rates brought in to supplement particular geographic/county samples were within a reasonable travel time for each respective community.

**iii. Use rigorous data collection procedures:**

In addition to the market rate data collected in January 2021, the department will include additional data collection requirements in the procurement for the market rate survey vendor.

Colorado's 2017-2018 Market Rate Survey collected data in two phases. The first was a census effort in which Colorado made at least three attempts to collect data from every licensed provider in the State. In the second phase, Colorado targeted more intensive outreach efforts to County/Provider Type/Age combinations (e.g., Homes in a specific county) that did not have a large enough response rate in the sample to be statistically representative. Remaining gaps in the data (i.e., combinations of

County/Type/Age that did not have sufficient data for representation after the second phase) were then filled in by bringing in the next nearest provider of that type/age in terms of travel time. This approach was verified using commutertime data to ensure that the provider rates brought in to supplement particular geographic/county samples were within a reasonable travel time for each respective community.

**iv. Reflect geographic variations:**

Colorado conducted an initial survey as part of the Child Care Relief Grant application process in January 2021. The department received a total 3,521 surveys out of a total universe of approximately 4690 licensed providers, which is a 75% response rate overall. By provider type, 72% of centers (1827 responses); 85% of homes (1399 responses), and 55% of preschools (295 received). The data that was collected is representative of all regions across the state.

Colorado's 2017-2018 Market Rate Survey designed to aggregate rates by provider types and age by county. Aggregating by County is required by state law and helps to inform county specific rates.

**v. Analyze data in a manner that captures other relevant differences:**

The department procured an independent report in December 2019 and again in December 2020 that compared 2017-2018 market rates and CCDF reimbursement rates to a model of the cost of care in different regions of the state to better understand how far off average market prices are compared to the cost of providing care at different ages and different quality levels.

**b. Given the impact of COVID-19 on the child care market, do you think that the data you gathered (as indicated in 4.2.1) on the prices or costs of child care adequately reflect the child care market as you submit this plan?**

No

Yes.

**If yes, why do you think the data represents the child care market?**

N/A



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

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

Colorado conducted an initial survey as part of the Child Care Relief Grant application process in January 2021. The department received a total 3,521 surveys out of a total universe of approximately 4690 licensed providers, which is a 75% response rate overall. By provider type, 72% of centers (1827 responses); 85% of homes (1399 responses), and 55% of preschools (295 received). The data that was collected is representative of variations in the price of child care services in all regions across the state.

Colorado's 2017-2018 Market Rate Survey was designed to aggregate rates by provider types and age by county. Aggregating by County is required by state law and helps to inform county allocations for direct services.

##### **b) Type of provider. Describe:**

Colorado conducted an initial survey as part of the Child Care Relief Grant application process in January 2021. The department received a total 3,521 surveys out of a total universe of approximately 4690 licensed providers, which is a 75% response rate overall. By provider type, 72% of centers (1827 responses); 85% of homes (1399 responses), and 55% of preschools (295 received). The data that was collected is representative of four provider types: 1) Center, 2) Homes, 3) Preschools and 4) School-age. Each of these corresponds to a particular child care license type, or set of license types.

Colorado's 2017-2018 Market Rate Survey was designed to identify rates by four provider types: 1) Center, 2) Homes, 3) Preschools and 4) School-age. Each of these corresponds to a particular child care license type, or set of license types.

##### **c) Age of child. Describe:**

Colorado conducted an initial survey as part of the Child Care Relief Grant application process in January 2021. The department received a total 3,521 surveys out of a total universe of approximately 4690 licensed providers, which is a 75% response rate overall. By provider type, 72% of centers (1827 responses); 85% of homes (1399 responses),

and 55% of preschools (295 received). The data that was collected identify age ranges based on the corresponding provider, or license, type. That is, the age bands for the MRS align with the most meaningful age bands based on licensing rules. These are as follows: Centers (0 to under 1.5 years, 1.5 years to under 3 years, 3 years to under 6 years, and 6 years old and older); Homes (0 to 2 years, 2 years to under 6 years, 6 years and older); Preschools (any age in licensed preschool); and School-Age (any age in licensed school-age).

Colorado's 2017-2018 Market Rate Survey is designed to identify age ranges based on the corresponding provider, or license, type. That is, the age bands for the MRS align with the most meaningful age bands based on licensing rules. These are as follows: Centers (0 to under 1.5 years, 1.5 years to under 3 years, 3 years to under 6 years, and 6 years old and older); Homes (0 to 2 years, 2 years to under 6 years, 6 years and older); Preschools (any age in licensed preschool); and School-Age (any age in licensed school-age).

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

Colorado's 2017-2018 Market Rate Survey was able to parse the data by a variety of variables including quality rating, licensed capacity, and Colorado Child Care Assistance Program (CCCAP) utilization.

4.2.5 Has the Narrow Cost Analysis been completed for the FY 2022 - 2024 CCDF Plan?

No, a waiver is being requested in Appendix A. If no, describe the status of the Lead Agency's upcoming narrow cost analysis.

Yes, the narrow cost analysis information is included in the report as described in 4.2.6. If yes, describe how the State/Territory analyzed the cost of child care through a narrow cost analysis for the FY 2022 - 2024 CCDF Plan, including:

a. The methodology the Lead Agency used to conduct, obtain, and analyze data on the estimated cost of care (narrow cost analysis), including any relevant variation by geographic location, category of provider, or age of child (98.45 (f)(ii)).

b. How the methodology addresses the cost of child care providers' implementation of health, safety, quality and staffing requirements (i.e. applicable licensing and

regulatory requirements, health and safety standards, training and professional development standards, and appropriate child to staff ratio, groups size limits, and caregiver qualification requirements (98.45 (f)(ii)(A)).

c. How the methodology addresses the cost of higher-quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality (98.45 (f)(ii)(B)).

d. The gap between costs incurred by child care providers and the Lead Agency's payment rates based on findings from the narrow cost analysis.

**4.2.6 After conducting the market rate survey or ACF pre-approved alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or ACF pre-approved alternative methodology. The detailed report must also include the Narrow Cost Analysis, as described in 4.2.5, which estimates the cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements, and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For states without a QRIS or for a state with a QRIS system that is currently limited to only certain providers, those states may use other quality indicators (e.g. provider status related to accreditation, PreK standards, Head Start performance standards, school-age quality standards, or state defined quality measures.)**

The Lead Agency must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public or stakeholders.

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

a. Date the report containing results was made widely available - no later than 30 days after the completion of the report. 10/17/2018

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

Results from the 2017-2018 market rate survey were distributed to all county departments of human services and licensed providers. Additionally, the results are publicly available on the Office of Early Childhood's website

[https://dcfs.my.salesforce.com/sfc/p/#410000012srR/a/41000000CgCI/Z1X8\\_VOZVjuNVGIZ3CWC6S86aDEfZ3o4aJqMeiGC.rk](https://dcfs.my.salesforce.com/sfc/p/#410000012srR/a/41000000CgCI/Z1X8_VOZVjuNVGIZ3CWC6S86aDEfZ3o4aJqMeiGC.rk).

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

Stakeholder feedback informed the bounds of the data collection and how that may influence the way the study represents rates. Additionally, stakeholder input on how to best supplement insufficient data within counties or at specific provider types was taken into consideration. This included consultation with the Early Childhood Leadership Council Data Sub-committee, as well as consultation with our Sub-PAC.

### 4.3 Establish Adequate Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or ACF pre-approved alternative methodology, as identified in 4.2.1, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF assistance. Lead Agencies must also consider the costs of base and higher quality care at each level as part of its rate setting. The Lead Agency must re-evaluate its payment rates at least every 3 years.

#### **4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS as identified in 4.2.1) for the following categories below.**

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS as identified in 4.2.1) for the following categories below.

Lead Agencies are required to provide a summary of data and facts in their Plan to demonstrate how its payment rates ensure equal access. The preamble to the final rule (81 FR, p. 67512), indicates that a benchmark for adequate payment rates is the 75th percentile of the most recent MRS. The 75th percentile is the number separating the lowest 75 percent of rates from the highest 25 percent. Setting rates at the 75th percentile, while not a requirement, would ensure that eligible children have access to three out of four child care slots.

The 75th percentile benchmark applies to the base rates. Base rates are the lowest, foundational rates before any differentials are added (e.g., for higher quality or other purposes). Further, base rates must be sufficient to ensure that minimum health and safety and staffing requirements are covered.

Percentiles are not required if the Lead Agency conducted an ACF pre-approved alternative methodology, but must be reported if the Lead Agency conducted a MRS. For states that conduct an ACF pre-approved alternative methodology, report the base payment rates based on a full-time weekly rate.

The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. If rates are not statewide, please use the most populous geographic region (defined as the area serving highest number of CCDF children) to report base payment rates below.

a. Provide the base payment rates and percentiles based on either the statewide rates or the most populous area of the state (area serving highest number of children accessing CCDF). To facilitate compiling state by state payment rates, provide the full-time weekly base payment rates in the table below. If weekly payment rates are not published, then the Lead Agency will need to calculate its equivalent.

i. Age of child in what type of licensed child care setting (All rates are full-time) - Infant (6 months) Center care:

Base payment rate: \$63.88 \$73.91 \$89.95

Full-time weekly base payment rate: \$319.40 \$369.55 \$449.75

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? For the CRRSA Provider Rate Increase effective 9/1/2021 the rates range

between the 25th-90th percentile of the most recent MRS depending on the QRIS level of the provider.

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

ii. Age of child in what type of licensed child care setting (All rates are full-time) - Toddler (18 months) Center care:

Base payment rate:\$55.31 \$69.68 \$80.47

Full-time weekly base payment rate: \$276.55 \$348.40 \$402.35

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? For the CRRSA Provider Rate Increase effective 9/1/2021 the rates range between the 25th-90th percentile of the most recent MRS depending on the QRIS level of the provider.

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

iii. Age of child in what type of licensed child care setting (All rates are full-time) - Preschooler (4 years) Center care:

Base payment rate:\$45.41 \$47.03 \$58.04

Full-time weekly base payment rate: \$227.05 \$235.15 \$290.20

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? For the CRRSA Provider Rate Increase effective 9/1/2021 the rates range between the 25th-90th percentile of the most recent MRS depending on the QRIS level of the provider.

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

iv. Age of child in what type of licensed child care setting (All rates are full-time) - School-age child (6 years) Center care (Based on full-day, full-year rates that would be paid during the summer):

Base payment rate:\$35.00 \$48.30 \$57.75

Full-time weekly base payment rate: \$175.00 \$241.50 \$288.75

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? For the CRRSA Provider Rate Increase effective 9/1/2021 the rates range between the 25th-90th percentile of the most recent MRS depending on the QRIS level of the provider.

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

v. Age of child in what type of licensed child care setting (All rates are full-time) - Infant (6 months) Family Child Care:

Base payment rate:\$38.43 \$47.30 \$55.89

Full-time weekly base payment rate: \$192.15 \$236.50 \$279.45

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? For the CRRSA Provider Rate Increase effective 9/1/2021 the rates range between the 25th-90th percentile of the most recent MRS depending on the QRIS level of the provider.

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

vi. Age of child in what type of licensed child care setting (All rates are full-time) - Toddler (18 months) Family Child Care:

Base payment rate:\$38.43 \$47.30 \$55.89

Full-time weekly base payment rate: \$192.15 \$236.50 \$279.45

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? For the CRRSA Provider Rate Increase effective 9/1/2021 the rates range between the 25th-90th percentile of the most recent MRS depending on the QRIS level of the provider.

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

vii. Age of child in what type of licensed child care setting (All rates are full-time) - Preschooler (4 years) Family Child Care:

Base payment rate:\$32.25 \$40.85 \$53.74

Full-time weekly base payment rate: \$161.25 \$204.25 \$268.70

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? For the CRRSA Provider Rate Increase effective 9/1/2021 the rates range between the 25th-90th percentile of the most recent MRS depending on the QRIS level of the provider.

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

viii. Age of child in what type of licensed child care setting (All rates are full-time) - School-age child (6 years) Family Child Care (Based on full-day, full-year rates that would be paid during the summer):

Base payment rate:\$30.00 \$36.23 \$47.25

Full-time weekly base payment rate: \$150.00 \$181.15 \$236.25

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? For the CRRSA Provider Rate Increase effective 9/1/2021 the rates range between the 25th-90th percentile of the most recent MRS depending on the QRIS level of the provider.

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

b. If the Lead Agency does not publish weekly rates then how were these rates calculated (e.g., were daily rates multiplied by 5 or monthly rates divided by 4.3)?

Daily rates were multiplied by 5.

c. Describe how the Lead Agency defines and calculates part-time and full-time care.

Full-time is defined as more than five hours. Part-time care is defined as up to five hours. Part-time rates are calculated as 55% of the full time rate.

d. Provide the date these current payment rates became effective (i.e., date of last update based on most recent MRS as reported in 4.2.1). 09/01/2021

e. If applicable, identify the most populous area of the state (area serving highest number of children accessing CCDF) used to complete the responses above.

Denver County



f. Provide the citation, or link, if available, to the payment rates

[https://www.google.com/url?q=https://drive.google.com/file/d/1Sr6Me2\\_BpmaiAJPEGRyFxsjAc4VBjjeq/view?usp%3Dsharing&sa=D&source=editors&ust=1624639432445000&u sg=AOvVaw1PXhL\\_sUWjZoDdj4BfMclW](https://www.google.com/url?q=https://drive.google.com/file/d/1Sr6Me2_BpmaiAJPEGRyFxsjAc4VBjjeq/view?usp%3Dsharing&sa=D&source=editors&ust=1624639432445000&u sg=AOvVaw1PXhL_sUWjZoDdj4BfMclW)

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

Per a change in state statute in 2018, the Colorado Department of Human Services sets rates for all counties in an effort to establish reimbursement rates that provide equal access to high quality providers in each county.

**4.3.2 Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.**

a. Geographic area.

Describe:

Rates vary by county which reflects geographical differences.

b. Type of provider.

Describe:

Rates vary by type of provider as defined by the license: homes, centers, preschools and school age. Qualified Exempt Provider rates are set by each county to meet local needs but counties must not set Qualified Exempt Provider rates such that they inhibit or deter providers from becoming licensed.

c. Age of child.

Describe:

Rates vary by age ranges: Centers 0-18 months, 18-36 months, 36-6 years, school age & Family Child Care 0-24 months, 24 months - 6 years, school age.

d. Quality level.

Describe:

Rates are tiered by quality as determined by the Colorado Shines Quality Rating And Improvement System such that providers with the highest quality ratings (Level 3 through Level 5) receive the 75th percentile (Levels 4 & 5) of the appropriate market rate (rate by county/provider type/age) and those at Level 3 receive the 50th percentile. Effective 9/1/2021, those at the lowest quality levels (Levels 1 and 2) will receive at least the 25th percentile.

e. Other.

Describe:

N/A

**4.3.3 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children). Lead Agencies may pay providers more than their private pay rates as an incentive or to cover costs for higher quality care (81 FR, p. 67514).**

Has the Lead Agency chosen to implement tiered reimbursement or differential rates?

No.

Yes. If yes, identify below any tiered or differential rates, and at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS or an ACF pre-approved alternative methodology. Check and describe all that apply.

a. This option should not be selected if the answer above is "Yes" -- Tiered or differential rates are not implemented.

Describe:

b. Differential rate for non-traditional hours.

Describe:

County departments of human services may opt to pay higher rates for care during non-

traditional hours. For non-traditional hours, such as overnight care, counties may pay up to 200% of the base rate for that provider type and quality level (as determined under tiered reimbursement), as long as it does not exceed the private pay rate charged by that provider. Each county determines their methodology individually based on local need and available funding.

- c. Differential rate for children with special needs, as defined by the state/territory.

Describe:

County departments of human services may opt to pay higher rates for children with special needs. For special needs care, counties may pay up to 200% of the base rate for that provider type and quality level (as determined under tiered reimbursement), as long as it does not exceed the private pay rate charged by that provider for that type of care. Each county determines the percentage of the regular rate they will pay for children with special needs based on local need and available funding.

- d. Differential rate for infants and toddlers. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

- e. Differential rate for school-age programs. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

- f. Differential rate for higher quality, as defined by the state/territory.

Describe:

The Colorado Department of Human Services sets tiered rates to programs participating in the Colorado Shines Quality Rating and Improvement System based on the quality level achieved by the programs. Currently, rates are tiered by quality such that providers with the highest ratings within the Colorado Shines Quality Rating and Improvement System receive higher reimbursement rates (greater than or equal to the 75th percentile for Levels 4 and 5; greater than or equal to the 50th percentile for Level 3) based on the appropriate market rate (rate by county/provider type/age). Providers who meet the basic

quality standards in Licensing (Level 1 or Level 2) receive the base reimbursement rate (greater than or equal to the 25th percentile). These percentiles were informed through the use of the Provider Cost of Quality Calculator (PCQC) tool. The base rate is meant to address the cost of basic health and safety while the higher tiers are meant as an incentive for providers to increase and maintain higher quality care.

[g. Other differential rates or tiered rates.](#)

[Describe:](#)

**Using funds received through the CRRSA Act, the Department will temporarily implement tiered increases that are estimated to cover approximately 20% of the disparity between the current reimbursement rate and the estimated cost of quality care for each rate type and county grouping type, based on the results of the narrow cost analysis "Analysis of Child Care Costs and Subsidy Rates in Colorado in 2020" by Andrew Brodsky, PhD, completed in December 2020. Because this disparity between the rate and cost of quality care is greatest for infant and toddler care and in rural areas, the tiered structure will increase those rates at a higher proportion.**

**The rate increase temporarily raises the existing reimbursement rates by 20% of the amount that the reimbursement rate would need to increase to fully cover the cost of care. These rates will be effective from 9/1/2021 until 6/20/2022, when the rates based on the new market rate survey will be implemented.**

#### [4.3.4 Establishment of adequate payment rates.](#)

[a. Describe how base payment rates are adequate and enable providers to meet health, safety, quality, and staffing requirements under CCDF, and how they were established based on the most recent MRS or ACF pre-approved alternative methodology and the Narrow Cost Analysis, as reported in 4.2.1 and 4.2.5.. In determining compliance with the Act for the equal access provisions in the FY2019-2021 CCDF Plan, the OCC reviewed all the states with payment rates below the 75th percentile benchmark. Of those states,](#)

the half with the lowest payment rates were considered non-compliant and placed on a corrective action plan (CAP). These states all had rates below the 25th percentile for either some or all categories of care. The 25th percentile is not to be viewed as a benchmark or a long-term solution to gauge equal access. It is also not to be viewed as sufficient for compliance in future plan cycles. OCC expects to continue to take action against states with the lowest rates in future plan cycles in an effort to keep payment rates moving upward toward ensuring equal access. Note: Per the preamble (81 FR p. 67512), in instances where an MRS or ACF pre-approved alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

Until the new market rate survey is completed, the department is raising rates based on the 2017-2018 Market Rate Study under the waiver allowed under Appendix A of this state plan period. Rates are tiered by quality such that providers with the highest ratings within the Colorado Shines Quality Rating and Improvement System receive higher reimbursement rates. Although the increased rates were based primarily on the results of the narrow cost analysis "Analysis of Child Care Costs and Subsidy Rates in Colorado in 2020" by Andrew Brodsky, PhD, completed in December 2020 and then proportionately applied by quality level and provider type, we have translated those increased rates to reflect the percentiles of the market in ranges for the purpose of the state plan. The tiered rates range from the 75th to above the 90th percentile for Levels 4 and 5 providers, 50th-75th percentile for level 3 providers and 25th-50th for Levels 1 and 2, based on the appropriate rate by county/provider type/age after the increased rate adjustment is applied. In general, the Office of Early Childhood set rates relative to the prices charged within particular markets, prices which sustain businesses (i.e., meet or exceed costs over time at the market-level) that meet the health, safety, quality, and staffing requirements under CCDF. The rates set for the 2019-2021 plan period applied an increase of at least 5% to the previous rates based on the 2017-2018 Market Rate Study. The original rates were informed through the use of the Provider Cost of Quality Calculator (PCQC) tool. With this tool, the base rate is meant to address the cost of basic health and safety while the higher tiers are meant as an incentive for providers to increase and maintain higher quality care. The percent increase that was applied to the original rates exceeds the increase in Colorado's inflation rate over the past year, which should help to ensure that the rates are sufficient to support health, safety, quality and staffing requirements until the new Market Rate Study is completed.

b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology** . Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

The increased rates were informed by the most recent narrow costs analysis, "Analysis of Child Care Costs and Subsidy Rates in Colorado in 2020" by Andrew Brodsky, PhD, completed in December 2020. The study uses the Colorado Child Care Cost Tool, which is based on the U.S. Office Of Child Care's Provider Cost of Quality Calculator to compare the 2019-2020 reimbursement rates to the cost of quality for various age groups (infant, toddler, preschool and school-age), child care setting types (centers, homes) and modeled quality levels (levels 1 through 5). This tool has been used in numerous contexts around Colorado and has been widely reviewed and vetted by stakeholders across the state. In addition, the model makes several adjustments to account for the impact of COVID-19 on providers' financial models, including adjustments for temporary changes, such as group size reductions, as well as longer term costs such as increased sanitation and personal protective equipment costs. Reimbursement rates set at each quality level are meant to cover the cost of quality at each respective quality level as well as cover basic health and safety. The tiered rates are meant to serve as an incentive for providers to increase and maintain higher quality care.

**4.3.5 Describe how the Lead Agency took the cost of higher quality, as determined in 4.2.5, into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For states without a QRIS, the states may use other quality indicators (e.g. provider status related to accreditation, PreK standards, Head Start performance standards, or state-defined quality measures).**

Up until this plan period, the rates set for CCCAP were based primarily on the price charged for particular types of care in particular communities and the tiers were then based on percentiles of the market price. However, the upcoming rate increase addresses the cost of quality, as well as the additional health and safety costs associated with COVID-19, and adjusts the tiered rates accordingly. As mentioned above, the state conducted a recent narrow cost analysis in 2020 modeled on the Provider Cost of Quality Calculator (PCQC) tool to better understand the fixed costs for providers at different quality levels and used this to

apply a proportional increase to every rate.

**4.3.6 Identify and describe any additional facts that the Lead Agency considered in determining its payment rates ensure equal access. If applicable, provide a description of how any additional health and safety costs, because of the COVID-19 pandemic are included in rate setting.**

When setting the increased reimbursement rates for this plan period, the state utilized the 2020 narrow cost analysis, which included specific adjustments to its model based on the costs associated with COVID-19, This included an analysis that included a temporary adjustment based on reduced group sizes as well an analysis focused on the longer-term impacts of the pandemic, such as a reduction in demand for certain types of provider types (mainly center care); and adjustment for the staff impacts on maintaining consistent cohorts of children during the day; and the increased costs of sanitation supplies.

**4.4 Implement Generally Accepted Payment Practices and Ensure Timeliness of Payments**

**4.4 Implement Generally Accepted Payment Practices and Ensure Timeliness of Payments**

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(l)(3)). Responses may also identify any additional health and safety fees providers are charging as a result of COVID-19.

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

#### **4.4.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.**

a. Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

i. Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

ii. Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

The Colorado Department of Human Services Child Care Automated Tracking system (CHATS) generates weekly payments. In addition, for payments that are not automatically reimbursed through CHATS in which case a provider must submit a manual bill, county departments of human/social services must pay providers within 21 days of receiving a complete manual claim form.



b. To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

i. Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

County departments of human services may enter into contracts for slots agreements with licensed child care providers. The purpose of these contracts is to negotiate a guaranteed payment, based on full-time or part-time monthly units, regardless of occasional absences.

ii. Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

Effective 8/1/2021 The Department will be utilizing Coronavirus Response and Relief Supplemental Appropriations Act funds to increase economic support to providers that accept subsidy children through an increased number of monthly absences as one of our identified strategies. Effective 8/1/2021-6/30/2022 Colorado Child Care Assistance Program rules require counties to reimburse licensed child care providers for absences as follows:

1. No fewer than two (6) absences per month if they are in levels one (1) or two (2) of the department's quality rating and improvement system.
2. No fewer than three (7) absences per month if they are in levels three (3), four (4), or five (5) of the department's quality rating and improvement system.
3. No fewer than two (6) absences per month if they are a school age child care program that does not have a quality rating through the department's quality rating and improvement system.

This exceeds the number of monthly absences required to provide full payment if a child attends at least 85% of the care that is authorized.

Effective 7/1/2022 the Colorado Child Care Assistance Program rules will require counties to reimburse licensed child care providers for absences as follows to provide full payment if a child attends at least 85% of the care that is authorized.

1. No fewer than two (3) absences per month if they are in levels one (1) or two (2) of the department's quality rating and improvement system.
2. No fewer than three (4) absences per month if they are in levels three (3), four (4), or five (5) of the department's quality rating and improvement system.
3. No fewer than two (3) absences per month if they are a school age child care

program that does not have a quality rating through the department's quality rating and improvement system.

The average number of authorized days of care per month from January 2019-December 2020 was 18.65 days/month. (85% of 18.65 = 15.85) Thus, a minimum of three absences per month is required to meet full payment if a child attends at least 85% of monthly care that is authorized.

- iii. Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

N/A

- iv. Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

N/A

c. The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

- i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

All payments are based on full-time or part-time units. Full-time is defined as more than five hours. Part-time care is defined as up to five hours. Part-time rates are calculated as 55% of the full time rate.

- ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

County departments of human services may pay licensed providers for registration, activity and transportation fees that are customarily charged to private-paying parents.

d. The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, including fees related to COVID 19, and the dispute-resolution process. Describe:

The Colorado Child Care Assistance Program (CCCAP) Fiscal Agreement includes the general payment policies, rates, and any fees charged by the providers. The agreement also details provider rights and responsibilities and the dispute resolution process for fiscal agreement termination and payment dispute. In addition, some counties also include additional county payment policies that detail the county specific information, such as number of holidays/absences, registration, activity and transportation allowances, payment and manual claim information. Because Colorado is State supervised and county administered, it varies by county. To inform providers of the potential maximum reimbursement, each county uses the template within the fiscal agreement and fills in their county ceiling for each quality tier. These maximums are noticed to providers so that they are informed of what their private pay rates will be compared against. Once the provider's private pay rates are received and viewed, they are compared to the county ceiling rates and the provider gets their rates or the county ceiling, whichever is less. The provider receives a copy of the executed fiscal agreement and a rate notification of their specific daily rate reimbursement per age category. Payroll run cycle calendar is also included which details the payroll dates for the year as well as general information about submitting manual claims for days not automatically reimbursed through the Colorado Department of Human Services Child Care Automated Tracking System (CHATS).

The CCCAP Authorization Eligibility Notice details the effective begin and end dates of approved care, the schedule detailing days per month and unit of care (full time more than 5 hours/day up to 12 hours/day, part time up to 5 hours/day, full time/part time more than 12 hours to 17 hours/day and full time/full time more than 17 hours per day but less than 24 hours per day) and individualized parental fee amounts due per child. This notice

also details rules related to parental reporting responsibilities for program compliance as well as detailing the case penalties associated with giving false information by deed or omission. Finally, this notice outlines the benefits dispute resolution process for clients.

e. The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur.

Describe:

In addition to receiving notices through mail, email, or fax, child care providers also have access to notices electronically through the Attendance Tracking System (ATS). The ATS is a web-based system specifically designed to track a child's attendance for payment purposes as well as give providers access to up-to-date eligibility, authorization and payment status for Colorado Child Care Assistance Program families. Counties are required to issue notices regarding changes to child care subsidies within one business day of the action date. (3.912 (OO)).

f. The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

The timely appeal and resolution process for payment inaccuracies and disputes is detailed in the executed fiscal agreement between the county and the provider. Colorado uses an automated system for attendance billing and payment, providers are to reconcile their weekly payment summaries. If a provider finds that a payment was inaccurate or missing, they submit a written manual claim (state form) to the county detailing what day/time/child they are claiming the discrepancy in payment. The claim must be submitted within 60 days of care or the provider forfeits payment. Once the manual claim is submitted to the county, the claim with corresponding signatures on attendance records is reviewed against the client's case file and eligibility. If needed, the county is also to contact the child care provider and parent(s) to resolve the discrepancy. If the county agrees with the discrepancy, the claim is paid within 30 days of receipt by the county. If the county disagrees with the manual claim, the manual claim is denied and the provider is notified. If the provider disputes the county review, the provider can request an informal county level conference in writing within 15 calendar days of the date of action of the manual claim denial. The information about how to request a conference and to whom is detailed in the fiscal agreement. A county must set the conference within 2 weeks of receiving the written request from the provider. The resolution from the

conference is then provided to the child care provider within 15 calendar days of the conference.

g. Other. Describe:

N/A

#### 4.4.2 Do payment practices vary across regions, counties, and/or geographic areas?

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

Counties may choose to pay alternative rate types for specialized care, such as care for children with special needs, weekend care or overnight care. Counties set their own rates for license-exempt care and also have the flexibility in determining the number of absences and/or holidays they pay, as long as it meets the minimums set by state program rules. Additionally, counties have the option to pay for child care holds and/or drop in days. Counties also have the option to cover the cost of registration, activity, and transportation fees that a provider may charge a family. Lastly, counties may enter into a slot contract with a provider in order to increase the supply and improve the quality of child care for county identified target populations.

#### 4.4.3 Describe how Lead Agencies' payment practices described in subsection 4.4 support equal access to a full range of providers.

The Department has made significant efforts to reduce the barriers associated with accepting CCCAP and to support generally accepted payment practices. These efforts include, weekly payments through CHATS; increasing the minimum number of monthly absences; state set reimbursement rates; system functionality that supports automatic payment of registration, activity and transportation fees; system functionality that supports contract for slots; improving and streamlining the fiscal agreement process. These efforts align policies more closely with private pay practices more than they ever have and we continue to assess the barriers that providers face when accepting child care subsidies to continue to make

positive changes. We continue to see an increase in the number of child care providers accepting CCCAP which means an increase in access to child care for subsidy families.

#### 4.5 Establish Affordable Co-Payments

Family co-payments are addressed in Section 3 related to minimum 12-month eligibility and the graduated phase-out provision and also in this subsection, because they are an important element for determining equal access. If a Lead Agency allows providers to charge amounts more than the required family co-payments, the Lead Agency must provide a rationale for this practice, including how charging such additional amounts will not negatively impact a family's ability to receive care they might otherwise receive, taking into consideration a family's co-payment and the provider's payment rate.

4.5.1 How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF services (98.16 (k))? Check all that apply

- a. Limit the maximum co-payment per family.

Describe: .

N/A

- b. Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

N/A

- c. Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.2.5.

Colorado has an exit eligibility of 85% State Median Income for all counties. The parent fee structure gradually increases the co-payment amount as a family's income increases.

d. Other.

Describe:

As of 7/1/21 eligible households with countable income that is at or below the 100% of the FPG have a copay assessed at 1% of their income. Eligible households with countable income that is above 100% of the FPG have a copay assessed at 1% of their income plus a marginal rate increase of fourteen percent 14% for every dollar of gross countable household income above one 100% of the FPG. An additional \$15/month per child fee shall be added to the co-payment for households that are requesting care for more than one child and have income above 100% of the FPG. The marginal rate increase ensures that families are able to retain more of their income over time as they receive more income as their other public assistance benefits are reduced.

This co-payment structure is a huge success for Colorado in approving the affordability of child care for subsidy families. Previously, co-payments ranged from 1 percent up to 14 percent of a household's gross income with varying additional child fees and there was a pronounced increase in parent fees for families earning between 100 percent FPG and 150 percent FPG. The marginal rate eliminates the steep increase families faced in the previous formula by slowly increasing the amount of the parent fee by 14% on every dollar earned above one hundred percent FPL. This would ensure that as families experience a modest increase in their income, they are able to retain more of that income rather than paying most of it to elevated parent fees or not accepting a raise at all. This would help families continue to afford child care and maintain continuity of care for their children, particularly as they recover from the financial devastation of the pandemic.

**4.5.2. Does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?**

No

Yes. If yes:

- i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.
- ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.
- iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

## 5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for all child care providers in a state or territory and then moves to focus specifically on CCDF providers who may be licensed, or those exempt from licensing. The next section addresses child-staff ratios, group size limits, and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children. The section then covers the health and safety requirements; standards, training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Finally,



Lead Agencies are asked to describe any exemptions for relative providers (98.16(l)). In some cases, CCDF health and safety requirements may be integrated within the licensing system for licensed providers and may be separate for CCDF providers who are license-exempt. In either case, Lead Agencies are expected to identify and describe health and safety requirements for all providers receiving CCDF.

