Child Care and Development Fund (CCDF) Plan
For
Connecticut
FFY 2016-2018

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1 Define CCDF Leadership and Coordination with Relevant Systems

Implementation of the requirements of the CCDBG Act of 2014 will require leadership and coordination between the child care assistance program and other child- and family-serving agencies, services, and supports at the state and local levels. ACF recognizes that each grantee must identify the most appropriate entities and individuals to lead and participate in implementation based on the context within that State or Territory. This will include those that manage various components of CCDF-funded activities and requirements (fiscal, subsidy, health and safety monitoring, and continuous quality improvement) as well as other public and private partners.

This section collects information to help ACF understand the stakeholders convened and consulted to develop the Plan, where authority lies to make policy decisions and program changes, and who is responsible for implementing the blueprint for action the Plan describes. For example, the law requires that, at the option of the Tribes, State/Territory Lead Agencies must collaborate and coordinate with Indian tribes or tribal organizations in the State in a timely manner in the development of the CCDF Plan. ACF expects that new requirements in the law will necessitate that grantees build partnerships with other agencies and organizations to better link the children and families receiving financial assistance to information, services and resources regarding other programs for which they may be eligible, including developmental screenings for children, and other resources (also in section 2). In addition, States and Territories must describe how public-private partnerships are being used to increase the supply and quality of child care services.

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1))

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

Identify the Lead Agency or joint inter-agency office designated by the State/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))

Name of Lead Agency: Connecticut Office of Early Childhood

Address of Lead Agency: 165 Capitol Ave Hartford, CT 06106

Name and Title of the Lead Agency Official: Myra Jones-Taylor, Commissioner

Phone Number: 860-713-6410

E-Mail Address: Myra.Jones-Taylor@ct.gov

Web Address for Lead Agency (if any): www.ct.gov/oec/

1.1.2 Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/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 entity with administrative responsibilities and include contact information.

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Harriet Feldlaufer

Title of CCDF Administrator: Division Director for Early Care and Education

Address of CCDF Administrator: 165 Capitol Ave Hartford, CT 06106

Phone Number: 860-713-6707

E-Mail Address: harriet.feldlaufer@ct.gov

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

Name of CCDF Co-Administrator:

Title of CCDF Co-Administrator:

Phone Number:

E-Mail Address:

Description of the role of the Co-Administrator:

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any):

Web Address for CCDF program (for the public) (if any):

Web Address for CCDF program policy manual (if any):

Web Address for CCDF program administrative rules (if any):

1.1.3 Identify the agency/department/entity that is responsible for each of the major parts of CCDF administration and the name of the lead contact responsible for managing this portion of the Plan.

Outreach and Consumer Education (section 2)

Agency/Department/Entity Connecticut Office of Early Childhood

Name of Lead Contact Laura Dunleavy

Subsidy/Financial Assistance (section 3 and section 4)

Agency/Department/Entity Connecticut Office of Early Childhood

Name of Lead Contact Charmaine Thomas

Licensing/Monitoring (section 5)

Agency/Department/Entity Connecticut Office of Early Childhood

Name of Lead Contact Debra Johnson

Child Care Workforce (section 6)

Agency/Department/Entity Connecticut Office of Early Childhood

Name of Lead Contact Margaret Gustafson

Quality Improvement (section 7)

Agency/Department/Entity Connecticut Office of Early Childhood

Name of Lead Contact Deborah Flis

Grantee Accountability/Program Integrity (section 8)

Agency/Department/Entity Connecticut Office of Early Childhood

Name of Lead Contact Harriet Feldlaufer

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 other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b))

1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?

In other words, identify whether CCDF program rules and policies are established by the state or territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

- [x] All program rules and policies are set or established at the State/Territory level.
- [ ] Some or all program rules and policies are set or established by local entities. If checked,

indicate which entities establish the following policies. Check all that apply.

- ☐ Eligibility rules and policies (e.g., income limits) are set by the:
  - ☐ State/Territory
  - ☐ County.

    If checked, describe the type of eligibility policies the county can set

  - ☐ Other local entity (e.g., workforce boards, early learning coalitions).

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

  - ☐ Other.

    Describe:

- ☐ Sliding fee scale is set by the:
  - ☐ State/Territory
  - ☐ County

    If checked, describe the type of sliding fee scale policies the county can set

  - ☐ Other local entity (e.g., workforce boards, early learning coalitions).

    If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set

  - ☐ Other.

    Describe:

- ☐ Payment rates are set by the:
  - ☐ State/Territory
  - ☐ County.

    If checked, describe the type of payment rate policies the county can set

  - ☐ Other local entity (e.g., workforce boards, early learning coalitions).

    If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set

☐ Other.

Describe:

☐ Other.

List and describe (e.g., quality improvement systems, payment practices):

1.2.2 How is the CCDF program operated in your State/Territory?

In other words, which agency(ies) implement or perform these CCDF services and activities and how will the State/Territory ensure that Federal CCDF requirements are fully implemented by other governmental or nongovernmental agencies. ACF recommends minimizing differences in eligibility or other policies across counties or other jurisdictions to ease family burden and confusion. Check all that apply. and describe the services performed by the entity and how the State/Territory ensures accountability that federal requirements are fully implemented by other agency(ies).

a) Who determines eligibility?

☐ CCDF Lead Agency

☐ TANF agency

Describe.

☐ Other State/Territory agency.

Describe.

☐ Local government agencies such as county welfare or social services departments

Describe.

☐ Child care resource and referral agencies

Describe.

☐ Community-based organizations

Describe.

☑ Other.

Describe.

The Office of Early Childhood contracts with the United Way of Connecticut to determine program eligibility.

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

☑ CCDF Lead Agency

☑ TANF agency

Describe.

Refers clients to CTs Child Care Resource and Referral (CCR&R) United Way of Connecticut

☐ Other State/Territory agency.

Describe.

☐ Local government agencies such as county welfare or social services departments

Describe.

☑ Child care resource and referral agencies

Describe.

Connecticut's Statewide CCR&R system operated by United Way of Connecticut provides families with information on child care and related services and helps match the requests of families with child care providers and programs. United Way of Connecticut is a single location serving the entire state of Connecticut using a web-based system with options to electronically chat or connect to a live call center. The CCR&R maintains a robust online listing of information on child care programs and providers statewide.

☐ Community-based organizations

Describe.

☐ Other.

Describe.

c) Who issues payments?

☐ CCDF Lead Agency

☑ TANF agency

Describe.

The Office of Early Childhood contracts with the United Way of Connecticut that specifies that electronic data files be sent to the Connecticut Department of Social Services (DSS) for processing monthly payments. The United Way generates an electronic payment file that is received by DSS. The DSS Information Technology Department receives the files, creates checks, and forwards an issuance file to the Bank of America with the check data. The DSS Information Technology Department also processes another payment file from The United Way that contains the Debit Card and Direct Deposit issuances to providers. This file is sent to JP Morgan Chase (JPMC) for posting the funds to the providers' accounts. A third file containing demographic data for the Debit Card users is sent to JPMC. This file is used to create the Debit Cards.

☐ Other State/Territory agency.

Describe.

☐ Local government agencies such as county welfare or social services departments

Describe.

☐ Child care resource and referral agencies

Describe.

☐ Community-based organizations

Describe.

☐ Other.

Describe.

1.3 Consultation in the Development of the State Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

1.3.1 Check who and describe how the Lead Agency consulted with these entities in the development of the CCDF Plan (check all that apply).

For example, did the entity participate in a drafting committee, review drafts, sign off on the final version, or develop a memorandum of understanding with the Lead Agency to meet requirements to share information or services for CCDF subsidy families, or other manner of participation? This list includes entities required by law along with a list of optional CCDF Plan consultation partners that Lead Agencies potentially would consult with in their developing their CCDF Plan.

☑ [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns

Describe:

The OEC has contacted the Deputy Director of the Connecticut Conference of Municipalities to discuss the state's plan and strategies for working together regarding implementation of the plan.

☑ [REQUIRED IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act).

Describe:

The Office of Early Childhood's Commissioner is Co-Chair of the Early Childhood Cabinet (Connecticut State Advisory Council-SAC) and Connecticut's CCDF

Administrator is also a member of the Cabinet. In October 2015, a presentation regarding the CCDF Plan reauthorization was given by Rachel Schumacher, Director of the Administration for Children and Families Office of Child Care and Shireen Riley, Regional Program Manager, Office of Child Care. All Cabinet members had an opportunity to ask questions and review the timeline for Connecticut's plan development.

If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?

☑ Yes,

☐ No.

If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy

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

Describe, including which Tribe(s) you consulted with

Connecticut's CCDF Administrator met with the Social Services Manager for the Mohegan Sun Tribe which is one of two federally recognized tribes in Connecticut to discuss state-wide professional development activities and future strategies for collaboration.

☐ Check N/A if no Indian Tribes and/or Tribal organizations in the State

☑ State/Territory agency responsible for public education.

Describe:

The OEC Commissioner and the CCDF Administrator have regular meetings with the Connecticut Association of Public School Superintendents on issues related to licensing and other health and safety requirements. These have resulted in conducting a state-wide survey of all public school programs regarding the feasibility of licensing all programs receiving CCDF funds.

☑ State agency/agencies 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 Section 619 for preschool).

Describe:

On July 1, 2015, Connecticut's IDEA Part C program transitioned to the Office of Early Childhood and its Division Director is a member of the Early Childhood Cabinet (SAC). Part B, Section 619 of Connecticut's IDEA program resides in the State Department of Education and the program manager for these federal funds is a member of the Early Childhood Cabinet (SAC). The OEC is in the process of completing a memorandum of agreement with the State Department of Education to articulate roles and responsibilities for delivering a high quality system of support for inclusive practices for children receiving these funds.