Note: When responding to questions in this section, the OCC recognizes that each state/territory identifies and defines its own categories of care. The OCC does not expect states/territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important to note that these requirements apply to all child care staff members who are licensed, regulated, or registered under state/territory law and all other providers eligible to deliver CCDF services.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

## 5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

**5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check, identify, and describe all that apply, and provide a citation to the licensing rule.**

a. Center-based child care.

i. Identify the providers subject to licensing:

Child Care Center means a facility that is maintained for the whole or part day for the care of five or more children who are eighteen years of age or younger and who are not related to the owner, operator or manager, with or without compensation. This term includes, but is not limited to day care centers, preschool, school age child care centers, before and after school programs, nursery schools, kindergarten, day camp, summer camp and centers for children with developmental disabilities. 7.701.11 (A) & (B) 12 CCR 2509-8 and 7.701.2 (C) 12 CCR 2509-8

ii. Describe the licensing requirements:

Child Care Center means a facility that is maintained for the whole or part day for the care of five or more children who are eighteen years of age or younger and who are not related to the owner, operator or manager, with or without compensation. This term includes, but is not limited to day care centers, preschool, school age child care centers, before and after school programs, nursery schools, kindergarten, day camp, summer camp and centers for children with developmental disabilities. All Child Care Centers are required to be licensed. Child Care Centers must follow the General Rules for Child Care Facilities and the Rules Regulating Child Care Centers (Less than 24-hour Care) and these rules can be found on the Colorado Office of Early Childhood website at

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Rules-and-Regulations&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Rules-and-Regulations&lang=en)

iii. Provide the citation:

7.701.11 (A) & (B) 12 CCR 2509-8 and 7.701.2 (C) 12 CCR 2509-8.

b. Family child care. Describe and provide the citation:

i. Identify the providers subject to licensing:

Family Child Care Home means a facility for care of children in a place of residence of a family or person for the purpose of providing less than twenty four hour care for children under the age of eighteen years who are not related to the provider. "Family child care Colorado home" may include infant toddler child care homes, large child care homes and experienced child care homes. 7.701.11 (A) & (B) 12 CCR 2509-8 and 7.701.2 (A) 12 CCR 2509-8.

ii. Describe the licensing requirements:

Family Child Care Home means a facility for care of children in a place of residence of a family or person for the purpose of providing less than twenty four hour care for children under the age of eighteen years who are not related to the provider. "Family child care home" may include infant/ toddler child care homes, large child care homes and experienced child care homes. All Family Child Care Homes except those exempted from licensing per 26-6-103 (1) (i) (I) (A) (B), C.R.S. are required to be licensed. Family Child Care Homes must follow the General Rules for Child Care Facilities and the Rules Regulating Family Child Care Homes and these rules can be found on the Colorado Office of Early Childhood website at [https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Rules-and-Regulations&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Rules-and-Regulations&lang=en)

iii. Provide the citation:

7.701.11 (A) & (B) 12 CCR 2509-8 and 7.701.2 (A) 12CCR 2509-8

c. In-home care (care in the child's own) (if applicable):

i. Identify the providers subject to licensing:

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

ii. Describe the licensing requirements:

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements per 26-6-103 (1) (i) (I) (A) (B), C.R.S. . If the number of children in care exceeds exemption limits they are

required to obtain a family child care license. Family Child Care Home means a facility for care of children in a place of residence of a family or person for the purpose of providing less than twenty four hour care for children under the age of eighteen years who are not related to the provider. "Family child care home" may include infant/toddler child care homes, large child care homes and experienced child care homes. All Family Child Care Homes except those exempted from licensing per 26-6-103 (1) (i) (I) (A) (B), C.R.S. are required to be licensed. Family Child Care Homes must follow the General Rules for Child Care Facilities and the Rules Regulating Family Child Care Homes and these rules can be found on the Colorado Office of Early Childhood website at

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Rules-and-Regulations&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Rules-and-Regulations&lang=en)

iii. Provide the citation:

7.701.11 (A) & (B) 12 CCR 2509-8

**5.1.2 Identify the CCDF-eligible providers who are exempt from licensing requirements. Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. Describe how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)). Do not include exempt relative care providers, this information will be collected in Section 5.6.**

a. License-exempt center-based child care. Describe and provide the citation by answering the questions below.

i. Identify the CCDF-eligible center-based child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption:

N/A

ii. Provide the citation to this policy:

N/A

iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.

N/A

b. License-exempt family child care. Describe and provide the citation by answering the questions below.

i. Identify the CCDF-eligible family child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption:

"Qualified exempt child care provider" means a family child care home provider who is not licensed but provides care for a child(ren) from the same family; or an individual who is not licensed but provides care for a child(ren) who is related to the individual if the child's care is funded in whole or in part with money received on the child's behalf from the publicly funded CCCAP under rule manual Volume 7, Section 7.701.11, A, 1,

b. (12 CCR 2509-8). Qualified exempt child care provider: A non-licensed family child care home in which less than twenty-four (24) hour care is given at any one time for:

a. Any number of children directly related to the provider;

b. Any number of siblings from one family unrelated to the provider; or,

c. Up to four (4) children, who are unrelated to the provider.

d. No more than two (2) children under the age of two (2) years may be cared for at any time if the provider's own children are in the provider's care as they are counted toward the maximum capacity of four (4).

"Non-relative out-of-home care" means care provided by a person, who is not related to the child, in another location by a person who does not meet the definition of "adult caretaker" or "teen parent".

ii. Provide the citation to this policy:

3.914.1 (B)(1)(a-d) 9 CCR 2503-9), (3.914.1 (B)(1)(e)(1-4) 9 CCR 2503-9

iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.

In order to ensure the safety of children in care, the Colorado Department of Human Services requires all legally exempt non-relative providers, who provide child care in their homes or the homes of children, annually complete ten (10) core areas of required trainings; an annual on-site health and safety visit where care is being conducted; and sign a self-attestation form that addresses:

- 1) building and physical premises safety
- 2) health, safety and welfare of provider and child.

c. In-home care (care in the child's own home by a non-relative): Describe and provide the citation by answering the questions below.

i. Identify the CCDF-eligible in-home child care (care in the child's own home by a non-relative) providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption.

"Qualified exempt child care provider" means a family child care home provider who is not licensed but provides care for a child(ren) from the same family; or an individual who is not licensed but provides care for a child(ren) who is related to the individual if the child's care is funded in whole or in part with money received on the child's behalf from the publicly funded CCCAP under rule manual Volume 7, Section 7.701.11, A, 1, b. (12 CCR 2509-8).

Qualified exempt child care provider: A non-licensed family child care home in which less than twenty-four (24) hour care is given at any one time for:

- a. Any number of children directly related to the provider;
- b. Any number of siblings from one family unrelated to the provider; or,
- c. Up to four (4) children, who are unrelated to the provider.
- d. No more than two (2) children under the age of two (2) years may be cared for at any time if the provider's own children are in the provider's care as they are counted toward the maximum capacity of four (4)

"Non-relative in-home care" means care provided by a person, who is not related to the child, in the child's own home by a person who does not meet the definition of "adult caretaker" or "teen parent".

ii. Provide the citation to this policy:

3.914.1 (B)(1)(a-d) 9 CCR 2503-9, (3.914.1 (B)(1)(e)(3) 9 CCR 2503-9

iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.

In order to ensure the safety of children in care, the Colorado Department of Human Services requires all legally exempt non-relative providers, who provide child care in their homes or the homes of children, annually complete ten (10) core areas of required trainings; an annual on-site health and safety visit where care is being conducted; and sign a self-attestation form that addresses:

- 1) building and physical premises safety
- 2) health, safety and welfare of provider and child.

## 5.2 Standards for Ratios, Group Size and Qualifications for CCDF Providers

Lead Agencies are required to have child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories. Exemptions for relative providers will be addressed in subsection 5.6.

### **5.2.1 Describe how the state/territory defines the following age classifications. For instance, Infant: 0-18 months.**

a. Infant. Describe:

The age definition of an infant is six weeks to 18 months old. Overlap between ages infant/toddler/preschool are to allow time for transition appropriate to the child's development. If a classroom is licensed as an infant program all infant rules apply, as a toddler all toddler rules, etc.

**b. Toddler. Describe:**

The age definition of a toddler is 12 months to 36 months old. Overlap between ages infant/toddler/preschool are to allow time for transition appropriate to the child's development. If a classroom is licensed as an infant program all infant rules apply, as a toddler all toddler rules, etc.

**c. Preschool. Describe:**

The age definition of a preschooler is two and a half through six years of age. Overlap between ages infant/toddler/preschool are to allow time for transition appropriate to the child's development. If a classroom is licensed as an infant program all infant rules apply, as a toddler all toddler rules, etc.

**d. School-Age. Describe:**

The age range for a school-age children is five (5) and eighteen (18) years of age. Children four (4) years of age, who will turn five (5) on or before October 15th of the current calendar year may attend a program the summer before they enter kindergarten.

**5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.**

**a) Licensed CCDF center-based care**

**i. Infant**

**A. Ratio:**

The ratio of child care professionals to number of infants is 1:5.

**B. Group size:**

The group size is 10 infants.

**ii. Toddler**

**A. Ratio:**

The ratio of child care professionals to the number of toddlers is 1:5 for one to two



year olds and 1:7 for two to three year olds.

**B. Group size:**

The group size is 10 for one to two year olds and 14 for two to three year olds.

**iii. Preschool**

**A. Ratio:**

The ratio of child care professionals to number of preschoolers is 1:8 for two and a half years to three years of age; 1:10 for three to four years of age; 1:12 for four to five years of age.

**B. Group size:**

The group size is 16 for ages two and a half to three years; 20 for three to four years; 24 for four to five years.

**iv. School-age**

**A. Ratio:**

**The ratio of child care professionals to number of school-age children is 1:15**

**B. Group size:**

The group size for school age children is 30.

**v. Mixed-Age Groups (if applicable)**

**A. Ratio:**

Ratios and group sizes for centers with mixed ages: ratios for two and a half years of age to six years of age is 1:10.

**B. Group size:**

The group size for mixed ages two and a half years of age to six years of age is 20

**vi. If any of the responses above are different for exempt child care centers, describe the ratio and group size requirements for license-exempt providers.**

The Department does not set the ratios and group sizes for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

**5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.**

b. Licensed CCDF family child care home providers:

i. Mixed Groups

A. Ratio:

The ratio for a regular family child care home and large child care home regardless of the number of providers is no more than two infants under the age of two years. A three under two provider may care for up to three children under the age of two years, with no more than two children under 12 months. An Infant-Toddler Home may care for up to four children with one provider or eight children with two caregivers.

B. Group size:

**The group size for a licensed Family Child Care Home is six to 12 children with no more than two children under the age of two years of age, except where otherwise stated for specific license types.**

ii. Infant

A. Ratio:

The ratio for a regular family child care home and large child care home regardless of the number of providers is no more than two infants under the age of two years. A three under two provider may care for up to three children under the age of two years, with no more than two children under 12 months. An Infant-Toddler Home may care for up to four children with one provider or eight children with two caregivers.

#### B. Group size:

The group size for a licensed Family Child Care Home is six to 12 children with no more than two children under the age of two years of age, except where otherwise stated for specific license types.

### iii. Toddler

#### A. Ratio:

The ratio for a "regular family child care home" and "large child care home", regardless of the number of providers, is no more than two infants or toddlers under the age of two years. A "three under two provider" may care for up to three children under the age of two years, with no more than two children under 18 months. An "infant-toddler home" may care for up to four children with one provider or eight children with two caregivers

#### B. Group size:

The group size for a licensed family child care home is six to 12 children with no more than two children under the age of two years, except where otherwise stated for specific license types.

### iv. Preschool

#### A. Ratio:

The ratio for a "regular family child care home" and "large child care home", regardless of the number of providers, is no more than two infants or toddlers under two years of age. A "three under two provider" may care for up to three children under two years of age, with no more than two children under 18 months. An "infant-toddler home" may care for up to four children with one caregiver or up to eight children with two caregivers.

#### B. Group size:

The group size for a licensed family child care home is six to 12 children with no more than two children under two years of age, except where otherwise stated for specific license types.

v. School-age

A. Ratio:

The ratio for a regular family child care home and large child care home regardless of the number of providers is no more than two infants or toddlers under two years of age. A "three under two provider" may care for up to three children under two years of age, with no more than two children under 18 months. An "infant-toddler home" may care for up to four children with one caregiver or up to eight children with two caregivers.

B. Group size:

The group size for a licensed Family Child Care Home is six to 12 children with no more than two children under two years of age, except where otherwise stated for specific license types.

vi. If any of the responses above are different for exempt child care homes, describe the ratio and group size requirements for license-exempt family child care home providers.

Legally exempt child care homes are limited to two types of homes. The first legally exempt home option is caring for children related to the provider and children from one unrelated family. There is no group size limit on this type of legally exempt care. The other legally exempt home option is providing care for no more than four children, with no more than two of these children under two years of age. The four-child limit includes all related children under 18 years of age still living within the legally exempt child care home.

**5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.**

c. Licensed in-home care (care in the child's own home):

i. Mixed Groups (if applicable)

**A. Ratio:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

**B. Group size:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

**ii. Infant (if applicable)**

**A. Ratio:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

**B. Group size:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

**iii. Toddler (if applicable)**

**A. Ratio:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

**B. Group size:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

**iv. Preschool (if applicable)**

**A. Ratio:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

**B. Group size:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

**v. School-age (if applicable)**

**A. Ratio:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

**B. Group size:**

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

vi. Describe the ratio and group size requirements for license-exempt in-home care.

If care is provided to related children then care is limited to related children and no more than one unrelated sibling group.

If care is provided to children from more than one unrelated family, the limit on infants and toddlers is no more than two children under the age of two and no more than four total children in care at any given time.

### 5.2.3 Provide the teacher/caregiver qualifications for each category of care.

#### a. Licensed Center-Based Care

i. Describe the teacher qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care:

Infant:

Teacher/caregiver qualifications: An infant lead teacher must have verified training and experience in one of the following areas:

1. A registered nurse, licensed to practice in Colorado, with a minimum of six months of experience in the care of infants.
2. A licensed practical nurse, licensed to practice in Colorado, with 12 months of experience in the care of infants.
3. An adult who holds a certificate in infant and toddler care from an accredited college or university with completion of a minimum of 30 semester hours in the development and care of infants and toddlers in a group setting.
4. An adult who is currently certified as a Child Development Associate (CDA).
5. An adult who: 1) Holds a current Early Childhood Professional Credential Level III Version 2.0; 2) Has completed one three-semester-hour class in infant/toddler development; or, 3) Has completed the Colorado Department of Human Services-approved Expanding Quality in Infant and Toddler Care course of training and holds 12 months of verifiable full-day experience working with infants and/toddlers.
6. An adult who: 1) Is at least 19 years of age, and, 2) Is qualified as an early childhood teacher (7.702.44 (A) 12 CCR 2509-8), and, 3) Has a minimum of 12 months of verifiable full-day experience in the group care of infants or toddlers; and, 4) Has completed at least two three-semester hour college courses from a regionally accredited college or university on the development and care of infants and toddlers in a group setting, one of which must be infant/toddler development or the Colorado Department of Human Services-approved Expanding Quality in Infant and Toddler Care course of training.

7. An adult who: 1) Is at least 19 years of age; and, 2) Is qualified as an early childhood teacher (7.702.44 (A) 12 CCR 2509-8); and, will complete within the first six months of employment two (2) three semester hour college courses from a regionally accredited college or university with one of the courses being infant/toddler development or the Colorado Department of Human Services-approved Expanding Quality in Infant and Toddler Care course of training.

An infant program early childhood teacher must have completed eight hours of orientation in the infant program from the infant program supervisor including, but not limited to, the following topics:

1. Toys and equipment, appropriate activities for infants and toddlers, appropriate sleep positions for infants and toddlers, the safe and appropriate diaper change technique;
2. At least six months of experience in the care of infants or toddlers; and,
3. Meet qualifications for an early childhood teacher found at 7.702.44 (A) 12 CCR 2509-8 or be qualified as an infant program supervisor.

The infant program staff aide must be at least 18 years of age, must have completed eight hours of orientation as listed above, at the infant program and must work under the direct supervision of an infant early childhood teacher.

Toddler:

A lead teacher must meet at least one of the following qualifications:

1. A registered nurse, licensed to practice in Colorado, with a minimum of six months of experience in the care of infants and/or toddlers.
2. An adult who holds a certificate in infant and toddler care from a regionally accredited college or university with completion of at least 30 semester hours or equivalent in such courses as child growth and development, nutrition, and care practices with children birth to three years of age.
3. An adult who is certified as a Child Development Associate (CDA) or Certified Child Care Professional (CCP) or holds another Colorado Department of Human Services-approved certificate.
4. A licensed practical nurse with at least 12 months of verifiable experience in the care of children less than three years of age.
5. An adult who meets the education and experience requirements for early childhood teacher of a large center (7.702.44 (A) 12 CCR 2509-8).
6. A current Colorado Early Childhood Professional Credential Level III Version 2.0.

Staff aides must be at least 16 years of age, must work directly under the supervision of the director or a toddler Early Childhood Teacher, and must have completed eight hours of orientation at the toddler program.

Preschool:



An Early Childhood teacher must meet at least one of the following qualifications:

1. A Bachelor's degree in Early Childhood Education, Elementary Education, Special Education, Family and Child Development, or Child Psychology.
2. A Bachelor's degree from a regionally accredited college or university with a major area of study in any area other than those listed at 7.702.44 (A)(1)(a) 12CCR 2509-8 and additional two, three-semester hour early childhood education college courses with one course being either introduction to early childhood education or guidance strategies.
3. Current Early Childhood Professional Credential Level III Version 2.0.
4. A two-year college degree, 60 semester hours, in early childhood education from a regionally accredited college or university, which must include at least two, three-semester hour courses, one of which must be either introduction to early childhood education or guidance strategies; and at least six months (910 hours) of satisfactory experience.
5. Completion of 12 semester hours from a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas in early childhood education and one of the three semester hour courses must be either introduction to early childhood education or guidance strategies, plus nine months (1,395 hours) of verified experience in the care and supervision of four or more children less than six years of age who are not related to the individual.
6. Completion of a vocational or occupational education sequence in child growth and development plus 12 months (1,820 hours) of verified experience in the care and supervision of four or more children less than six years of age who are not related to the individual.
7. Current certification as a Child Development Associate (CDA) or other Colorado Department of Human Services-approved credential.
8. Completion of a course of training approved by the Colorado Department of Human Services that includes training and work experience with children in a child growth and development program plus 12 months (1,820 hours) of verified experience in the care and supervision of four or more children less than six years of age who are not related to the individual.
9. Twenty-four (24) months (3,640 hours) of verified experience in the care and supervision of four or more children less than six years of age who are not related to the individual. Satisfactory experience includes being a licensee of a Colorado family child care home, a teacher's aide or teacher in a child care center, preschool, or elementary school, plus either: 1) A current Colorado Early Childhood Professional Credential Level I; or, 2) Two, three-semester hour early childhood education college courses from a regionally accredited college or university, at either a two-year, four-year or graduate level, in each of the following subject or content areas with one course being either introduction to early childhood education or guidance strategies.

Assistant Early Childhood Teacher:

1. Completion of one of the early childhood education courses in 7.702.42 (A) 12CCR 2509-8, with a course grade of "C" or better and 12 months (1820 hours) verified experience in the care and supervision of four or more children less than six years of age, who are not related to the individual. Satisfactory experience includes being a licensee of a family child care home; a teacher's aide in a center, preschool or elementary school. Assistant early childhood teachers must be enrolled in and attending the second early childhood education class which will be used as the basis for their qualification for the position of early childhood teacher; or,
2. Persons having completed two of the early childhood education classes with a course grade of "C" or better and no experience; or,
3. A current Colorado Early Childhood Professional Credential Level I Version 2.0.

#### Staff Aide

1. Staff aides must be at least 16 years of age and must work directly under the supervision of the director or an early childhood teacher.
2. Infant staff aides must be at least 18 years of age.
3. Staff aides, without supervision from an early childhood teacher or director, may supervise no more than two preschool age children while assisting the children with diapering or toileting.

#### School-age:

A School Age Early Childhood Teacher employed in a child care center must meet one of the following qualifications:

1. A Bachelor's degree in Early Childhood Education, Elementary Education, Special Education, Family and Child Development, or Child Psychology.
2. A Bachelor's degree from a regionally accredited college or university with a major area of study in any area other than those listed at 7.702.44 (A)(1)(a) 12CCR 2509-8 and additional two, three-semester hour early childhood education college courses with one course being either introduction to early childhood education or guidance strategies.
3. Current Colorado Early Childhood Professional Credential Level III Version 2.0.
4. A two-year college degree, 60 semester hours, in early childhood education from a regionally accredited college or university, which must include at least two, three-semester hour courses, one of which must be either introduction to early childhood education or guidance strategies; and at least six months (910 hours) of satisfactory experience.
5. Completion of 12 semester hours from a regionally accredited college or university, at either a two-year, four-year or graduate level, in each of the following subject or content areas in early childhood education and one of the three semester hour courses must be either introduction to early childhood education or guidance strategies, plus nine months (1,395 hours) of verified experience in the care and supervision of four or more children less than six years of age who are not related to the individual.

6. Completion of a vocational or occupational education sequence in child growth and development plus 12 months (1,820 hours) of verified experience in the care and supervision of four or more children less than six years of age who are not related to the individual.
7. Current certification as a Child Development Associate (CDA) or other Colorado Department of Human Services-approved credential.
8. Completion of a course of training approved by the Colorado Department of Human Services that includes training and work experience with children in a child growth and development program plus 12 months (1,820 hours) of verified experience in the care and supervision of four or more children less than six years of age who are not related to the individual.
9. Twenty-four (24) months (3,640 hours) of verified experience in the care and supervision of four or more children less than six years of age who are not related to the individual. Satisfactory experience includes being a licensee of a Colorado family child care home, a teacher's aide or teacher in a child care center, preschool, or elementary school, plus either: 1) A current Colorado Early Childhood Professional Credential Level I Version 2; or, 2) Two, three-semester hour early childhood education college courses from a regionally accredited college or university, at either a two-year, four-year or graduate level, in each of the following subject or content areas with one course being either introduction to early childhood education or guidance strategies.

In a program licensed as a School-Aged Child Care Center, program leaders and aides must meet the following qualifications:

Program Leader:

Each program leader must be at least 18 years of age, demonstrate ability to work with children, and must meet all of the following qualifications:

1. Complete the Colorado Department of Human Services-approved course in injury prevention.
2. Complete the Colorado Department of Human Services-approved course in playground safety for School-Aged Child Care Centers. This requirement does not apply to day camps that do not regularly use a playground.
3. Must have at least three months (460 hours) of full-time or equivalent part-time satisfactory and verifiable experience with school-age children.

Program Aide:

A program aide must be at least 16 years of age. Program aides must work directly under the supervision of the program director or program leaders and must never be left alone with children. Program aides can be counted as staff in determining child care staff ratios.

ii. Describe the director qualification for licensed CCDF center-based care, including any variations based on the ages of children in care or the number of staff employed:

The educational requirements for the director or substitute director of a large center must be met by satisfactory completion of one of the following.

1. A Bachelor degree in early childhood education from a regionally accredited Colorado college or university; or,
2. A current early childhood professional Credential Level IV Version 2.0 as determined by the Colorado Department of Education; or,
3. A master's degree with a major emphasis in child development, Early Childhood Education, Early Childhood Special Education; or,
4. Completion of all the following specific coursework:
  1. Introduction to Early Childhood Professions (ECE 101);
  2. Introduction to Early Childhood Education Lab Techniques (ECE 102);
  3. Early Childhood Guidance Strategies for Children (ECE 103) or Pyramid Plus Approach Training;
  4. Early Childhood Nutrition, Health, and Safety (ECE 205);
  5. Administration of Early Childhood Care and Education Programs (ECE 240);
  6. Administration: Human Relations for Early Childhood Professions (ECE 240) or Introduction to Business (BUS 100, BUS 101, or BUS 120);
  7. Early Childhood Curriculum Development (ECE 220);
  8. Early Childhood Growth and Development (ECE 238);
  9. The Exceptional Child (ECE 260); and
  10. Infant/toddler Theory and Practice (ECE 111) or Expanding Quality in Infant and Toddler Care Training.

Experience requirements include:

1. Persons with Bachelor's or Master's degree with a major emphasis in child development, early childhood education, early childhood special education, or a current Colorado Early Childhood Professional Credential Level IV Version 2.0.
2. Persons with a two-year college degree in early childhood education must have 12 months (1,820 hours) of verified experience working directly with children in a child development program.
3. Persons with a Bachelor's degree and completion of courses specified in 7.702.42(A)(3)(a-j) 12 CCR 2509-8 must have 12 months (1,820 hours) of verified experience working directly with children in a child development program.

4. Persons who have no degree but have completed the thirty (30) semester hours specified in Section 7.702.42, A, 3, a-j, must have twenty-four (24) months (3,640 hours) of verified experience working directly with children in a child development program.
5. Verified experience acquired in a licensed Colorado family child care home or school-age child care center may count for up to half of the required experience for director qualifications. To have Colorado family child care home experience considered, the applicant must be or have been the licensee. The other half of the required experience must be working directly with children in a child development program.
6. Experience with five (5) year olds must be verified as follows:
  1. If experience caring for five year old children occurs in a child care center classroom, the hours worked shall be counted as preschool experience; or,
  2. If experience caring for five year old children occurs in an elementary school program, the hours worked shall be counted as school-age experience.

There are no variations for these requirements based on the ages of children in care or number of staff employed.

iii. [If any of the responses above are different for license-exempt child care centers, describe which requirements apply to exempt centers:](#)

The Department does not set the teacher or director qualifications for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iv. [If applicable, provide the website link detailing the center-based teacher and director qualifications.](#)

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Professional-Certifications&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Professional-Certifications&lang=en)

## b. [Licensed Family Child Care](#)

i. [Describe the provider qualifications for licensed family child care homes, including any variations based on the ages of children in care:](#)

Infant:

Providers and/or substitutes must be at least 18 years of age. Aides must be at least 16 years of age. Aides and volunteers must work under the direct supervision of a primary provider at all times. Completion of 15 hours pre-licensing training, CPR and First Aid Certification, Standard Precautions, Medication Administration Training, Safe

Sleep, Building and Physical Premises, Immunizations, shaken baby abusive head trauma, Child Abuse Prevention is required. The primary provider must be the resident of the home. The "three under two provider" and the "infant-toddler provider" must complete the Colorado Department of Human Services approved Expanding Quality in Infant and Toddler Care 48-hour course of training.

The "experienced child care provider" must have been licensed in Colorado for at least six consecutive years and complete 90 clock hours of training in the preceding six years including the Colorado Department of Human Services approved Expanding Quality in Infant and Toddler Care 48-hour course of training.

Toddler:

Providers and/or substitutes must be at least 18 years of age. Aides must be at least 16 years of age. Aides and volunteers shall work under the direct supervision of a primary provider at all times. Completion of 15 hours pre-licensing training, CPR and First Aid Certification, Standard Precautions Medication Administration Training, Safe Sleep, Building and Physical Premises, Immunizations, Shaken Baby Abusive Head Trauma, Child Abuse Prevention is required. The primary provider must be the resident of the home. The "three under two provider" and the "infant-toddler provider" must complete the Colorado Department of Human Services approved Expanding Quality in Infant and Toddler Care 48-hour course of training.

The "experienced child care provider" must have been licensed in Colorado for at least six consecutive years and complete 90 clock hours of training in the preceding six years including the Colorado Department of Human Services approved Expanding Quality in Infant and Toddler Care 48-hour course of training.

Preschool:

Providers and/or substitutes must be at least 18 years of age. Aides must be at least 16 years of age. Aides and volunteers must work under the direct supervision of a primary provider at all times. Completion of 15 hours pre-licensing training, CPR and First Aid Certification, Standard Precautions, and Medication Administration Training, Building and Physical Premises, Immunizations, Shaken Baby Abusive Head Trauma, Child Abuse Prevention is required. The primary provider must be the resident of the home. The "three under two provider" and the "infant-toddler provider" must complete the Colorado Department of Human Services approved Expanding Quality in Infant and Toddler Care 48-hour course of training.

The "experienced child care provider" must have been licensed in Colorado for at least six consecutive years and complete 90 clock hours of training in the preceding

six years including the Colorado Department of Human Services approved Expanding Quality in Infant and Toddler Care 48-hour course of training

School-age:

Providers and/or substitutes must be at least 18 years of age. Aides must be at least 16 years of age. Aides and volunteers must work under the direct supervision of a primary provider at all times. Completion of 15 hours pre-licensing training, CPR and First Aid Certification, Standard Precautions, and Medication Administration Training, Building and Physical Premises, Immunizations, Child Abuse Prevention is required. is required. The primary provider must be the resident of the home. The "three under two provider" and the "infant-toddler provider" must complete the Colorado Department of Human Services approved Expanding Quality in Infant and Toddler Care 48-hour course of training.

The "experienced child care provider" must have been licensed in Colorado for at least six consecutive years and complete 90 clock hours of training in the preceding six years including the Colorado Department of Human Services approved Expanding Quality in Infant and Toddler Care 48-hour course of training.

ii. [If any of the responses above are different for license-exempt family child care homes, describe which requirements apply to exempt homes:](#)

Legally exempt child care homes are limited to children related to the provider and children from one unrelated family. These arrangements cannot exceed four children, with no more than two of these children under two years of age. The four-child limit includes all related children under 18 years of age still living within the legally exempt child care home.

iii. [If applicable, provide the website link detailing the family child care home provider qualifications:](#)

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Child-Care-Licensing-and-Administration&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Child-Care-Licensing-and-Administration&lang=en)

c. [Regulated or registered In-home Care \(care in the child's own home by a non-relative\)](#)

i. [Describe the qualifications for licensed in-home child care providers \(care in the child's own home\) including any variations based on the ages of children in care:](#)

Colorado does not regulate care in the child's own home in cases where the number

of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

ii. If any of the responses above are different for license-exempt in-home care providers, describe which requirements apply to exempt in-home care providers:

Qualified Exempt Providers must be at least 18 years of age. They are required to complete 15 hours of pre-service training, including: Disaster Preparedness and Emergency Response (FEMA); How Experiences Impact Early Brain Development (1st year)/child development course (consecutive years); Injury Prevention for Child Care Centers; Introduction to First Aid and CPR; Part 1: Medication Administration Training (MAT); Playground Safety for Child Care Centers; Preventing Shaken Baby Syndrome and Abusive Head Trauma; Prevention of Sudden Infant Death Syndrome (SIDS) and Use of Safe Sleep Practices; Recognition and Reporting of Child Abuse and Neglect; Standard Precautions, including Prevention and Control of Infectious Diseases and Immunizations; Transportation Rules. Qualified Exempt providers also must complete an Emergency Plan and Fire Safety. Building and Physical Premises is included in training.

### 5.3 Health and Safety Standards and Training for CCDF Providers

#### 5.3 Health and Safety Standards and Training for CCDF Providers

The state/territory must describe its requirements for pre-service or orientation training and ongoing training. Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served. This training must address the required health and safety topics (658E(c)(2)(l)(i) and the content area of child development. Lead Agencies have flexibility in determining the number of training hours to require, and they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Lead Agencies must also have ongoing training requirements for caregivers, teachers, and directors who are caring for children receiving CCDF funds (658E(c)(2)(l)(i); 98.44(b)(1)(iii)).



Lead Agencies are to report the total number of ongoing training hours that are required each year, but they do not have to report these hours out by topic (658E(c)(2)(G)(iii)). Ongoing training requirements will be addressed in 5.3.13.

Both preservice/orientation and ongoing trainings should be a part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory.

States and territories must have health and safety standards

for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the required health and safety topics as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care programs receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for relative providers, as defined in 98.2. Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)). Exemptions for relative providers' standards and training requirements will be addressed in question 5.6.3.

To certify, describe the following health and safety requirements for programs serving children receiving CCDF assistance on the following topics (98.16(l)) identified in questions 5.3.1 - 5.3.12. Note: Monitoring and enforcement will be addressed in subsection 5.4.

### **5.3.1 Prevention and control of infectious diseases (including immunizations) health and safety standards and training requirements.**

#### a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Colorado Department of Human Services, Office of Early Childhood includes in the child care licensing standards requirements on the prevention and control of infectious disease (including immunizations). These requirements include:

1) procedures for reporting communicable illness; 2) children and staff immunization requirements; 3) Colorado Child Care Health Consultant meetings; 4) Standard Precautions and Immunization Collection Training; and, 5) Physical premises

maintenance. In addition, Child Care Centers and School-Aged Child Care Centers must document compliance with the Colorado Department of Public Health and Environment rules and regulations governing the health and sanitation of child care facilities. The "Rules And Regulations Governing The Health And Sanitation Of Child Care Facilities In The State Of Colorado" 6 CCR 1010-7 can be found <https://www.colorado.gov/pacific/cdphe/child-care>. These rules govern the minimum health and sanitation requirements for the operation and maintenance of child care facilities in order to protect the health of children and staff in these facilities. Content Covered in this set of rule include the following:

1. Premises, 7.6 CCR 1010-7;
2. Facility, 7.7 CCR 1010-7;
3. Sanitary Facilities and Controls, 7.8 CCR 1010-7;
4. Interior Design, 7.9 CCR 1010-7;
5. Disease Prevention, 7.10 CCR 1010-7;
6. Food Service, 7.11 CCR 1010-7;
7. Infant and Toddler Programs and as Applicable to Older Children, 7.12 CCR 1010-7;
8. Care of Animals, 7.13 CCR 1010-7;
9. Toxic Materials Management, 7.714 CCR 1010-7; and,
10. Compliance Procedures, 7.715 CCR 1010-7.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license. Child Care Centers and School-aged Child Care Centers must document compliance with the Colorado Department of Public Health and Environment "Rules And Regulations Governing The Health And Sanitation Of Child Care Facilities In The State Of Colorado" 6 CCR 1010-7. Family Child Care Homes and license-exempt homes are exempt from Colorado Department of Public Health and Environment Approval. There is no variation based on age of children in licensed care.

Children receiving child care from a Qualified Exempt Child Care Provider who is unrelated to the child and care is provided outside of the child's home and who are not attending school as defined by the Colorado Department of Education shall provide a

copy of their immunization record to the county, indicating that the children are age-appropriately immunized, unless exempt due to religious or medical reasons.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

7.701.34 (A) 12 CCR 2509-8, 7.701.52 (B)(1)(c) 12CCR 2509-8, 7.702.93 (E) 12 CCR 2509-8, 7.702.32 (I) 12 CCR 2509-8, 7.702.33 (G)12 CCR 2509-8, 7.702.33 (N) 12 CCR 2509-8, 7.702.41 (H) 12 CCR 2509-8, 7.702.52(A)(2)(a) 12 CCR 2509-8, 7.702.52 (E) 12 CCR 2509-8, 7.702.45 (C)(1) 12 CCR 2509-8, 7.707.32 (A)(4) 12CCR 2509-8, 7.707.32 (A)(9) 12 CCR 2509-8, 7.707.51 (A)(7) 12 CCR 2509-8, 7.707.71 (D)(2) 12 CCR 2509-8, 7.707.71 (A)(3) 12 CCR 2509-8, 7.707.71 (D)(1)12 CCR 2509-8, 7.707.72 (A)(1-7) 12 CCR 2509-8, 7.707.72 (B)(1-2) 12 CCR 2509-8,7.707.72 (C)(1-2) 12 CCR 2509-8, 7.707.921 (G) 12 CCR 2509-8, 7.712.41 (J) 12 CCR 2509-8, 7.712.41(L) 12 CCR 2509-8, 7.712.42 (D)(1) 12 CCR 2509-8, 7.712.42 (D)(5) 12 CCR 2509-8,7.712.52 (A)(1)(b) 12 CCR 2509-8, 7.712.83 (D) 12 CCR 2509-8, 3.914.1 (B)(7)(b) 9 CCR 2503-9

#### b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Child Care Centers - 7.702.33 (G) 12 CCR 2509-8 and 7.702.33 (N) 12 CCR 2509-8

Family Child Care Homes - 7.707.32 (A)(4) 12 CCR 2509-8 and 7.707.32 (A)(9) 12CCR 2509-8

School Age Child Care Centers 7.712.41 (K) 12 CCR 2509-8 and 7.712.41 (M)  
12CCR 2509-8; 9 CCR 2503-9

Qualified-exempt or License-exempt - 3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR  
2503-9

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to and are caring for the child outside of the child's home, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers prevention and control of infectious disease for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI), which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

Standard Precautions is required to be updated annually.

### 5.3.2 Prevention of sudden infant death syndrome and the use of safe-sleep practices.

#### a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Colorado Department of Human Services, Office of Early Childhood includes requirements within the child care licensing standards for the prevention of sudden infant death syndrome and the use of safe-sleep practices. Included in safe-sleep requirements:

1. Training requirements
2. Equipment requirements
3. Bedding and materials requirements
4. Pacifier requirements
5. Alternative sleep position requirements
6. Infant monitors and sleeping room requirements
7. Room temperature requirements

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license. There are no other variations by category of care from these requirements. These requirements apply to all infants under 12 months of age.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

7.702.33 (E) 12 CCR 2509-8, 7.702.54( C)(1-21) 12 CCR 2509-8, 7.702.54 (D) 12CCR 2509-8, 7.707.75 (G) 12 CCR 2509-8, 7.707.75 (H)(1-18) 12 CCR 2509-8,7.707.75 (I) 12 CCR 2509-8, 7.707.75 (J) 12 CCR 2509-8; 3.914.1 (B)(7)(a) 9 CCR 2503-9

All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

#### b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Child Care Centers-7.702.33 (E) 12 CCR 2509-8.

Family Child Care Homes- 7.707.75 (G) 12 CCR 2509-8; 9 CCR 2503-9, 3.914.1 (B)(7)(a) CCR 2503-9.

Qualified-exempt or License-exempt - 3.914.1 (B)(7)(a) 9 CCR 2503-9

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing

services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers SIDS prevention and Safe Sleep Practices for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI), which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

- Pre-Service
- Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

- Yes
- No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

Prevention of sudden infant death syndrome and the use of safe-sleep practices is required annually.

### 5.3.3 Administration of medication, consistent with standards for parental consent.

#### a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Colorado Department of Human Services, Office of Early Childhood includes requirements for the administration of medication, consistent with standards for parental consent, within the child care licensing standards. Administration of medication requirements include:

1. Reporting requirements for incorrect administration
2. Policy and procedure notification for parents
3. Staffing requirements
4. Colorado Child Care Health Consultant oversight and delegation
5. Prescribing authority and parental permission
6. Medication records
7. Medication storage and disposal

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

Child Care Centers and School-aged Child Care Centers must have Colorado Child Care Health Consultant meetings at scheduled intervals; Family Child Care Homes and license-exempt are exempt from the requirement of having scheduled Colorado Child Care Health Consultant meetings. There are no variations based on the age of children in care.

There are no variations for Qualified Exempt Providers.

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the



provider is licensed.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

7.701.52 (A)(4)(b) 12 CCR 2509-8, 7.702.31 (Q) 12 CCR 2509-8, 7.702.45( A)(7) 12 CCR 2509-8, 7.702.45 (C)(1) 12 CCR 2509-8, 7.702.51 (C)(3) 12 CCR 2509-8, 7.702.51(C)(4)(a) 12 CCR 2509-8, 7.702.52 (C)(1-15) 12 CCR 2509-8, 7.702.58 (C)(6) 12 CCR 2509-8, 7.707.22 (F)(2)(b) 12 CCR 2509-8, 7.707.32 (A)(7) 12 CCR 2509-8, 7.707.36 (B)(7) 12 CCR 2509-8, 7.707.41 (B)(27) 12 CCR 2509-8, 7.707.71 (A)(1)(a) 12 CCR 2509-8, 7.707.71 (C)(1-7) 12 CCR 2509-8, 7.712.31 (A)(18) 12 CCR 2509-8, 7.712.42 (D)(1) 12 CCR 2509-8, 7.712.52 (C)(1-13) 12 CCR 2509-8, 7.712.65 (A)(5) 12 CCR 2509-8, 7.712.81 (A)(7); 3.914.1 (B)(7)(a) 9 CCR 2503-9

All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

#### b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Child Care Centers-7.702.45(A)(7) 12 CCR 2509-8, 7.702.52 (C)(7) 12 CCR 2509-8.

Family Child Care Homes- 7.707.32 (A)(7) 12 CCR 2509-8.

School Age Child Care Centers- 7.712.52 (C)(6) 12 CCR 2509-8, CCR 2503-9.

Qualified-exempt or License-exempt -3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers Administration of Medication for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI), which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

- Pre-Service
- Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

- Yes
- No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

Child Care must have an individual with medication administration training on site at all times. Family Child Care Home Providers must have medication administration training prior to working with children.

The Colorado Department of Human Services, Office of Early Childhood approves medication administration training must be renewed every three years. Delegation of medications must be renewed annually. All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

#### **5.3.4 Prevention of and response to emergencies due to food and allergic reactions.**

##### **a. Standard(s)**

**i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.**

The Colorado Department of Human Services, Office of Early Childhood includes requirements for response to emergencies due to food and allergic reactions in the child care licensing standards. These requirements include:

1. Prohibition of serving foods known to cause allergic reactions
2. Accommodations for children with food allergies
3. Admission procedures for children with severe allergies
4. Identify specific interventions required for individualized health care plans for children with asthma or allergies

**ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.**

There are no variations based on category of care for licensed programs or licensed-exempt providers. There are no variations based on the age of the children in care.

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

7.702.51 (B)(4) 12 CCR 2509-8, 7.702.52 (C)(7)(a) 12 CCR 2509-8, 7.707.41 (B)(17)12 CCR 2509-8, 7.707.51 (A)(7) 12 CCR 2509-8, 7.707.71( A)(1)(a-b) 12 CCR 2509-8, 7.707.73 (M) 12 CCR 2509-8, 7.712.52 (A)(1)(a) 12 CCR 2509-8, 7.712.52(C)(6)(a) 12 CCR 2509-8, 7.712.52 (C)(13) 12 CCR 2509-8, 7.712.81 (A)(7) 12 CCR 2509-8; 3.914.1 (B)(7)(b) 9 CCR 2503-9

All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

#### b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Child Care Centers-7.702.45 (A)(7) 12 CCR 2509-8 and 7.702.52 (C)(7) 12 CCR 2509-8.

Family Child Care Homes-7.707.32 (A)(7) 12 CCR 2509-8.

School Age Child Care Centers 7.712.52 (C)(5) 12 CCR 2509-8, CCR 2503-9.

Qualified-exempt or License-exempt - 3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9.

Allergic reactions from food are covered in both the Medication Administration Training and Standard Precautions Training.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training

approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers Emergencies due to food and allergic reactions for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI), which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

- Pre-Service
- Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

- Yes
- No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Colorado Office of Early Childhood includes in the child care licensing standards requirements for nutritional standards and practices. These requirements include: - USDA child and adult care food program requirements, staff training, plans and parental permission, and accommodations for children with food allergies. Prohibition of serving foods known to cause allergic reactions - Child appropriate and

developmental food requirements.

### **5.3.5 Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic.**

#### **a. Standard(s)**

**i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.**

The Colorado Department of Human Services, Office of Early Childhood includes requirements for building and physical premises safety in the child care licensing standards. These requirements include:

1. Training requirements
2. Equipment and materials requirements
3. Indoor and outdoor environment requirements
4. Storage requirements

**ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.**

There are no variations based on category of care. There are no variations based on the age of children in care.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

**iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.**

7.702.59 (A)(5) 12 CCR 2509-8, 7.702.61 (C) 12 CCR 2509-8, 7.702.62 (F) 12 CCR 2509-8, 7.702.73 (B)(1) 12 CCR 2509-8 7.702.73 (B)(6)12 CCR 2509-8, 7.702.81 (C-G) 12 CCR 2509-8, 7.702.81 (I-J) 12 CCR 2509-8,7.702.81 (L-M) 12 CCR 2509-8, 7.702.82 (A-J) 12 CCR 2509-8, 7.707.91 (A-N) 12 CCR 2509-8, 7.707.923 (A-P) 12 CCR 2509-8, 7.707.931 (A-O) 12 CCR 2509-8,7.707.934 (A-C) 12 CCR 2509-8, 7.707.94 (D)(8) 12 CCR 2509-8, 7.712.56 (A)(5) 12 CCR 2509-8, 7.712.71 (D)(2-3) 12 CCR 2509-8,7.712.73 (A-B) 12 CCR 2509-8;3.914.1 (B)(3)(e); 3.914.1 (B)(7)(a) 9 CCR 2503-9

Facilities create the plan according to their environment. Licensing staff reviews and approves the plan, ensures that program staff are trained on the plan, and monitor that the plan is being implemented. All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

#### b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Child Care Centers-7.702.33 (D) 12 CCR 2509-8.

Family Child Care Homes-7.707.32 (A)(8) 12 CCR 2509-8.

School Age Child Care Centers- 7.712.41 (K) 12 CCR 2509-8, CCR 2503-.,.

Qualified-exempt or License-exempt - 3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing

services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI) and the SS-31, which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

- Pre-Service
- Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

- Yes
- No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Colorado Department of Human Services, Office of Early Childhood includes in the child care licensing standards requirements for building and physical premises safety. These requirements include: 1. Training requirements 2. Equipment and materials requirements 3. Indoor and outdoor environment requirements 4. Storage requirement. Child care rules are reviewed and updated on a regular basis.



Facilities create the plan according to their environment. Licensing staff reviews and approves the plan, ensures that program staff are trained on the plan, and monitor that the plan is being implemented. All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

### **5.3.6 Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment.**

#### **a. Standard(s)**

**i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.**

The Colorado Department of Human Services, Office of Early Childhood includes the prevention of shaken baby syndrome, abusive head trauma, and child maltreatment in child care licensing standards. These requirements include:

1. Reporting requirements
2. Training requirements
3. Guidance strategies
4. Social emotional supports

**ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.**

Prevention of shaken baby syndrome and abusive head trauma prevention apply to all providers working with children under the age of three and do not apply to school-aged child care centers. Prevention of shaken baby syndrome and abusive head trauma prevention apply to all licensed and non relative qualified exempt providers working with children under the age of three. Prevention of child maltreatment has no variation based on age of children in care.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing

services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

7.701.52 (B)(1)(d) 12 CCR 2509-8, 7.701.53 (A-C) 12 CCR 2509-8, 7.701.54 (A-B) 12CCR 2509-8, 7.702.31 (H)(1-5) 12 CCR 2509-8, 7.702.31 (X) 12 CCR 2509-8,7.702.33 (F) 12 CCR 2509-8, 7.702.33 (C) 12 CCR 2509-8, 7.702.33 (H-I) 12 CCR 2509-8, 7.702.56 (A-E) 12 CCR 2509-8, 7.707.32 (A)(1) 12 CCR 2509-8, 7.707.32(A)(10) 12 CCR 2509-8, 7.707.36 (B)(6)(a) 12 CCR 2509-8, 7.707.41 (B)(19)(a-e) 12CCR 2509-8, 7.707.41 (B)(33) 12 CCR 2509-8, 7.707.41 (B)(30) 12 CCR 2509-8,7.707.81 (A-J) 12 CCR 2509-8, 7.712.31 (A)(9)(a-e) 12 CCR 2509-8, 7.712.31 (A)(23)12 CCR 2509-8, 7.712.31 (A)(26) 12 CCR 2509-8, 7.712.41 (F) 12 CCR 2509-8,7.712.55 (A-H) 12 CCR 2509-8; 3.914.1 (B)(3)(e); 3.914.1 (B)(7)(a) 9 CCR 2503-9

The above citations include rules with health and safety standards for shaken baby, abusive head trauma and child maltreatment. All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

#### b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Child Care Centers-7.702.33 (F) 12 CCR 2509-8.

Family Child Care Homes- 7.707.32 (A)(10) 12 CCR 2509-8, 3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9

Qualified-exempt or License-exempt - 3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Prevention of shaken baby syndrome and abusive head trauma prevention apply to all providers working with children under the age of three and do not apply to school age child care centers. Prevention of shaken baby syndrome and abusive head trauma prevention apply to all providers working with children under the age of three.

Prevention of child maltreatment has no variation based on age of children in care.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers shaken baby syndrome, abusive head trauma and child maltreatment for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI) and the SS-31, which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Colorado Department of Human Services, Office of Early Childhood includes the prevention of shaken baby syndrome, abusive head trauma, and child maltreatment in the child care licensing standards. These requirements include: 1. Reporting requirements 2. Training requirements 3. Guidance strategies 4. Social emotional supports

All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

**5.3.7 Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.**

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Colorado Department of Human Services, Office of Early Childhood includes in the child care licensing standards requirements that all child care providers must have a written plan for evacuating and safely moving children to an alternate site, as well as

lockdown, shelter in place, and active shooter on premises. The plan must include provisions for multiple types of hazards, such as floods, fires, tornados, and local shootings. Requirements of the plan include:

1. Reuniting families
2. Planning for children with special needs and those with access and functional needs
3. Continuity of operations

All staff must be trained on this plan and the plan must align with the requirements of the Emergency Preparedness Plan for the State.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations by category of care. There are no variations based on the age of children in care. Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1

(B)(7)(a) 9 CCR 2503-9

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

7.701.100 (A-F) 12 CCR 2509-8

Qualified-exempt or License-exempt -3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9

All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

70701.100 (A) 12 CCR 2509-8, 3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9  
Qualified-exempt or License-exempt -3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) (B)(5) 9 CCR  
2503-9

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

There are no variations based on the category of care. There are no variations based on the ages of children in care.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers emergency preparedness and response planning for emergencies resulting from a natural disaster or human caused event for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI) and the SS-31, which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own

home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Colorado Department of Human Services, Office of Early Childhood includes in the child care licensing standards requirements that all child care providers must have a written plan for evacuating and safely moving children to an alternate site, as well as lockdown, shelter in place, and active shooter on premises. The plan must include provisions for multiple types of hazards, such as floods, fires, tornados, and local shootings. Requirements of the plan include:

1. Reuniting families
2. Planning for children with special needs and those with access and functional needs
3. Continuity of operations

All staff must be trained on this plan and the plan must align with the requirements of the Emergency Preparedness Plan for the State. Licesning Specialists review and approve the plan, ensure staff are trained on the plan, and that the plan is implemented. All licensing standards are monitored at each inspection. Inspections occur no less frequently that annually per Standard Operating Procdures L-7 and L-8.

### 5.3.8 Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants.

#### a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Colorado Department of Human Services, Office of Early Childhood includes in the child care licensing standards requirements for building and physical premises safety. These requirements include:

1. Training requirements
2. Equipment and materials requirements
3. Indoor and outdoor environment requirements
4. Storage requirement.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations based on the age of the children in care. Qualified Exempt Child Care Providers that are providing care for a child that they are not related to must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.



7.702.33 (D) 12 CCR 2509-8, 7.702.61 (C) 12 CCR 2509-8, 7.702.62 (F) 12 CCR 2509-8, 7.702.81 (C-G) 12 CCR 2509-8, 7.702.81 (I-J) 12 CCR 2509-8, 7.702.81 (L-M) 12 CCR 2509-8, 7.702.82 (A-J) 12 CCR 2509-8, 7.707.91 (A-N) 12 CCR 2509-8, 7.707.923 (A-P) 12 CCR 2509-8, 7.707.931 (A-O) 12 CCR 2509-8, 7.707.934 (A-C) 12 CCR 2509-8, 7.712.41 (K) 12 CCR 2509-8, 7.712.71 (D)(2-3) 12 CCR 2509-8, 7.712.73 (A-B) 12 CCR 2509-8; 3.914.1(B)(7)(b) 9 CCR 2503-9.

All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

#### b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Child Care Centers-7.702.33 (D) 12 CCR 2509-8.

Family Child Care Homes-7.707.32 (A)(8) 12 CCR 2509-8.

School Age Child Care Centers- 7.712.41 (K) 12 CCR 2509-8,

Qualified-exempt or License-exempt - 3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

There are no variations by category of care. There are no variations based on the ages of children in care.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers handling and storage of hazardous materials and the appropriate disposal of bio-contaminants for non-relative license-

exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI) and the SS-31, which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

- Pre-Service
- Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

- Yes
- No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Colorado Department of Human Services, Office of Early Childhood includes in the child care licensing standards requirements for building and physical premises safety. The plan should be updated as change occurs. These requirements include:

1. Training requirements
2. Equipment and materials requirements
3. Indoor and outdoor environment requirements
4. Storage requirement.

### 5.3.9 Precautions in transporting children (if applicable).

#### a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

This description should identify the practices which must be implemented by child care programs. The Colorado Department of Human Services, Office of Early Childhood includes requirements for transporting children in the child care licensing standards.

These Requirements include:

1. Requirements for vehicles
2. Requirements for drivers
3. Plans and parental permissions

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations based on the age of the children in care. Qualified Exempt Child Care Providers that are providing care for a child that they are not related to must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

7.702.31 (K) 12 CCR 2509-8, 7.702.59 (A-D) 12 CCR 2509-8, 7.707.32 (A) (1) 12CCR

2509-8, 7.707.41(b)(15) 12CCR 2509-8, 7.707 (94)(A-H), 7.712.31 (A)(12) 12 CCR 2509-8, 7.712.56 (A-D) 12CCR 2509-8

All licensing standards are monitored at each inspection. Inspections occur no less frequently than annually per Standard Operating Procedures L-7 and L-8.

**b. Pre-Service and Ongoing Training**

**i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.**

Child Care Centers 7.702.59 (C)(9) 12 CCR 2509-8.

Family Child Care Homes- 7.707.32 (A)(1)12 CCR 2509-8. Regulations and training on transportation are included in the Family Child Care Home Pre-licensing training.

School Age Child Care Centers-7.712.56 (C)(9) 12 CCR 2509-8,

Qualified-exempt or License-exempt - 3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9

**ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?**

There are no variations for licensed providers or license-exempt.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers precautions in transporting children for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI) and the SS-31, which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

Programs must ensure all staff transporting children take the driver training. The 4 hour driver training must include the follow in the curriculum: behind the wheel training; participant transport attendance procedures including taking attendance at the destination; managing behavioral issues; loading and unloading procedures; daily vehicle inspection procedure; proper tire inflation; emergency equipment and how to use it; accident procedures; passenger illness procedures; procedures for backing up; and vehicle evacuation. The Department reviews and approves the program's training.lick or tap here to enter text.

All licensing standards are monitored at each inspection. Inspections occur no less frequently that annually per Standard Operating Procdures L-7 and L-8.

### 5.3.10 Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR).

#### a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Colorado Department of Human Services, Office of Early Childhood includes requirements for pediatric first aid and cardiopulmonary resuscitation (CPR) certification in the child care licensing standards as well as including requiring first aid and CPR training for all staff and requirements for fully certified staff members.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations by category of care. There are no variations based on the age of children in care.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

7.702.46 (A)(5) 12 CCR 2509-8, 7.702.47 (D) 12 CCR 2509-8, 7.702.48 (B)(6) 12 CCR 2509-8, 7.702.52 (B)(4-5) 12 CCR 2509-8, 7.702.52 (C)(7) 12 CCR 2509-8, 7.702.59

(C)(2) 12 CCR 2509-8, 7.702.59 (D)(2) 12 CCR 2509-8, 7.707.32 (A)(6) 12CCR 2509-8, 7.707.34 (C)(3) 12 CCR 2509-8, 7.707.36 (B)(7)(a) 12 CCR 2509-8,7.707.94 (B) 12 CCR 2509-8, 7.712.41 (G-H) 12 CCR 2509-8, 7.712.42 (G)(1-3) 12CCR 2509-8, 7.712.52 (C)(6) 12 CCR 2509-8, 7.712.56 (C)(2) 12 CCR 2509-8;3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9

**b. Pre-Service and Ongoing Training**

**i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.**

Child Care Centers-7.702.46 (A)(5) 12 CCR 2509-8, 7.702.47 (D) 12 CCR 2509-8,7.702.52 (B)(4) 12 CCR 2509-8, 7.702.52 (B)(5) 12 CCR 2509-8 .

Family Child Care Homes-7.707.32 (A)(6) 12 CCR 2509-8

School Age Child Care Centers- 7.712.42.(G)(1) 12 CCR 2509-8

Qualified-exempt or License-exempt -3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9.

**ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?**

There are no variations for category of care, age of children and license-exempt programs.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers pediatric first aid and pediatric cardio pulmonary resuscitation (CPR) for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI) and the SS-31, which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form](#)

## [ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

- Pre-Service
- Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

- Yes
- No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

Those staff that are required to be certified in First Aid and CPR must renew certification prior to expiration, all other staff members must renew First Aid and CPR training every two years.

**5.3.11 Recognition and reporting of child abuse and neglect. Note: The description must include a certification that child care providers within the state comply with the child abuse reporting requirements of section 106(b)(2)(B)(i) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)).**



a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Colorado Department of Human Services, Office of Early Childhood includes in the child care licensing standards requirements for recognition and reporting of child abuse. These requirements include:

1. Staff roles/responsibilities/training
2. Reporting requirements
3. Policy and Procedures

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There is no variation by category of care or status. There is no variation by age of children in care or license status.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9

The Department does not set the standards for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

7.701.52 (B)(1)(d) 12 CCR 2509-8, 7.701.53 (A-C) 12 CCR 2509-8, 7.701.54 (A-B) 12 CCR 2509-8, 7.702.31 (X) 12 CCR 2509-8, 7.702.33(C) CCR 2509-8, 7.707.36 (B)(6)(a) CCR 2509-8, 7.707.41(B)(30) CCR 2509-8, 7.712.31 (A)23 CCR 2509-8, 7.712.41 (M) CCR 2509-8, 3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Child Care Centers-7.702.33 (C) 12 CCR 2509-8 and 7.702.33 (H) 12 CCR 2509-8.

Family Child Care Homes-7.707.41 (B)(30) 12 CCR 2509-8 and 7.707.32 (A)(11)12 CCR 2509-8.

School Age Child Care Centers-7.712.41 (H) 12 CCR 2509-8 and 7.712.41 (M) 12 CCR 2509-8.

Qualified-exempt or License-exempt -3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

There are no variations by category of care. There are no variations of the age of children in care.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers recognition and reporting of child abuse and neglect for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI) and the SS-31, which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption

requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

- Pre-Service
- Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

- Yes
- No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Child Abuse Recognition and Reporting training is required annually.

**5.3.12 PLEASE ENTER 'NA' IN THE TEXT BOXES 'i', 'ii', AND 'iii' BELOW, AND COMPLETE QUESTION 5.3.12b**

a. PLEASE ENTER 'NA' IN THE TEXT BOXES 'i', 'ii', AND 'iii' BELOW, AND COMPLETE QUESTION 5.3.12b

i. Please enter 'NA' below

NA

ii. Please enter 'NA' below

NA

iii. Please enter 'NA' below

NA

5.3.12 Child Development. Lead Agencies are required to describe in their plan how training addresses child development principles, including the major domains of cognitive, social, emotional, physical development and approaches to learning (98.44(b)(1)(iii)).

b. Pre-Service and Ongoing Training

i. Describe the training content and provide the citation(s) for the training

requirement(s). Include citations for both licensed and license-exempt providers

Child Care Centers-7.702.42 (A) 12 CCR 2509-8, 7.702.33 (L) (1,2) 12 CCR 2509-8

Family Child Care Homes-7.707.32 (A)(1) 12 CCR 2509-8; 3.914.1 (B)(3)(e), 3.914.1

(B)(7)(a) 9 CCR2503-9.

Qualified-exempt or License-exempt -3.914.1 (B)(3)(e), 3.914.1 (B)(7)(a) 9 CCR 2503-9

ii. Describe any variations in training requirements for this topic. Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

There are no variations by license type age of children in care.

Qualified Exempt Child Care Providers that are providing care for a child that they are not related to, must complete all assigned pre-service health and safety training approved by the state department of human services, within three months of providing services as a qualified exempt child care provider. 3.914.1 (B)(7)(a) 9 CCR 2503-9.

COLORADO DEPARTMENT OF HUMAN SERVICES, DIVISION OF EARLY CARE AND LEARNING CHILD CARE STANDARDS FOR QUALIFIED EXEMPT PROVIDER'S SELF-ASSURANCE FORM/CLIENT ACKNOWLEDGEMENT (SS-31) includes the requirement for training that covers pediatric first aid and pediatric cardio pulmonary resuscitation (CPR) for non-relative license-exempt providers. Completion of required training is verified by the program and included in the annual Report of Inspection (ROI) and the SS-31, which is signed by the provider. The link to these forms: [Child Care Standards for Qualified Exempt Providers Self-Assurance Form ROI Template](#)

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in

which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding this topic? This description should include methods to ensure that providers are able to maintain and update their understanding of child development principles as described in the topic above.

The Office of Early Childhood utilizes early childhood mental health consultants, local agencies offering child care resource and referral services and Early Childhood Councils to make information about research and best practices in child development available at the local level.

**5.3.13 Provide the number of hours of ongoing training required annually for eligible CCDF providers in the following settings (658E(c)(2)(G)(iii):**

a. Licensed child care centers:

**15 hours of annual ongoing training is required**

b. License-exempt child care centers:

N/A

c. Licensed family child care homes:

15 hours of annual ongoing training

d. License-exempt family child care homes:

For Qualified Exempt non-relative providers, 15 hours of annual ongoing training.

e. Regulated or registered In-home child care:

15 hours of annual ongoing training

f. Non-regulated or registered in-home child care:

For Qualified Exempt non-relative providers, 15 hours of annual ongoing training.

**5.3.14 In addition to the required standards, does the Lead Agency require providers to comply with the following optional standards? If checked, describe the standards, how often the training is required and include the citation. (Please check all that apply)**

a. Nutrition:

Describe:

The Colorado Office of Early Childhood includes in the child care licensing standards requirements for nutritional standards and practices. These Requirements include:

1. USDA child and adult care food program requirements
2. Staff trainings
3. Plans and parental permissions
4. Accommodations for children with food allergies
5. Prohibition of serving foods known to cause allergic reactions
6. Child appropriate and developmental food requirements

7.702.33(K) 15 minimum clock hours of training that includes health safety and nutrition  
7.707.32(B)(1) 15 clock hours of training that includes health safety and nutrition  
7.712.41H 12 CCR 2509-8 Staff must read policies and procedures for food preparation practices. The nutrition training is optional as a part of the annual 15 clock hours of training.

**b. Access to physical activity:**

**Describe:**

The Colorado Office of Early Childhood includes in the child care licensing standards requirements for physical activity. These requirements include:

1. Equipment
2. Time

7.702.58 (A) (2-7) 12 CCR 2509-8

There is no training requirement for physical activity.

**c. Caring for children with special needs:**

**Describe:**

The Colorado Office of Early Childhood standards related to special needs, including the definition of special needs is found in the General Rules for Child Care Facilities found at section 7.701.14 CCR 2509-8 titled "Civil Rights" and states that all licensed child care facilities in Colorado are subject to:

1. The non-discrimination provisions of Title VI of the Civil Rights Act of 1964, Title 45 Code of Federal Regulations (CFR), Part 80; the Age Discrimination Act of 1975, Title 45 CFR, Part 91; Section 504 of the Rehabilitation Act of 1973, and Title 45 CFR, Part 84.
2. Titles I through V of the Americans with Disabilities Act, Title 29 C.F.R., Part 1630. Child care facilities are required to be in compliance with the ADA and make reasonable accommodations in regards to decisions related to the enrollment, or dismissal of a child with a disability or chronic condition.

Colorado defines special needs as a lack of independent ambulation or the need for assistance in feeding, toileting, or dressing or in other areas of self-care as well as social, emotional and behavioral needs.

The center must inform its Child Care Health Consultant (CCHC) prior to the first day of care of the enrollment of a child with special health care needs, if known, so staff receive training, delegation and supervision as indicated by the child's individualized health care plan. 7.702.51 (C) (2) 12 CCR 2509-8. Frequency of this training is dependent on the needs of the child and determined by the CCHC.

The Department does not have other training requirements related to caring for children with special needs.

- d. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)).

**Describe:**

The Department has health and safety standards, but does not require training in the following topics:

1. Sun Protection
2. Guidance
3. Activities
4. Equipment and Materials
5. Play equipment and materials
6. Rest time equipment
7. Buildings and Facilities
8. Fire Safety

## **5.4 Monitoring and Enforcement Policies and Practices for CCDF Providers**

### **5.4.1 Enforcement of licensing and health and safety requirements.**

Lead agencies must certify that procedures are in effect to ensure that all child care providers caring for children receiving CCDF services comply with all applicable state and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers, or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.4.2.

- a. To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety Standards as described in Section 5.3.

All child care facilities receive at least one scheduled pre-licensing inspection as well as annual supervisory inspections. All licensing standards are monitored at each inspection per Standard Operating Procedures L-7 and L-8. In addition, the child care facility may be subject to complaint, Injury or Stage II investigations by the Colorado Department of Human Services.

Annual inspections are unannounced and include an inspection of the entire indoor and outdoor premises, a review of the facilities policies and procedures, including the facilities



emergency procedure plan, emergency drill logs, children's sign in and out forms, nurse consultant records and a review of the fire and health department inspections. Staff files are reviewed for qualifications, background checks, health statements, immunization statements, and appropriate training certificates. A percentage of children's files are reviewed for compliance to ensure that the required forms and paperwork are current and appropriate for the age of the child, including enrollment forms, health statement, immunizations and any health care plans for children with chronic or medical needs. A Report of Inspection (ROI) is left with the provider at the conclusion of each inspection and the licensee must follow up with a written plan of compliance. The written plan of compliance is reviewed and approved by the Licensing Specialist. For those facilities that are not in compliance with the rules and regulations, the Licensing Specialist may recommend the license for a Negative Licensing Action, including but not limited to the demotion of a license to a probationary status, fines, the revocation of the license or the denial of an application. For those cases where the Department feels children are in imminent danger, the license is subject to a summary suspension.

[b. To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety Training as described in Section 5.3.](#)

All child care facilities receive at least one scheduled pre-licensing inspection as well as annual supervisory inspection to confirm compliance. In addition, the child care facility may be subject to complaint or Stage II investigations by the Colorado Department of Human Services.

All Qualified Exempt Providers receive an annual on-site health and safety inspection conducted by the state department of human services or its designee. Non-relative qualified exempt providers shall correct any health and safety inspection standards within thirty (30) days after the inspection unless the results identify standards that must be corrected immediately.

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

[c. To certify, describe the procedures to ensure that CCDF providers comply with all other applicable state and local health, safety, and fire standards.](#)

All child care facilities receive at least one scheduled pre-licensing inspection as well as annual supervisory inspection to confirm compliance. All licensing standards are

monitored at each inspection per Standard Operating Procedures L-7 and L-8.

All Qualified Exempt Providers receive an annual on-site health and safety inspection conducted by the state department of human services or its designee. Non-relative qualified exempt providers shall correct any health and safety inspection standards within thirty (30) days after the inspection unless the results identify standards that must be corrected immediately.

The Department does not set the training requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. Colorado does not regulate care in the child's own home in cases where the number of children served is below statutory exemption requirements. If the number of children in care exceeds exemption limits they are required to obtain a family child care license.

#### **5.4.2 Inspections for licensed CCDF providers.**

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

##### **a. Licensed CCDF center-based child care**

- i. Describe your state/territory's policies and practices for pre-licensure inspections of licensed child care center providers for compliance with health, safety, and fire standards.**

Colorado requires a scheduled pre licensing inspection for all providers, including new applicants and any significant change to an existing license. Colorado requires a scheduled pre-licensing inspection for all new applications as well as all change of service applications. The licensing specialist will conduct an inspection of the entire physical premises, both indoors and outdoors, of the facility to assess compliance with rules and regulations governing the facility type. The licensing specialist will also review all policies and procedures, children records, staff records, and any other records required for the facility/ type will be reviewed for compliance with rules and regulations, prior to or during the original inspection including approving fire and health department inspections and compliance with local zoning. All violations will be documented on a Report of Inspection for the facility. The time frame for corrections of violations will be noted on the ROI. Compliance must be established "prior to issuance of license," except for those items where a provisional license can be issued. The applicant is provided a copy of the Report of Inspection and must complete a written plan of compliance before the license is issued.

**ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care center providers.**

1. An unannounced, supervisory licensing inspection for all child care facilities is conducted on an annual basis, per standard operating procedure L5. These Inspections include compliance with all applicable child care rules, including health and safety requirements, staff qualifications, physical premises (indoors and outdoors), and a review of staff and children files. The review of compliance with fire and health department standards are also included in both the pre-licensing and annual licensing inspection. These unannounced supervisory licensing inspections are in addition to any complaint investigations or follow-up to child abuse investigations or reported injury investigations.

For this plan year, during the coronavirus pandemic to support limiting the spread of the virus, Colorado is completing annual unannounced supervisory inspection virtually for all child care programs operating during the pandemic. These inspections include reviewing compliance with all applicable child care rules, including health and safety requirements, staff qualifications, physical premises requirements (indoors and outdoors), and a review of staff and children files including required background checks. These unannounced virtual supervisory licensing inspections are in addition to onsite inspections for any high severity complaint investigations, follow-up to child abuse investigations, adverse licensing monitoring visits, or reported serious injury

investigations. Colorado will resume on-site inspections for all unannounced annual supervisory visits once the pandemic has ended. Programs that are temporarily closed during the pandemic will receive inspections once they resume operations.

iii. Identify the frequency of unannounced inspections:

- A. Once a year
- B. More than once a year

Describe:

iv. If applicable, describe the differential monitoring process and how these inspections ensure that child care center providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

The licensing specialist completes an annual inspection to ensure compliance with all licensing rules.