☑ State/Territory institutions for higher education, including community colleges.

Describe:

A faculty member from one of Connecticut's Community Colleges is a member of the Early Childhood Cabinet (SAC) and is involved in statewide policy discussions and was integral in the development of Connecticut's Core Knowledge and Competency Framework.

☑ State/Territory agency responsible for child care licensing.

Describe:

Connecticut's Child Care Licensing is a Division of the Office of Early Childhood and its Division Director is a co-author of the Connecticut CCDF Plan.

☑ State/Territory office/director for Head Start State collaboration

Describe:

The Head Start State Collaboration Office resides in the Office of Early Childhood and the Collaboration Office is a member of the Early Childhood Cabinet (SAC) and a lead contributor of state policies related to families experiencing homelessness and professional development activities related to the health and safety of infants and toddlers being served by Connecticut's child care subsidy program.

☑ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants.

Describe:

The CCDF Administrator is working closely with Connecticut's' three Early Head Start

Childcare Partnership grantees to prioritize enrollment of families in the child care subsidy program. Connecticut has dedicated state funds to ensure continuity of child care for these families through duration of the federal grant.

☐ State/Territory agency responsible for Child and Adult Care Food Program (CACFP).
Describe:

☐ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention
Describe:

☑ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services.
Describe:
The CCDF Administrator meets regularly with the State Department of Education 21st Century Grant Coordinator to discuss strategies for delivering high quality programs and services for school age children aligned with the federal standards of the 21st Century Grant program.

☑ State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant
Describe:
The Family Support Division of the Office of Early Childhood is responsible for administering the Maternal, Infant, and Early Childhood Home Visiting Grant (MIECHV) and coordinates all home visiting programs in Connecticut.

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).
Describe:

☑ McKinney-Vento State coordinators for Homeless Education.
Describe:
The McKinney Vento State Coordinator is a member of the Early Childhood Cabinet (SAC) and collaborates with the CCDF Administrator to develop supports for serving

families experiencing homelessness and will assist in coordinating the McKinney -Vento Local Liaisons statewide to implement Connecticut's CCDF Plan.

☐ State/Territory agency responsible for public health.
Describe:

☐ State/Territory agency responsible for mental health.
Describe:

☐ State/Territory agency responsible for child welfare.
Describe:

☐ State/Territory liaison for military child care programs.
Describe:

☐ State/Territory agency responsible for employment services/workforce development.
Describe:

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).
Describe:
The CCDF Administrator maintains regular ongoing communication on key issues related to administration and accountability of the CCDF Subsidy program.

☐ State/community agencies serving refugee or immigrant families.
Describe:

☑ Child care resource and referral agencies.
Describe:
The OEC has a written contract with Connecticut's CCR&R (United Way of Connecticut) to provide consumer education to families and to oversee Connecticut's child care subsidy program (Care 4 Kids). The CCDF Administrator works very closely with the CCR&R to ensure all policies are implemented and that changes meet new legislative requirements.

☑ Provider groups or associations.

Describe:

The OEC has regular and ongoing communication with the Early Childhood Alliance and other state-wide advocacy groups.

☑ Worker organizations.

Describe:

The Office of Early Childhood is responsible for implementing all the requirements associated with the SEIU- CSEA Family Child Care Union Contract. The OEC Commissioner and the CCDF Administrator meet regularly with union officials to ensure all requirements of the contract are being implemented.

☐ Parent groups or organizations.

Describe:

☐ Other.

Describe:

1.3.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)).

Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, the description should include:

a) Date(s) of notice of public hearing: 12/16/2015

Reminder - Must be at least 20 calendar days prior to the date of the public hearing.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice.

The public was notified through the OEC website (www.ct.gov/oec), eAlert system for licensed child care providers, Early Childhood listserv (reaching nearly 1,100 early childhood providers and stakeholders) and OEC social media sites.

c) Date(s) of public hearing(s): 01/11/2016//01/12/2016//01/13/2016//01/14/2016

Reminder - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed Hearing were held at public community colleges. In addition to the hearings, a user- friendly web-based survey tool was developed to solicit comments.

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) The Plan was posted on the OEC website (www.ct.gov/oec), an eAlert system for licensed child care providers, state-wide Early Childhood listserv (reaching nearly 1,100 early childhood providers and stakeholders) and OEC social media sites.

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? All comments were reviewed and considered in completion of the final plan. A summary of comments were posted to the OEC website and sent electronically to the Early Childhood Cabinet (SAC).

1.3.3 Describe the strategies used by the Lead Agency to make the CCDF Plan and Plan Amendments available to the public. Check all that apply and describe the strategies below, including any relevant links as examples.

☑ Working with advisory committees.

Describe:

Meetings were held with the Early Childhood Cabinet (SAC) to review the Plan and all public comments to finalize any plan amendments.

☐ Working with child care resource and referral agencies.

Describe:

☐ Providing translation in other languages.

Describe:

☑ Making available on the Lead Agency website.

List the website:

www.ct.gov/oec/

☑ Sharing through social media (Twitter, Facebook, Instagram, email, etc.).

Describe:

Links to the CCDF Plan, as well as dates and locations of the public hearings were posted on the agency's Facebook (www.facebook.com/ctoec) and Twitter (www.twitter.com/ct_oec) pages.

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

Describe:

Links to the Plan, as well as dates and locations of the public hearings were posted via the OEC website's eAlert system for licensed child care providers, as well as the Early Childhood listserv (reaching nearly 1,100 early childhood providers and stakeholders, including parent groups).

☐ Other.

Describe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/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.

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O))

Please describe 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 quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list

appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

☑ [REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.).

Describe:

The Office of Early Childhood's Division of Early Care and Education oversees all state and federally funded early childhood programs with the exception of IDEA Part B, Section 619 preschool special education. The OEC is in the process of developing a memorandum of agreement with the State Department of Education articulating roles and responsibilities on the coordination of best practices on inclusion in early childhood education preschool settings.

☑ [REQUIRED IF APPLICABLE] Tribal early childhood programs.

Describe, including which Tribes coordinating with:

The Office of Early Childhood has consulted with Social Services Manager for the Mohegan Sun Tribe which is one of two federally recognized tribes in Connecticut to discuss statewide professional development activities and future strategies for collaboration. The Office of Early Childhood will continue to coordinate with the Mohegan Sun as they develop the tribes CCDF Plan and include strategies to share resources.

☐ Check N/A if no Indian Tribes and/or Tribal organizations or programs in the State.

☑ [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities.

Describe:

The Office of Early Childhood is the lead agency for the IDEA Part C Program.

☑ [REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act).

Describe:

The Office of Early Childhood is collaborating with the State Administrator of the McKinney-Vento Act and will require local McKinney-Vento Liaisons to be members of local School Readiness Councils.

The Early Childhood Cabinet (SAC) accepted a proposal presented by Co-chairs Lieutenant Governor, Nancy Wyman and OEC Commissioner, Myra Jones-Taylor, to better serve families with young children experiencing homelessness.

The proposal was the result of the work of a Cabinet subcommittee focusing on families with young children experiencing homelessness. The subcommittee was charged with identifying high-priority policy shifts within state agencies that can better support the needs of families with young children experiencing homelessness. Subcommittee members represented a number of state agencies and community organizations including the Office of Early Childhood (OEC), Departments of Public Health (DPH), Social Services (DSS), Education (SDE), Housing (DOH) and Children and Families (DCF), as well as the Interagency Coordinating Council for Birth to Three, Connecticut Coalition Against Domestic Violence, Connecticut Coalition to End Homelessness, The Connection, Inc., New Reach, Inc., Education Connection, Community Renewal Team, LULAC Head Start, Inc., the Yale Child Study Center and the Commission on Children. Most recently, Governor Dannel P Malloy issued Senate Bill 10 An Act to Increase Child Care for Children who are Homeless which will create a protective service category for homeless children to access child care subsidy.

☑ [REQUIRED] Early childhood programs serving children in foster care.

Describe:

The Office of Early Childhood coordinates with the Department of Children and Families and prioritizes foster care families for child care services.

☑ State/Territory agency responsible for child care licensing.

Describe:

State licensing for child care programs and youth camps is a Division of the Office of Early Childhood.

☑ State/Territory agency with Head Start State collaboration grant.

Describe:

The Head Start State Collaboration Office resides in the Office of Early Childhood.

☑ State Advisory Council authorized by the Head Start Act.

Describe:

The Commissioner of the Office of Early Childhood is co-chair with the Lieutenant Governor of the Early Childhood Cabinet (SAC).

☑ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants.

Describe:

The OEC is working closely with Connecticut's three federally funded EHS-CC grantees to ensure continuity and stability of child care through regularly scheduled meetings and telephone conference calls. The OEC has dedicated a portion of a staff members time from the Division of Early Care and Education to work directly with the three grantees.

☑ McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons

Describe:

The Office of Early is engaged in ongoing and regular communication with the State McKinney Vento Coordinator.

☑ Child care resource and referral agencies.

Describe:

The OEC has a written contract with United Way of Connecticut, our state's CCR &R to inform families of all child care services available.

☑ State/Territory agency responsible for public education.

Describe:

The Office of Early Childhood works collaboratively with the Connecticut Association of Public School Superintendents and is in the process of identifying strategies to ensure all health and safety requirements are being met for children in public schools who receive a child care subsidy.