All licensed child care centers are inspected on an annual basis, unless the facility is in a negative licensing action. Those facilities in a negative licensing action are inspected on a monthly basis until there is a final decision on the case. The licensing specialist will conduct an inspection of the entire physical premises, both indoors and outdoors, of the facility to assess compliance with rules and regulations governing the facility type. The licensing specialist will also review all policies and procedures, children records, staff records including training certificates for the required CCDF training in Safe Sleep, Prevention of Abusive Head Trauma, Medication Administration, Prevention and Response to Food Allergies, Building and Physical Premises Safety, Emergency Preparedness and Response, Handling and Storage of Hazardous Materials, Precautions in Transporting Children, First Aid and CPR. Other Records required for the facility/ type will be reviewed for compliance with rules and regulations including current, approving fire and health department inspections. All violations will be documented on a Report of Inspection for the facility. The time frame for corrections of violations will be noted on the Report of Inspection. The licensee is provided a copy of the Report of Inspection and must complete a written plan of compliance. The child care rules governing child care programs providing CCDF services include all required CCDF health and safety standards. The licensing specialist completes an annual inspection to ensure compliance with all licensing rules.

For this plan year, during the coronavirus pandemic to support limiting the spread of the virus, Colorado is completing annual unannounced supervisory inspection virtually for all child care programs operating during the pandemic. These inspections include reviewing compliance with all applicable child care rules, including health and safety requirements, staff qualifications, physical premises requirements (indoors and outdoors), and a review of staff and children files including required background checks. These unannounced virtual supervisory licensing inspections are in addition to onsite inspections for any high severity complaint investigations, follow-up to child abuse investigations, adverse licensing monitoring visits, or reported serious injury investigations. Colorado will resume on-site inspections for all unannounced annual supervisory visits once the pandemic has ended. Programs temporarily closed during the pandemic will receive inspections once they resume operations.

v. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

Internal Standard Operating Procedure L-4 and Standard Operating Procedure L-5

#### 5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

## **b. Licensed CCDF family child care home**

### **i. Describe your state/territory's requirements for pre-licensure inspections of licensed family child care providers for compliance with health, safety, and fire standards**

Colorado requires a scheduled pre-licensing inspection for all new applications as well as all change of service applications. The licensing specialist will conduct an inspection of the entire physical premises, both indoors and outdoors, of the facility to assess compliance with rules and regulations governing the facility type. The licensing specialist will also review all policies and procedures, children records, staff records, and any other records required for the facility/ type will be reviewed for compliance with rules and regulations, prior to or during the original inspection including approving fire and health department inspections and compliance with local zoning. All violations will be documented on a Report of Inspection (ROI) for the facility. The time frame for corrections of violations will be noted on the ROI. Compliance must be established "prior to issuance of license," except for those items where a provisional license can be issued. The applicant is provided a copy of the Report of Inspection and must complete a written plan of compliance before the license is issued.

### **ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF family child care providers.**

All licensed Family Child Care Homes are inspected annually and all annual inspections are unannounced. These unannounced inspections are in addition to any complaint, Stage II, injury/accident investigation or change of service inspection that may occur.

### **iii. Identify the frequency of unannounced inspections:**

- A. Once a year  
 B. More than once a year

Describe:

### **iv. If applicable, describe the differential monitoring process and how these inspections ensure that family child care providers continue to comply with the**

[applicable licensing standards, including health, safety, and fire standards.](#)

All licensed Family Child Care Homes are inspected on an annual basis, unless the facility is in a negative licensing action. Those facilities in a negative licensing action are inspected on a monthly basis until there is a final decision on the case. The licensing specialist will conduct an inspection of the entire physical premises, both indoors and outdoors, of the facility to assess compliance with rules and regulations governing the facility type. The licensing specialist will also review all policies and procedures, children records, staff records including training certificates for the required CCDF training in Safe Sleep, Prevention of Abusive Head Trauma, Medication Administration, Prevention and Response to Food Allergies, building and physical premises safety, Emergency preparedness and response, Handling and Storage of hazardous materials, Precautions in transporting children, First Aid and CPR. Other records required for the facility/ type will be reviewed for compliance with rules and regulations including current, approving fire and health department inspections. All violations will be documented on a Report of Inspection for the facility. The time frame for corrections of violations will be noted on the Report of Inspection. The licensee is provided a copy of the Report of Inspection and must complete a written plan of compliance.

[v. List the citation\(s\) for your state/territory's policies regarding inspections for licensed CCDF family child care providers](#)

Internal Standard Operating Procedure L-4 and Standard Operating Procedure L-5.

#### [5.4.2 Inspections for licensed CCDF providers.](#)

[Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety \(including, but not limited to, those requirements described in 98.41\) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time \(658E\(c\)\(2\)\(K\)\(i\)\(II\); 98.16 \(n\); 98.42\(b\)\(2\)\(i\)\).](#)

[Certify by describing, in the questions below, your state/territory's monitoring and](#)

enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

c) Licensed in-home CCDF child care

i. Does your state/territory license in-home child care (care in the child's own home)?

No (Skip to 5.4.3 (a)).

Yes. If yes, answer A-D below:

A. Describe your state/territory's policies and practices for pre-licensure inspections of licensed in-home care (care in the child's own) providers for compliance with health, safety, and fire standards.

Colorado requires a scheduled pre-licensing inspection for all new applications as well as all change of service applications. The licensing specialist will conduct an inspection of the entire physical premises, both indoors and outdoors, of the facility to assess compliance with rules and regulations governing the facility type. The licensing specialist will also review all policies and procedures, children records, staff records, and any other records required for the facility/ type will be reviewed for compliance with rules and regulations, prior to or during the original inspection including approving fire and health department inspections and compliance with local zoning. All violations will be documented on a Report of Inspection (ROI) for the facility. The time frame for corrections of violations will be noted on the ROI. Compliance must be established "prior to issuance of license," except for those items where a provisional license can be issued. The applicant is provided a copy of the Report of Inspection and must complete a written plan of compliance before the license is issued.

B. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care in-home care (care in the child's own home) providers.

All licensed Family Child Care Homes are inspected annually and all annual inspections are unannounced. These unannounced inspections are in addition to any complaint, Stage II, injury/accident investigation or change of service inspection that may occur.



C. Identify the frequency of unannounced inspections:

- 1. Once a year
- 2. More than once a year

Describe:

D. If applicable, describe the differential monitoring process and how these inspections ensure that in-home care (care in the child's own providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

All licensed family child care homes are inspected on an annual basis, unless the facility is in a negative licensing action. Those facilities in a negative licensing action are inspected on a monthly basis until there is a final decision on the case. The licensing specialist will conduct an inspection of the entire physical premises, both indoors and outdoors, of the facility to assess compliance with rules and regulations governing the facility type. The licensing specialist will also review all policies and procedures, children records, staff records including training certificates for the required CCDF training in Safe Sleep, Prevention of Abusive Head Trauma, Medication Administration, Prevention and Response to Food Allergies, building and physical premises safety, Emergency preparedness and response, Handling and Storage of hazardous materials, Precautions in transporting children, First Aid and CPR. Other records required for the facility/ type will be reviewed for compliance with rules and regulations including current, approving fire and health department inspections. All violations will be documented on a Report of Inspection for the facility. The time frame for corrections of violations will be noted on the Report of Inspection. The licensee is provided a copy of the Report of Inspection and must complete a written plan of compliance.

E. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF in-home care (care in the child's own home) providers.

Internal Standard Operating Procedure L-4 and Standard Operating Procedure L-5.

### 5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers

Licensing Specialists at the Colorado Department of Human Services, Office of Early Childhood, Division of Early Care and Learning are responsible for conducting pre-licensure inspections and unannounced inspections. For additional capacity, the Department contracts with non-profit organizations and county departments of health and human services, to conduct pre-licensure inspections and unannounced inspections of licensed providers throughout the state. All licensing specialists, including those under contract, must meet the same qualification criteria and are all trained together by the Department.

### **5.4.3 Inspections for license-exempt center-based and family child care providers.**

The Lead Agency must have policies and practices that require licensing inspectors (or qualified

monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Inspections for relative providers will be addressed in question 5.6.4. At a minimum, the health and safety requirements to be inspected must address the standards listed in subsection 5.3 (98.41(a)).

To certify, describe the policies and practices for the annual monitoring of:

a. License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used.

The Department does not set the training requirements for DoD providers. These are established by the DoD. Inspection reports from DoD are obtained and posted on the OEC website at this link: h

[https://drive.google.com/drive/folders/1pss\\_8TBicpaAozvPeUiQe\\_6ccnCECsko?usp=sharing](https://drive.google.com/drive/folders/1pss_8TBicpaAozvPeUiQe_6ccnCECsko?usp=sharing). DoD inspection reports include verification of DoD required training.

i. Provide the citation(s) for this policy or procedure

3.903 (9 CCR 2503-9)

b. License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used.

An annual announced on-site health and safety inspection is conducted by the Exempt Care Specialist for all Non-Related Qualified Exempt Providers. Non-relative qualified exempt providers shall correct any health and safety inspection standards within thirty (30) days after the inspection unless the results identify standards that must be corrected immediately. The Exempt Care Specialist assesses all required health, safety and pre-service and ongoing requirements are met using Colorado's health and safety inspection tool.

In response to the COVID-19 pandemic and to support Executive and Public Health Order requirements, the Department requested and was approved to waive the requirement at 45 CFR §98.42 (b) (2) for inspections of license-exempt child care programs impacted by COVID-19. The Office of Early Childhood is requesting relief from this provision to allow license-exempt family child care inspections to occur less

frequently than annually temporarily. Instead of in-person visits the Exempt Care Specialist will complete a monitoring check in by phone or video call with all Non-Related Qualified Exempt Providers providing care that were scheduled for an onsite visit from 4/1/2020 until 90 days after the resolution of the COVID-19 pandemic, not to exceed one year initially.

i. Provide the citation(s) for this policy or procedure

3.914.1 (B)(7) CCR 2503-9.

#### **5.4.4 Inspections for license-exempt in-home care (care in the child's own home).**

Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home that are appropriate to the setting. A child's home may not meet the same standards as other child care facilities and this provision gives Lead Agencies flexibility in conducting more streamlined and targeted on-site inspections. For example, Lead Agencies may choose to monitor in-home providers on basic health and safety requirements such as training and background checks. Lead Agencies could choose to focus on health and safety risks that pose imminent danger to children in care. This flexibility cannot be used to bypass the monitoring requirement altogether. States should develop procedures for notifying parents of monitoring protocols and consider whether it would be appropriate to obtain parental permission prior to entering the home for inspection (98.42(b)(2)(iv)(B)).

a. To certify, describe the policies and practices for the annual monitoring of license-exempt in-home care, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring procedures are used.

The Exempt Care Specialist completes announced monitoring visits to all Non-Related Qualified Exempt Providers that are providing care inside of the child's home, on an annual basis. The Exempt Care Specialist assesses all required health, safety and pre-service requirements are met using Colorado's health and safety inspection checklist tool. This health and safety inspection checklist tool includes monitoring for fire requirements. If corrections are needed, the provider must demonstrate they have made the corrections within the timeframe identified in the Report of Inspection (ROI). The ROI is posted in a visible location at the provider location and also on the OEC website at:

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Families?p=Family&s=Colora](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Families?p=Family&s=Colora)

[do-Child-Care-Assistance-Program&lang=en](#). The Department does not set the policies or practices for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed. The links to the DoD health and safety reports are posted on the website at:

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Families?p=Family&s=Colorado-Child-Care-Assistance-Program&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Families?p=Family&s=Colorado-Child-Care-Assistance-Program&lang=en).

b. Provide the citation(s) for this policy or procedure.

3.914.1 (B)(7)(b) CCR 2503-9.

c. List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers:

The Exempt Care Specialist is responsible for conducting inspections of license-exempt CCDF providers and is employed at the Colorado Department of Human Services, Office of Early Childhood, Division of Early Care and Learning.

The Department does not conduct inspections for DoD providers or for child care centers located out of state. These are conducted by the DoD or the state in which the provider is licensed.

#### **5.4.5 Licensing Inspectors (or qualified inspectors designated by the Lead Agency).**

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the state's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

a. To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers

At a minimum, all licensing specialists are required to have a Bachelor's degree in Early Childhood Education or related field and have experience working in a child care

program. Staff must also receive a regulatory credential through the National Association of Regulatory Administration within the first year of employment as a licensing specialist. Licensing staff are trained to the child care rules and regulations, standard operating procedures, consistent application of regulations and other topics through a training series. This training includes a module on language and cultural diversity. Once a module has been completed, the specialist shadows other seasoned licensing staff to experience hands on learning in the field. The training also includes Mandated Child Abuse reporting, identifying safety hazards, and recognition of health requirements. All Licensing staff through their degree, credential, experience and training have qualifications appropriate to the age of children in care and type of provider setting.

b. To certify, describe how inspectors and monitors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

The Division of Early Care and Learning has also developed our own internal online training for new Licensing Specialists. The training consists of 6 modules that train staff on licensing overview, inspections, investigations, professionalism, confidentiality and personal safety, adverse action and report writing.

c. Provide the citation(s) for this policy or procedure.

This requirement is noted as a minimum qualification for Licensing Specialist within the job postings and position descriptions on file with the Colorado Department of Personnel and Administration. This minimum qualification is also included as a contract requirement for vendors conducting child care licensing functions.

**5.4.6 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).**

a. To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child

care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

The Colorado Division of Early Care and Learning utilizes a community-based licensing model. This model requires licensing specialists to conduct all inspections for each licensed program type, excluding qualified exempt providers, within an assigned geographic territory. The use of this model creates efficiencies in licensing and travel time and helps assist the Division in ensuring the number of licensing specialists per the number of child care providers is sufficient to conduct licensing inspections at least every twelve months. The current ratio of licensing specialists to facilities is approximately 1:100.

**b. Provide the policy citation and state/territory ratio of licensing inspectors.**

The Colorado Department of Human Services, Office of Early Childhood, Division of Early Care and Learning Standard Operating Procedure R-1. The current ratio of licensing specialists to facilities is approximately 1:100.

## 5.5 Comprehensive Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct comprehensive background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For family child care homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)). Exemptions for relative providers will be addressed in 5.6.5.

A comprehensive background check must include eight (8) separate and specific components (98.43(2)(b)), which encompass three (3) in-state checks, two (2) national checks, and three (3) interstate checks (if the individual resided in another state in the preceding 5 years).

**5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).**

a. Components of In-State Background Checks

i. Criminal registry or repository using fingerprints in the current state of residency

Licensed, regulated, or registered child care providers

Citation:

26-6-107(1)(a)(I)(A), C.R.S. 7.701.33 12 CCR 2509-8

All other providers eligible to deliver CCDF Services

Citation:

26-6-107(1)(a)(I)(A), C.R.S. 7.701.33 12 CCR 2509-8

ii. Sex offender registry or repository check in the current state of residency

Licensed, regulated, or registered child care providers

Citation:

C.R.S.26-6-107(1.5)(B)(II)(a.7)(D), 7.701.33H 12 CCR 2509-8

All other providers eligible to deliver CCDF Services

Citation:

C.R.S.26-6-107(1.5)(B)(II)(a.7)(D), 7.701.33H 12 CCR 2509-8

iii. Child abuse and neglect registry and database check in the current state of residency

Licensed, regulated, or registered child care providers

Citation:

C.R.S. 26-6- 107(1)(C), 7.701.32 12 CCR 2509-8.



All other providers eligible to deliver CCDF Services

Citation:

C.R.S. 26-6- 107(1)(C), 7.701.32 12 CCR 2509-8.

**5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).**

b. Components of National Background Check

i. FBI Fingerprint Check

Licensed, regulated, or registered child care providers

Citation:

7.701.33 (D) 12 CCR 2509-8, 7.701.33 (D)(3) 12 CCR 2509-8, 7.701.33 (D)(4)(a) 12 CCR 2509-8.

All other providers eligible to deliver CCDF Services

Citation:

7.701.33 (D) 12 CCR 2509-8, 7.701.33 (D)(3) 12 CCR 2509-8, 7.701.33 (D)(4)(a) 12 CCR 2509-8.

ii. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based search

Licensed, regulated, or registered child care providers

Citation:

26-6-107(1)(a)(I)(A), C.R.S. 7.701.33 12 CCR 2509-8 .

All other providers eligible to deliver CCDF Services

Citation:

26-6-107(1)(a)(I)(A), C.R.S. 7.701.33 12 CCR 2509-8 .

**5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for**

all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services

(e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).

c. Components of Interstate Background Checks

i. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional.

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

Licensed, regulated, or registered child care providers

Citation:

7.701.33 12 CCR 2509-8

All other providers eligible to deliver CCDF Services

Citation:

7.701.33 12 CCR 2509-8

ii. Sex offender registry or repository in any other state where the individual has resided in the past 5 years.

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) to mitigate any gaps that may exist between the two

sources.

Licensed, regulated, or registered child care providers

Citation:

7.701.33 12 CCR 2509-8

All other providers eligible to deliver CCDF Services

Citation:

7.701.33 12 CCR 2509-8

iii. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years

Note: This is a name-based search

Licensed, regulated, or registered child care providers

Citation:

7.701.33 12 CCR 2509-8

All other providers eligible to deliver CCDF Services

Citation:

7.701.33 12 CCR 2509-8

### **5.5.2 Procedures for a Provider to Request a Background Check.**

Child care providers are required to submit requests for background checks for each of their staff members to the appropriate state or territorial agency, which is to be defined clearly on the state or territory Web site. Family child care home providers must also submit background check requests for all household members over the age of 18. The requests must be submitted prior to when the individual becomes a staff member and must be completed at least once every five years per Â§ 98.43(d)(1) and (2). The state or territory must ensure that its policies and procedures under this section, including the process by which a child care provider or other state or territory may submit a background check request, are published on the web site of the state or territory as described in Â§ 98.43(g) and the web site of local lead agencies.

a. Describe the state/territory procedure(s) for a provider to request the required background checks. If the process is different based on provider type, please include that in this description. If the process is different based on each background check component, please include that in this description.

Both the Colorado Bureau of Investigation (CBI) and Federal Bureau of Investigation (FBI) fingerprint-based background checks requests must be submitted to CBI via their third party vendors Idemia (via IdentoGO Centers) or American Bioidentity (via Colorado Fingerprinting) prior to the employee's first day of employment at the facility. Colorado and National Sex Offender Registry checks are included and processed from the fingerprints submitted to CBI. Colorado Child Abuse and Neglect Records Checks are a check of the Colorado Department of Human Services' (CDHS) Trails database for information to determine if the applicant has been identified as having a finding of child abuse or neglect. This check is done when individuals submit a request and fee to the Department. Licensed Family Child Care Homes abuse and neglect checks are completed as part of the application process.

The Department does not set the background check requirements for DoD providers or for child care centers located out of state. These are established by the DoD or the state in which the provider is licensed.

b. The state/territory must ensure that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. What are the fees and how do you ensure that these fees do not exceed the actual cost of processing and administering the background checks? Lead Agencies can report that no fees are charged if applicable (98.43(f)).

C.R.S. 26-6-105 (1)(c) requires that the fees established to obtain criminal record checks and checking the records and reports of child abuse and neglect must not exceed the direct and indirect costs incurred by the department.

c. Describe the state/territory policy(ies) related to prospective staff members working on a provisional basis. Pending completion of all background check components in 98.43(b), the prospective staff member must be supervised at all times by an individual who received a qualifying result on a background check described in 98.43(b) within the past 5 years (98.43(c)(4)) and the prospective staff member must have completed and received satisfactory results on either the FBI fingerprint check or a fingerprint check of

the state/territory criminal registry or repository in the state where the prospective staff member resides. Describe and include a citation for the Lead Agency's policy:

Individuals who have obtained a successfully completed CBI or FBI record check may care for children, for no longer than ninety (90) calendar days, while waiting for all other required background checks to be completed. The individual must be supervised at all times by an individual who has successfully completed all required background checks. 7.701. 32 (D)(1)(a)(1).

d. Describe the procedure for providers to request background checks for staff members that resided in another state within the previous 5 years.

State Criminal History Check (SCH). This check may be conducted using a fingerprint or name-based check; and is initiated by the child care provider/prospective staff member with results provided directly to the Department. It must be completed using the approved state agency of previous residence procedures and State-Based Background Check Checklist . This check is not required for states participating in the National Fingerprint File (NFF) program: Florida, Georgia, Hawaii, Idaho, Iowa, Kansas, Maryland, Minnesota, Missouri, Montana, North Carolina, New Jersey, New York, Ohio, Oklahoma, Oregon, Tennessee, West Virginia, and Wyoming.

State Sex Offender Registry (SSOR) Check. This check may be conducted using a fingerprint or name-based check and is initiated by the child care provider/prospective staff member.

State Child Abuse and Neglect Registry Check (SCAN). This check is a name-based search and is initiated by the child care provider/prospective staff member.

Information on how to complete the state background checks can be found on the previous state of residence website from which you are requesting the checks. Each state's child care background check contact information may be found on the Office of Early Childhood website.

e. Describe the procedure to ensure each staff member completes all components of the background check process at least once during each 5-year period. If your state enrolls child care staff members in the FBI Rap Back Program or a state-based rap back program, please include that in this description. Note: An FBI Rap Back program only covers the FBI Fingerprint component of the background check. If child care staff

members are enrolled in a state-based rap back, please indicate which background check components are covered by this service.

Colorado Bureau of Investigation currently provides subsequent arrest information for anyone who is flagged to a current CDHS license. Per 7.701.32(J) 12 CCR 2509-8 every five (5) years, all child abuse and neglect inquiry background checks must be renewed by resubmitting an inquiry form and current fee to the State Department for processing. An updated clearance letter or verification of the submission of the inquiry form must be obtained before five (5) years from the date reflected on the current clearance letter. Per section 7.701.33 (D) (5) 12 CCR 2509-8 every five (5) years, requests for FBI criminal record checks must be renewed by re-submitting a complete set of fingerprints and the required fee to CBI for processing. An updated clearance letter or verification of the submission of the request must be obtained prior to five (5) years from the date reflected on the current clearance letter. Licensed Family Child Care Homes are processed and tracked by licensing support staff and are processed every five years with the family child care provider's continuation request.

f. Describe the procedure to ensure providers who are separated from employment for more than 180 consecutive days receive a full background check.

Individuals are tracked by the Background Investigation Unit through a flag removal submitted by the program when an individual leaves employment. If the individual does not become employed with another child care program after 180 days, the individual will be removed. If they return after more than 180 consecutive days have passed they would need to be re-fingerprinted.

g. Provide the website link that contains instructions on how child care providers should initiate background check requests for a prospective employee (98.43(g)).

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Background-Checks&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Background-Checks&lang=en)

### **5.5.3 Procedures for a Lead Agency to Respond to and Complete a Background Check.**

Once a request has been initiated, the state shall carry out the request of a child care provider

for a criminal background check as expeditiously as possible, but not to exceed 45 days after the date on which such request was submitted. The Lead Agency shall make the determination whether the prospective staff member is eligible for employment in a child care program (98.43(e)(1)). Lead Agencies must ensure the privacy of background checks by providing the results of the criminal background check to the requestor or identified recipient in a statement that indicates whether a child care staff member (including a prospective child care staff member or a family child care household member over the age of 18) is eligible or ineligible for employment, without revealing any documentation of criminal history or disqualifying crimes or other related information regarding the individual. In the following questions, describe the Lead Agency's procedures for conducting background checks. These responses should include:

- The name of the agency that conducts the investigation; include multiple names if multiple agencies are involved in different background check components
- How the Lead Agency is informed of the results of each background check component
- Who makes the determinations regarding the staff member's eligibility? Note: Disqualification decisions should align to the response provided in 5.5.7.
- How the Lead Agency ensures that a background check request is carried out as quickly as possible and not more than 45 days after a request is submitted.

a. Describe the procedures for conducting In-State Background Check requests and making a determination of eligibility.

Requests for fingerprint-based criminal record checks must be submitted to the Colorado Bureau of Investigation (CBI) via their third party vendors Idemia (via IdentGO Centers) or American BiIdentity (via Colorado Fingerprinting) prior to the employee's first day of employment at the facility. The Colorado Department of Human Services (CDHS), Office of Early Childhood Background Investigation Unit (BIU) will receive the Colorado State criminal history results directly from CBI weekly.

BIU staff reviews all Colorado State charges (including State Sex offender and National Sex offender) and Federal Bureau of Investigation fingerprint-based background check results, utilizing the Colorado Courts Access System (ICON) to compare all charges to the CCCLA disqualifying crimes in CRS 26-6-104 and CRS 26-6-108, which align with CCDGB Act disqualifying crimes. If a disqualifying charge is identified a notice is sent to the licensing specialist for final decision of eligibility. Eligibility letters in compliance with the Child Care and Development Block Grant Act are provided to both the child care program and the individual being checked. CBI results are typically received by child care

programs within 24-48 hours. Colorado Child Abuse and Neglect Records Checks is completed when an individual submits a request and fee by mail to the BIU. Results are emailed to the individual. Colorado is required per statute 19-1-307, C.R.S. (2020) to provide the results of this check within 10 days of the request.

[b. If the procedure is different for National Background checks, including the name-based NCIC NSOR check and FBI fingerprint check, please describe here.](#)

The Colorado Department of Human Services (CDHS), Office of Early Childhood Background Investigation Unit (BIU) will receive Federal Bureau of Investigation (FBI) criminal history results and NCIC NSOR directly from CBI weekly. Eligibility letters for FBI eligibility letters are typically processed within 14-21 days of fingerprinting.

[c. Describe the procedures for conducting Interstate Background Check requests and making a determination of eligibility. \(Note this response should detail how a state conducts an interstate check for a provider who currently lives in their state or territory but has lived in another state\(s\) within the previous five years\).](#)

All providers are required to request the three (3) state of previous residence checks, (Criminal History, Sex Offender Registry, and Child Abuse and Neglect), if their prospective staff member has lived in another state within five years of hire. Access to each state's child care background check contact information is posted on the Office of Early Childhood website. Within 20 days of initiating the FBI and CBI fingerprint-based background check, a complete copy of each state background check response must be received by the Department from the state where the background check was conducted, along with the State-Based Background Checklist to be reviewed for a determination of eligibility. All three (3) required background checks must be received by the Department as well as the State Background Check Checklist must be included in the package sent to the BIU. Once the files are reviewed, the BIU will send the facility a letter regarding the applicant's eligibility status.

[d. Describe the procedure the Lead Agency has in place to make an eligibility determination in the event not all the components of the background check are completed within the required 45-day timeframe.](#)

Employees that have requested and fulfilled all requirements to obtain the required background check but have not received a response within the required 45-day timeframe will be deemed eligible for employment. If additional information is



subsequently obtained another review to determine eligibility will occur at that time.

e. Describe procedures for conducting a check when the state of residence is different than the state in which the staff member works.

Individuals would complete the same process as required for all employees who reside in Colorado. The individual would need to complete the five year inter-state checks for their state of residency.

#### 5.5.4 State designation as a "Compact State" and participation in the National Fingerprint File program.

a. "Compact States" are states that have ratified the National Crime Prevention and Privacy Compact Act of 1998 in order to facilitate electronic information sharing for noncriminal justice purposes (such as employment) among the Federal Government and states. More information can be found here: <https://www.fbi.gov/services/cjis/compact-council>. The Compact allows signatory states to disseminate its criminal history record information to other states for noncriminal justice purposes in accordance with the laws of the receiving state. For the most up-to-date Compact States and Territories map visit: <https://www.fbi.gov/services/cjis/compact-council/maps>. Is your state or territory a Compact State?

No

Yes

b. The National Fingerprint File (NFF) is a database of fingerprints, or other unique personal identification information relating to an arrested or charged individual, which is maintained by the FBI to provide positive fingerprint identification of record subjects. Only a state or territory that has ratified the Compact (a Compact State) may join the NFF program. An FBI fingerprint check satisfies the requirement to perform an interstate check of another state's criminal history record repository if the responding state (where the child care staff member has resided within the past 5 years) participates in the NFF program. It is unnecessary to conduct both the FBI fingerprint check and the search of an NFF state's criminal history record repository (refer to CCDF-ACF-PIQ-2017-01). For the most up-to-date NFF Participation map visit: <https://www.fbi.gov/services/cjis/compact-council/maps>. Is your state or territory an NFF State?

No

Yes

### 5.5.5 Procedures for a Lead Agency to Respond to Interstate Background Checks:

#### a. Interstate Criminal History Registry Check Procedures

Provide a description of how the state or territory responds to interstate criminal history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain criminal history information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

Individuals may apply to the Colorado Bureau of Investigation through its Internet Criminal History Check System (ICHC) to receive a Colorado criminal history registry check. Colorado is an open records act state and there are no laws or policies that prevent the release of criminal information.

#### b. Interstate Sex Offender Registry Check Procedures

Provide a description of how the state or territory responds to interstate sex offender history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain sex offender information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

Individuals may apply to the Colorado Bureau of Investigation through its Colorado Sex Offender search or Internet Criminal History Check System (ICHC) to receive a Colorado Sex Offender Registry Check.

#### c. Interstate Child Abuse and Neglect Registry Check Procedures

Provide a description of how the state or territory responds to interstate child abuse and neglect history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain child abuse and neglect information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

Per 19-1-307, C.R.S., The State Department of Human Services, when requested in writing by an individual to check records or reports of child abuse or neglect for the

purpose of screening that individual when such individual's responsibilities include care of children, supervision of children, or unsupervised contact with children. Individuals submit and request and fee and the results are emailed to the individual.

### 5.5.6 Consumer Education Website Links to Interstate Background Check Processes

Lead Agencies must have requirements, policies, and procedures in place to respond as expeditiously as possible to other States', Territories' and Tribes' requests for background checks in order to meet the 45-day timeframe (98.43(a)(1)(iii)). In addition, Lead Agencies are required to include on their consumer education website the process by which another Lead Agency may submit a background check request, along with all of the other background check policies and procedures (98.43 (g)).

State and Territory Lead Agencies are required to designate one page of their existing Consumer Education Website as a landing page for all interstate background check related processes and procedures pertaining to their own state. The purpose of having a dedicated interstate background check web page on the Lead Agency Consumer Education Website is to help state and territories implement the interstate background check requirements of the CCDBG Act (CCDF Consumer Education Website and Reports of Serious Injuries and Death (OMB #0970-0473)).

Check to certify that the required elements are included on the Lead Agency's consumer education website for each interstate background check component, and provide the direct URL/website link.

**Note: The links provided below should be a part of your consumer education website identified in 2.3.11.**

**a. Interstate Criminal Background Check:**

- i. Agency Name
- ii. Address
- iii. Phone Number
- iv. Email
- v. FAX
- vi. Website
- vii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?))
- viii. Forms
- ix. Fees
- x. Is the state a National Fingerprint File (NFF) state?
- xi. Is the state a National Crime Prevention and Privacy Compact State?
- xii. Direct URL/website link to where this information is posted.

Enter direct URL/website link:

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Background-Checks&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Background-Checks&lang=en)

**b. Interstate Sex Offender Registry (SOR) Check:**

- i. Agency Name
- ii. Address
- iii. Phone Number
- iv. Email
- v. FAX

- vi. Website
- vii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)
- viii Forms
- ix. Fees
- Direct URL/website link to where this information is posted.

Enter direct URL/website link:

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Background-Checks&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Background-Checks&lang=en)

c. Interstate Child Abuse and Neglect (CAN) Registry Check:

- i. Agency Name
- ii. Is the CAN check conducted through a County Administered Registry or Centralized Registry?
- iii. Address
- iv. Phone Number
- v. Email
- vi. FAX
- vii. Website
- viii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification is needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)
- ix. Forms
- x. Fees
- xi. Description of information that may be included in a response to a CAN registry check (including substantiated instances of child abuse and neglect accompanied by the State's definition of "substantiated" instances of child abuse and neglect.

- xii. Direct URL/website link to where this information is posted.

Enter direct URL/website link:

[https://www.coloradoofficeofearlychildhood.com/oec/OEC\\_Providers?p=Providers&s=Background-Checks&lang=en](https://www.coloradoofficeofearlychildhood.com/oec/OEC_Providers?p=Providers&s=Background-Checks&lang=en)

**5.5.7 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry (98.43 (c)(1)(i-iii)). Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or - subject to an individual review (at the state/territory's option) - a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)(iv-v)).**

a. Does the state/territory disqualify child care staff members based on their conviction for any other crimes not specifically listed in 98.43(c)(i)?

No

Yes.