☑ State/Territory institutions for higher education, including community colleges.

Describe:

The Office of Early Childhood meets quarterly with the Early Childhood Higher Education

Consortia (ECHEC) comprised of representatives from all 2- and 4- year institutions of higher education to discuss best practices and strategies to increase coordination and continuity regarding pre-service teacher preparation.

☐ State/Territory agency responsible for Child and Adult Care Food Program (CACFP).
Describe:

☐ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention.
Describe:

☐ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services.
Describe:

☑ State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant.
Describe:
The Office of Early Childhood's Division of Family Support is the recipient of the MIECHV Grant program.

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).
Describe:

☐ State/Territory agency responsible for public health.
Describe:

☐ State/Territory agency responsible for mental health.
Describe:

☐ State/Territory agency responsible for child welfare.
Describe:

☐ State/Territory liaison for military child care programs.

Describe:

☐ State/Territory agency responsible for employment services/workforce development.

Describe:

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

TANF case workers provide information and referrals to clients regarding child care subsidy.

☐ State/Territory community agencies serving refugee or immigrant families

Describe:

☐ Provider groups or associations.

Describe:

☑ Worker organizations.

Describe:

The Office of Early Childhood meets regularly with the SEIU CSEA regarding the implementation of the union contract for family child care providers.

☐ Parent groups or organizations.

Describe:

☐ Other.

Describe:

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs 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, homeless children, 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 in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high 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 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 or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) 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 the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

1.5.1 Will you combine CCDF funds with the funds for any program with which you coordinate (described in 1.4.1)?

☑ Yes, If yes, describe at a minimum:

How do you define "combine"

Connecticut allows child care providers to combine Connecticut's Child Care Subsidy (Care 4 Kids) with state School Readiness, Child Day Care Contracts, Smart Start, Early Head Start, and Head Start.

Which funds will you combine

Funds for Connecticut's Child Care Subsidy (Care 4 Kids)

Goal(s) of combining funds (why?) and expected outcomes, 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

Increase reimbursement rates and quality of the programs

Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?)

Funds are combined at the program level

How are the funds tracked and method of oversight

Care 4 Kids subsidies are tracked by United Way of Connecticut. Other state and federal funds are tracked by OEC grant managers.

☐ No.

1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (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 reauthorization.

1.6.1 Describe the entities with whom and the levels at which the State/Territory is partnering (level - State/Territory, county/local, and/or programs), the goals of the partnerships, method of partnering. Include in your description examples of activities that have resulted from partnerships with other State/Territory and public agencies, tribal organizations, private entities, faith based organizations or community-based organizations, and how the partnerships are expected to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services.

Connecticut's Early Childhood Cabinet (SAC) devoted this past year to developing a major policy proposal to better serve homeless families with young children. The proposal was developed in partnership with non-profit homeless services providers and five states agencies (the Office of Early Childhood, Departments of Education, Housing, Social Services, and Children and Families). Going forward this group will implement the policy changes proposed to improve the delivery of child care services for homeless families. This will be accomplished through changes to child welfare systems, homeless shelter provider systems, child care

systems, and Medicaid systems regarding changes to eligibility, documentation requirements, referral networks, training, and screenings.

Connecticut's CCR&R (United Way of Connecticut) will expand their role in the provision of quality improvement supports to child care services in the coming three years. A key component of developing a statewide system of quality improvement support will be to build on the existing service delivery systems. The work will include an inventory of existing quality improvement support in the state and the facilitation of communities of learning which may result in an investment in shared services and cooperative agreements.

Developing public and private partnerships is a top priority for the Commissioner of the OEC. The Commissioner works closely with The Connecticut Council for Philanthropy (CCP), a state-wide association of grant-makers, has dedicated fiscal resources to the OEC to support an organizational assessment and continues to explore opportunities for supporting state efforts to improve the quality and supply of child care in CT.

1.7 Coordination with Local or Regional Child Care Resource and Referral Systems

States may use funds to support or establish Child Care Resource and Referral (CCR&R systems (also see section 7.4). If they do, there are specific requirements for CCR&Rs (658E(c)(3)(B)(iii)) These include:

- Provide families with information on a full range of child care options (including faith-based, community-based child care centers and family child care homes, nontraditional hours and emergency child care centers) in their local area or region
- To the extent practicable, work directly with families who receive child care assistance 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 State/Territory
- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities
- Collect data and provide information on the supply of and demand for child care services in local areas or regions of the State/Territory and submit such information to the State/Territory
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care centers and family child care homes providers, to increase the supply and quality of child care services in the State/Territory
- As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

Nothing in statute prohibits States from using CCR&Ragencies to conduct or provide additional services beyond those required by statute above.

1.7.1 Does the State fund a system of local or regional CCR&R organizations?

☑ Yes. The State/Territory funds a CCR&R system. See also related follow-up questions in Section 7.1 and 7.4.

If yes, the local or regional referral agency is required to do all of the activities listed here.

See also related follow-up questions in Section 7.1 and 7.4. Does the CCR&R system provide all services identified below:

Connecticut funds a state-wide CCR & R (United Way of Connecticut) to provide information to the public seeking quality affordable childcare and to child care providers seeking to offer quality child care services. Activities include:

- Counseling and consumer education regarding all legal child care options in Connecticut;
- Developmentally appropriate learning activities based on Connecticut's Early Learning and Development Standards;
- Researched-based information on the long-term impact of high quality early childhood education on development;
- Assistance for low income families to access child care and early education services;
- Maintenance of a referral system to provider services and information to support families and providers;
- Conducting educational workshops and presentations for child care providers and parent education activities state-wide (all training content are aligned with the Connecticut's Early Learning and Development Standards and Core Knowledge and Competency Framework); and
- Providing technical assistance through on-site visits to newly licensed family child care providers.

☐ No. The State/Territory does not fund a CCR&R system and has no plans to establish. Use section 7.4 to describe plans, if any, to establish a CCR&R system.

1.8 Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement that States must include a Statewide Child Care

Disaster Plan for coordination of activities with the State/Territory human services agency, emergency management agency, child care licensing agency, State/Territory local resource and referral agencies, and the State Advisory Council (SAC) or other state-designated cross-agency body if there is no SAC. (658E(c)(2)(U)) The Statewide Child Care Disaster Plan must include:

- Guidelines for continuing CCDF assistance and child care services after a disaster, which may include provision of temporary child care, and temporary operating standards for child care after a disaster.
- Requirements that child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Requirements that child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

1.8.1 Describe the status of State's Statewide Child Care Disaster Plan.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan

If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan

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

Overall Target Completion Date (no later than September 30, 2016) 9/30/2016

Overall Status - Describe the State/Territory's overall status toward complete

implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

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

The Office of Early Childhood's continuity of operations functions are included in the COOP plans of several state agencies, with specific assignment of continuity of operations made in the State Department of Education plan.

An Office of Early Childhood staff member serves as the Co-chair of the Child Emergency Preparedness Committee, a subcommittee of CT's Statewide Emergency Management and Homeland Security Advisory Council, under the Department of Emergency Services and Public Protection.This committee's work emphasizes emergency preparedness for the early childhood community, including the provision of training to providers, links to regional Department of Emergency Services and Public Protection staff and other Emergency Management leaders in the state, and outreach to local emergency management directors in communities. An existing work group, responsible for the OEC's Emergency Management, includes representatives from the OEC's Divisions of Child Care Licensing and Early Care and Education. This workgroup meets monthly to develop the OEC COOP.

Unmet requirement - Identify the requirement(s) to be implemented child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

A 2016 ledgislative proposal regarding the Office of Early Childhood's child care licensing requirements for child care providers include regulatory requirements that address preparation, response, and reunification.The OEC will address requirements for unlicensed providers through enhanced training and emergency plan development.

Projected start date for each activity: 01/31/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

The Department of Education, Public Health and Emergency Services and Public Protection

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The OEC is in the process of transitioning to a plan specifically for our agency. This transition is supported by the expansion of the administrative infrastructure of the OEC to include dedicated legal, fiscal, and information technology staff.

Projected start date for each activity: 01/31/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Departments of Education, Public Health and Emergency Services and Public Protection

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children's most important teacher and advocate. State and Territory child care

systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12. The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

1. 1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
    - a) the availability of child care assistance,
    - b) the quality of child care providers (if available),
    - c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify.
    - d) Individuals with Disabilities Education Act (IDEA) programs and services,
    - e) Research and best practices in child development, and
    - f) State/Territory policies regarding social- emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children from birth to five for purposes of this requirement) from early childhood programs receiving CCDF.
    - 2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:
    - a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
    - b) Information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.
    - c) State/Territory processes for: 1) licensing child care providers; 2) conducting

background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

2.1 Information about Child Care Financial Assistance Program Availability and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A)), 658E(c)(2)(E)(i)(1))

2.1.1 Describe how the State/Territory informs families of availability of services.

a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?)

The Office of Early Childhood contracted with the Connecticut Economic Resource Center (CERC), including a group of national advisors (Ajay Chaudhry, U.S. Department of Health and Human Services, Anne Mitchell, Early Childhood expert in policy research, and David Murphey, Child Trends) to conduct a comprehensive statewide unmet needs study regarding the supply and demand of child care services in Connecticut. The study also assessed the degree to which parents can, with reasonable effort, enroll in an affordable child care program that meets their needs and supports their child's development. This study will allow OEC to examine policy changes and strategies to better target outreach efforts.

b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations.