If yes, describe other disqualifying crimes and provide the citation:

Per 26-6-108 C.R.S., The Department may disqualify individuals for the following:

(a) Be convicted of any felony, other than those offenses specified in section 26-6-104(7) , or child abuse, as specified in section 18-6-401, C.R.S ., the record of conviction being conclusive evidence thereof, notwithstanding section 24-5-101, C.R.S ., or have entered into a deferred judgment agreement or a deferred prosecution agreement to any felony, other than those offenses specified in section 26-6-104(7) , child abuse, as specified in section 18-6-401, C.R.S ., or should the department have a certified court order from another state indicating that the applicant, licensee, person employed by the licensee, or any person residing with

the licensee has been convicted of a felony, other than those offenses specified in section 26-6-104(7) , under a law of any other state or the United States or has entered into a deferred judgment agreement or a deferred prosecution agreement in another state as to a felony, other than those offenses specified in section 26-6-104(7) ; or

(a.5) Be convicted of third degree assault, as described in section 18-3-204, C.R.S ., any misdemeanor, the underlying factual basis of which has been found by the court on the record to include an act of domestic violence, as defined in section 18-6-800.3, C.R.S ., the violation of a protection order, as described in section 18-6-803.5, C.R.S ., any misdemeanor offense of child abuse as defined in section 18-6-401, C.R.S ., or any misdemeanor offense in any other state, the elements of which are substantially similar to the elements of any one of the offenses described in this paragraph (a.5). For purposes of this paragraph (a.5), "convicted" shall have the same meaning as set forth in section 26-6-104(7)(a)(II) ; or

(b) Be determined to be insane or mentally incompetent by a court of competent jurisdiction and, should a court enter, pursuant to part 3 or part 4 of article 14 of title 15, C.R.S., or section 27-65-109(4) or 27-65-127, C.R.S ., an order specifically finding that the mental incompetency or insanity is of such a degree that the licensee is incapable of operating a family child care home, foster care home, or child care center, the record of such determination and entry of such order being conclusive evidence thereof; or

(c) Use any controlled substance, as defined in section 18-18-102(5), C.R.S ., including retail marijuana, or consume any alcoholic beverage during the operating hours of the facility or be under the influence of a controlled substance or alcoholic beverage during the operating hours of the facility; or

(c.5) Be convicted of unlawful use of a controlled substance as specified in section 18-18-404, C.R.S ., unlawful distribution, manufacturing, dispensing, sale, or possession of a controlled substance as specified in section 18-18-403.5 , 18-18-405 , or 18-18-405.5, C.R.S., or unlawful offenses relating to marijuana or marijuana concentrate as specified in section 18-18-406, C.R.S .; or(d) Consistently fail to maintain standards prescribed and published by the department; or  
(e) Furnish or make any misleading or any false statement or report to the department; or

(f) Refuse to submit to the department any reports or refuse to make available to the department any records required by it in making investigation of the facility for

licensing purposes; or

(g) Fail or refuse to submit to an investigation or inspection by the department or to admit authorized representatives of the department at any reasonable time for the purpose of investigation or inspection; or

(h) Fail to provide, maintain, equip, and keep in safe and sanitary condition premises established or used for child care pursuant to standards prescribed by the Department of Public Health and Environment and the department of human services or by ordinances or regulations applicable to the location of such facility; or

(i) Willfully or deliberately violate any of the provisions of this part 1; or

(j) Fail to maintain financial resources adequate for the satisfactory care of children served in regard to upkeep of premises and provision for personal care, medical services, clothing, and other essentials in the proper care of children; or

(k) Be charged with the commission of an act of child abuse or an unlawful sexual offense, as specified in section 18-3-411 (1), C.R.S., if:

(l) Such individual has admitted committing the act or offense and the admission is documented or uncontroverted; or

(ll) The administrative law judge finds that such charge is supported by substantial evidence; or

(l) Admit to an act of child abuse or if substantial evidence is found that the licensee, person employed by the licensee, or person who resides with the licensee in the licensed facility has committed an act of child abuse. For the purposes of this paragraph (l), "child abuse" has the same meaning as that ascribed to the term "abuse" or "child abuse or neglect" in section 19-1-103 (1), C.R.S.; or

(m) Be the subject of a negative licensing action; or

(n) Misuse any public funds that are provided to any foster care home or any child placement agency that places or arranges for placement of a child in foster care for the purposes of providing foster care services, child placement services related to the provision of foster care, or any administrative costs related to the provision of such foster care services or such foster-care-related child placement services. The state board shall promulgate rules defining the term "misuse", which rules shall take into account similar definitions in federal law and may include references to relevant circulars of the federal office of management and budget.



b. Describe how the Lead Agency notifies the applicant about their eligibility to work in a child care program. This description should detail how the Lead Agency ensures the privacy of background checks. Note: The Lead Agency may not publicly release the results of individual background checks. (98.43(e)(2)(iii)).

The Colorado Department of Human Services, Office of Early Childhood Background Investigation Unit (OEC-BIU) mails an Eligible or Not Eligible letter directly to the facility provider with no details of charges (FBI results only). A letter is also mailed to the Applicant letting the applicant know if they are Not Eligible and the disqualifying charges (FBI and CBI charges).

The child care facility receives the Colorado fingerprint results directly from the Colorado Bureau of Investigation (CBI) Secure Document Delivery System (SDDS). CDHS OEC-BIU then reviews all Colorado fingerprint results to compare against CRS 26-6-104 and 26-6-108.

c. Describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43 (e)(2-4)).

There is not a review policy if someone was originally disqualified for a felony drug offense. Currently anyone who was disqualified due to a felony drug offense and separated from employment may submit a new background check to determine current eligibility.

### **5.5.8 Appeals Processes for Background Checks**

States and territories shall provide for a process by which a child care program staff member (including a prospective child care staff member) may appeal the results of a background check to challenge the accuracy or completeness of the information contained in a staff member's background report. The state or territory shall ensure that:

-- The child care staff member is provided with information related to each disqualifying crime in a report, along with information/notice on the opportunity to appeal

-- A child care staff member will receive clear instructions about how to complete the appeals

process for each background check component if the child care staff member wishes to challenge the accuracy or completeness of the information contained in such member's background report

-- If the staff member files an appeal, the state or territory will attempt to verify the accuracy of the information challenged by the child care staff member, including making an effort to locate any missing disposition information related to the disqualifying crime

-- The appeals process is completed in a timely manner for any appealing child care staff member

-- Each child care staff member shall receive written notice of the decision. In the case of a negative determination, the decision should indicate 1) the state's efforts to verify the accuracy of information challenged by the child care staff member, 2) any additional appeals rights available to the child care staff member, and 3) information on how the individual can correct the federal or state records at issue in the case. (98.43(e)(3))

-- The Lead Agency must work with other agencies that are in charge of background check information and results (such as the Child Welfare office and the State Identification Bureau), to ensure the appeals process is conducted in accordance with the Act.

a. What is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background check report? If there are different appeal process procedures for each component of the check, please provide that in this description, including information on which state agency is responsible for handling each type of appeal. Note: The FBI Fingerprint Check, State Criminal Fingerprint, and NCIC NSOR checks are usually conducted by a state's Identification Bureau and **may** have different appeal processes than agencies that conduct the state CAN and state SOR checks.

Reports and records received from other agencies, including police and child protection investigation reports are confidential and may not be released to the public as required by 7.701.6 (C)(4) 12 CCR 2509-8. Any person who disputes any information on the criminal history record may challenge the accuracy and completeness of the record or disputes the record can be taken directly to the arresting agency, or a "record challenge" may be conducted at the Colorado Bureau of Investigation (CBI). To challenge a record once the criminal history record has been obtained and discrepancies are detected, a challenge of any of those discrepancies may be conducted by presenting, in person, a copy of the CBI criminal history record in question and a driver's license or government issued photo ID to CBI. Fingerprints will be taken from the person contesting an arrest

record and compared within the Automated Fingerprint Identification System (AFIS). Under Colorado Law, individuals receiving letters from County Departments of Human/Social Services notifying them that they have been identified as responsible for an incident of child abuse or neglect, are entitled to contest (appeal) the accuracy of the county decision to an impartial decision maker. The Colorado Child and Adult Mistreatment Dispute Review Section (CAMDRS) is the impartial board that reviews county decisions that an individual is responsible for abuse or neglect. If an individual disagrees with the decision of CAMDRS they can request a hearing with an Administrative Law Judge. Colorado does not have a separate review process for individuals disqualified due to a felony drug offense committed during the preceding five years.

b. If the appeals process is different for interstate checks, what is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background report for interstate checks?

The appeals process would be the same.

c. Interstate Child Abuse and Neglect (CAN) Registry Check:

The appeals process would be the same.

## 5.6 Exemptions for Relative Providers

States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from certain health and safety requirements. Note: This exception applies if the individual cares only for relative children.

Check and describe where applicable the policies that the Lead Agency has regarding exemptions for eligible relative providers for the following health and safety requirements. The description should include the health and safety requirements relatives are exempt from, if applicable, as well as which of the federally defined relatives the exemption applies to.

### 5.6.1 Licensing Requirements (as described in Section 5.1)

- a. Relative providers are exempt from all licensing requirements.
- b. Relative providers are exempt from a portion of licensing requirements.  
Describe:
- c. Relative providers must fully comply with all licensing requirements.

### 5.6.2 Health and Safety Standards (as described in Section 5.2 and 5.3)

- a. Relative providers are exempt from all health and safety standard requirements
- b. Relative providers are exempt from a portion of health and safety standard requirements.  
Describe:
- c. Relative providers must fully comply with all health and safety standard requirements.

### 5.6.3 Health and Safety Training (as described in Section 5.3)

- a. Relative providers are exempt from all health and safety training requirements.
- b. Relative providers are exempt from a portion of all health and safety training requirements.  
Describe:
- c. Relative providers must fully comply with all health and safety training requirements.

### 5.6.4 Monitoring and Enforcement (as described in Section 5.4)

- a. Relative providers are exempt from all monitoring and enforcement requirements.
- b. Relative providers are exempt from a portion of monitoring and enforcement requirements.

Describe:

- c. Relative providers must fully comply with all monitoring and enforcement requirements.

### 5.6.5 Background Checks (as described in Section 5.5)

- a. Relative providers are exempt from all background check requirements.
- b. Relative providers are exempt from a portion of background check requirements. If checked, identify the background check components that relatives must complete:
  - i. Criminal registry or repository using fingerprints in the current state of residency
  - ii. Sex offender registry or repository in the current state of residency
  - iii. Child abuse and neglect registry and database check in the current state of residency
  - iv. FBI fingerprint check
  - v. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name based search.
  - vi. Criminal registry or repository in any other state where the individual has resided in the past five years.
  - vii. Sex offender registry or repository in any other state where the individual has resided in the past five years.
  - viii. Child abuse and neglect registry or data base in any other state where the individual has resided in the past five years.
- c. Relative providers must fully comply with all background check requirements.

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). This section addresses the quality improvement activities implemented by the Lead Agency related to the support of the child care workforce and the development and implementation of early learning and developmental guidelines. It asks Lead Agencies to describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services. (98.53 (f)) in either of these two areas.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

## 6.1 Professional Development Framework

**6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors in programs that serve children of all ages. This framework should be developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.**

a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

i. State/territory professional standards and competencies. Describe:

The knowledge and skills of early childhood program staff provides the foundation for high-quality early childhood programming. As a result, early childhood educators need specialized knowledge, skills, practices, and dispositions in order to be effective in promoting positive outcomes for young children.

Caring for Our Children informs the professional qualification requirements of Colorado child care licensing rules to ensure Colorado's requirements follow nationally recognized standards of care.

The Department is statutorily charged with setting the standards for licensed care, including that of the child care workforce. In addition, the Department is statutorily charged with developing and maintaining a voluntary professional credential (Early Childhood Professional Credential) for the early childhood workforce. The Colorado Shines Professional Development Information System (PDIS) is designed to track the training and education of early childhood educators, provide online professional development, and assist early childhood professionals in attaining additional professional development, training, and education. Individuals who enter their information into the Colorado Shines PDIS are able to apply for a variety of personnel qualifications and credentials, including consultative roles such Coaches, Child Care Health Consultants, Trainers and Early Childhood Mental Health Consultants.

**Statewide Competency Framework:**

Colorado utilizes a competency based professional development system for individuals working with early care and education licensed facilities. The Colorado Competencies for Early Childhood Educators and Administrators (Early Childhood Competencies) is a framework that outlines the basic knowledge and skills needed to enter the field and progress. The Early Childhood Competencies allow individuals to build their knowledge and skills in a cumulative manner and choose goals for an Individual Professional Development Plan. The Early Childhood Competencies have been revised since the prior State Plan, based on broad stakeholder input, to ensure cultural and linguistic competencies are reflected throughout the framework. Additionally, this newer version of the competencies is aligned with the National Association of the Education for Young Children, Power to the Profession.

### **What are the levels of competence?**

Colorado's Competencies for Early Childhood Educators and Administrators are built on a framework of three levels. They begin with the basic knowledge and skills needed to enter the field and progress to advanced levels of mastery and academic preparation with a wide range of experiences. The three levels are cumulative, meaning that early childhood educators at the top level have the skills and knowledge to meet all the competencies in the lower levels. Early childhood educators progress through the levels by furthering education, participating in training opportunities, getting involved in mentoring/coaching, and utilizing reflective practices. Skills and knowledge may present at varying levels depending on the competency domain and the professional's role, work setting, and experience. The levels are best described as:

Level 1 - Demonstrates the basic skills and knowledge to best support quality early childhood care and education.

Level 2 - Demonstrates the skills and knowledge at the previous level plus: Applies skills and knowledge to implement effective early childhood environments and experiences for young children.

Level 3 - Demonstrates the skills and knowledge at previous levels plus: Analyzes and integrates procedures and practices that are optimal for young children.

Colorado supports a common, statewide progression of credentials and degrees aligned with the Early Childhood Competencies. These efforts are occurring across multiple sectors, including ongoing professional development opportunities and formal education.



The CORE Knowledge Standards are used to define competencies for professionals supporting children ages eight to thirteen.

**ii. Career pathways. Describe:**

The Early Childhood Professional Credential (Credential) is a competency- and research-based credentialing system developed to recognize the expertise of a broad spectrum of professionals working with young children. The Credential is awarded based on an individualized, point-based system that considers formal education, ongoing professional development, experience, and demonstrated competencies. By recognizing these component areas in six possible levels, the Credential supports a career progression from the completion of entry level training requirements to post graduate level degree completion. As recommended by the Transforming the Workforce for Children Birth through Age 8 report (Institute of Medicine and National Research Council of the National Academies, 2015), the scoring system integrates all professional learning experiences to fully support competency development and ongoing professional practice. Additionally, the point structure considers the types of professional development that are most effective in changing professional practice. The Credential can be used by professionals to meet the personnel requirements of child care licensing rules and regulations and is used to score the Workforce and Professional Development Quality Indicator of Levels 3-5 in the Colorado Shines Quality Rating and Improvement System.

In addition to the voluntary Early Childhood Professional Credential, individuals are offered multiple pathways (as described in Section 5 of this State Plan) to meet child care licensing personnel requirements.

**iii. Advisory structure. Describe:**

The Office of Early Childhood meets regularly with with internal and external stakeholders to discuss: 1) Prioritization of training development; 2) Training and education gaps; 3) Establishment and maintenance of performance metrics; and 4) Ongoing maintenance and configuration of the Colorado Shines Professional Development Information System (PDIS), which serves as the learning management system and workforce registry.

**iv. Articulation. Describe:**

Colorado's community colleges that offer early childhood courses, certificates and

degrees, have mapped the core fifteen early childhood education courses to the Early Childhood Competencies. The four-year teacher preparation programs are also aligned to the Competencies. The Colorado Department of Higher Education is responsible for statewide articulation agreements.

**v. Workforce information. Describe:**

The Colorado Shines Professional Development Information System (PDIS) includes a registry component that collects information on demographics, employment (compensation and employment start and end dates), education, training, child care licensing personnel qualifications, Early Childhood Professional Credential awards, consultative role competency level, and professional development planning details.

**vi. Financing. Describe:**

Colorado has submitted a plan to utilize funding from the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, to fund grants to all eligible early childhood providers to remain open and recover from the COVID-19 pandemic, with an emphasis on early childhood educator workforce retention. For these grants, providers outline their funding needs and choose from a menu of workforce retention options, such as hazard pay, maintaining hours for employees, paying for benefits, etc. These grants also include bonus amounts for certain criteria, including operating in a child care desert and serving infants and toddlers.

**b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.**

**i. Continuing education unit trainings and credit-bearing professional development to the extent practicable**

**Describe:**

The Colorado Department of Human Services, in partnership with the Department of Higher Education and the Department of Labor and Employment plans to address recruitment and retention strategies and rebuild the early childhood workforce following the COVID-19 pandemic by:

1. Allowing any Coloradan to take the minimum coursework required to be a licensed educator (ECE 101 and 103) through the community college system for free; and
2. Increasing funding for proven recruitment and retention programs, including scholarships to pay for ongoing higher education tuition, apprenticeships for work-

based learning, loan forgiveness.

- ii. Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

The Colorado Department of Human Services, in partnership with the Department of Higher Education and the Department of Labor and Employment plans to address recruitment and retention strategies and rebuild the early childhood workforce following the COVID-19 pandemic by:

1. Offering wrap-around peer mentorship to retain educators and streamlining pathways into the early childhood workforce;
2. Awarding bonuses to reward increased professional development; and,
3. Providing free online training to enhance Director competencies.

- iii. Other

Describe:

**6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.**

One of the four subcommittees for the Early Childhood Leadership Commission (ECLC), Colorado's State Advisory Council, is the Workforce Development subcommittee. The ECLC subcommittees and working groups are the mechanism to gather broad stakeholder input. This includes both the legislative and rule making processes. Specifically, members of this subcommittee were involved in the Early Childhood and Administrator Competencies and Early Childhood Educator Alignment refresh workgroups convened as part of the Colorado Shines Brighter Preschool Development Grant effort. Finally, agenda time is secured, as needed, to address professional development, training, and education of child care providers and staff during the Workforce Development subcommittee meeting, to ensure members are briefed and aware of professional development, training, and education of child care providers.

### **6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).**

Colorado knows that a qualified and committed early care and education workforce is essential for the success of policies and programs designed to improve the lives of children. To this end, foundational system frameworks and partnerships are leveraged to inform strategies to improve the quality, diversity, stability, and retention of caregivers, teachers, and directors. These include financial assistance to attain credentials and post-secondary degrees. The program option to use quality improvement funding and tiered subsidy payments to support staff in completing training, certificates, courses, and degrees that enhance quality practice, career development, and staff compensation. The Colorado Shines Quality Rating and Improvement System framework is research based and reinforces quality practices within the Leadership, Management, and Administration Indicator to strengthen the recruitment and retention within child care facilities.

The Colorado Department of Human Services, Office of Early Childhood recently rebuilt the Colorado Shines Professional Development Information System as a key investment to enhance data collection, centralize qualification data, and make smart use of these data to be responsive to changing conditions of the child care professional workforce.

In partnership with the Colorado Evaluation and Action Lab at the University of Denver, the Office of Early Childhood is working to more routinely link relevant data to track workforce trends to guide policy and programmatic decisions that improve Colorado's ability to recruit and retain quality workforce. This effort includes the following action plan:

1. Use the newly launched Linked Information Network of Colorado (LINC) to routinely connect data from the Colorado Departments of Human Services (CDHS), Higher Education (CDHE), and Labor and Employment (CDLE) to get a comprehensive picture of all early childhood workforce members in Colorado.
2. Develop an analytic model that can provide timely updated answers to critical early childhood educator workforce questions on issues including number of workforce members, workforce demographics, turnover, wages, and educational pathways.
3. Disseminate this intelligence to all relevant stakeholders including the Governor's Office, relevant state agency leadership, and community stakeholders.

This effort not only allows for updated snapshots of the workforce, but it also creates the

ability to use relevant data to track and evaluate the effects of policy or program to support the quality, diversity, stability, and retention of caregivers, teachers, and directors and overall well-being of the workforce.

## 6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

### **6.2.1 Describe how the state/territory incorporates into training and professional development opportunities:**

-- the knowledge and application of its early learning and developmental guidelines (where applicable);

-- its health and safety standards (as described in section 5);

-- and social-emotional/behavioral and mental health intervention models for young children, which can include positive behavior intervention and support models that reduce the likelihood of suspension and expulsion of children (as described in Section 2 of the Pre-Print) (98.44(b)).

Colorado integrates the Colorado Early Learning and Development Guidelines through their incorporation in the Child Growth, Development and Learning Domain of the Colorado Competencies for Early Childhood Educators and Administrators. This domain reinforces the importance of understanding children's (regardless of culture, gender, age, race, ability, etc.) growth, development, and learning is paramount in providing experiences that foster the predictable steps and sequences of development. Knowing how children grow, develop, and

learn allows early childhood educators to develop, guide, and monitor learning experiences that address all domains of child development as defined in the Colorado Early Learning and Development Guidelines (ELDGs). Developmentally appropriate learning experiences consider a child's developmental abilities, temperament, home language and cultural background, needs, and learning styles while recognizing factors such as family characteristics and community influences. Fully understanding the importance of child growth, development, and learning means all children (regardless of culture, gender, age, race, ability, etc.) are valued individually and inclusivity is respected. In addition, the Colorado Shines Professional Development Improvement System (Colorado Shines PDIS) offers a number of training modules that address Colorado's Early Learning and Development Guidelines and this important resource is for professionals, families, and advocates who care for and about children.

The Office of Early Childhood incorporates the knowledge and application of the State's health and safety standards through published eLearning courses offered on the Colorado Shines PDIS. These include both pre-service and required training. In cases where child care centers or family child care home providers are required to develop individualized training that is specific to their program (e.g., Building and Physical Premises Safety and Precautions in Transporting Children) guidance that includes details for the regulation and requirement is provided within the Colorado Shines PDIS course catalog. Required courses that are not hosted on the Colorado Shines PDIS ((e.g., Disaster Preparedness and Emergency Response (FEMA) and CPR and First Aid Certification)) are also included in the course catalog with a link to Department approved training vendors.

Colorado incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models by requiring that three of the 15 continuing ongoing professional development clock hours be focused on social emotional topics. These topics include, but are not limited to, early brain development, the importance of developmental screening and monitoring for social emotional health, toxic stress and resiliency, and working effectively with a mental health consultant. The Expanding Quality in Infant Toddler Care (EQIT) Course includes six hours focused on social emotional topics specific to infants and toddlers. This course supports infant and toddler early care educators to implement a responsive care process called Respect, Reflect, Relate with children as well as with families to address behaviors adults find challenging in child care settings. Individualized coaching support provided by the EQ

Infant Toddler Specialist Network is available to all EQIT course participants Efforts will be ongoing to develop training that specifically enhances the skills of professionals to support social emotional health and wellbeing for children in child care.

In addition, the Social-emotional Health and Development Promotion Domain is included within Colorado Competencies for Early Childhood Educators and Administrators. This domain is included within the competencies because incorporating responsive interactions and strategies into an early childhood program provides opportunities for establishing secure, interpersonal peer to peer, adult to child, and adult to adult relationships and social-emotional health. Developmentally appropriate guidance strategies help children develop social-emotional health, and better understand themselves as individuals and as members of a group. A warm and caring, culturally and linguistically responsive environment in which staff consistently use a variety of evidence-based guidance strategies, helps children and families feel respected, valued and accepted. Creating an inclusive and supportive culture is fostered through providing both individual and group guidance strategies. Efforts will be ongoing to develop training that specifically enhances the skills of professionals to support social emotional health and wellbeing for children in child care.

**6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).**

The Colorado Shines Professional Development Information System contains a Learning Management System making training widely available. As training is approved and added to the system - including training required by licensing as well as ongoing professional development - the self paced e-learning modules are available to professionals across the state. In addition, many of the modules are available as face-to-face learning experiences and can be utilized by qualified trainers statewide, including trainers associated with Indian tribes and tribal organizations.

**6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers in the subsidy system:**

**a) with limited English proficiency**

Spanish is the largest language need in Colorado and efforts are focused on ensuring support in this language. Recruitment and retention of those providers whose first language is Spanish is supported in several ways. Child Care Licensing worked with Padres & Jóvenes Unidos on a Spanish language curriculum and training guide for family child care home providers. Office of Early Childhood websites (Colorado Shines and Office of Early Childhood) are available in Spanish. Informational materials, health and safety requirements, and Colorado Shines resource materials are available for both parents and professionals. Help desk support also includes bilingual Spanish support.

The Colorado Shines Professional Development Information System is available in Spanish. In addition, the Office of Early Childhood offers a growing number of face-to-face and online, self-paced e-learning courses in Spanish in order for individuals to meet licensing requirements and engage in ongoing professional development related to Colorado Shines or other related topics in the field. Evaluation data is collected to assess the ongoing need to offer a more broad range of professional content in Spanish or other non-English languages. All participant-facing materials associated with the Expanding Quality in Infant Toddler Care (EQIT) Course are translated into and maintained in Spanish. Expanding Quality Infant Toddler Specialists are able to provide the EQIT course in Spanish. Additionally, there is currently limited capacity to provide instruction in Arabic. Finally, the Early Childhood Competency Self-Assessment is translated into Spanish. The competencies outline what an individual should know and be able to do based on their role.

**b) who have disabilities**

Child Care Licensing consults with child care providers and potential child care providers (applicants) to make accommodations necessary to become licensed, including those with disabilities.



**6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians as defined in Section 4 of the Indian Self-Determination and Education Assistance Act (including Alaska Natives) and Native Hawaiians (98.44(b)(2)(iv)).**

In Colorado, there are no additional requirements for professionals who work with children whose families receive the child care subsidy. There are, however, additional requirements related to professionals who work with infants and toddlers. The Colorado Department of Human Services, Office of Early Childhood requires coursework that is developed for child care providers and is aligned to the Colorado Competencies for Early Childhood Educators and Administrators. The content areas of these competencies, otherwise known as domains, describe knowledge and skills that early childhood educators need in order to work effectively with children birth through age eight and their families. In order to increase knowledge and skills, early childhood educators are expected to participate in quality continuing education opportunities (e.g., college classes, community-based training, etc.). The domains included within Colorado's Competencies for Early Childhood Educators and Administrators are:

1. Child Growth, Development, and Learning
2. Child Observation and Assessment
3. Family and Community Partnerships
4. Social-emotional Health and Development Promotion
5. Healthy, Safety, and Nutrition
6. Professional Practices
7. Teaching Practices

Content for each of these domains is written with all children in mind (regardless of culture, gender, age, race, ability, etc.).

Colorado develops content to address requirements and professional development needs for providers that support school age or Colorado Shines ineligible programs based on rule, state priorities and areas of need identified through the reports of inspections (ROI) for these license types, such as playground safety and injury prevention. Other agencies, such as the

Colorado Afterschool Partnership (CAP) supports a more focused professional development strategy for school age providers.

**6.2.5 The Lead Agency must provide training and technical assistance (TA) to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).**

a. Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

The Colorado Shines Professional Development Information System (Colorado Shines PDIS) operates as a statewide learning management system. Supporting Children and Families Impacted by Homelessness reviews how to determine if a family meets the definition of being "homeless" and the services available for these families. It also covers what early care and learning programs can do to support children and families experiencing homelessness. After completing this course, learners will be able to:

1. Define who is considered homeless as defined by the McKinney-Vento Homeless Assistance Act
2. Dispel myths about homelessness in early learning programs
3. Help families and children experiencing homelessness find local resources

In addition, the National Center on Parent, Family, and Community Engagement eLearning course is published to the Colorado Shines PDIS. This course reviews how to determine a family's homeless situation, build relationships with families and how to find state and local partners who can support community outreach to families experiencing homelessness. After completing this course, learners will be able to:

1. Identify who is considered homeless as defined by the McKinney-Vento Homeless Assistance Act
2. Understand the challenges and barriers facing families experiencing homelessness
3. Identify state and local partners who can support efforts to provide community outreach to homeless families; identify strategies to increase access to and participation in programs for children and families experiencing homelessness

Training for county supervisory and eligibility staff with the Colorado Child Care Assistance Program (CCCAP) includes an overview of rules that relate to enrolling and serving children experiencing homelessness. This training includes details for how the family's contribution

will be calculated and to whom it will be applied. These staff also have access to the two earlier mentioned eLearning courses that address supporting families experiencing homelessness within the Colorado Child Care Assistance Program Learning Management System.

The Office of Early Childhood contracts with Child Care Resource and Referral agencies statewide. These agencies collaborate locally with homeless service providers, McKinney-Vento liaisons and others who work with families experiencing homelessness to identify and provide referrals to child care.

The Provider Self Service Portal offers a help desk to access additional technical assistance if needed.

[b. Describe the state/territory's training and TA efforts for Lead Agency \(or designated entity\) staff in identifying and serving children and their families experiencing homelessness \(connects to question 3.3.6\).](#)

The Colorado Department of Human Services, Office of Early Childhood contracts with Child Care Resource and Referral agencies statewide. These agencies collaborate locally with homeless service providers, McKinney-Vento liaisons and others who work with families experiencing homelessness to identify and provide referrals to child care in partnership with the Colorado Shines Call Center and county departments of human services. Both eLearning modules review how to determine if a family meets the definition of being "homeless" and the services available for these families. These courses also include information regarding the required grace period of at least 90 days to gather documentation of immunizations and other health and safety requirements for families experiencing homelessness for licensed providers. The grace period for licensed exempt care is at least 60 days.

Training for county supervisory and eligibility staff with the Colorado Child Care Assistance Program (CCCAP) includes an overview of rules that relate to enrolling and serving children and families experiencing homelessness. Course content specifically addresses the required grace period. These staff also have access to the two earlier mentioned eLearning courses that address supporting families experiencing homelessness within the Colorado Child Care Assistance Program Learning Management System.

The Provider Self Service Portal offers a help desk to access additional technical assistance

if needed.

**6.2.6 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.**

a. Describe the strategies that the state/territory is developing and implementing for strengthening child care providers' business practices.

Colorado recognizes the value of business practices and includes leadership, management and administration as one of the five quality standards within the Colorado Shines Quality Rating and Improvement System. Reinforcement of this standard is leveraged through quality improvement supports, such as coaching and professional development. The Colorado Shines coaching model includes intensive support offered by subject matter experts to enhance particular aspects of quality. One way in which credentialed coaches support the Leadership, Management and Administration Quality Indicator is through the utilization of the Business Administration Scale for Family ChildCare (BAS) and the Program Administration Scale (PAS). Both are reliable and easy-to-administer tools for measuring the overall leadership and management practices of early childhood programs. Each tool can be utilized as a self-assessment, or in combination with coaching to learn about the quality of practices and act as a catalyst for action toward positive change and quality improvement efforts. Colorado is fortunate to have a number of qualified trainers for the BAS and PAS. These individuals offer training support and technical assistance on a fee for service basis. State level training support will be provided as needed and budget allows.

In addition, LEADING EDGE™ for child care providers helps both licensed child care providers (home and center-based) and start-ups. The program assists childcare providers to strengthen business practices when coping with the challenges of COVID-19 and the ever changing landscape of the Colorado workforce. A primary objective of this effort is to strengthen the child care provider business model and enhance business owner skills so that these critically important services can continue to support our local economies. Participants of the course have:

1. Access to virtual classes with weekly presentations, group discussion forums, homework, financial spreadsheets and templates;
2. One-on-one consulting with certified Small Business Development Center (SBDC) consultants, during the course and beyond;
3. Direct connections with local and statewide industry experts and key business leaders; and,
4. Continuous feedback on your business plan and strategy during the course.

This program is funded through a collaboration between the State of Colorado's Office of Early Childhood, the Office of Economic Development and International Trade (OEDIT) and the Colorado SBDC network.

Through ongoing data collection and analysis from the Colorado Shines Quality Rating and Improvement System and course evaluations, Colorado will continue to prioritize training development and technical assistance resources related to business practices for professionals in the field, as well as those who provide program level support through coaching.

b. Check the topics addressed in the state/territory's strategies for strengthening child care providers's business practices. Check all that apply.

- i. Fiscal management
- ii. Budgeting
- iii. Recordkeeping
- iv. Hiring, developing, and retaining qualified staff
- v. Risk management
- vi. Community relationships
- vii. Marketing and public relations
- viii. Parent-provider communications, including who delivers the training, education, and/or technical assistance
- ix. Other

Describe:

## 6.3 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

Lead Agencies can invest CCDF quality funds in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 of the CCDF Rule, and those included in the activities to improve the quality of child care also addressed in Section 7 (98.53(a)(1)).

### 6.3.1 Training and professional development of the child care workforce.

a. In the table below, describe which content is included in training and professional development activities and how an entity is funded to address this topic. Then identify which types of providers are included in these activities. Check all that apply.

i. Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies (98.53 (a)(1)(i)(A)).

Describe the content and funding:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals.

Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood, or through collaborative partnership, in order to enhance the skills of child care professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado

Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

**Examples include:**

- **Let's Get Moving! Physical Activity in Early Care and Learning**
- Introduction to the Child and Adult Care Food Program (CACFP)
- How Experiences Impact Early Brain Development
- Nurturing Healthy Sexual Development in Children
- Guiding with Development in Mind (Positive Guidance Sequence)
- Guiding with Attachment and Temperament in Mind (Positive Guidance Sequence)
- Positive Guidance Strategies (Positive Guidance Sequence)

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

ii. Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and the mental health of young children and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.4.5.) (98.53(a)(1)(iii)).

Describe the content and funding:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals.

Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood, or through collaborative partnership, in order to enhance the skills of child care

professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

Examples include:

- Guiding with Development in Mind (Positive Guidance Sequence)
- Guiding with Attachment and Temperament in Mind (Positive Guidance Sequence)
- Positive Guidance Strategies (Positive Guidance Sequence)
- How Experiences Impact Early Brain Development
- Working with an Early Childhood Mental Health Consultant

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

iii. Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. (98.53(a)(1)(iv)).

Describe the content and funding:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals.

Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood,



or through collaborative partnership, in order to enhance the skills of child care professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

Examples include:

- Strengthening Protective Factors
- Culturally Responsive Care
- Supporting Children and Families Impacted by Homelessness
- Recognizing the Impact of Bias on Early Childhood Professionals

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

iv. Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula, and designing learning environments that are aligned with state/territory early learning and developmental standards (98.15 (a)(9)).

Describe the content and funding:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals.

Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood,

or through collaborative partnership, in order to enhance the skills of child care professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

Examples include:

- Individualizing Care
- Culturally Responsive Care
- Guiding with Development in Mind
- Positive Guidance Strategies

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

v. Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development.

Describe the content and funding:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals.

Examples include:

- Introduction to the Early Intervention and Preschool Special Education Programs

- Supporting Young Children Through Inclusive Care
- Introduction to the Child and Adult Care Food Program (CACFP)

Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood, or through collaborative partnership, in order to enhance the skills of child care professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

vi. Using data to guide program evaluation to ensure continuous improvement 98.53(a)(1)(ii).

Describe the content and funding:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals.

Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood, or through collaborative partnership, in order to enhance the skills of child care

professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

Examples include:

- How to Use Authentic Child Assessment Data to Achieve Positive Outcomes

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

vii. Caring for children of families in geographic areas with significant concentrations of poverty and unemployment.

Describe the content and funding:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals.

Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood, or through collaborative partnership, in order to enhance the skills of child care professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado

Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

viii. Caring for and supporting the development of children with disabilities and developmental delays 98.53 (a)(1)(i)(B).

Describe the content and funding:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals.

Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood, or through collaborative partnership, in order to enhance the skills of child care professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

Examples include:

- Introduction to the Early Intervention and Preschool Special Education Programs
- Supporting Young Children Through Inclusive Care

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

ix. Supporting the positive development of school-age children (98.53(a)(1)(iii)).

Describe the content and funding:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals. Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood, or through collaborative partnership, in order to enhance the skills of child care professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

Examples include:

- Injury Prevention for School-Age Programs
- Playground Safety for School-Age Programs
- Colorado Early Learning and Development Guidelines

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

x. Other

Describe:

The Colorado Department of Human Services, Office of Early Childhood develops, either directly or through contract, develops competency- based, self-paced e-learning training modules that aligns with the Colorado Child Care Licensing Health and Safety Standards, best practices identified through the Caring for our Children Basics, the Colorado Shines Quality Rating and Improvement System framework, and the Colorado Competencies for Early Childhood Educators and Professionals.

Future course development is developed by a team of instructional designers and trainers at the Colorado Department of Human Services, Office of Early Childhood, or through collaborative partnership, in order to enhance the skills of child care professionals as resources allow. Funding to support this team, and contracts associated with this effort, includes CCDF, Preschool Development Grant, and State General Fund. Subject matter experts may be internal or external to the Office of Early Childhood so funding for this time and effort will vary. The Colorado Shines Professional Development Information System includes a course catalog that details information for courses available by topic area.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

**b. Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce and then identify which providers are eligible for this activity. Check all that apply.**

- i. Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling.
  - Licensed center-based
  - License exempt center-based
  - Licensed family child care home
  - License- exempt family child care home
  - In-home care (care in the child's own home)
- ii. Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities.
  - Licensed center-based
  - License exempt center-based
  - Licensed family child care home
  - License- exempt family child care home
  - In-home care (care in the child's own home)
- iii. Financial awards such as scholarships, grants, loans, or reimbursement for expenses and/or training, from the state/territory to complete post-secondary education.
  - Licensed center-based
  - License exempt center-based
  - Licensed family child care home
  - License- exempt family child care home
  - In-home care (care in the child's own home)
- iv. Other.



- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

Describe:

**6.3.2 Describe the measurable indicators of progress relevant to subsection 6.3 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

The Colorado Department of Human Services, Office of Early Childhood evaluates and confirms learning objectives through ongoing needs assessments for all training and professional development activities. The Office of Early Childhood includes an instructional design team that assesses and provides feedback regarding trainees' acquisition of knowledge and skill at the completion of training and recommends additional self-development or training activities to promote skill development. This staff knows and engages in a variety of assessment methods before, during, and after training to measure the impact of training. The Department also utilizes course completion counts and course evaluation data to assess the course utilization and revisions.

To this end, the following measurable indicators will be assessed:

- Number of training hours completed in the following competency domains:
  - Child Growth, Development and Learning
  - Child Observation and Assessment
  - Family and Community Partnerships
  - Health, Safety, and Nutrition
  - Leadership, Management, and Administration
  - Professional Practice
  - Social Emotional Health and Development
  - Teaching Practice
- Level 1 evaluations (reaction surveys): Percentage of learners who "agree" or "strongly agree" that a course provided valuable new ideas and information that will enhance their work.
- Level 2 evaluation: Percentage of learners who increased their knowledge as determined by an increase in score from a pre to post test.
- Percentage of self-paced online coursework that is available in English and Spanish.

## 6.4 Early Learning and Developmental Guidelines

**6.4.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.**

a. Describe how the state/territory's early learning and developmental guidelines address the following requirements:

i. Are research-based.

The Colorado Early Learning and Development Guidelines describe the trajectory of children's learning and development from birth to eight years old. The Guidelines are designed so that everyone who cares for young children can play an important part in giving Colorado's children a strong start. The Guidelines are based on national research and bring together widely accepted strategies to help children develop successfully. They were reviewed and advised by both state and national experts with knowledge of early childhood development and teaching practice, as well as specific content areas. These Experts have woven together their knowledge about these important years, and as a result, the Guidelines are aligned with and help connect existing programs to create a coordinated approach to learning and development.

ii. Developmentally appropriate.

The Guidelines include a broad description of children's growth to ensure a holistic

approach to creating positive early childhood environments. For each age level, the Guidelines address approaches to learning, health and physical development, social and emotional development, language, literacy, numeracy, logic and reasoning, and other subject specific learning. Although the specific domains used to organize descriptions of children's development evolve within the Guidelines to reflect the specific requirements of each age group, they maintain a broad view of the whole child and describe all aspects of children's growth.

### iii. Culturally and linguistically appropriate.

The Guidelines acknowledge and are responsive to variations in culture, languages, and abilities. For instance, child rearing practices, developmental expectations, the role of different family members, and the child's own individual versus collective identity may vary across cultures. To address this, the Guidelines include examples and resources that address the particular requirements of children for whom English is a second language and children with learning or physical challenges. The Guidelines also acknowledge the great variation in when and in what order children attain particular developmental milestones. The knowledge and skills described are designed to provide support and information to families, caregivers, and educators concerning children's development within certain age spans, rather than dictate exactly when or how each child should progress.

### iv. Aligned with kindergarten entry.

The Guidelines address the development of children in kindergarten through third grade. A graphic is used to orient readers to how the Guidelines are organized by domains across age ranges. Domains are color-coded throughout the Guidelines to align with the graphic. These Guidelines are aligned with the Colorado Academic Standards for preschool through third grade and with the Head Start Child Development and Early Learning Framework. They are designed to show the continuum of development from birth through age 8, while complementing the variety of existing expectations and models being used in the State of Colorado with each age group. Thus, the Guidelines were informed by a wide variety of state and national documents, including current research on early learning and best practices in early education.

v. [Appropriate for all children from birth to kindergarten entry.](#)

The Colorado Early Learning and Developmental Guidelines are divided into three major sections: Birth-Age 3; Ages 3-5; and Kindergarten-Third Grade (Ages 5-8). Each of these actions describes children's development within a set of areas called domains. These Domains differ somewhat for each age group. The Guidelines begin with a narrative describing the first four months of a baby's life. This is followed by a set of tables describing children's abilities from ages 4 months to 5 years. These tables organize content within domains and subdomains and include indicators, examples, and suggested supports. Content for infants and toddlers is organized for children at 4-8 months, 9-18 months, and 19-36 months. Content for preschool-age children 3-5 year old is articulated as a single age span. A graphic is used to orient readers to how the Guidelines are organized by domains across age ranges. Domains are color-coded throughout the Guidelines to align with the graphic. These Guidelines are aligned with the Colorado Academic Standards for preschool through third grade and with the Head Start Child Development and Early Learning Framework. They are designed to show the continuum of development from birth through age 8, while complementing the variety of existing expectations and models being used in the State of Colorado with each age group. Thus, the Guidelines were informed by a wide variety of state and national documents, including current research on early learning and best practices in early education.

vi. [Implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.](#)

Colorado's State Advisory Council, the Early Childhood Leadership Commission, ensures the update of the Early Learning and Development Guidelines through a subcommittee of the Program Quality and Alignment Committee.

b. [Describe how the required domains are included in the state/territory's early learning and developmental guidelines. Responses for "other" are optional.](#)

i. [Cognition, including language arts and mathematics.](#)

The Guidelines include the language and literacy domain, cognitive development domain for the following age groups: birth to age three, ages three to five, and kindergarten through third grade. English language development, language development, literacy knowledge and skills, logic and reasoning, mathematics

knowledge and skills are addressed for children ages three to five. The following are addressed for children kindergarten through third grade: Colorado English language proficiency; world languages; reading, writing, and communicating; and mathematics. Developmental milestones are described within separate domains to provide an organizational structure for the document. In practice, child development and learning across domains are highly interrelated.

#### [ii. Social development.](#)

The Guidelines include the social development domain for the following age groups: birth to age three, ages three to five, and kindergarten through third grade. Developmental milestones are described within separate domains to provide an organizational structure for the document. In practice, child development and learning across domains are highly interrelated.

#### [iii. Emotional development.](#)

The Guidelines include the emotional development domain for the following age groups: birth to age three, ages three to five, and kindergarten through third grade. Developmental milestones are described within separate domains to provide an organizational structure for the document. In practice, child development and learning across domains are highly interrelated.

#### [iv. Physical development.](#)

The Guidelines include the physical development and health domain for the following age groups: birth to age three, ages three to five, and kindergarten through third grade. Comprehensive health and physical education content is addressed for children kindergarten through third grade. Developmental milestones are described within separate domains to provide an organizational structure for the document. In practice, child development and learning across domains are highly interrelated.

#### [v. Approaches toward learning.](#)

The Guidelines include the approaches to learning domain for the following age groups: birth to age three, ages three to five, and kindergarten through third grade. Developmental milestones are described within separate domains to provide an organizational structure for the document. In practice, child development and learning across domains are highly interrelated.

vi. Describe how other optional domains are included, if any:

The Guidelines address the following content areas for children ages three to five: 1) social studies knowledge and skills and 2) creative arts expression. Additional content areas addressed for children kindergarten through third grade: music, dance, visual arts, drama and theatre arts.

Transition supports are also addressed for the following: 1) transition to home; 2) infancy to toddlerhood; 3) home to school; 4) early intervention (Part C) to preschool special education (Part B); and 5) transition to kindergarten.

c. Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates.

The Colorado Early Learning and Development Guidelines were originally developed and approved by the Colorado Early Childhood Leadership Commission in 2011. They were updated in 2019 as one of the five required activities under the Colorado Preschool Development Grant (PDG) B-5, and specifically designed to maximize parental choice and knowledge. As part of this update the Guidelines were aligned with the 2020 Colorado Academic Standards and the 2015 Head Start Early Learning Outcomes Framework (HSELOF). Throughout the update process, stakeholders from a wide variety of agencies and sectors were involved, including representatives from the Colorado Department of Education, the Colorado Department of Public Health and Environment, Colorado Department of Human Services, Head Start, local child care providers, higher education, early learning professionals, and others. An Advisory Board met numerous times to ensure the resulting guidelines reflect a strong research base, enhance working early childhood systems in Colorado, and meet the needs of diverse audiences and purposes. The Guidelines were reviewed and advised by state experts with knowledge of early childhood development and teaching practice, as well as specific content areas. The most recent update of the Guidelines was finalized in May of 2019 and are updated at least every 10 years.

d. If applicable, discuss the state process for the adoption, implementation, and continued improvement of state out-of-school time standards.

Child Care Licensing sets the standards for out-of-school time care through rules which are informed by Caring for Our Children. These rules are reviewed and revised

on a regular basis through consultation with other state agencies, child development experts, health professionals, school-age providers, school-district personnel, national accreditation bodies, the Colorado Afterschool Partnership and health and safety experts, such as certified playground safety inspectors

e. Provide the Web link to the state/territory's early learning and developmental guidelines and if available, the school-age guidelines.

<https://earlylearningco.org/>

#### **6.4.2 CCDF funds cannot be used to develop or implement an assessment for children that:**

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,
- Will be used as the primary or sole method for assessing program effectiveness,
- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

The Colorado Early Learning and Developmental Guidelines are intended to:

1. Improve families' and professionals' knowledge of child development;
2. Guide families and professionals working with children in planning and implementing developmental and learning activities;
3. Inform or guide developmental support, instruction, assessment, and intervention; and,
4. Provide unifying guidelines that are embraced by and embedded in programs and services (e.g., early care and education, home visitation, medical homes, early intervention) across the comprehensive early childhood service delivery system.

**6.4.3 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measurable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).**

The Colorado Department of Human Services, Office of Early Childhood measures the progress for the maintenance and implementation of the Colorado Early Learning and Development Guidelines using course completion data and the timely updates to this important resource statewide. The Colorado Early Learning and Development Guidelines course is available statewide through the Colorado Shines Professional Development Information System. This course provides an overview of the Colorado Early Learning and Development Guidelines and an introduction on how to use the guidelines to support children's growth and learning.

Through the prioritization of goals and the analysis of data from these systems, Colorado has established the following goals for quality improvement to address high quality, accountable early childhood education facilities and workforce.

1. Increase the net recruitment of new early childhood professionals qualified to educate children birth to age five from 23,700 to 24,300.
2. Increase the number of individuals earning a Level 3 or Level 4 Early Childhood Professional Credential by about 15% from 1,606 to 1,847.
3. Increase the number of Child Development Associate scholarships issued by the Office of Early Childhood from 0 to 220 (scholarships issued).
4. Increase the number of Early Childhood Mental Health Specialists (Full-time Equivalent, FTE) which support children, families, and providers from 34 to 52 (Support FTE).
5. Implement a plan for improving data collection of the early childhood workforce through a modernized professional registry system that includes increasing the number of professionals enrolled in the system in order to identify workforce needs and gaps.

Ongoing data analysis and strategy development will inform future workforce goals.



## 7 Support Continuous Quality Improvement

Lead Agencies are required to use a portion of their CCDF program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the CCDF Plan, the ACF 118, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. In the annual expenditure report, the ACF-696, ACF will collect data on how much CCDF funding is spent on quality activities. This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a Quality Progress Report, the ACF 218, that will include a description of activities funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce (Addressed in Section 6)
- Improving on the development or implementation of early learning and developmental guidelines (Addressed in Section 6)
- Developing, implementing, or enhancing a tiered quality rating and improvement system or other systems of quality improvement for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring,

training, and health and safety (as described in section 5)

- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds, and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)). These activities can benefit infants and toddlers through school-age populations, and all categories of care. It is important that while Lead Agencies have the flexibility to define "high quality" and develop strategies and standards to support their definition, Lead Agencies should consider how that definition and those strategies for different provider types reflect and acknowledge their unique differences and how quality varies in different settings, including family child care and small care settings as well as child care centers.

This section covers the quality activities needs assessment, quality improvement activities, and indicators of progress for each of the activities undertaken in the state or territory.

## 7.1 Quality Activities Needs Assessment for Child Care Services

**7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).**

Colorado implements [Colorado Shines](#), a statewide Tiered Quality Rating and Improvement System (QRIS), to ensure children receive the highest quality programming in all licensed settings serving children prior to kindergarten entry. The Colorado Shines QRIS includes integrated technology systems, which provide an opportunity to develop and track data informed goals for quality improvement. [The Colorado Shines Professional Development and Information System](#) (Colorado Shines PDIS) and the Colorado Shines QRIS technology system are integrated to share data related to employee professional development and credentials which informs the progression and point accumulation for child care programs within the Workforce and Professional Development quality standard. The integration with the State Child Care Licensing System enables Colorado Shines to always have up-to-date program license data and basic program profile information. The data exchange between the Quality Improvement Grant Management System enables the program to see what funding is available, as well as the ability to apply for quality improvement grants. Finally, including child care resource and referral functionality within the [Colorado Shines](#) website enables referral specialists to easily help families search for programs that match their needs and criteria with ease and in turn provide a better experience for families and their children. The Colorado Department of Human Services, Office of Early Childhood utilizes data from the Colorado Shines technology system and other state databases that are linked to this system to both support and sustain increased program quality across the state and better evaluate the progress of both professionals and programs. Through the detailed and conscientious data collection efforts related to these components, data is used to assess and inform the presence of quality, as well as areas of need. Ultimately, data is utilized to ensure the quality investments that Colorado is able to make now, and in the future, are available to the highest number of programs and supports the attainment of high-quality levels for these programs.

The Department develops goals through a performance-based analysis strategy that allows every program to focus on and improve performance outcomes. Through this process, the Office of Early Childhood is able to make more informed, collaborative decisions to align

efforts and resources to affect positive change. In addition, there are a number of goals tracked through the [Governor's Dashboard](#), which provides a summary of how Colorado is progressing on the Governor's vision. Both allow for the tracking of goals and continuous quality improvement efforts through the collection of timely data; increasing transparency; conducting regular executive and cabinet meetings to assess the effectiveness of the strategies; and identifying new performance measures.

The Office of Early Childhood collects data for analytic purposes to identify positive trends and opportunities for improvement. When improvements are needed, the Office determines and implements appropriate strategies.

**7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. If applicable, include a direct URL/website link for any available evaluation or research related to the findings.**

Colorado includes four components that make up the overarching goals to improve the quality of child care services: [quality standards](#), improvement supports, quality incentives, and [support for implementation](#). Quality standards include child care licensing regulations and quality indicators outlined within the Colorado Shines Quality Rating and Improvement System (QRIS). Colorado Shines includes five standard areas that research has shown are related to program quality: Child Health; Family Partnerships; Leadership Management and Administration; Learning Environment; and, Workforce and Professional Development. In addition to accumulating the total number of points required for each rating Levels 3-5, programs must meet minimum levels of quality as measured by the appropriate Early Childhood Environment Rating Scale (ERS). To support quality improvement, Colorado Offers programs professional development and coaching to support best practices. Quality Incentives are offered statewide to support quality improvement and professional development. Finally, support for implementation addresses funding to support recruitment and engagement of programs, training and supervision for technical assistance staff, and data systems development, integration and maintenance. These goals were selected as priorities for the Colorado Department of Human Services, Office of Early Childhood in partnership with the Early Childhood Leadership Commission, Colorado's State Advisory Council.

## 7.2 Use of Quality Funds

### 7.2.1 Check the quality improvement activities in which the state/territory is investing

a. Supporting the training and professional development of the child care workforce as discussed in 6.2 (Related Section: 6.3). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

- "Cares Act" funds
- Preschool Development Grant funds

b. Developing, maintaining, or implementing early learning and developmental guidelines (Related Section: 6.4). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

c. Developing, implementing, or enhancing a tiered quality rating and improvement system (Related Section: 7.3). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

- "Cares Act" funds
- Preschool Development Grant funds

d. Improving the supply and quality of child care services for infants and toddlers (Related Section: 7.4). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

- "Cares Act" funds

e. Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7 (Related Section: 7.5). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

- "Cares Act" funds

f. Facilitating Compliance with State Standards (Related Section: 7.6). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

- "Cares Act" funds

g. Evaluating and assessing the quality and effectiveness of child care services within the state/territory (Related Section: 7.7). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

- "Cares Act" funds

- Preschool Development Grant funds

h. Accreditation Support (Related Section: 7.8). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

i. Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development (Related Section: 7.9). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

- "Cares Act" funds
- Preschool Development Grant funds

j. Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible (Related Section: 7.10). Check all that apply

i CCDF funds

ii. State general funds

Other funds. Describe:

### 7.3 Quality Rating and Improvement System (QRIS) or Another System of Quality Improvement

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

### 7.3.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?

- a. No, the state/territory has no plans for QRIS development. If no, skip to 7.4.1.
- b. No, but the state/territory is in the QRIS development phase. If no, skip to 7.4.1.
- c. Yes, the state/territory has a QRIS operating statewide or territory-wide.

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners, and provide a link, if available.

The Colorado Shines Quality Rating and Improvement System is administered statewide. The Colorado Department of Human Services secures contracts with a number of partners to support the implementation of this system, including: 1) Colorado Shines Rating Administrator; 2) Early Childhood Coaching Consultant; 3) Early Childhood Professional Development Team; 4) Colorado Shines Environmental Rating Scales (ERS) Inter-Rater Reliability Partner; 5) Child Care Licensing; and 6) Early Childhood Councils. The Department maintains a website that includes detailed information for Colorado Shines ( <http://www.coloradoshines.com>).

- d. Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available.

- e. Yes, the state/territory has another system of quality improvement.  
Describe the other system of quality improvement and provide a link, if available.

### 7.3.2 Indicate how providers participate in the state or territory QRIS or another system of quality improvement.

a. Are providers required to participate in the QRIS or another system of quality improvement? Check all that apply if response differs for different categories of care.



- Participation is voluntary
- Participation is partially mandatory. For example, participation is mandatory for providers serving children receiving a subsidy, participation is mandatory for all licensed providers or participation is mandatory for programs serving children birth to age 5 receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).
- Participation is required for all providers.

b. Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory QRIS or another system of quality improvement? Check all that apply.

- i. Licensed child care centers
- ii. Licensed family child care homes
- iii. License-exempt providers
- iv. Early Head Start programs
- v. Head Start programs
- vi. State Prekindergarten or preschool programs
- vii. Local district-supported Prekindergarten programs
- viii. Programs serving infants and toddlers
- ix. Programs serving school-age children
- x. Faith-based settings
- xi. Tribally operated programs
- xii. Other

Describe:

Although the response for 7.3.2 a indicates all programs are required to participate. This option was selected because it represented the best option based on Colorado's Requirements. To be more specific, required participation is only required in cases where a program is licensed and enrolls children prior to kindergarten entry. All Programs meeting these criteria are required to participate in the Colorado Shines Quality Rating and Improvement System. This does not, however, include relatives and/or licensed exempt providers.

c. Describe how the Lead Agency's QRIS, or other system for improving quality, considers how quality may look different in the different types of provider settings which participate in the QRIS or other system of quality improvement. For instance, does the system of quality improvement consider what quality looks like in a family child care home with mixed-age groups vs. child care centers with separate age groups? Or are standards related to quality environments flexible enough to define quality in home-based environments, as well as child care center environments?

The Colorado Shines QRIS standards include separate frameworks for licensed family child care homes and child care centers. The Environment Rating Scales are used during the observation process, where assessors take into consideration the age of children and licensed setting when selecting the specific scale.

### **7.3.3 Identify how the state or territory supports and assesses the quality of child care providers.**

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services or another system of quality improvement. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33).

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- No
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
  - a. Programs that meet state/territory PreK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between PreK programs and the quality improvement system) .
  - b. Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start

programs and the quality improvement system).

- c. Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
- d. Programs that meet all or part of state/territory school-age quality standards.
- e. Other.

Describe:

Programs have the opportunity to achieve a high-quality rating through an alternative pathway, which is accessible for programs that already have an accreditation, certification or is part of an approved school district. The Colorado Shines QRIS accepts the standards and requirements for the following accreditations, certifications and school districts as an alternative pathway to a high quality rating:

1. Accrediting Bodies

1. American Montessori Society (AMS) - Level 3
2. Association of Christian Schools International (ACSI) - Level 3
3. Cogna - Level 4
4. Council on Accreditation (COA) - Level 3
5. National Association for the Education of Young Children (NAEYC) - Level 4
6. National Association for Family Child Care (NAFCC) - Level 3
7. National Early Childhood Program Accreditation (NECPA) - Level 3

2. Office of Head Start Grantee and Delegate Programs - programs with a child care license and an OHS issued grant - Level 4

3. Approved School Districts:

1. Denver Public Schools - Level 4
2. Boulder Valley School District - Level 4
3. Douglas School District - Level 3
4. Jefferson School District - Level 3
5. Cherry Creek School District - Level 4

**7.3.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?**

No

Yes. If yes, check any links between the state/territory's quality standards and licensing requirements

- a. Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
- b. Embeds licensing into the QRIS
- c. State/territory license is a "rated" license
- d. Other.

**Describe:**

Colorado Shines is the system used for assessing, enhancing, and communicating the quality levels of licensed child care programs. This quality rating and improvement system (QRIS) provides a framework for rating all licensed child care programs serving children five years of age or younger using a common set of research-based standards, specifically to incentivize and support programs to maintain and increase quality over time. The Colorado Shines quality standards apply to all licensed child care centers, family child care homes, and district and charter-based preschool programs serving children prior to kindergarten entry.

Colorado Shines quality levels 1 and 2 are building blocks. The Office of Early Childhood, Division of Early Care and Learning, Child Care Licensing Administration Unit, is responsible for rating level 1 and level 2 programs within Colorado Shines. Programs that meet current child care licensing criteria will receive a level 1 quality rating. Level 1 demonstrates that a program maintains a permanent license. There are no requirements that programs be rated beyond the licensing requirements of a level 1. Level 2 demonstrates that a provider has taken additional steps toward building quality by completing a self-assessment related to quality indicators and meeting additional staff training requirements. The completion of these steps are verified by Licensing Specialists.

Programs that wish to gain a high-quality rating (levels 3-5) can voluntarily apply and are required to provide evidence to meet the level requirements. Program ratings of levels 3 - 5 are obtained through higher levels of points across the standards categories, as well as meeting all licensing requirements for levels 1 and 2. The traditional path for achieving a high quality rating involves an on-site assessment that evaluates program practice against the five research-based Colorado Shines quality standard areas: Workforce and Professional Development; Family Partnerships; Leadership, Management and Administration; Learning Environment; and Child Health. In addition to accumulating the total number of points required for high quality

level, programs must meet minimum levels of quality as measured by the appropriate Environment Rating Scale (ERS). High-quality ratings must be renewed every three years, but programs may opt to re-rate sooner in an attempt to attain a higher rating.

**7.3.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS or another system of quality improvement.**

No

Yes. If yes, check all that apply

a. If yes, indicate in the table below which categories of care receive this support.

i. One-time grants, awards, or bonuses

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

ii. Ongoing or periodic quality stipends

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

iii. Higher subsidy payments

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home

In-home (care in the child's own home)

iv. Training or technical assistance related to QRIS

Licensed center-based

License exempt center-based

Licensed family child care home

License- exempt family child care home

In-home (care in the child's own home)

v. Coaching/mentoring

Licensed center-based

License exempt center-based

Licensed family child care home

License- exempt family child care home

In-home (care in the child's own home)

vi. Scholarships, bonuses, or increased compensation for degrees/certificates

Licensed center-based

License exempt center-based

Licensed family child care home

License- exempt family child care home

In-home (care in the child's own home)

vii. Materials and supplies

Licensed center-based

License exempt center-based

Licensed family child care home

License- exempt family child care home

In-home (care in the child's own home)

viii. Priority access for other grants or programs

Licensed center-based

License exempt center-based

Licensed family child care home

License- exempt family child care home

In-home (care in the child's own home)

ix. Tax credits for providers

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

x. Tax credits for parents

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

xi. Payment of fees (e.g. licensing, accreditation)

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

b. Other:

N/A

**7.3.6 Describe the measurable indicators of progress relevant to subsection 7.3 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

Information from Colorado Shines technology system links to other state data systems to both support and sustain increased program quality across the state and better evaluate program outcomes. The enhanced system helps benchmark quality for consumers and broaden awareness of the components of quality. Colorado is tracking these data to

understand the impact of quality investments and to inform policy decisions for quality improvement investments. Data is used to ensure the quality investments that Colorado is able to make now, and in the future, are available to the highest number of programs and supporting the attainment of high-quality levels for these programs.

## 7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

**7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.**

- a. Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low- income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe:



- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- b. Establishing or expanding the operation of community-based, neighborhood-based, or provider networks comprised of home-based providers, or small centers focused on expanding the supply of infant and toddler care.

Describe:

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- c. Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

Expanding Quality in Infant Toddler Care (EQ) Initiative-approved Infant Toddler Specialists (EQ ITS) provide the Expanding Quality in Infant Toddler Care (EQIT) 48-hour core course of training. EQ ITS are required to maintain a Trainer Credential, allowing them to also provide additional courses of training specific to infant and toddler child care and development.

The Colorado Shines Professional Development Information System hosts eLearning opportunities for providers that address child development and best practices related to infant and toddler care.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home

- In-home care (care in the child's own home)
- d. Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant/toddler specialists.

Describe:

EQ Infant-toddler specialists provide ongoing coaching based on the content of Expanding Quality in Infant Toddler Care (EQIT) 48-hour core course of training and/or the content of approved Colorado Shines PDIS coursework , using the EQ RELATE coaching model. This strengths-based and caregiver driven coaching model supports caregivers to increase their responsive care skills, increase their reflective capacity, and apply their knowledge of infant and toddler care and development. Caregivers choose the content focus of each coaching visit. Infant Toddler specialists observe the caregiver and document positive child experiences and effective caregiver strategies. A short reflective conversation follows each observation visit and includes goal setting and review related to responsive infant toddler care strategies. Enhanced coaching can also be provided, focusing on back-and-forth interactions as collected using LENA early talk data.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

## 7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods

in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

**7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.**

- e. Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

Describe:

N/A

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- f. Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments.

Describe:

The specific standards applied through the various levels of Colorado Shines are based on research about program quality and positive child development outcomes for children prior to kindergarten entry, including infants and toddlers. Quality improvement funds are available to support opportunities identified by the program within a Quality Improvement Plan, with a majority of these efforts focused on the availability and access to quality infant and toddler care. Colorado Shines utilizes the Infant/Toddler Environment Rating Scale where appropriate. Additionally, programs have an option to earn points by voluntarily choosing to use the CLASS Assessment for Infant/Toddler.

- Licensed center-based
- License exempt center-based

- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- g. Developing infant and toddler components within the state/territory's child care licensing regulations.

Describe:

Colorado's Child Care Rules and Regulations include specific infant and toddler components. These rules address requirements related to the following:

1. Infant program staff
2. Toddler program staff
3. Infant and toddler programs affiliated with public school teen parent programs
4. Physical care and supervision for infant and toddler programs
5. Meals and snacks, feeding the infant
6. Child care equipment and materials
7. Play equipment and materials
8. Rest time equipment
9. Buildings and facilities for infant programs and toddler programs
10. Space requirements
11. Food preparation area for infant and toddler programs
12. Toilet facilities
13. Fire and safety requirements

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- h. Developing infant and toddler components within the early learning and developmental guidelines.

Describe:

The Colorado Early Learning and Development Guidelines addresses children birth to age 3 and describes the development of infants and toddlers during their first three years of life and provides suggestions and guidelines for parents and other caregivers. The Guidelines are broken into four age groups. The first age group, birth to four months, is presented as a narrative that describes the unique needs of newborns and how caregivers can support the early development of very young infants. The remaining three age groups - 4-8 months, 9-18 months, and 19-36 months - list

indicators and examples that describe what infants and toddlers may do that is typical of development at those ages. Recommended supports, provide ideas for what caregivers can do to support the development of infants and toddlers at each age group, and what environmental supports they may provide.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

## 7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

**7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.**

- i. Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development.

Describe:

Parents and families of young children receive consumer friendly information about programs that have been quality rated. The Colorado Shines website, [www.coloradoshines.com](http://www.coloradoshines.com), targets parents and families of young children to help them search for quality-rated providers for their young children and promotes the benefits of quality early care and education. This resource offers messages with easy-to-understand plain language, including defining what is meant by "quality" child care and education. Quality levels achieved by child care programs are posted on this website which contains a child care facility search for parents and the public. The website also provides parents and families with information to help them support their child's learning and development.

The Colorado Early Learning and Development Guidelines website ([www.earlylearningco.org](http://www.earlylearningco.org)), which provides developmentally appropriate information and resources for infants and toddlers in both English and Spanish.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- j. Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being.

Describe:

N/A

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- k. Coordinating with child care health consultants.

**Describe:**

Licensed child care centers are required through rule to consult with a child care health consultant at least once a month at the child care facility. The monthly consultation must be specific to the needs of the facility and include some of the following topics: training, delegation and supervision of medication, administration and special health procedures, health care, hygiene, disease prevention, equipment safety, nutrition, interaction between children and adult caregivers, and normal growth and development, including that for infants and toddlers.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- l. Coordinating with mental health consultants.

**Describe:**

Licensed Child Care Centers are required through rule to develop procedures on guidance, positive instruction, supporting positive behavior, discipline and consequences, including how the program will access an early childhood mental health consultant or other specialist as needed.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- m. Establishing systems to collect real time data on available (vacant) slots in ECE settings, by age of child, quality level, and location of program.

**Describe:**

Early Childhood Councils support local efforts to improve child care resource and referral activities. This includes conducting outreach to report real-time availability of child care slot openings through stronger resource and referral services and growing the licensed provider population, with an emphasis on infant and toddler care.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- n. Other.

Describe:

Competitive Community Innovation Grants are awarded to address systemic challenges for early care and learning providers across Colorado that have been worsened as a result of the economic, social, and health impacts of COVID-19. The Office of Early Childhood provides grants to CCDF-eligible providers and community based organizations to identify and implement transformational solutions to address, in part, increasing access for infant and toddler care.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

**7.4.2 Describe the measurable indicators of progress relevant to subsection 7.4 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures.**

The Colorado Department of Human Services analyzes reports of inspections to ensure compliance with child care rules and regulations and other state standards. These data will be analyzed to determine any trends relevant to noncompliance and will inform training and technical assistance resources. Analysis of these data will inform progress relevant to infant and toddler components within the Colorado Child Care Licensing Regulations, including the utilization of early childhood mental health consultants and child care health consultants.

A team of instructional designers and trainers within the Office of Early Childhood evaluates and confirms learning objectives through ongoing needs assessments for all training and



professional development activities. This team assesses and provides feedback regarding trainees acquisition of knowledge and skill at the completion of training and recommends additional self-development or training activities to promote skill development. This staff knows and engages in a variety of assessment methods before, during, and after training to measure the impact of training.

The Expanding Quality in Infant Toddler Care (EQ) Initiative collects and analyzes output and self-reported satisfaction and impact data regarding the Expanding Quality in Infant Toddler Care (EQIT) course. Administrative data collection includes the number of individuals who accessed EQ Infant Toddler Specialist services through an EQIT Course, and the number of hours of coaching with the EQ RELATE or other enhanced coaching and includes associated program information. These data are correlated with other assessment data including infant toddler specific QRIS data such as indicator-level ITERS assessments although there is very little overlap among programs participating in higher levels of quality and programs employing individuals who participate in EQ Infant Toddler Specialist-provided professional development. Satisfaction and impact assessments include self-reported increase in knowledge of child development, change in responsive caregiving practice, and sense of self-confidence. Self-confidence, or self-efficacy in caregiving is an emerging data point that is correlated with better outcomes for children. Caregivers are also asked whether EQ services supported them to stay in the field, and this data serves as a proxy for EQ Initiative impact on retention. Future expansion of the Colorado Shines technology systems will allow us to better understand the impact of EQ services on retention.

The Colorado Shines website includes consumer-friendly information about each rating level to help families understand the difference between each quality rating level. Colorado will continue to promote Colorado Shines and child care quality ratings and evaluate the impact of any formal marketing campaign, including website analytics and feedback from parents and the public regarding the readability of reports. Efforts to incorporate the Colorado Early Learning and Development Guidelines into Colorado Shines, training and professional development, assessment training, and communications to communities and families are ongoing.