The OEC partners with its CCR&R (United Way of Connecticut) to inform families of the various child care and early childhood statewide services available. In addition, Connecticut is unique in that it is one of a handful of states with an executive branch state agency dedicated to early childhood. By creating the Office of Early Childhood, Governor Dannael P. Malloy shifted existing early childhood programs from five different state agencies to a single state agency responsible for the oversight and administration of the state's early care and education programs. Through the creation of the OEC, the state is able to provide information on all available early childhood programs through its three Divisions. For

example, this allows child care licensing inspectors, home visitors, early care and education providers and others to receive and disseminate information on a myriad of early childhood programs and family support services in a coordinated and consistent manner.

c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach?

- Office of Early Childhood website (www.ct.gov/oec): provides statewide information on the agency for providers as well as families.
- Office of Early Childhood microsite (www.ctoec.org): a responsive website that provides information for families on a number of early childhood topics ranging from prenatal information to preschool to information for providers. It also connects families to other available supports including Temporary Family Assistance and Housing Support.
- The More You Know, The Better They Grow Campaign: is an OEC public outreach campaign launched in fall of 2014. This multi-media public information campaign includes the development of the OEC's microsite as well as electronic, radio and other advertisements and early care and education materials such as brochures and posters. The campaign focus on the importance of high quality child care, child development and the critical role of adults. The materials and resources were distributed to local WIC and Social Services offices. The materials are also distributed at community fairs, conferences, and regional and statewide events and are available upon request.

2.1.2 How can parents apply for services? Check all that apply.

☐ Electronically via online application, mobile app or email.

Provide link

☐ In-person interview or orientation.

Describe agencies where these may occur:

☐ Phone

☑ Mail

☑ At the child care site

☑ At a child care resource and referral agency.

☐ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations.

Describe:

☐ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time).

Describe:

☐ Other strategies.

Describe:

2.2 Consumer Education Website

The CCDBG Act of 2014 added a purpose of the child care program "to promote involvement by parents and family members in the development of their children in child care settings." (658A(b)(3)) The consumer education requirements address multiple topics that parents and family members need in order to make informed choices and act as their most important teacher and advocate. Lead agencies must certify that they will collect and disseminate the following information through resource and referral agencies or other means. (658E(c)(2)(E))

2.2.1 The State/Territory certifies that it collects and disseminates the following information to parents, providers and the general public:

- information about the availability of the full diversity of child care services that will promote informed child care choices,
- Availability of child care assistance,
- Quality of child care providers (if available),
- Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP) for which families may also qualify.
- Individuals with Disabilities Education Act (IDEA) programs and services,
- Research and best practices in child development, including social and emotional development, early childhood development, meaningful parent and family engagement, and physical health and development (particularly healthy eating and physical activity), and
- State/Territory policies regarding the social-emotional behavioral health of young children, which may include positive behavioral intervention and support models, and policies on

expulsion of preschool-aged children, in early childhood programs receiving child care assistance (CCDF).

☑ Yes. The State/Territory certifies as of March 1, 2016 that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.7 below.

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

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

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

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with to complete implementation of this activity

2.2.2 Describe how the State/Territory makes information availabe about the full diversity of child care services that will promote informed child care choices, including consumer-

friendly strategies such as materials that are culturally responsive and in multiple languages as needed that reflect the literacy levels of consumers, and are easy to access

a) Describe how the State/Territory makes information about the full diversity of child care services available to 1) parents of eligible children, 2) providers and 3) the general public

Information about the full diversity of child care services available to parents of eligible children, providers and the general public is made through Connecticut's CCR&R (United Way of Connecticut), the Office of Early Childhood's (OEC) website and microsite. The OEC will continue to work on the development of materials for families that promote informed child care choices, including consumer-friendly strategies. All information is posted on the OEC's website in html format to allow for translation through the use of the website's Google translator.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Existing information is provided though the Office of Early Childhood's (OEC) website and microsite to Connecticut's child care subsidy program (Care 4 Kids), as well as information regarding publicly funded early care and education programs including School Readiness, Child Day Care, Smart Start, federal Head Start, federal Early Head Start Child Care Partnership, and the federal Preschool Development Grant. Materials developed in the OEC's "The More You Know, The Better They Grow" public information campaign includes information regarding child care options for low-income families and refers families to contact Connecticut's CCR & R (The United Way of Connecticut) for information on what is available in their area.

c) Describe who you partner with to make information about the full diversity of child care choices available

The OEC partners with Connecticut's CCR & R (United Way of Connecticut) on the dissemination of information about the full diversity of child care choices available.

2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended

audiences and are easy to understand

a) Describe how the State/Territory makes information about child care quality available to 1) parents of eligible children, 2) providers and 3) the general public

Information about child care quality is available electronically and by calling the Office of Early Childhood's Division of Licensing or Connecticut's CC R& R (United Way of Connecticut).

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

- ELicense website: Provides information about licensed family- and center-based child care programs including dates of licensure, dates of inspection and disciplinary information.
- Child Care 2-1-1: Connecticut's CCR&R (United Way of Connecticut) provides information related to program quality including NAEYC and NAFCC accreditation.
- OEC's Division of Licensing: Child care staff are available during business hours to provide information on licensed family and center based child care programs including dates of licensure, dates of inspections and disciplinary information.

c) Describe who you partner with to make information about child care quality available

The OEC partners with its CCR & R (United Way of Connecticut) to provide information on child care quality.

2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs.

For example, does the State/Territory share information about these other programs through linkages from the online application, universal applications, through intake process/front line workers, providers, child care resource and referral agencies or other trusted advisors such as home visitors, pediatricians, faith-based services, etc.? At a minimum, include in your description how you provide information to eligible parents, what you provide and by what methods, and which partners you work with to provide information about other available service programs.

a) Temporary Assistance for Needy Families (TANF)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential

statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

b) Head Start and Early Head Start Programs

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

c) Low Income Home Energy Assistance Program (LIHEAP)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

e) Women, Infants, and Children Program (WIC)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

f) Child and Adult Care Food Program(CACFP)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

g) Medicaid

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

h) Children's Health Insurance Program (CHIP)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential

statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

i) Individuals with Disabilities Education Act (IDEA)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides families information about this program. CCR&R also hosts a robust interactive website which information can also be found.

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs.

For example, does the State/Territory provide information to providers through CCR&Routreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc?

a) Temporary Assistance for Needy Families (TANF)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

b) Head Start and Early Head Start Programs

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential

statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

c) Low Income Home Energy Assistance Program (LIHEAP)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

e) Women, Infants, and Children Program (WIC)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also host a robust interactive website which information can also be found.

f) Child and Adult Care Food Program(CACFP)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

g) Medicaid

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

h) Children's Health Insurance Program (CHIP)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

i) Individuals with Disabilities Education Act (IDEA)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential

statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

j) Other State/Federally Funded Child Care Programs (example-State Pre-K)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)

The Connecticut's CCR&R (United Way of Connecticut) provides a free confidential statewide call center which operates Monday - Friday 8:00 a.m. - 5:00 p.m. The call center provides providers with information about this program. CCR&R also hosts a robust interactive website which information can also be found.

2.2.6 Describe how the State/Territory makes available information to parents of eligible children, the general public, and where applicable, providers (see also section 6) about research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement. (658E(c)(2)(E)(VI))

a) Describe how the State/Territory makes information about research and best practices in child development available to 1) parents of eligible children, 2) providers and 3) the general public

The OEC has invested considerable effort and resources to develop and distribute materials on our state's birth to age five Early Learning and Development Standards (ELDS) which provides information to families, providers and the general public on what children should know and be able to do. The OEC has developed a number of materials including:

- Early Learning and Development Standards (ELDS): A comprehensive, content valid document which outlines eight learning domains and provides information on the skills and abilities children should have and at what ages. The standards are also available electronically in a mobile-friendly format on the website: www.ct.gov/oec/elds.
- Family Action Guides: A booklet with family-friendly strategies that engage families in supporting early learning and development at home. These action guides are available in English and Spanish and have been distributed state wide.

- Posters: The ELDS posters highlight each of the eight learning domains and can be displayed in programs, libraries, community centers, and pediatric offices as an easy reference.
- Principal's Guide provides a summary of the ELDS for school leaders and program directors describing their role in supporting early learning and development.
- Guidance Documents: Developed for providers to support English language learners and children with special needs.
- Video Library: The OEC contracted with the Center for Early Childhood Education at Eastern Connecticut State University to developed videos and related training materials related to the ELDS. This 10 - part video collection provides information and training scenarios on the Connecticut's ELDS with strategies for working with children birth-age 5 in a variety of child care settings. The videos can be accessed on the Center of Early Childhood Education's website and are accessible to the general public. Accompanying guidance is available for use of the videos in a variety of professional learning settings such as higher education classrooms, center-based training and coaching sessions, regional and state conferences and webinars. Finally, the Center has developed a searchable web- based library to assist trainers, coaches, program administrators and higher education faculty to support professional learning of providers at career entry to mastery level.
- Webinars: Archived webinars are available on-demand on the OEC's website for principals, program administrators, child care providers and higher education faculty which provide an overview of the ELDS and how the standards can be applied in all settings and sectors.
- ELDS guidance documents have been developed for working with dual language learners, children with special needs, and families.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

All ELDS materials are currently available electronically and hard copies are available upon request through the OEC website. In addition, upon the initial printing, materials were distributed to all licensed child care providers, public schools with preschool classrooms, pediatricians, libraries, unlicensed Family, Friend and Neighbor providers, Family Resource Centers and institutions of higher education. To date, over 31,000 copies of the Early Learning and Development Standards have been distributed, as well as over 19,000 posters and over 100,000 Family Action Guides. Information regarding available materials and trainings is also shared on the OEC's social media sites.

c) Describe who you partner with to make information about research and best practices in child development available

The OEC partnered, and continues to partner, with early childhood providers, including early

education and pediatricians, as well as libraries, Family Resource Centers and institutes of higher education to disseminate the Early Learning and Development Standards as well as the supporting materials.