Information from Colorado Shines technology system links to other state data systems to both support and sustain increased program quality across the state and better evaluate program outcomes. The enhanced system helps benchmark quality for consumers and

broaden awareness of the components of quality. Colorado is tracking these data to understand the impact of quality investments and to inform policy decisions for quality improvement investments. This includes coaching activities, consultative support (child care health consultants, mental health consultants, infant toddler specialists) , and other access quality improvement strategies for infants and toddlers.

## 7.5 Child Care Resource and Referral

A Lead Agency may expend funds to establish, expand, or maintain a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

### 7.5.1 What are the services provided by the local or regional child care and resource and referral agencies?

All child care resources and referral activities are secured through contract. Statewide, centralized call center supports the resource and referral activities for families. Referral specialists provide families with information on a full range of child care options in their local area or region, including enhanced referrals to families with unique needs, children with special health and behavioral concerns, and additional resources for families at risk to ensure families have the information they need to make informed choices regarding the services that best suit their needs. Specialists also work directly with families who receive child care subsidies to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality, as determined by the Colorado Shines Quality Rating and Improvement System.

To ensure efficient and effective delivery of child care information and resources to families and programs, Colorado utilizes a regional resource and referral approach that is

based on the network of Early Childhood Councils statewide. To support this effort, Early Childhood Councils:

1. Collect data and provide information on the coordination of services and supports available within the different local areas across the state to inform the local knowledge of the referral specialists supporting the statewide, centralized call center;
2. Recruit new licensed providers, particularly in areas of the state that have been identified as child care deserts through the implementation of the Emerging and Expanding Child Care Grant Program;
3. Collect data and provide information on the supply of and demand for child care services in local areas of the State by conducting frequent outreach and reporting on the availability of child care slot openings and growing of the licensed provider population, with an emphasis on infant and toddler care;
4. Work to develop partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in Colorado.
5. Provide technical assistance and resources to eligible child care programs, to ensure optimal awareness and engagement in statewide initiatives, such as the Colorado Shines Quality Rating and Improvement System, Professional Development Information System, and Colorado Child Care Assistance Program (CCCAP).
6. Coordinate their activities with the activities of the Colorado Department of Human Services, Office of Early Childhood and/or local agencies that implement Child Care And Development Fund activities.
7. Adhere to the requirements of the Colorado Child Care Disaster Plan.

The Colorado Department of Human Services coordinates the statewide network through the Office of Early Childhood, Division of Early Care and Learning.

[7.5.2 Describe the measurable indicators of progress relevant to subsection 7.5 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.](#)

Current measurable indicators of progress relevant to child care resource and referral activities include the following:

1. Ensure a minimum of 90% of statewide licensed child care facilities continue to provide care for children ages zero to five, from 3,738 to 3,364 facilities.
2. Ensure 90% of the facilities serving children age birth to five who receive child care sustainability grants continue to operate.
3. Increase family awareness on the full range of child care options in their local area or region, including enhanced referrals to families with unique needs, children with special health and behavioral concerns, and additional resources for families at risk

to ensure families have the information to make informed choices regarding the services that best suit their needs. During the last reporting period, Child Care Resource and Referral Agencies assisted 5,222 families in their search for child care (September 2020).

4. Retain a minimum of 80% of statewide licensed child care capacity from 236,839 to 189,471 total licensed capacity Statewide through post-COVID child care provider support strategies.
5. Ensure that a minimum of 472 of the 525 early child care facilities which received Emergency Child Care Collaborative funding continue to operate.

A measurable indicator for the Emerging and Expanding Child Care Grant Program has not been determined.

## 7.6 Facilitating Compliance With State Standards

7.6.1 What activities does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory health and safety requirements? These requirements may be related to inspections, monitoring, training, compliance with health and safety standards, and with state/territory licensing standards as outlined in Section 5.

Describe:

**7.6.1 What activities does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory health and safety requirements? These requirements may be related to inspections, monitoring, training, compliance with health and safety standards, and with state/territory licensing standards as outlined in Section 5.**

Describe:

The Colorado Department of Human Services leverages the Colorado Shines Professional Development Information System, which includes a learning management system, to publish self-paced e-learning modules. These modules address a variety of health and safety licensing standards. In addition, administrative guides are developed to accompany rules regulating child care facilities. The guides serve to clarify, and ensure the proper and consistent interpretation and implementation of, child care rules. The guide also provides the rationale behind rules and links to resources to help programs comply with the rules.

**7.6.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?**

No

Yes. If yes, which types of providers can access this financial assistance?

Licensed CCDF providers

Licensed non-CCDF providers

License-exempt CCDF providers

Other

Describe:

N/A

**7.6.3 Describe the measurable indicators of progress relevant to subsection 7.6 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

The Office of Early Childhood, Colorado Department of Human Services analyzes reports of inspections to ensure compliance with child care rules and regulations and other state standards. These data are analyzed to determine any trends relevant to noncompliance and will inform training and technical assistance resources. Colorado recently launched a technology system that allows analysis of data by rule. The Office of Early Childhood collects reports of inspection data and conducts an annual analysis to determine necessary adjustments for technical assistance and policy.

In addition to this ongoing analysis, the Child Care Licensing Unit, in partnership with the Governor's office will conduct a full review and analysis of state and local regulatory requirements and tax policies to determine the extent to which any create potential barriers to operating child care facilities.

## 7.7 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

### **7.7.1 Does the state/territory measure the quality and effectiveness of child care programs and services in both child care centers and family child care homes?**

No

Yes.

If yes, describe any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children.

To examine the key concepts included in the Colorado Shines quality constructs, Child Trends conducted a literature review. The goal of this review was to examine existing research evidence and professional standards to support the inclusion of the Colorado Shines quality categories, particularly as they pertain to the promotion of positive outcomes for children. The literature review demonstrated that the Colorado Shines quality categories are grounded in research. The evidence review demonstrates an empirical basis for the Colorado Shines quality categories and criteria. In some instances, the research demonstrates mixed findings or limited empirical evidence. These are topics (e.g., workforce qualifications, ratios, the most effective family engagement practices) in which the early care and education field continues to investigate the relationships between standards of quality and children's development and learning.

To examine the strategies used to measure the Colorado Shines quality constructs, Child Trends conducted a document review and interviews with key stakeholders who implement the rating process. The goal of this activity was to determine whether the strategies used to measure the quality indicators are rigorous and working as intended. An examination of the Colorado Shines measurement strategies also included an assessment of the inter-rater reliability procedures used for the classroom/program observation measure(s) and the rating process used by program verifiers who conduct document reviews and reviews of other sources of evidence that

comprise the quality rating. The Child Trends assessment determined that the rating process is clearly articulated for program verifiers and includes an inter-rater reliability process that will help ensure consistency across staff. The policies and procedures that guide the Colorado Shines rating process are clearly articulated and aligned with best practice, which can help to ensure consistency across rating specialists and assessors and the accuracy of rating determinations.

**7.7.2 Describe the measurable indicators of progress relevant to subsection 7.7 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures.**

Measurable indicators of the quality and effectiveness of child care programs and services in both child care centers and family child care homes are based on the Colorado Shines Quality Rating and Improvement System. These indicators are determined through the analysis of movement across rating levels, and within rating levels, over time (though this analysis will be limited to changes over the course of the three year cycles, unless a facility chooses to re-rate sooner). Colorado is also able to attach this movement to particular facilities, which allows for analysis of correlations between quality improvement efforts, and any corresponding movements in ratings over-time, as well as patterns in quality improvement by facility characteristics such as type, and geographic location. Together, these analyses support a better understanding of the impact of quality improvement efforts, and provide an opportunity to make adjustments as appropriate.

Current indicators of progress include:

1. Increasing the number and percentage of licensed child care programs in the top tiers of quality (Levels 3 - 5), which was 28.6% during the last reporting period (September 2020).
2. Increasing the number and percentage of children under the age of five participating in the Colorado Child Care Assistance Program in high quality child care programs (Levels 3 - 5), which was 65.6% during the last reporting period (September 2020).

## 7.8 Accreditation Support

### **7.8.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?**

- a. Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes. Is accreditation available for programs serving infants, toddlers, preschoolers and school-age children?

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

- b. Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

- c. Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

- d. Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide

- i. Focused on child care centers

Describe:

- ii. Focused on family child care homes

Describe:

- e. No, but the state/territory is in the in the development phase of supporting accreditation.



- i. Focused on child care centers

Describe:

- ii. Focused on family child care homes

Describe:

- f. No, the state/territory has no plans for supporting accreditation.

**7.8.2 Describe the measurable indicators of progress relevant to subsection 7.8 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

The Colorado Department of Human Services, Office of Early Childhood does not use funds to support child care providers in the voluntary pursuit of accreditation and has no plans for accreditation development.

## 7.9 Program Standards

**7.9.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for:**

**a. Infants and toddlers**

Through the incorporation of licensing into the Colorado Shines QRIS, technical assistance and marketing efforts, the Colorado Department of Human Services, Office of Early Childhood supports state and local efforts to participate in high-quality standards as defined by Colorado Shines for children prior to kindergarten entry, including infants and toddlers. The Colorado Shines team, in partnership with Early Childhood Councils, is focused on supporting programs to move to higher levels of quality, addressing barriers associated with the pursuit of high quality and best practices. This includes engagement and education support from Quality Improvement Navigators and Child Care Licensing Specialists. Credentialed Coaches support licensed programs to address continuous quality improvement activities based on the Colorado Shines framework.

#### b. Preschoolers

Through the incorporation of licensing into the Colorado Shines QRIS, technical assistance and marketing efforts, the Colorado Department of Human Services, Office of Early Childhood supports state and local efforts to participate in high-quality standards as defined by Colorado Shines for children prior to kindergarten entry, including preschoolers. The Colorado Shines team, in partnership with Early Childhood Councils, is focused on supporting programs to move to higher levels of quality, addressing barriers associated with the pursuit of high quality and best practices. This includes engagement and education support from Quality Improvement Navigators and Child Care Licensing Specialists. Credentialed Coaches support licensed programs to address continuous quality improvement strategies based on the Colorado Shines framework.

#### c. and/or School-age children.

School-age quality standards are defined within the Colorado Child Care Licensing rules. Clarification for these rules are defined through the administrative guides and quality standards are supported through professional development courses.

### **7.9.2 Describe the measurable indicators of progress relevant to subsection 7.9 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

Quality rating data from the Colorado Shines Technology System is utilized to assess progress in improving the quality of child care programs in these program standard areas. Analysis of the accumulation of scores in these areas, as well as circumstances where a program submitted documentation that was determined to be insufficient will inform training and technical assistance activities to ensure a strengthened approach in supporting programs to successfully incorporating high quality standards as defined by the Colorado Shines framework.

To determine progress for various quality indicators, such as quality level for licensed programs and credential level for professionals, each Early Childhood Council has access to a live dashboard within the Colorado Shines Technology System. These dashboards are

utilized by Early Childhood Council staff to determine impact of effort and progress and slippage overtime. Early Childhood Councils have found these real time data dashboards to be helpful, and are able to utilize data to understand the quality landscape for the communities they serve and inform practice.

Indicators of progress related to school-age children are evaluated by assessing compliance with the Colorado Child Care Licensing Requirements.

## 7.10 Other Quality Improvement Activities

**7.10.1 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities; and also describe the measurable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry, and the data on the extent to which the state or territory has met these measures. Describe:**

The Colorado Department of Human Services, Office of Early Childhood does not support any other activities to improve the quality of child care services.

## 8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and

processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

-- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF

-- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF

-- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities

-- Internal processes for conducting child care provider subsidy

## 8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

**8.1.1 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:**

- a. Verifying and processing billing records to ensure timely payments to providers

Describe:

The county departments of human services are considered sub-recipients for purposes of implementing and monitoring all aspects of the Colorado Child Care Assistance Program (CCCAP). The Division of Early Care and Learning is responsible for monitoring county expenditures and adherence to program rules and policies. Counties must complete County Plans, identifying individual policies related to allowable county-options and utilizing a standardized review process to ensure counties complete monthly reviews of attendance data. The Division of Early Care and Learning within the Colorado Department of Human Services (CDHS) approves these plans.

**b. Fiscal oversight of grants and contracts**

**Describe:**

In cases where the Office of Early Childhood contracts for services related to child care licensing and quality initiatives, the Office of Early Childhood conducts subrecipient monitoring. The Office of Early Childhood follows State of Colorado and Department of Human Services procurement rules and guidelines in developing and monitoring contracts. These guidelines include requirements and stipulations for different types of procurement options such as Requests for Proposals, Requests for Qualified Offerers, Sole Source, Inter Agency Agreements, Memoranda of Understanding, or Purchase of Service Agreements.

Oversight of a CCDF funded contract begins during the contract development process. The development and content of the appropriate procurement mechanism is determined by the Colorado Procurement Code and is approved by the Contracts Management Unit within the Lead Agency. State program staff work closely with the Contract Management Unit staff when developing all contracts or agreements. All subrecipients must certify that federal regulations and state guidelines will be followed. Contracts include statements of work exhibits that outline deliverables, key activities, performance indicators, performance metrics, and benchmarks and outline the frequency in which progress reports are submitted to the appropriate program staff at the Lead Agency. The Colorado Department of Human Services/Office of Early Childhood (OEC) Contracts Unit has a rigorous, multilevel budget review process for each procurement in which costs are reviewed for allowability before an agreement is executed. Post award, the OEC Finance Unit requires vendors to submit monthly invoices that include line item budget details which are reviewed for allowability by both Program and Fiscal staff.

**c. Tracking systems to ensure reasonable and allowable costs**

**Describe:**

The State's financial system, Colorado Operations Resource Engine (CORE), contains functionality to prevent obligation or expenditures of Federal funds outside of the period of availability. Additionally, the system's Chart of Account codes also help identify categories of unallowable expenditures.

d. Other

Describe:

The Colorado Office of the State Controller has adopted the "Standards for Internal Control in the Federal Government" (the "Green Book") as the standard for internal control for Federal Awards to State Agencies. State Agencies must follow the Green Book to maintain effective internal control related to administering federal grant funding.

**8.1.2 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:**

a. Conduct a risk assessment of policies and procedures

Describe:

The Colorado Department of Human Services conducts risk assessments on all subrecipient contracts and conducts monitoring based on the assessed level of risk for each contract. Monitoring may include review of programmatic performance and financial reports, audit review, on-site monitoring and desk audits.

The Colorado Department of Human Services conducts risk assessments on all counties responsible for administering the Colorado Child Care Assistance Program (CCCAP) as outlined in the CDHS Subrecipient Monitoring Procedures and tools as applicable. The information obtained in the risk assessment and overall risk is utilized by CCCAP to inform a county monitoring plan to outline the type and level of monitoring used by CCCAP monitor county performance and determine if additional monitoring is required. County monitoring plans are updated in coordination with internal control monitoring and/or as needed as defined by potential risk, agency changes that may impact the administration of CCCAP services, or program changes.

b. Establish checks and balances to ensure program integrity

Describe:

The Office of Early Childhood utilizes CHATS, the electronic system for determining eligibility and making payments, to ensure checks and balances by establishing security roles and system edits. Security access to CHATS is limited to the user's primary role and access is restricted to users that have not completed applicable

training. Security access is monitored regularly to ensure inactive users are terminated appropriately. Access for users with universal roles is reviewed and approved by the CCCAP Director based on the needs of the agency. The system is programmed with multiple edits and safeguards, including, but not limited to tracking and limiting payments for absent days and holidays, tracking and capping provider payments based on established policy, and automating provider rates to prevent incorrect rates from being entered and/or paid. System rules streamline the CCCAP application of many of the child care policies based on data entered by eligibility workers. The Office of Early Childhood also conducts internal testing of CHATS and ATS to ensure system activities that may result in noncompliance or errors are proactively identified and resolved.

[c. Use supervisory reviews to ensure accuracy in eligibility determination](#)

[Describe:](#)

The Office of Early Childhood has established a standardized statewide review process and review guidelines for supervisory and/or quality assurance case file reviews to ensure core eligibility criteria is reviewed, procedural errors are identified, and payments are accurate. These guidelines include assurances and expectations for review staff and a standard definition of errors to ensure consistency in the review process. CDHS conducts reviews of county case files and payment information for compliance with federal and state rules. In addition to state reviews, counties are required to conduct monthly random case file reviews and provider attendance records for compliance with federal and state rules. Program staff within the Division of Early Care and Learning work closely with counties to ensure the current rules are applied during the reviews and that the determination of errors is consistently applied. The Office of Early Childhood utilizes the findings to monitor county performance, identify the cause of top error trends and/or improper payments, and to provide targeted training and technical assistance.

[d. Other](#)

[Describe:](#)

The Office of Early Childhood collaborates with other subsidy programs to streamline verification requirements, simplify the application and re-determination processes, share information across programs, and align eligibility requirements when applicable.

**8.1.3 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)), including processes to train child care providers and staff of the Lead Agency and other agencies engaged in the administration of CCDF about program requirements and integrity.**

a. Check and describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply.

i. Issue policy change notices.

Describe:

ii. Issue policy manual.

Describe:

iii. Provide orientations.

Describe:

Counties have the option to conduct provider orientations on the child care subsidy program.

iv. Provide training.

Describe:

Licensing and Administration Unit conducts monthly training on CCDF requirements and implementation of policies with all licensing staff, including staff conducting CCDF services on the behalf of the Department as a contracted vendor. All contracted vendors are monitored as a sub-recipient. Contracted vendors are assigned a State CDHS Licensing Supervisor as a contract liaison. The contract liaison provides monthly training to the vendor on all licensing requirements as well as fiscal monitoring.

Providers enter into a Fiscal Agreement Contract to provide child care services to CCCAP children with local County Departments of Human Services, the majority of



provider training and technical assistance is provided at a local level based on the counties practices.

Training videos and resources are available to providers on the OEC website to provide information on the Attendance Tracking System (ATS) related to their requirements for accurate attendance tracking.

- v. Monitor and assess policy implementation on an ongoing basis.

Describe:

- vi. Meet regularly regarding the implementation of policies.

Describe:

The Child Care Licensing and Administration Unit conducts monthly training on CCDF requirements and implementation of policies with all licensing staff, including staff conducting CCDF services on the behalf of the Department as a contracted vendor. All contracted vendors are monitored as a sub-recipient. Contracted vendors are assigned a State CDHS Licensing Supervisor as a contract liaison. The contract liaison provides monthly training to the vendor on all licensing requirements as well as fiscal monitoring.

- vii. Other.

Describe:

The Colorado Child Care Assistance Program (CCCAP) Fiscal Agreement includes the general payment policies, rates, and any fees charged by the providers. The agreement also details provider rights and responsibilities and the dispute resolution process for fiscal agreement termination and payment dispute. In addition, some counties also include additional county payment policies that detail the county specific information, such as number of holidays/absences, registration, activity and transportation allowances, payment and manual claim information. Because Colorado is State supervised and county administered, it varies by county. To inform providers of the potential maximum reimbursement, each county uses the template within the fiscal agreement and fills in their county ceiling for each quality tier. These maximums are noticed to providers so that they are informed of what their private pay rates will be compared against. Once the provider's private

pay rates are received and viewed, they are compared to the county ceiling rates and the provider gets their rates or the county ceiling, whichever is less. The provider receives a copy of the executed fiscal agreement and a rate notification of their specific daily rate reimbursement per age category. Payroll run cycle calendar is also included which details the payroll dates for the year as well as general information about submitting manual claims for days not automatically reimbursed through the Colorado Department of Human Services Child Care Automated Tracking System (CHATS).

b. Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity (98.68 (a)(3)). Check all that apply:

i. Issue policy change notices.

Describe:

The Colorado Department of Human Services, Office of Early Childhood utilizes informational or operational memos to notify county department of human/social services of changes in subsidy administration requirements in addition to the rule promulgation process which includes extensive collaboration with counties that locally administer the subsidy program.

ii. Train on policy change notices.

Describe:

The Colorado Department of Human Services (CDHS), Office of Early Childhood provides ongoing training, coaching, and technical assistance to the 64 counties regarding local implementation and administration of the Colorado Child Care Assistance Program (CCCAP). Training offered may also be provided to CCDF contractors, child care providers, benefit recipients, and external entities as needed. Course content includes relevant federal law and regulations, state law and regulations, and Departmental Memos. The use of the attendance tracking system to monitor enrollment and attendance, training on Colorado Department of Human Services Child Care Automated Tracking system (CHATS), PEAK Universal Application, generating reports, and all other technology systems used to administer CCCAP is also provided to promote and support the local

implementation for this program.

Courses are offered online and face-to-face. Course content is regularly reviewed to ensure that it reflects current information regarding policy and procedure and effective adult learning theories. Review includes identification of key stakeholders across Colorado, including end users of the program, seeking input for collective feedback. The CDHS staff identify needs, prioritize, write and/or revise materials in order to keep training materials current.

The CDHS staff assess and provide feedback regarding trainees' acquisition of knowledge and skill at the completion of training and recommend additional self-development or training activities to promote skill development. A variety of assessment methods are conducted before, during, and after training to measure impact. The CDHS staff also systematically observe trends (e.g., case review error trends, consistent errors, help desk tickets, frequent questions, unmet program goals) to identify training needs.

[iii. Issue policy manuals.](#)

Describe:

[iv. Train on policy manual.](#)

Describe:

[v. Monitor and assess policy implementation on an ongoing basis.](#)

Describe:

Requirements are established through changes in the state Child Care Assistance Program (CCCAP) regulations. Upon promulgation of rules through the State Board of Human Services review and public hearings, the Office of Early Childhood conducts training for CCCAP staff of county departments of human services. Additionally, the Office of Early Childhood utilizes the data from state and county case reviews to monitor compliance as part of an ongoing system of monitoring counties in key eligibility, authorization and payment regulations, new regulations, and/or changes to policies. Information obtained from case reviews are used to identify findings related to common errors. These findings, along with error trends

identified from help desk tickets, frequent questions, unmet program goals, and/or findings from audits are used to inform training and technical assistance activities which help to inform improvement strategies pursued by the CDHS and the counties. The Office of Early Childhood also monitors participation in training that is required to accurately administer the program.

The Office of Early Childhood also participates in comprehensive rule reviews to assess the continuing need for, and the appropriateness and cost effectiveness of, its rules to determine if they should be continued in their current form, modified, or repealed as outlined in CRS 24-4-103.3.

CCCAP monitors participation in training that is required for counties to accurately administer the program and ensures at least one participant from each county attends and meets the expected competencies. A competency assessment will be incorporated in all training sessions that are deemed mandatory for required participants to provide assurances to CCCAP that they have demonstrated they have the competencies required to accurately administer the program.

[vi. Meet regularly regarding the implementation of policies.](#)

[Describe:](#)

CDHS conducts formal expeditious collaborative processes with counties to review, draft and recommend policies or rule changes that meet federal guidelines. The Office of Early Childhood conducts weekly internal meetings to review help desk tickets submitted by county staff for the Colorado Child Care Assistance Program (CCCAP) to ensure consistent interpretation and application of CCCAP regulations and procedures for state and county staff and to identify opportunities for additional technical assistance (specific to the user/county) or training updates at stakeholder meetings as appropriate. Meeting agendas, presentations, and resources are stored electronically and available to county users following the sessions. In addition, CHATS users may view the responses to CHATS tickets for guidance and can filter the information to facilitate their search. CCCAP also utilizes help desk tickets to determine if policy clarifications (via email communication or agency memo) and/or system or policy updates are needed.

vii. Other.

**Describe:**

The Office of Early Childhood provides counties and providers with the opportunity to discuss policy changes at the CCCAP Users Group, a monthly forum to share policy changes, clarify policy and or system changes, and gain input from county stakeholders. Counties are also encouraged to participate in the CHATS Change Management process to provide input on system changes.

**8.1.4 Describe the processes in place to regularly evaluate Lead Agency internal control activities (98.68 (a)(4)). Describe:**

The Office of Early Childhood utilizes numerous activities to evaluate internal control activities as outlined in 2 CFR 200.331(d), CRS 26-2-715, CRS 26-2-717, 9 CCR 2501-1, and 9 CCR 2503-9 including but not limited to scheduled monitoring reviews of county operations, reviews of audits and risk based reports to evaluate performance, monitoring CHATS user access, and evaluating client records and provider payments for timeliness and accuracy. The Child Care Assistance Program conducts county monitoring reviews with each county at a minimum of once every three years to evaluate the administration of CCCAP as outlined in the MOU. County monitoring reviews may be conducted more frequently based on concerns with county performance, significant changes to county leadership and/or staff, and/or information obtained via CDHS Risk Assessments. County monitoring includes reviews of county policies and procedures, performance reports, system access, fraud prevention and detection efforts, and program integrity activities. CDHS staff conducts reviews of client case files and provider records to ensure accuracy and alignment with CCCAP procedures and identifies opportunities for training and technical assistance based on interviews with county leadership, eligibility and provider staff, and county providers and/or clients. The findings of each review are summarized for the county and areas of concern identified by CDHS staff are clearly documented. Depending on the severity of the issue, counties may be expected to identify a plan to resolve the issue and/or identify training or technical support needed to resolve the issue. Timeframes for responses are dependent on the severity of the issue, level of effort involved in resolving the task, and potential support and technical assistance required by the county and CCCAP staff to review and/or approve policies and activities.

The Office of Early Childhood reviews the results of single audits to identify exceptions, opine on county findings, confirm the county's response aligns with CCCAP regulations and policies, and provide management decisions to be included in the resulting management decision letter. CDHS CCCAP staff also evaluates the findings to determine if additional monitoring, technical assistance, or follow up is necessary and to ensure follow up of prior year findings and/or concerns as outlined in 2 CFR 200.511 and 2 CFR 200.331(d)(2).

The Office of Early Childhood CCCAP staff monitor performance in these areas to determine if regular follow-up is required and provide support and technical assistance to include telephone calls, email updates, desk reviews, and/or site visits as necessary. Non-compliance and/or underperformance is addressed through monitoring plans, performance plans, and/or corrective action as outlined in the MOU and Volume I as outlined in 2 CFR 200.331(d), CRS 26-2-715, CRS 26-2-717, 9 CCR 2501-1, and 9 CCR 2503-9.

The Office of Early Childhood conducts regular reviews of policies and procedures with designated staff, regularly monitors CHATS users access to ensure inactive users are terminated, review and approve requests for new or updated access for universal users to ensure changes to CCCAP regulations and/or procedures do not conflict with system edits and controls, and limit access based on the business need. In addition, CCCAP monitors proposed and adopted legislation to identify potential risk, collaborates with other CDHS divisions and public assistance programs to review eligibility requirements and address program integrity concerns, reviews data shared from other programs to ensure the information is sufficient in meeting program objectives/goals, and conducts internal testing of CHATS and ATS to ensure system activities that may result in noncompliance or errors are proactively identified and resolved.

**8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may**

**not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.**

a. Check and describe all activities that the Lead Agency conducts, including the results of these activities, to **identify and prevent fraud or intentional program violations**. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations.

- i. Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe the activities and the results of these activities:

In order to confirm eligibility criteria, Colorado Child Care Assistance Program staff use interfaces with other programs, including Department of Labor, TANF and Child Support Services (ACSES), as needed. The information obtained from these systems provides verification of information used to confirm eligibility criteria and verify client information to include employment and wages, demographic information, information regarding the eligibility for and receipt of public assistance benefits, and child support expense and income details. The results of this activity mitigate the potential for fraud in the program by utilizing the information obtained from these sources to research potential allegations of fraud and to confirm or refute information gathered when determining eligibility and/or conducting investigations.

The Office of Early Childhood partnered with the other public assistance programs (Adult Financial, Colorado Works, and SNAP) to standardize the processes used by each program to investigate and track potential intentional program violations (IPV). These changes included standardized policies and requirements for administrative procedures, county responsibilities, client rights, and client noticing and provided a standardized foundation for the Office of Early Childhood to begin to utilize data to track results.

In SFY21, the Office of Early Childhood also standardized and automated the process for initiating and tracking potential IPV and fraud in CHATS, the statewide automated tracking system. These changes included the implementation of a statewide method for establishing and enforcing sanctions for clients convicted of an IPV or fraud and providing statewide data to identify the number of referrals,

investigations and convictions related to client IPV/fraud, record and track associated overpayments due to IPV/fraud and assist the Office of Early Childhood in evaluating the effectiveness of fraud prevention strategies. This functionality will be available to counties in SFY22 to allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

**ii. Run system reports that flag errors (include types).**

**Describe the activities and the results of these activities:**

The Office of Early Childhood regularly reviews reports from the Colorado Financial Management System (CFMS) and CHATS to monitor conflicts in attendance records. CDHS staff also review CHATS and ATS to monitor payments and additional care needs to the appropriate rates, and other potential high-risk areas. Counties are also expected to review risk-based reports and errors that impact eligibility and payment accuracy. Risk-based reports include but are not limited to timely processing, absence payments, provider rates, and case management activities. The review of these reports will result in correct provider payments and will reduce the exceptions identified on the risk-based reports, reduce and/or prevent duplicate payments, and ensure providers are paid in the right amount at the right time for the right child. Reviews of these reports also help counties to identify anomalies and target specific cases and provider files for further research.

The data gathered from these reports will allow the Office of Early Childhood to measure the frequency and severity of potential errors for each county, determine if counties are taking the appropriate steps in a timely manner, and quantify the number of IPV/fraud and associated overpayments that were identified by risk-based reports and allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

**iii. Review enrollment documents and attendance or billing records**

**Describe the activities and the results of these activities:**

Counties are required by rule to audit provider records monthly as outlined in 3.911 (III) 9 CCR 2503-9. These reviews are conducted using the statewide standardized review elements and review tools to ensure consistency and accuracy. Counties share the results of the provider reviews and applicable findings, identify the



actions they take to resolve the errors, and processes they put in place to prevent the errors from recurring. The reviews are also used to identify instances of potential fraud based on attendance or billing records for further research and follow-up by counties to ensure provider information and payments are accurate.

In SFY21, the Child Care Assistance Program incorporated monthly reviews of attendance and billing records in the monitoring of risk-based reports and worked with counties to resolve associated errors as part of the county monitoring process. The data gathered from these reports will measure the frequency and severity of potential errors for each county, determine if counties are taking the appropriate steps in a timely manner, and quantify the number of IPVs/fraud and associated overpayments identified by the review of attendance or billing records, and mitigate the potential for fraud in the program by ensuring the provider information and payments are accurate.

The data gathered from these reports will allow the Office of Early Childhood to measure the frequency and severity of potential errors for each county, determine if counties are taking the appropriate steps in a timely manner, and quantify the number of IPVs/fraud and associated overpayments that were identified by risk-based reports and allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

**iv. Conduct supervisory staff reviews or quality assurance reviews.**

**Describe the activities and the results of these activities:**

The Department utilizes three different levels of reviews to support this activity:

1. Monthly, random case file reviews are conducted at the county-level to ensure eligibility determinations and subsidy payments are accurate based on CCCAP regulations and policies. Counties share the results of the findings, identify the actions they take to resolve the errors, and processes they put in place to prevent the errors from recurring.
2. CDHS staff also conducts monthly reviews of client case files to ensure accuracy and alignment with CCCAP regulations. The findings of each review are summarized for the county and areas of concern identified by CDHS staff are clearly documented and followed up on by CCCAP staff to ensure the case under review is corrected and to prevent future errors.
3. Finally, as part of county monitoring reviews the Office of Early Childhood conducts supervisory reviews of eligibility determinations and compliance with

CCCAP regulations, child care authorizations, provider payments, and parent fees.

All of the reviews are conducted utilizing standardized definitions, review elements, review processes, and review tools to ensure consistency in reviews and accurately reflect errors and trends. The results from these reviews are compiled by the Colorado Child Care Assistance Program staff and are used to monitor county performance, identify error trends and opportunities for improvement, and develop strategies to rectify or prevent ongoing violations.

In SFY21, CCCAP automated the selection of cases for county-level case reviews and began formally tracking the results of county-level reviews to measure accuracy. The data gathered from these reviews will be used to determine accurate processing, identify the frequency and amounts of improper payments, measure county performance, and identify areas of concern (such as insufficient verification and case documentation) or incorrect payments to measure and improve performance and accuracy. The information gathered from these reports will also allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

[v. Audit provider records.](#)

[Describe the activities and the results of these activities:](#)

The Office of Early Childhood and counties conducts reviews of provider records through risk-based reports to evaluate attendance records and provider payments for accuracy. The Office of Early Childhood also conducts reviews of provider files as part of the county monitoring process to inform county performance monitoring and identify opportunities for improvement and technical assistance. In addition, Counties are required by rule to conduct reviews of provider records monthly as part of their required monitoring 3.911 (III) 9 CCR 2503-9.

In SFY21, CCCAP automated the selection of providers for county-level reviews and began formally tracking the results of county-level reviews to measure accurate processing for provider files. The data gathered from these reviews will be used to determine accurate processing, identify the frequency and amounts of improper payments, measure county performance and allow the Colorado Child Care Assistance Program to utilize the information obtained from the reviews to identify

areas of concern (such as insufficient verification and case documentation) or incorrect payments to be researched by counties for potential fraud or program violations. The results of these reviews are shared with the Office of Early Childhood and utilized to monitor county performance, identify statewide error trends and opportunities for improvement, and develop strategies to rectify or prevent ongoing violations. In addition, the information obtained from these reviews may be used in researching the provider file to determine if further research is necessary and/or by the county office to determine if potential fraud and/or program violations occurred, reducing the likelihood of fraud and/or decreasing improper payments. The information captured from these reviews will also allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

The Office of Early Childhood holds regular meetings with county staff to train on changes and updates to rules and policies regarding intentional and unintentional program violations. Training identified as mandatory to complete required tasks is identified for county users based on their role and responsibility. As a result, all users are expected to complete training prior to gaining access in CHATS, resulting in assurances that all users only have access to the system to complete their tasks. In addition, the Office of Early Childhood provides training and user guides for counties to conduct county reviews. This requirement enforces separation of duties and prevents internal and/or user fraud by limiting system access to functions the user is trained in and ensures staff are aware of expectations.

vii. Other

Describe the activities and the results of these activities:

8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may

not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

- i. Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration (PARIS)).