2.2.7 Describe how information on the State/Territory's policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five for purposes of this requirement), in early childhood programs receiving CCDF is collected and disseminated to parents, providers and the general public. (658E(c)(2)(E)(i)(VII))

a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to 1) parents of eligible children, 2) providers and 3) the general public. At minimum, describe **what** you provide (e.g., early childhood mental health consultation services to child care programs) and **how** (i.e., methods such as written materials, direct communication, etc.) for each group:

i. Parents

The OEC's Division of Family Support offers a prevention program (Help Me Grow) that provides families and early childhood providers' access to a variety of community resources that address children's social and emotional behaviors and developmental needs. The Help Me Grow program also offers the "Ages and Stages" program which helps families better understand and track children's developmental milestones.

ii. Providers

The OEC partnered with the Center for Early Childhood Education at Eastern Connecticut State University to develop a series of videos for child care providers concerning children's social and mental health needs. The video is posted on the Center for Early Childhood's website and is available to the public. The OEC also partnered with the Connecticut Health and Development Institute (CHDI) to develop training tools for child health care providers on infant mental health and maternal depression. These tools were utilized in workshops for pediatricians.

iii. General public

The OEC's "Help Me Grow" staff regularly hosts community networking breakfasts that bring together the general public to share information.

b) Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available

The Office of Early Childhood partnered with the Child Health and Development Institute (CHDI) on to develop training tools for early care and education provider and child health care providers.These tools were utilized in workshops and trainings for both early care and health providers and pediatricians.These traning tools are available online on CHDI website:www.kidsmentalhealthinfo.com, which provides information for families and providers on early childhood mental health. The state's Early Learning and Development Standards and supplemental materials also include information on social and emotional development. These materials were distributed to all licensed child care providers, public schools with preschool classrooms, pediatricians, libraries, unlicensed Family, Friend and Neighbor providers, Family Resource Centers and institutions of higher education.

c) Does the State have a written policy regarding preventing expulsion of:

Preschool children (from birth to five) in early childhood programs receiving child care assistance?

☐ Yes.

If yes, If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link

☑ No.

School-age children from programs receiving child care assistance?

☐ Yes.

If yes, describe how the State/Territory makes information about that policy available to 1) parents, 2) providers and 3) the general public (what you provide, how you provide and any partners used) and provide a link

☑ No.

2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening services. (658E(c)(2)E(ii)) At a minimum, the State/Territory must establish procedures to provide information to families and child care providers on: (1) 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.); and (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays.

Describe the status of the State/Territory's procedures for providing information on and referring families to existing developmental screening services.

☑ Fully implemented and meeting all Federal requirements outlined above - by March 1, 2016.

List the Lead Agency policy citation(s) and:

Connecticut has several mechanisms in place for providing information on and referring families to existing developmental screening resources and services. The Department of Social Services (DSS) has notified all physicians, physician assistants, Advanced Practice Nurses, Medical Clinics, Outpatient General Hospitals and Federally Qualified Health Centers regarding best practices and approved screening tools for developmental and behavioral screens administered as part pf a primary care visit. See DSS Provider Bulletin 2015-70, November 2015.

https://www.ctdssmap.com/CTPortal/Information/Get%20Download%20File/tabid/44/Default.aspx?Filename=pb15_70.pdf&URI=Bulletins/pb15_70.pdf.

The Office of Early Childhood administers "Help Me Grow", a prevention program for children up to age 5 which provides families and providers with a variety of community resources that address a child's behavioral or developmental needs.

a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened

The Office of Early Childhood administers "Help Me Grow", a prevention program for children up to age 5 which provides families and providers with a variety of community resources that address a child's behavioral or developmental needs. Help Me Grow

includes the Ages and Stages program which helps parents better understand developmental milestones using a monitoring kit that includes questions and age-appropriate activities. A child development care coordinator reviews the questionnaires and provides the parents with the results. If the coordinator has a concern about the child's development, he or she will suggest services or an evaluation and help the family through the process. In addition, the Child Development Infoline, funded by the OEC, connects callers with care coordinators trained to listen and ask questions that identify developmental needs and resources. If a child is facing behavioral, learning or other developmental difficulties, child development community liaisons will identify resources available in the family's community, making up to 12 calls to community agencies to find the right programs or services.

b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays

All CCDF families and child care providers have access to the resources and services described above.

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

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

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

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with to complete implementation of this activity

2.2.9 Describe how the State/Territory meets the requirement to maintain a record of substantiated parental complaints. (658E(c)(2)(C))

a) How does the State/Territory define substantiated parental complaint
Substantiated complaints are complaints made about child care providers in which there is sufficient evidence to demonstrate that the allegations made in said complaint are true.
b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)
All complaints against licensed providers are documented electronically and a hard copy is kept in a complaint file for two years.

c) How does the State/Territory make substantiated parental complaints available to the public on request
All complaints against licensed providers are documented electronically and a hard copy is kept in a complaint file for two years.

d) Describe how the State/Territory defines and maintains complaints from others about providers
All complaints are maintained as described above, including parental complaints and complaints from outside entities.

2.2.10 How will the Lead Agency or partners provide outreach and services to eligible

families for whom English is not their first language?

Check the strategies, if any, that your State/Territory has chosen to implement.

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

The OEC utilizes bilingual child care referral specialists employed by Connecticut's CCR & R (United Way of Connecticut).

- [ ] None

2.2.11 If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State/Territory has the ability to have translation/interpretation in all primary and secondary languages

The OEC provides written materials in Spanish. The OEC's website has the ability to translate information on its website into dozens of languages and Connecticut's CCR & R (United Way of Connecticut) has the ability to provide interpretation services in a large number of languages as well.

2.2.12 Describe how the Lead Agency or partners provide outreach and services to eligible persons with disabilities

Connecticut's CCR&R (United Way of Connecticut) tracks child care providers who have experience working with children and families with disabilities. This resource allows for families to be connected directly with experience providers. The Office of Early Childhood, Help Me Grow, prevention program for families and providers has a TTY machine available for families experiencing hearing loss.

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing processes for licensing and monitoring child care providers, processes for conducting criminal background checks, and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse.

The State/Territory must make public certain information about the results of such monitoring on a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

2.3.1 Describe the status of State/Territory's consumer education website.

☐ Fully implemented and meeting all Federal requirements outlined above - by March 1, 2016.

Provide the link to the website:

and describe how the consumer education website meets the requirements to:

a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe

b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers. Describe

c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. Describe

d) Provide information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe

e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate. Describe

☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date. Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017) 11/1/9/2017

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

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

The OEC's website currently links to the State's eLicense site which provides provider-specific information for licensed child care providers including inspection dates and a history of violations.

Unmet requirement - Identify the requirement(s) to be implemented Share provider-specific information about health and safety, licensing or regulatory requirements met

by the provider (including the last date of inspection, and any history of violations).

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Information including a description of health and safety requirements and licensing or regulatory requirements for child care providers will be developed and posted on the website. The OEC's Division of Licensing will develop the materials.

Projected start date for each activity: 11/0/1/2015
Projected end date for each activity: 11/19/2017
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with to complete implementation of this activity

The Office of Early Childhood

Unmet requirement - Identify the requirement(s) to be implemented A description of health and safety requirements and licensing or regulatory requirements for child care providers.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

A description of the processes for licensing, background checks, monitoring and offenses that prevent individuals from being providers will be developed and posted on the website. In progress. The OEC's Division of Licensing will develop the materials.

Projected start date for each activity: 11/01/2015
Projected end date for each activity: 11/19/2017
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with to complete implementation of this activity

The Office of Early Childhood

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

aggregate information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Annual aggregate information about the numbers of deaths, serious injuries and incidences of substantiated child abuse in child care settings will be created and made available annually on the website. The OEC's Division of Licensing is developing methods to collect and report the necessary information.

Projected start date for each activity: 11/01/2015
Projected end date for each activity: 11/19/2017
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with to complete implementation of this activity

The Office of Early Childhood

Unmet requirement - Identify the requirement(s) to be implemented The website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

A consumer-friendly website will include action plans, the results of monitoring inspections in plain language, and corrective action plans and provide frequently asked questions. The OEC's Division of Licensing will develop the materials.

Projected start date for each activity: 11/01/2015
Projected end date for each activity: 11/19/2017
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with to complete implementation of this activity

The Office of Early Childhood

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to "deliver high-quality, coordinated early childhood care and education services to maximize parents" options and support parents trying to achieve independence from public assistance"; and "to improve child care and development of participating children." (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements - and the opportunity for children to form trusting relationships with teachers - are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have 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 job search of not less than three (3) months, and to describe policies for graduated phase- out of assistance. The definition of an eligible child includes that a family's assets may not exceed $1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children pending completion of documentation are also now required. There is nothing in statute to prohibit States from establishing policies that extend eligibility beyond 12 months or establish other similar policies to align program requirements that allow children enrolled in Head Start, Early Head Start, state or local pre-kindergarten and other collaborative programs to finish the program year and to promote continuity for families receiving services through multiple benefits programs.