Describe the activities and the results of these activities:

In order to confirm eligibility criteria, Colorado Child Care Assistance Program staff use interfaces with other programs, including Department of Labor, TANF and Child Support Services (ACSES), as needed. The information obtained from these systems provides verification of information used to confirm eligibility criteria and verify client information to include employment and wages, demographic information, information regarding the eligibility for and receipt of public assistance benefits, and child support expense and income details. This practice mitigates the need for an additional inquiry and provides the CCCAP worker with reliable information to use in the determination of eligibility and payment calculation, reducing the likelihood of errors and/or unintentional program violations.

In SFY21, the Lead Agency automated the referral process to allow data sharing between TANF/Colorado Works recipients and CCCAP for clients receiving TANF Child Care assistance, allowing both programs the ability to share relevant eligibility related information. The data collected through these referrals will be used to measure accurate processing and analyze error trends to identify and resolve unintentional program violations and allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

- ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

The Office of Early Childhood regularly reviews reports from the Colorado Financial Management System (CFMS) and CHATS to monitor conflicts in attendance records. CDHS staff also review CHATS and ATS to monitor payments and additional care needs to the appropriate rates, and other potential high-risk areas. Counties are also expected to review risk-based reports and errors that impact

eligibility and payment accuracy. Risk-based reports include but are not limited to timely processing, absence payments, provider rates, and case management activities.

In SFY21, the Child Care Assistance Program developed risk-based reports that collect and analyze data from clients and child care providers to resolve associated errors as part of the county monitoring process. The data gathered from these reports will allow CCCAP to measure the frequency and severity of potential errors for each county, determine if counties are taking the appropriate steps in a timely manner, and measure overpayments identified by risk-based reports that were caused by unintentional program violations. CCCAP will analyze the data to identify and resolve error trends and measure accuracy. The review of these reports will result in correct provider payments and will reduce the exceptions identified on the risk-based reports, reduce and/or prevent duplicate payments, and ensure providers are paid in the right amount at the right time for the right child. Reviews of these reports also help counties to identify anomalies and target specific cases and provider files for further research. The information captured from these reports will also allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

**iii. Review enrollment documents and attendance or billing records**

**Describe the activities and the results of these activities:**

Counties are required by rule to audit provider records monthly as outlined in 3.911 (III) 9 CCR 2503-9. These reviews are conducted using the statewide standardized review elements and review tools to ensure consistency and accuracy. Counties share the results of the provider reviews and applicable findings, identify the actions they take to resolve the errors, and processes they put in place to prevent the errors from recurring. The results of this activity mitigate the potential for unintentional program violations and ensure the provider information and payments are accurate, resulting in fewer unintentional program violations.

In SFY21, the Child Care Assistance Program incorporated monthly reviews of attendance and billing records in the monitoring of risk-based reports and worked with counties to resolve associated errors as part of the county monitoring process.

The information gathered from these reports will allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

iv. Conduct supervisory staff reviews or quality assurance reviews.

Describe the activities and the results of these activities:

The Department utilizes three different levels of reviews to support this activity:

1. Monthly, random case file reviews are conducted at the county-level to ensure eligibility determinations and subsidy payments are accurate based on CCCAP regulations and policies. Counties share the results of the findings, identify the actions they take to resolve the errors, and processes they put in place to prevent the errors from recurring.
2. CDHS staff also conducts monthly reviews of client case files to ensure accuracy and alignment with CCCAP regulations. The findings of each review are summarized for the county and areas of concern identified by CDHS staff are clearly documented and followed up on by CCCAP staff to ensure the case under review is corrected and to prevent future errors.
3. Finally, as part of county monitoring reviews the Office of Early Childhood conducts supervisory reviews of eligibility determinations and compliance with CCCAP regulations, child care authorizations, provider payments, and parent fees.

All of the reviews are conducted utilizing standardized definitions, review elements, review processes, and review tools to ensure consistency in reviews and accurately reflect errors and trends. The results from these reviews are compiled by the Colorado Child Care Assistance Program staff and are used to monitor county performance, identify error trends and opportunities for improvement, and develop strategies to rectify or prevent ongoing violations.

In SFY21, CCCAP automated the selection of cases for county-level case reviews and began formally tracking the results of county-level reviews to measure accuracy. The data gathered from these reviews will be used to determine accurate processing, identify the frequency and amounts of improper payments, measure county performance, and identify areas of concern (such as insufficient verification and case documentation) or incorrect payments to measure and improve performance and accuracy. The information gathered from these reports will also allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

v. Audit provider records.

Describe the activities and the results of these activities:

The Office of Early Childhood and counties conducts reviews of provider records through risk-based reports to evaluate attendance records and provider payments for accuracy. The Office of Early Childhood also conducts reviews of provider files as part of the county monitoring process to inform county performance monitoring and identify opportunities for improvement and technical assistance. In addition, Counties are required by rule to conduct reviews of provider records monthly as part of their required monitoring 3.911 (III) 9 CCR 2503-9.

In SFY21, CCCAP automated the selection of providers for county-level reviews and began formally tracking the results of county-level reviews to measure accuracy. The data gathered from these reviews will be used to determine accurate processing, identify the frequency and amounts of improper payments, measure county performance and allow the Colorado Child Care Assistance Program to utilize the information obtained from the reviews to identify areas of concern (such as insufficient verification and case documentation) or incorrect payments to be researched by counties for potential unintentional program violations. The results of these reviews are shared with the Office of Early Childhood and utilized to monitor county performance, identify statewide error trends and opportunities for improvement, and develop strategies to rectify or prevent ongoing violations. In addition, the information obtained from these reviews may be used in researching the provider file to determine if further research is necessary by the county office to determine if unintentional program violations occurred, resulting in fewer unintentional program violations. The information captured from these reviews will also allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

The Office of Early Childhood holds regular meetings with county staff to train on changes and updates to rules and policies regarding intentional and unintentional program violations. Training identified as mandatory to complete required tasks is identified for county users based on their role and responsibility. As a result, all

users are expected to complete training prior to gaining access in CHATS, resulting in assurances that all users only have access to the system to complete their tasks. In addition, the Office of Early Childhood provides training and user guides for counties to conduct county reviews. This requirement enforces separation of duties and prevents internal and/or user fraud by limiting system access to functions the user is trained in and ensures staff are aware of expectations, ultimately reducing the number of unintentional program violations.

vii. Other

Describe the activities and the results of these activities:

8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

- i. Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration (PARIS)).

Describe the activities and the results of these activities:

In order to confirm eligibility criteria, Colorado Child Care Assistance Program staff use interfaces with other programs, including Department of Labor, TANF and Child Support Services (ACSES), as needed. The information obtained from these systems provides verification of information used to confirm eligibility criteria and verify client information to include employment and wages, demographic information, information regarding the eligibility for and receipt of public assistance benefits, and child support expense and income details. This practice mitigates the need for an additional inquiry and provides the CCCAP worker with reliable information to use in the determination of eligibility and payment calculation,



reducing the likelihood of errors and/or agency errors.

In SFY21, the Lead Agency automated the referral process to allow data sharing between TANF/Colorado Works recipients and CCCAP for clients receiving TANF Child Care assistance, allowing both programs the ability to share relevant eligibility related information. The data collected through these referrals will be used to measure accurate processing and analyze error trends to identify and resolve unintentional program violations and allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

ii. [Run system reports that flag errors \(include types\).](#)

[Describe the activities and the results of these activities:](#)

The Office of Early Childhood regularly reviews reports from the Colorado Financial Management System (CFMS) and CHATS to monitor conflicts in attendance records. CDHS staff also review CHATS and ATS to monitor payments and additional care needs to the appropriate rates, and other potential high-risk areas. Counties are also expected to review risk-based reports and errors that impact eligibility and payment accuracy. Risk-based reports include but are not limited to timely processing, absence payments, provider rates, and case management activities.

In SFY21, the Child Care Assistance Program developed risk-based reports that collect and analyze data from clients and child care providers to resolve associated errors as part of the county monitoring process. The data gathered from these reports will allow CCCAP to measure the frequency and severity of potential errors for each county, determine if counties are taking the appropriate steps in a timely manner, and measure overpayments identified by risk-based reports that were caused by unintentional program violations. CCCAP will analyze the data to identify and resolve error trends and measure accuracy. The review of these reports will result in correct provider payments and will reduce the exceptions identified on the risk-based reports, reduce and/or prevent duplicate payments, and ensure providers are paid in the right amount at the right time for the right child. Reviews of these reports also help counties to identify anomalies and target specific cases and provider files for further research. The information captured from these reports will also allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

[iii. Review enrollment documents and attendance or billing records](#)

[Describe the activities and the results of these activities:](#)

Counties are required by rule to audit provider records monthly as outlined in 3.911 (III) 9 CCR 2503-9. These reviews are conducted using the statewide standardized review elements and review tools to ensure consistency and accuracy. Counties share the results of the provider reviews and applicable findings, identify the actions they take to resolve the errors, and processes they put in place to prevent the errors from recurring. The reviews are also used to identify instances of improper payments based on attendance or billing records for further research and follow-up by counties to ensure provider information and payments are accurate.

In SFY21, the Child Care Assistance Program incorporated monthly reviews of attendance and billing records in the monitoring of risk-based reports and worked with counties to resolve associated errors as part of the county monitoring process. The data gathered from these reports will measure the frequency and severity of potential errors for each county, determine if counties are taking the appropriate steps in a timely manner, and measure overpayments identified by attendance or billing records that were caused by agency errors. CCCAP will analyze the data to identify and resolve error trends and measure accuracy.

[iv. Conduct supervisory staff reviews or quality assurance reviews.](#)

[Describe the activities and the results of these activities:](#)

The Department utilizes three different levels of reviews to support this activity:

1. Monthly, random case file reviews are conducted at the county-level to ensure eligibility determinations and subsidy payments are accurate based on CCCAP regulations and policies. Counties share the results of the findings, identify the actions they take to resolve the errors, and processes they put in place to prevent the errors from recurring.
2. CDHS staff also conducts monthly reviews of client case files to ensure accuracy and alignment with CCCAP regulations. The findings of each review are summarized for the county and areas of concern identified by CDHS staff are clearly documented and followed up on by CCCAP staff to ensure the case under review is corrected and to prevent future errors.
3. Finally, as part of county monitoring reviews the Office of Early Childhood conducts supervisory reviews of eligibility determinations and compliance with CCCAP regulations, child care authorizations, provider payments, and parent

fees.

All of the reviews are conducted utilizing standardized definitions, review elements, review processes, and review tools to ensure consistency in reviews and accurately reflect errors and trends.

In SFY21, CCCAP automated the selection of cases for county-level case reviews and began formally tracking the results of county-level reviews to measure accuracy. The data gathered from these reviews will be used to determine accurate processing, identify the frequency and amounts of improper payments, measure county performance, and identify areas of concern (such as insufficient verification and case documentation) or incorrect payments to measure and improve performance and accuracy. The information gathered from these reports will also allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

[v. Audit provider records.](#)

[Describe the activities and the results of these activities:](#)

The Office of Early Childhood and counties conducts reviews of provider records through risk-based reports to evaluate attendance records and provider payments for accuracy. The Office of Early Childhood also conducts reviews of provider files as part of the county monitoring process to inform county performance monitoring and identify opportunities for improvement and technical assistance. In addition, Counties are required by rule to conduct reviews of provider records monthly as part of their required monitoring 3.911 (III) 9 CCR 2503-9.

In SFY21, CCCAP automated the selection of providers for county-level reviews and began formally tracking the results of county-level reviews to measure accuracy. The data gathered from these reviews will be used to determine accurate processing, identify the frequency and amounts of improper payments, measure county performance and allow the Colorado Child Care Assistance Program to utilize the information obtained from the reviews to identify areas of concern (such as insufficient verification and case documentation) or incorrect payments to be researched by counties for potential agency errors. The results of these reviews are shared with the Office of Early Childhood and utilized to monitor county performance, identify statewide error trends and opportunities for improvement, and

develop strategies to rectify or prevent ongoing violations. The information captured from these reviews will also allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives.

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

The Office of Early Childhood holds regular meetings with county staff to train on changes and updates to rules and policies regarding intentional and unintentional program violations. Training identified as mandatory to complete required tasks is identified for county users based on their role and responsibility. As a result, all users are expected to complete training prior to gaining access in CHATS, resulting in assurances that all users only have access to the system to complete their tasks. In addition, the Office of Early Childhood provides training and user guides for counties to conduct county reviews resulting in better quality reviews and better data to inform future actions, ultimately reducing the number of agency errors.

vii. Other

Describe the activities and the results of these activities:

**8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.**

a. Identify what agency is responsible for pursuing fraud and overpayments (e.g. State Office of the Inspector General, State Attorney).

In Colorado, the child care subsidy program is county administered and state supervised so it is up to each county department of human/social services that administers CCCAP to pursue fraud and overpayments.

8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

b. Check and describe all activities, including the results of such activity, that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the

description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Activities can include, but are not limited to, the following:

- i. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

There is no threshold for recovery for intentional program violations/fraud.

All adult caretakers or teen parents that apply for the Colorado Child Care Assistance Program (CCCAP) are provided with a written notice of the penalties for an Intentional Program Violation (IPV) on the child care application and statement of responsibility. Providers are notified of the penalties for fraud in the Fiscal Agreement, including but not limited to termination of the fiscal agreement and/or legal action.

Counties are required to investigate any adult caretaker(s) or teen parent(s) who has applied for or received CCCAP and/or CCCAP providers whenever there is an allegation or reason to believe that an individual has committed fraud or an IPV. For potential client IPV or fraud following the investigation, counties are required to act on cases where documented evidence exists to show an individual has committed one or more acts of IPV by either obtaining a "Waiver of Intentional Program Violation Hearing"; or, conducting an administrative disqualification hearing; or, referring the case for civil or criminal action in an appropriate court of jurisdiction. An IPV/ADH shall be requested whenever facts of the case do not warrant civil or criminal prosecution, where documentary evidence exists to show an individual has committed one or more acts of IPV, and the individual has failed to sign and return the Waiver of IPV form. If an individual is found to have committed an intentional program violation through the processes identified above, the primary adult caretaker or teen parent is provided with a notice of the period of disqualification and shall affect any household to which the adult caretaker(s) or teen parent(s) is a member. The penalty shall be in effect for:

1. Twelve (12) months upon the first occasion of any such offense;
2. Twenty-four (24) months upon the second occasion of any such offense and,
3. Permanently upon the third such offense.

The county must also calculate the or its designee notifies the household or child care provider(s) of the amount due and the reason for the recovery using the prior notice rules; and the county or its designee enters the amount of the overpayment and other specific factors of the situation in the case record, including the calculation used to

determine the recovery amount. For adult caretakers or teen parents that commit fraud or an intentional program violation, the county sets up a recovery payment plan. Counties are ultimately responsible for managing and maintaining the agreements with providers; however, if fraud is suspected, counties are encouraged to notify the Office of Early Childhood of the allegation to assist in coordinating activities across counties that have an active fiscal agreement with the provider, assist in system related activities (such as mass noticing to impacted families and/or resetting of PINs as applicable), gathering reports, and ensuring follow-up on confirmed allegations. Counties are required to investigate allegations of potential provider fraud and act where documented evidence exists to show the provider committed one or more acts of fraud. Action includes notifying other counties with active fiscal agreements with the provider of the fraud, sharing relevant investigation information with other counties that have an active fiscal agreement with the provider, establishing recoveries associated to the fraudulent payments, and determining if the circumstances warrant termination of the fiscal agreement or other action as appropriate, including but not limited to pursuing legal action. For providers, the county departments of human services may recover through repayment plans.

In SFY21, the Office of Early Childhood standardized and automated the process for initiating and tracking potential IPV and fraud in CHATS, the statewide automated tracking system. These changes included the implementation of a statewide method for establishing and enforcing sanctions for clients convicted of an IPV or fraud and providing statewide data to identify the number of referrals, investigations and convictions related to client IPV/fraud, record and track associated overpayments due to IPV/fraud and assist the Office of Early Childhood in evaluating the effectiveness of fraud prevention strategies. This functionality will be available to counties in SFY22 to allow the Office of Early Childhood to begin capturing data to track and monitor the results of these initiatives. CCCAP will utilize the data collected in CHATS to develop reports to track the results of these activities including but not limited to identifying the total dollar amount of client and provider overpayments, the cause of each overpayment (IPV/fraud, unintentional program violations, agency error), and the amount collected annually by counties

- ii. [Coordinate with and refer to the other state/territory agencies \(e.g., state/territory collection agency, law enforcement agency\).](#)

[Describe the activities and the results of these activities:](#)

When the counties or their designee(s) determine that they have paid or are about to pay for child care as a result of a suspected criminal act, the facts used in the determination shall be reviewed with the counties' legal advisor, investigatory unit and/or a representative from the District Attorney's office. If the available evidence supports suspected criminal acts, the case shall be referred to the District Attorney. All Referrals to the District Attorney shall be made in writing and shall include the amount of assistance fraudulently received by the adult caretaker, teen parent, or child care provider.

In SFY21, CCCAP partnered with the other public assistance programs (Adult Financial, Colorado Works, and SNAP) to standardize the processes used by each program to investigate and track potential intentional program violations (IPV). These changes included standardized policies and requirements related to administrative procedures, county responsibilities, client rights, and client noticing and provided a standardized foundation for the Lead Agency to begin tracking results. CCCAP also standardized and automated the process for initiating and tracking potential IPV and fraud in CHATS, the statewide automated tracking system. These changes included the implementation of a statewide method for establishing and enforcing sanctions for clients convicted of an IPV or fraud and providing statewide data to identify the number of referrals, investigations and convictions related to client IPV/fraud, record and track associated overpayments due to IPV/fraud and assist the Office of Early Childhood in evaluating the effectiveness of fraud prevention initiatives.

In SFY21, CCCAP also initiated changes to the CHATS system to allow for the recovery of qualifying client and provider overpayments through state tax intercepts utilizing the Colorado Department of Revenue state tax intercept file. These changes will allow counties to automatically recover outstanding overpayments that have not been successfully recovered through other means. This functionality will be available to counties in SFY22 to allow CCCAP to begin capturing data to track and monitor the results of these initiatives.

 [iii. Recover through repayment plans.](#)

[Describe the activities and the results of these activities:](#)

When the counties or their designee have determined that an adult caretaker(s) or

teen parent(s) has received public assistance for which he or she was not eligible due to an increase in household income, that causes the household's income exceeds eighty-five percent (85%) of the State median income, or a change in the qualifying eligible activity that was not reported within four weeks of its occurrence; or a childcare provider has received child care payments for which they were not eligible, the county, or its designee(s), determines if the overpayment is to be recovered.

The county or its designee determines whether there was willful misrepresentation and/or withholding of information and considers or rules out possible fraud; the county or its designee determines the amount of overpayment; the county or its designee notifies the household or child care provider(s) of the amount due and the reason for the recovery using the prior notice rules; and the county or its designee enters the amount of the overpayment and other specific factors of the situation in the case record, including the calculation used to determine the recovery amount. For providers, the county departments of human services may recover through repayment plans.

For adult caretakers or teen parents that commit fraud or an intentional program violation, the county sets up a recovery payment plan that requires over-the-counter payments.

[iv. Reduce payments in subsequent months.](#)

[Describe the activities and the results of these activities:](#)

For child care providers, the county departments of human services may recover funds by reducing payments in subsequent months.

CCCAP will utilize the data collected in CHATS to develop reports to track the results of these activities including but not limited to identifying the total dollar amount of client and provider overpayments, the cause of each overpayment (IPV/fraud, unintentional program violations, agency error), and the amount collected annually by counties through reduced payments. The Office of Early Childhood will utilize this information to begin capturing data to track and monitor the results of these initiatives.



v. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities:

Counties may pursue tax intercepts on overpayments. The taxpayer is entitled to object to the offset intercept) by filing a request for a county dispute resolution conference or state hearing within thirty (30) calendar-days from the date that the pre-offset notice is mailed, faxed, emailed, sent via other electronic systems, or hand-delivered to the taxpayer.

In SFY21, CCCAP initiated changes to the CHATS system to allow for the recovery of qualifying client and provider overpayments through state tax intercepts utilizing the Colorado Department of Revenue state tax intercept file. These changes will allow counties to automatically recover outstanding overpayments that have not been successfully recovered through other means.

CCCAP will utilize the data collected in CHATS to develop reports to track the results of the tax interface changes including but not limited to identifying the total dollar amount of client and provider overpayments, the cause of each overpayment (IPV/fraud, unintentional program violations, agency error), and the amount collected annually by counties through state tax intercepts. This functionality will be available to counties in SFY22 to allow CCCAP to begin capturing data to track and monitor the results of these initiatives.

vi. Recover through other means.

Describe the activities and the results of these activities:

Counties must pursue all legal remedies available to the county in order to recover the overpayment. Legal remedies include, but are not limited to:

- a. Judgments;
- b. Garnishments;
- c. Claims on estates; and,
- d. The state income tax refund intercept process.

CCCAP will utilize the data collected in CHATS to develop reports to track the results of recoveries including but not limited to identifying the total dollar amount of client and provider overpayments, the cause of each overpayment (IPV/fraud, unintentional program violations, agency error), the remedy used to recover the overpayment, and the amount collected annually by counties. Data from these reports will be used

by the Office of Early Childhood to monitor payments and evaluate the effectiveness of collection activities to address concerns and provide training and technical assistance. The information gathered from these reports will allow CCCAP to begin capturing data to track and monitor the results of these initiatives.

- vii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

Counties are responsible for establishing their own structure to address investigation and collection of improper payments. This varies county to county.

- viii. Other

Describe the activities and the results of these activities:

8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

c. Check and describe any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- i. N/A. the Lead Agency does not recover misspent funds due to unintentional program violations.
- ii. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

The threshold for recovery is \$50.00. Counties or their designee shall document the facts and situation that produced the overpayment and retain this documentation until the overpayment is paid in full or for three years plus the current year, whichever is longer; determine what benefits the household was eligible for and recover benefits for which the household was found to be ineligible, except in the case of willful misrepresentation or withholding of information; determine the payments for which the child care provider was not eligible and recover those payments, and initiate timely written notice allowing for the fifteen(15) calendar day noticing period. Such notice shall include a complete explanation, including applicable rules, concerning the

overpayment, recovery sought and appeal rights. The county shall then take action to recover following the right of appeal and fair hearing process.

For providers, the county departments of human services may recover through repayment plans. For adult caretakers or teen parents that have an unintentional program violation, the county sets up a recovery payment plan that requires over-the-counter payments. Exception from recovery includes:

1. The household who is without fault in the creation of the overpayment; and,
2. The household who has reported any increase in income or change in resources or other circumstances affecting the household's eligibility within the timely reporting requirements for the program.

iii. [Coordinate with and refer to the other state/territory agencies \(e.g., state/territory collection agency, law enforcement agency\).](#)

[Describe the activities and the results of these activities:](#)

iv. [Recover through repayment plans.](#)

[Describe the activities and the results of these activities:](#)

When the counties or their designee have determined that an adult caretaker(s) or teen parent(s) has received public assistance for which they were not eligible due to an increase in household income, that causes the household's income exceeds eighty-five percent (85%) of the State median income, or a change in the qualifying eligible activity that was not reported within four weeks of its occurrence; or a childcare provider has received child care payments for which they were not eligible, the county, or its designee(s), determines if the overpayment is to be recovered.

The county or its designee determines whether there was willful misrepresentation and/or withholding of information and considers or rules out possible fraud;

Counties or their designee shall document the facts and situation that produced the overpayment and retain this documentation until the overpayment is paid in full or for three years plus the current year, whichever is longer; determine what benefits the household was eligible for and recover benefits for which the household was found to be ineligible, except in the case of willful misrepresentation or withholding of information; determine the payments for which the child care provider was not eligible and recover those payments, and initiate timely written notice allowing for the fifteen(15) calendar day noticing period. Such notice shall include a complete explanation, including applicable rules, concerning the overpayment, recovery sought

and appeal rights.

Counties are also required to take action to recover following the right of appeal and fair hearing process. For providers, the county departments of human services may recover through repayment plans.

For adult caretakers or teen parents that have an unintentional program violation, the county sets up a recovery payment plan that requires over-the-counter payments.

Exception from recovery includes:

- 1.The household who is without fault in the creation of the overpayment; and,
- 2.The household who has reported any increase in income or change in resources or other circumstances affecting the household's eligibility within the timely reporting requirements for the program.

Counties are expected to utilize reports developed by CCCAP to research potential recoveries and monitor repayment records. Counties research variances in client and provider payments records to determine if an improper payment exists and, if the variance results in a recovery, ensure the recovery is initiated timely and accurately. Counties receive reports of recoveries with repayment plans to analyze and monitor for accuracy and tracking. CCCAP will utilize the data collected in CHATS to develop reports to track the results of these activities including but not limited to identifying the total dollar amount of client and provider overpayments, the cause of each overpayment (IPV/fraud, unintentional program violations, agency error), and the amount collected annually by counties.

CCCAP staff also reviews these reports and monitors overpayment records to ensure counties address the reports and have incorporated the tracking and monitoring of recoveries as an indicator of county performance. The information gathered from these reports will allow CCCAP to begin capturing data to track and monitor the results of these initiatives.

[v. Reduce payments in subsequent months.](#)

[Describe the activities and the results of these activities:](#)

For providers, the county departments of human services may recover funds by reducing payments in subsequent months.

CCCAP will utilize the data collected in CHATS to develop reports to track the results of these activities including but not limited to identifying the total dollar amount of client

and provider overpayments, the cause of each overpayment (IPV/fraud, unintentional program violations, agency error), and the amount collected annually by counties through reduced payments. The information gathered from these reports will allow CCCAP to begin capturing data to track and monitor the results of these initiatives

[vi. Recover through state/territory tax intercepts.](#)

[Describe the activities and the results of these activities:](#)

Counties may pursue tax intercepts on overpayments. The taxpayer is entitled to object to the offset intercept) by filing a request for a county dispute resolution conference or state hearing within thirty (30) calendar-days from the date that the pre-offset notice is mailed, faxed, emailed, sent via other electronic systems, or hand-delivered to the taxpayer.

In SFY21, CCCAP initiated changes to the CHATS system to allow for the recovery of qualifying client and provider overpayments through state tax intercepts utilizing the Colorado Department of Revenue state tax intercept file. These changes will allow counties to automatically recover outstanding overpayments that have not been successfully recovered through other means. This functionality will be available to counties in SFY22 to allow CCCAP to begin capturing data to track and monitor the results of these initiatives.

CCCAP will utilize the data collected in CHATS to develop reports to track the results of the tax interface changes including but not limited to identifying the total dollar amount of client and provider overpayments, the cause of each overpayment (IPV/fraud, unintentional program violations, agency error), and the amount collected annually by counties through state tax intercepts.

[vii. Recover through other means.](#)

[Describe the activities and the results of these activities:](#)

Counties must pursue all legal remedies available to the county in order to recover the overpayment. Legal remedies include, but are not limited to:

- a. Judgments;
- b. Garnishments;
- c. Claims on estates; and,

d. The state income tax refund intercept process.

CCCAP will utilize the data collected in CHATS to develop reports to track the results of recoveries including but not limited to identifying the total dollar amount of client and provider overpayments, the cause of each overpayment (IPV/fraud, unintentional program violations, agency error), the remedy used to recover the overpayment, and the amount collected annually by counties. Data from these reports will be used by the Office of Early Childhood to monitor payments and evaluate the effectiveness of collection activities to address concerns and provide training and technical assistance. The information gathered from these reports will allow CCCAP to begin capturing data to track and monitor the results of these initiatives.

- viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

Counties are responsible for establishing their own structure to address investigation and collection of improper payments. This varies county to county.

- ix. Other

Describe the activities and the results of these activities:

8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

d. Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

- i. N/A. the Lead Agency does not recover misspent funds due to agency errors.

- ii. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

- iii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

- iv. Recover through repayment plans.

Describe the activities and the results of these activities:

- v. Reduce payments in subsequent months.

Describe the activities and the results of these activities:

- vi. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities:

- vii. Recover through other means.

Describe the activities and the results of these activities:

- viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

- ix. Other

Describe the activities and the results of these activities:

**8.1.7 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:**

- a. Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe the activities and the results of these activities:

All adult caretakers or teen parents that apply for the Colorado Child Care Assistance Program (CCCAP) are provided with a written notice of the penalties for an Intentional Program Violation (IPV) on the child care application and statement of responsibility. An IPV is an intentional act committed by an adult caretaker(s) or teen

parent(s), for the purpose of establishing or maintaining the Colorado Child Care Assistance Program (CCCAP) household's eligibility to receive benefits for which they were not eligible. An adult caretaker or teen parent commits an IPV when he or she makes a false or misleading statement or omission in any application or communication, with knowledge of its false or misleading nature, for the purpose of establishing or maintaining the household's eligibility to receive benefits.

Counties are required to conduct an investigation of any adult caretaker(s) or teenparent(s) who has applied for or received CCCAP whenever there is an allegation or reason to believe that an individual has committed an IPV as described below.

1. Following investigation, action shall be taken on cases where documented evidence exists to show an individual has committed one or more acts of IPV. Action shall be taken through:

- a. Obtaining a "Waiver of Intentional Program Violation Hearing"; or,
- b. Conducting an administrative disqualification hearing; or,
- c. Referring case for civil or criminal action in an appropriate court of jurisdiction.

Overpayment collection activities shall be initiated immediately in all cases even if administrative disqualification procedures or referral for prosecution is not initiated.

Adult caretakers and teen parents have the right to a county dispute resolution conference or a state level Administrative Disqualification Hearing with the Administrative Law Court as long as it is not being referred for prosecution on a civil or criminal action in the appropriate state or federal court.

If an individual is found to have committed an IPV, the disqualification penalty shall be in effect for:

1. Twelve (12) months upon the first occasion of any such offense;
2. Twenty-four (24) months upon the second occasion of any such offense and,
3. Permanently upon the third such offense.

In SFY21, CCCAP partnered with the other public assistance programs (Adult Financial, Colorado Works, and SNAP) to standardize the processes used by each program to investigate and track potential intentional program violations (IPV). These changes included standardized policies and requirements related to administrative procedures,



county responsibilities, client rights, and client noticing and provided a standardized foundation for the Lead Agency to begin tracking results. CCCAP also standardized and automated the process for initiating and tracking potential IPV and fraud in CHATS, the statewide automated tracking system. These changes included the implementation of a statewide method for establishing and enforcing sanctions for clients convicted of an IPV or fraud and providing statewide data to identify the number of referrals, investigations and convictions related to client IPV/fraud, record and track associated overpayments due to IPV/fraud and assist the Office of Early Childhood in evaluating the effectiveness of fraud prevention initiatives.

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

Describe the activities and the results of these activities:

Counties may terminate a fiscal agreement with a child care provider for suspected or verified program violations. Child care providers shall be informed in writing in advance of the termination and of their right to an informal county dispute resolution conference if a fiscal agreement is terminated. This action is taken at a local level and there is no data available on this currently to show the results of this activity.

c. Prosecute criminally.

Describe the activities and the results of these activities:

When the counties or their designee(s) determine that they have paid or are about to pay for child care as a result of a suspected criminal act, the facts used in the determination shall be reviewed with the counties' legal advisor, investigatory unit and/or representative from the District Attorney's office. If the available evidence supports suspected criminal acts, the case shall be referred to the District Attorney. All referrals to the District Attorney shall be made in writing and shall include the amount of assistance fraudulently received by the adult caretaker, teen parent, or child care provider. This action is taken at a local level and there is no data available on this currently to show the results of this activity.

d. Other.

Describe the activities and the results of these activities:

## Appendix A: MRS, Alternative Methodology and Narrow Cost Analysis Waiver Request Form

Lead Agencies may apply for a temporary waiver for the Market Rate Survey or ACF pre-approved alternative methodology and/or the narrow cost analysis in. These waivers will be considered "extraordinary circumstance waivers" to provide relief from the timeline for completing the MRS or ACF pre-approved alternative methodology and the narrow cost analysis during the COVID-19 pandemic. These waivers are limited to a one-year period.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in Section 4, questions 4.2.1 and 4.2.5.

To submit a Market Rate Survey (MRS) or ACF pre-approved alternative methodology or a Narrow Cost Analysis waiver, complete the form below.

Check and describe each provision for which the Lead Agency is requesting a time-limited waiver extension.

**Appendix A.1:** The Market Rate Survey (MRS) or ACF pre-approved alternative methodology (See related question 4.2.1.)

1. Describe the provision (MRS or ACF pre-approved alternative methodology) from which the state/territory seeks relief. Include the reason why the Lead Agency is seeking relief from this provision due to this extraordinary circumstance.

Due to the disruptions of the COVID-19 pandemic on the child care market, particularly the low enrollment the state has seen in care for children 0-5 as well as an atypical increase in demand for school-age child care, the department is not confident that current market rates are reflective of what the market will look like during the recovery from the pandemic. Therefore, the department is seeking a temporary one year waiver for the Market Rate Survey to allow additional time to collect and analyze representative data.

2. Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.

The department believes incrementally increasing the FFY2021-22 rates based on the 2017-2018 Market Rate Survey will allow better continuity and allow the sector to stabilize while we collect and analyze representative data.

3. Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

The department is increasing rates to support all providers at this time. Furthermore, the department is supplementing the fixed operational costs of CCCAP providers through sustainability grants and increased absence policies to accommodate the impact of COVID-19 as well as the recovery from the pandemic.

**Appendix A.2: The Narrow Cost Analysis (See related question 4.2.5.)**

1. Describe the provision (Narrow Cost Analysis) from which the state/territory seeks relief. Include the reason why in these extraordinary circumstances, the Lead Agency is seeking relief from this provision.

1. The Department is requesting a temporary one year waiver for the Narrow Cost Analysis. An initial narrow cost analysis report was conducted in December 2020 to determine the impact of COVID-19, as well as to assess the normal costs associated with providing child care. This analysis was used to help determine the increase in rates for FFY2021-22.

2. Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.

The department believes the short-term costs associated with COVID-19 were significant as demonstrated by the December 2020 report. However, the long-term impacts are not well understood. The waiver will allow the department time to better understand the longer-term effect of the pandemic on the costs of providing child care.

3. Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the

[waiver.](#)

The department is using the initial cost analysis report to increase rates for providers, therefore it will not adversely affect the health, safety and well-being of children served.