3.1 Eligible Children and Families

In order to be eligible for services, children must (1) be under the age of 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

such family); and who (3)(a) resides with a parent or parents who are working or attending a job training or educational program; or (b) is receiving, or needs to receive, protective services and resides with a parent or parents not described in (3a.). (658P(4))

3.1.1 Eligibility Criteria Based upon Child's Age

a) The CCDF program serves childrenfrom 0 (weeks/months/years) to 12 years (through age 12).

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))

☑ Yes, and the upper age is 18 (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity: The OEC's definition of physically and/or mentally incapable of self-care is: (a) a physical handicap or health impairment that causes chronic or acute health problems such as a heart condition, orthopedic impairment, tuberculosis, asthma, epilepsy, cerebral palsy ,leukemia, or congenital abnormality that has been diagnosed by the physician; (b) an intellectual incapacity or spectrum disorder as diagnosed by a physician, pediatrician, or psychologist; and (c) a behavioral or emotional disturbance, maladjustment or developmental delay that causes the child to exhibit marked and inappropriate behaviors or characteristics over extended periods that has been diagnosed by a psychologist, psychiatrist, or other clinically trained or state certified mental health professional acting within his or her scope or practice.
☐ No

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))

☐ Yes and the upper age is (may not equal or exceed age 19)
☑ No.

3.1.2 How does the Lead Agency define the following eligibility terms?

a) residing with -

means living with on a regular basis, including taking meals together and sleeping in the same home.

b) in loco parentis -

means a person with whom the child lives who is responsible for the day-to-day care and custody of the child when the child's parent by blood, marriage, adoption or court order is not performing such duties.

3.1.3 Eligibility Criteria Based on Reason for Care

a) How does the Lead Agency define "working, attending job training and education" for the purposes of eligibility at the point of determination? Provide a brief description below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).

* working:

means employment in one or more jobs as an employee of another individual, a partnership, corporation or self-employment for which compensation is paid in the form of earned income.

* attending job training

means enrollment in and regularly attending classes or compliance with the mandatory employment services requirements of the TANF program, including being available for work, reporting for interviews, attending group or individual orientation sessions and satisfactory participation in employment service activities.

* attending education

Education must meet employment services activities as approved by the Office of Early Childhood and the Department of Labor.

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

☑ Yes.

☐ No.

If no, describe additional requirements

not applicable

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

☑ Yes. If yes, how does the Lead Agency define "protective services" for the purposes of eligibility? Provide a brief description below.

1) Definition of protective services -

The OEC is seeking legislative authority to create a "Protective Services Category" to provide the Commissioner with the discretion to define "protective services" for the purpose of providing families with categorical eligibility. The current proposed definition includes children and families that are experiencing homelessness as defined by McKinney-Vento.

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

☑ Yes.

☐ No.

Note - If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities for CCDF purposes these children are considered to be in protective services and should be included in the protective services definition above.

☐ No.

3.1.4 Eligibility Criteria Based on Family Income

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

* Definition of income -

Countable income: Gross income less allowable deductions and excluded income;

Earned income: Compensation for personal services, including but not limited to wages, salaries, commissions, and bonuses.

b) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum "exit" eligibility level if applicable and below the federal limit of 85% of current SMI.

☐ **Note** - If the income eligibility limits are not statewide, check here

Describe how many jurisdictions set their own income eligibility limits

not applicable

Fill in the chart based on the most populous area of the state.

Family Size	(a) 100% of State Median Income (SMI) ($/month)	(b) 85% of State Median Income (SMI) ($/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) $/month Maximum "Entry" Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) $/month Maximum "Exit" Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI
1	4602	3912	2255	49%	2301	50%
2	6018	5115	2949	49%	3009	50%
3	7434	6319	3644	49%	3717	50%
4	8849	7522	4336	49%	4425	50%
5	11947	10155	5854	49%	5136	50%

Reminder - Income limits must be provided in terms of current State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. Federal poverty guidelines are available at http://aspe.hhs.gov/poverty/index.cfm.

c) SMI Source and year 2015 Federal Register Vol. 80, No. 111, 06-10-2015

d) These eligibility limits in column (c) became or will become effective on: July 1, 2015

e) Provide the link to the income eligibility limits http://www.ctcare4kids.com/care-4- kids-program/income-guidelines/

3.1.5 Graduated Phase-Out of Assistance

The CCDBG Act of 2014 added a provision that requires States and Territories to provide for a graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income. Providing a graduated phase-out supports long-term family economic stability by allowing for wage growth and a tapered transition out of the child care subsidy program. (658E (c)(2)(N)(iv)) This might be achieved through policies such as establishing a second income eligibility threshold at redetermination (e.g., establishing a different eligibility threshold for families first

applying for assistance and those already receiving assistance, sometimes called and "exit threshold") or by granting a sustained period of continued assistance to the family before termination.

Describe the status of the State/Territory's policy regarding graduated phase-out of assistance.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out

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

Overall Target Completion Date (no later than September 30, 2016) 9/30/2016

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Not yet started

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

Connecticut currently does not provide a graduated phase-out.

Unmet requirement - Identify the requirement(s) to be implemented A graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Changes necessary to current Connecticut's Child Care Subsidy program (Care 4

Kids) regulations have been identified and will be admended. Families will be provided a 3 month graduated phase-out.

Projected start date for each activity: 09/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Connecticut's Child Care Subsidy program (Care 4 Kids)

3.1.6 Fluctuation in Earnings

The CCDBG Act of 2014 added a requirement that the Plan shall demonstrate how the State/Territory's (or designated local entity) processes for initial determination and redetermination take into account irregular fluctuations in earnings. (658E(c)(2)(N)(i)(II))

Note - this change requires that States and Territories have policies to account for the fact that some parents with seasonal or other types of work schedules may have irregular earnings over the course of a year, including changes that temporarily exceed 85% of SMI. States and Territories should have procedures to guide how eligibility and copayments are set in a manner to take such circumstances into account. For example, averaging family income over a period of time to broaden the scope of income verification to be more reflective of annual income rather than tied to a limited time frame that may have seasonal irregularities.

Describe the status of the State/Territory's policy related to the fluctuation in earnings requirement.

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement

Gross income shall be calculated based on the best estimate of the income the family is expected to receive. Income received monthly or over a more frequent period shall be annualized based on the amount received in the four week period immediately prior to the date of the income calculation. If the income fluctuates in an unpredictable manner,

the income shall be averaged over a longer more representative period. If income is received regularly according to a schedule, the income shall be annualized based on such schedule.

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

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

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially implemented, other)

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information.

Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.

Reminder - Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start - Child Care Partnerships, or public educational standards which may include pre-k settings (http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01).

☑ Applicant identity.

Describe:

Applicants apply by mail, fax or dropping off materials. Since face-to-face interviews are not required, applicants who are not already known to the agency through the TANF, SNAP or medical programs must provide a photo ID.

☑ Applicant's relationship to the child.

Describe:

Applicant is not required to be related to the child.

☑ Child's information for determining eligibility (e.g., identity, age, etc.).

Describe:

Verification is only required if the child is not already known through the TANF, SNAP or medical programs. Child information can be verified by birth certificate, or school and medical records of other agencies and entities.

☑ Work.

Describe:

Employment is verified by wage receipts, employment letters, verification forms sent directly to employers, self-declared self-employment forms, IRS tax and business records.

☑ Job Training or Educational Program.

Describe:

TANF Job Training or Educational Programs are verified through the Department of Labor's online data system. High school attendance is verified by school letters, student class schedules, and progress reports.

☑ Family Income.

Describe:

Earnings are verified by wage receipts, employment letters, forms sent directly to employers, self-declared self- employment forms, IRS tax and business records or EquiFax Verification Services. Unearned income is verified by Department of Social Services online data base, award letters, copies of benefit checks, or the Department of Labor online data base.

☑ Household composition.

Describe:

The applicant's statement is accepted unless it presents a conflict. If there is a conflict, acceptable forms of verification include a landlord's statement, a copy of a lease, school records or records of other agencies, third party statement, and quality control investigations.

☑ Applicant Residence.

Describe:

The applicant's statement is accepted upon application.

☐ Other.

Describe:

Reminder - Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head

Start/Head Start standards, such as in Early Head Start - Child Care Partnerships, or public educational standards which may include pre-k settings (http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01).

3.1.8 Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?

☑ Time limit for making eligibility determinations.

Describe length of time :

30 days from receipt of a properly completed application form.

☑ Track and monitor the eligibility determination process

☑ Other.

Describe:

The Application process in accordance with Connecticut General Statutes Section 17b-749-09 (c) is as follows:

Application Processing

1. Applications shall be processed and eligibility determined within 30 days of the date that the CCAP administrator receives the application form, unless otherwise specified in this subsection. The first day of the processing period shall begin on the day following the date the application form was received. The parent shall be notified of the eligibility decision in accordance with the requirements of Section 17b-749-07 of the Regulations of Connecticut State Agencies. The provider shall also be notified if a completed child care agreement form was submitted with the application.

2. Eligibility shall be determined when sufficient information exists to determine if the family is eligible or ineligible. If the application is incomplete, the CCAP administrator shall issue a notice to the parent requesting the missing information. The parent shall be given a minimum of fifteen days from the date the notice is issued to return the information to the CCAP administrator. The first day of the fifteen-day period begins on the day the notice was issued.

3. If the parent has not selected a provider by the time eligibility is determined, the CCAP administrator shall determine if the family is eligible for the program without regard to eligibility for payments. The parent shall be notified of the decision and informed that

eligibility will be terminated if a provider is not selected and the information needed to enroll the provider is not submitted within thirty days. The CCAP administrator shall determine if a child is eligible for payment within ten days of the date the provider information is submitted. The family shall become ineligible if the information needed to determine payment eligibility for at least one child is not submitted within thirty days of the date assistance was granted.

4. Incomplete applications shall be denied only if the parent has been given at least 15 days to comply with an initial request for missing information.

5. Parents shall be given additional time to respond to a request for missing information if good cause exists for not providing the information in accordance with the requirements of subsection (e) of section 17b-749-06 of the Regulations of Connecticut State Agencies. Applications that remain incomplete after the 15 day notice period has expired shall be processed without regard to the missing information if good cause does not exist. If eligibility has not been established, the application shall be denied and the parent notified.

6. The processing period shall be extended beyond 30 days under the following conditions as long as the parent continues to cooperate with the application process:
a. If good cause exists for not providing verification in accordance with the requirements of subsection (e) of section 17b-749-06 of the Regulations of Connecticut State Agencies, and the delay causes the application to remain pending for more than 30 days;
b. If the parent or provider was not given at least 15 days to respond to an initial request for information;
c. If the parent responds timely to a request for missing information and the information submitted is either incomplete or requires additional verification before the application can be processed; or
d. If the CCAP administrator has assumed responsibility for obtaining missing information and has not been able to obtain the information.
7. The application shall continue to be processed if a good cause extension is granted or while the CCAP administrator is waiting to obtain additional verification. The extension shall continue for as long as necessary provided that the parent continues to cooperate and responds to written requests for verification in a timely manner. Additional verification or re-verification of circumstances that have already been verified may be required if the application remains pending more than thirty days. The delay in processing the application shall be considered the responsibility of the parent as long as the CCAP administrator has

taken prompt action to request the missing information in time to process the application within thirty days.

☐ None

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

Per CCDF regulations, 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 under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization. Lead Agencies must coordinate with TANF programs to ensure, pursuant 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 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:

State/Territory TANF Agency Department of Social Services

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

"appropriate child care":

Appropriate child care means care that meets the health and safety standards that are required for providers who receive payments under the provisions of the Child Care Assistance Program (CCAP), as mandated by Connecticut General Statutes, Section 17b-749.

"reasonable distance":

Reasonable distance means care that can be accessed by public transportation that is available to the client without interfering with the parent's ability to maintain employment.

If transportation is not available, child care must be within reasonable walking distance from the person's home.

"unsuitability of informal child care":

Unsuitable informal care means care that is exempt from State's licensing requirements, but does not meet the health and safety standards described above, or is otherwise shown to be unsafe or inappropriate for the child.

"affordable child care arrangements":

Affordable child care arrangements means the cost of care (after subsidies) is no more than ten percent of family's total income.

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

☑ In writing

☑ Verbally

☐ Other.

Describe:

☑ List the citation to this TANF policy.

List:

Connecticut State Department of Social Services Uniform Policy Manual transmittal UP-11-04 8500.

3.1.10 The Lead Agency certifies that it will require a family member to certify that the family assets do not exceed $1,000,000. A check-off on the application is sufficient

☑ Yes. The Lead Agency certifies that it will require families to certify that the family assets do not exceed $1,000,000 no later than September 30, 2016.

3.2 Increasing Access for Vulnerable Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. This did notchange under

reauthorization. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B))

3.2.1 Describe how the Lead Agency will prioritize or target child care services for the following children and families (658E(c)(3)(B)), including definitions, any time limits, grace periods or priority rules in the description:

a. Provide definition of "Children with special needs": Special needs is defined as a child under the age of nineteen who meets the requirements of subsection (b) of Section 17b-149 of the Regulations of Connecticut State Agencies. A child shall be considered to have special needs if the child's independence, self-sufficiency and safety is dependent on others and the child requires extra supervision, care or assistance in the child care setting due to the following physical, mental, behavioral or emotional conditions, including, but not limited to: (a) a physical handicap or health impairment that causes chronic or acute health problems such as a heart condition, orthopedic impairment, tuberculosis, asthma, epilepsy, cerebral palsy, leukemia, or congenital abnormality that has been diagnosed by the physician; (b) intellectual incapacity or spectrum disorder as diagnosed by a physician, pediatrician, or psychologist; (c) a behavioral or emotional disturbance, maladjustment or developmental delay that causes the child to exhibit marked and inappropriate behaviors or characteristics over extended periods that has been diagnosed by a psychologist, psychiatrist, or other clinically trained or state certified mental health professional acting within his or her scope or practice; (d) a speech, vision, or hearing impairment that has been diagnosed by a physician or state certified health care professional acting within his or her scope; (e) multiple handicaps that cause problems or interfere with the child's ability to function in the child care setting without extra care or supervision.

and describe how services are prioritized:

The OEC offers all Child Care Subsidy (Care 4 Kids) providers who care for children with identified special needs a 15% incentive payment.

b. Provide definition of "Families with very low incomes": Very Low Income: children living with families with income under 50 percent of the state's median income level.

and describe how services are prioritized:

Priority is given over other eligible CCDF families.

c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act)

No family fee for families with no earnings and priority is given over other eligible CCDF families.

3.2.2 Improving Access for Homeless Children and Families.

The CCDBG Act of 2014 places greater emphasis on serving homeless children and families. Stable access to high-quality child care provides tremendous benefits to all children, especially our most vulnerable children. Children and families who experience homelessness face many challenges. Improving access to child care can buffer children and families from the challenges and risks associated with homelessness by supporting children's learning and development in safe, stable and nurturing environments. Under the new law, States and Territories are required to use CCDF funds to 1) allow homeless children to receive CCDF assistance after an initial eligibility determination but before providing required documentation (including documentation related to immunizations); 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

States and Territories also must establish a grace period that allows homeless children and children in foster care (if served by the Lead Agency) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5. This flexibility will make it significantly easier for these vulnerable families to access child care services. This language is consistent with current requirements established through CCDF regulations in 1998, which required a grace period in which children can receive services while families take the necessary actions to comply with the immunization requirements. (658E(c)(2)I)(i)(I)) ACF recommends States and Territories consult the definition of homeless in the McKinney-Vento Act (section 725 of subtitle VII-B) as you implement the requirements of this section as that definition is consistent with the required CCDF administrative data reporting requirements.

Describe the status of the State/Territory's procedures to enroll and provide outreach to homeless families and establish a grace period for children in foster care, if served, for meeting immunization requirements

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe the following:

a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements

b. Procedures to conduct outreach to homeless families to improve access to child care services

c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services

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

Overall Target Completion Date (no later than September 30, 2016) 9/30/2016

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

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

On June 24, 2015, the Office of Early Childhood received onsite technical assistance from the Region 1 Office of Child Care and the National Technical Assistance Center to determine how best to serve families experiencing homelessness. The technical assistance team worked with Connecticut's CCDF administrator and other Office of Early Childhood staff, the State Administrator of the Mckinney Vento Act, and the State Head Start Collaboration Officer. The team worked to identify state resources and action steps for coordinating implementation. Subsequently, the Early Childhood Cabinet (SAC) under the leadership of the Connecticut's Lieutenant Governor and the Office of Early Childhood's Commissioner convened a sub-committee whose work focused on how the state could better meet the needs of young children and their families experiencing homelessness. A state plan was developed and approved. http://www.ctearlychildhood.org/uploads/6/3/3/7/6337139/homeless_policy_proposals_final.pdf . Most recently, Governor Dannel P Malloy introduced Senate Bill 10 An Act

Increasing Access to Child Care for Children who are Homeless. This act will create a protective service category for children who are homeless.

Unmet requirement - Identify the requirement(s) to be implemented 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Develop training and technical assistance for providers on identifying and serving families experiencing homelessness. Implement training and technical assistance.

Projected start date for each activity: 06/24/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

McKinney-Vento State Administrator, State Head Start Collaboration Officer, OEC CCDF Administrator, School Readiness Councils, other state agencies and entities

Unmet requirement - Identify the requirement(s) to be implemented A grace period that allows homeless children and children in foster care (if served by the Lead Agency) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Family's experiencing homeless will be considered a protective service category effective July 1, 2016. Licensed Connecticut's child care subsidy (Care 4 Kids)

providers will need to comply with the licensure regulations. The licensure regulations will be amended to provide a grace period for receipt of physical examination and immunization requirements for children experiencing homelessness.

Projected start date for each activity: 07/24/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

McKinney-Vento State Administrator, State Head Start Collaboration Officer, OEC CCDF Administrator, School Readiness Councils, other state agencies and entities.

Unmet requirement - Identify the requirement(s) to be implemented 3) conduct specific outreach to homeless families. (658E(c)(3))

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Office of Early Childhood will work closely with local McKinney Vento community liaisons and other state agencies who work with families experiencing homelessness to quickly identify eligible families in need of child care.

Projected start date for each activity: 07/24/2015
Projected end date for each activity: 09/30/2015
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

McKinney-Vento State Administrator, State Head Start Collaboration Officer, OEC CCDF Administrator, School Readiness Councils, other state agencies and entities.

3.3 Protection for Working Parents

3.3.1 Twelve Month Eligibility

The CCDBG Act of 2014 establishes a 12-month eligibility period for CCDF families. States are required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for not less than 12 months before the State redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i) &(ii))

Note that this change means a State may not terminate CCDF assistance during the 12 month period if a family has an increase in income that exceeds the State's income eligibility threshold, but not the federal threshold of 85% SMI.

In addition, this change means the State may not terminate assistance prior to the end of the 12 month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. For example, if a working parent is temporarily absent from employment due to extended medical leave, changes in seasonal work schedule, or a parent enrolled in training or educational program is temporarily not attending class between semesters, the state should not terminate assistance.

Describe the status of the State's establishment of a 12-month eligibility re-determination period for CCDF families.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination
List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination

☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target

completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 9/30/2016

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

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

July 1, 2015, Connecticut's Child Care Subsidy Program (Care 4 Kids) amended regulations from 8 months to 12 months for program eligibility.

Unmet requirement - Identify the requirement(s) to be implemented A minimum 12-month eligibility and redetermination period for CCDF families.

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

OEC will amend regulations to 85% SMI and define temporary changes in participation in training and/or work activities.

Projected start date for each activity: 02/15/2015
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Connecticut's Child Care Subsidy Program (Care 4 Kids)

3.3.2 State and Territory option to terminate assistance prior to 12 months

The CCDBG Act of 2014 provides States and Territories the option - but does not require them - to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a

non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible. (658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

Note that unless the State allows a minimum 3-month job search period - the State/Territory may not exercise the option to terminate assistance based on a parent's non-temporary job loss or cessation of attendance at a job training or educational program prior to the end of the minimum 12-month eligibility and re-determination period. The statute does not specify any documentation that States/Territories must require parents to submit regarding activities during periods of job search or finding training or education program requirements for this period.

Does the State/Territory terminate assistance prior to 12 months due to a parent's non-temporary loss of work or cessation of attendance at a job training or education program?

☑ Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY.

List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs

The OEC defines non-temporary change as a loss of a job or stopping an approved training activity. The parent will be provided a period of continued child care assistance for 3 months to allow parents to engage in job search or resume work.

☐ No, the State/Territory does not allow this option.

3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii)) Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and

education or public benefits programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or re-determination.

Describe the status of the State/Territory's redetermination procedures and policies to ensure that parents (especially parents receiving TANF) do not have their employment, education or job training unduly disrupted in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility.

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment

List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment

In accordance with Connecticut General Statutes Section 17b-749-02 (b) 5: Parents shall report changes in household income if above the state maximum threshold or child care arrangements in writing, by phone or in person directly to the CCAP administrator within ten days of the date of the change. Changes that are not reported timely may result in ineligibility, the loss of benefits or in an overpayment pursuant to the requirements of Sections 17b-749-02 through 17b-749-23, inclusive. The Office of Early Childhood recognizes the challenges that parents would face at redetermination or any change report if the parent had to leave their job, education or job training in order to comply with the State's requirements for redetermination of eligibility if this required an in office visit. As a result, it has been fully implemented that parents are not required to come into the office to apply for assistance or complete a redetermination. The parent has the option to mail, fax or drop off the application, redetermination or supported documents.

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

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

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

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.4 Family Contribution to Payment

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5) In addition to income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

3.4.1 Provide the CCDF copayments in the chart below according to family size.

☐ Note - If the sliding fee scale is not statewide, check here
and describe how many jurisdictions set their own sliding fee scale

Fill in the chart based on the most populous area of the State.

Family Size	(a) Lowest "Entry" Income Level Where Copayment First Applied	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b)?	(d) Maximum Highest "Entry" Income Level Before No Longer Eligible	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
1	0-20%	0-18	2%	50%	230	10%
2	0-20%	0-24	2%	50%	301	10%
3	0-20%	0-30	2%	50%	372	10%
4	0-20%	0-35	2%	50%	442	10%
5	0-20%	0-41	2%	50%	513	10%

a) What is the effective date of the sliding fee scale(s)? July 1, 2015

b) Provide the link to the sliding fee scale http://www.ctcare4kids.com/care-4-kids-program/income-guidelines/

3.4.2 How will the family's contribution be calculated and to whom will it be applied? Check all that the Lead Agency has chosen to use.

- ☐ Fee as dollar amount and
  - ☐ Fee is per child with the same fee for each child
  - ☐ Fee is per child and discounted fee for two or more children
  - ☐ Fee is per child up to a maximum per family
  - ☐ No additional fee charged after certain number of children
  - ☐ Fee is per family
- ☑ Fee as percent of income and
  - ☐ Fee is per child with the same percentage applied for each child
  - ☐ Fee is per child and discounted percentage applied for two or more children
  - ☐ Fee is per child up to a maximum per family
  - ☐ No additional percentage applied charged after certain number of children
  - ☑ Fee is per family

☐ Contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).
Describe:

☐ Other.
Describe:

3.4.3 Will the Lead Agency use other factors in addition to income and family size to determine each family's copayment? (658E(c)(3)(B))

☐ Yes, and describe those additional factors using the checkboxes below.

☐ Number of hours the child is in care

☐ Lower copayments for higher quality of care as defined by the State/Territory

☐ Other.

Describe other factors.

☑ No.

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size.

Will the Lead Agency waive family contributions/co-payments?

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

The poverty level used by the Lead Agency for a family size of 3 is $$3,716.76

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

3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable?

Check all that apply:

☑ Limits the maximum co-payment per family.

Describe:

Co-pay is based on the annual gross family and household size. The co-pay is a percentage and families would not pay anything higher then the calculated co-pay.

☑ Limits combined amount of copayment for all children to a percentage of family income.

List the percentage of the copayment limit.

Describe:

10% of a family's gross income whose income falls between 50% -75% of SMI.

☑ Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5.

Describe:

At the 12 month redetermination when a family's income changes to 50% or higher not to exceed state maximum income threshold , the family will be provided a graduated phase-out of 3 months.

☐ Does not allow providers to charge families the difference between the maximum payment rate (addressed in section 4) and their private pay rate in addition to the copayment they are paying.

Describe:

☐ Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider.

Describe:

☐ Other.

Describe:

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

The 2014 reauthorization of the CCDBG Act is designed to help States and Territories advance improvements to the quality of child care in order to promote the healthy social-emotional, cognitive and physical development of participating children. Ensuring that low-income and vulnerable children can access high-quality care (and remain enrolled to school entry and beyond) is an equally important purpose of CCDBG. Payment levels and policies have a major impact on access.

The CCDBG Act of 2014 revises the requirement for a market rate survey (MRS) so that: 1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child. Also, a State/Territory may develop and conduct an alternative methodology for setting payment rates, such as a cost estimation model, to take into account the cost of meeting quality requirements.

To provide stability of funding and encourage more child care providers to participate in the subsidy program, the State/Territory's payment practices for CCDF child care providers must reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory, such as paying for supplies, field trips, registration fees. In addition, to the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absence due to holidays or unforeseen circumstances such as illness or closures due to emergency.

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did

not change under the CCDBG Act of 2014.

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2))

Information about the full diversity of child care services available to families, providers and the general public is made through Connecticut's CCR&R (United Way of Connecticut). Additional information is also included on the Office of Early Childhood's (OEC) website and microsite. The OEC has developed materials for families that promote informed child care choices, including consumer-friendly strategies. All information is posted on the OEC's website in html format to allow for translation through the use of the website's Google translator. Connecticut offers eligible families certificates for child care subsidy that are portable and not tied to a provider.

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

- ☐ Certificate form provides information about the choice of providers, including high quality providers
- ☑ Certificate is not linked to a specific provider so parents can choose provider of choice
- ☑ Consumer education materials on choosing child care
- ☑ Referral to child care resource and referral agencies
- ☑ Co-located resource and referral in eligibility offices
- ☑ Verbal communication at the time of application
- ☑ Community outreach, workshops or other in-person activities
- ☐ Other.

Describe

4.1.3 Child Care Services Available through Grants or Contracts

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1) **Note:** Do not check "yes" if every provider is simply required to sign an agreement in order to be paid in the certificate program.

☐ Yes. If yes, **describe**

the type(s) of child care services available through grants or contracts

the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.)

the process for accessing grants or contracts

the range of providers available through grants or contracts

how rates for contracted slots are set for grants and contracts

how the State/Territory determines which entities to contract with for increasing supply and/or improving quality

if contracts are offered statewide and/or locally:

☑ No. If no, skip to 4.1.4.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following (check all that apply):

☐ Increase the supply of specific types of care with grants or contracts for:

- ☐ Programs to serve children with disabilities
- ☐ Programs to serve infants and toddlers
- ☐ Programs to serve school-age children
- ☐ Programs to serve children needing non-traditional hour care
- ☐ Programs to serve homeless children
- ☐ Programs to serve children in underserved areas

- ☐ Programs that serve children with diverse linguistic or cultural backgrounds
- ☐ Programs that serve specific geographic areas
  - ☐ Urban
  - ☐ Rural
- ☐ Other.

Describe:

☐ Improve the quality of child care programs with grants or contracts for:

- ☐ Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
- ☐ Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards
- ☐ Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
- ☐ Programs to serve children with disabilities or special needs
- ☐ Programs to serve infants and toddlers
- ☐ Programs to serve school-age children
- ☐ Programs to serve children needing non-traditional hour care
- ☐ Programs to serve homeless children
- ☐ Programs to serve children in underserved areas
- ☐ Programs that serve children with diverse linguistic or cultural backgrounds
- ☐ Programs that serve specific geographic areas
  - ☐ Urban
  - ☐ Rural
- ☐ Other.

Describe:

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care

of a provider who receives CCDF funds.

(658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access

Describe the policies and procedures for unlimited access

Connecticut's General Statute, Section 17b-749-12 (b) - Provisions Applicable to all Providers states that providers shall allow parents' unlimited access to their children and to the location where child care is provided.

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

☑ Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.

☑ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act

Describe:

The Office of Early Childhood will limit the use of in-home care by reducing the capacity of in-home care provided by relatives to a total of three children with no more than two children under the age of two.

☑ Restricted based on provider meeting a minimum age requirement

Describe:

The provider shall be no less than twenty (20) years of age and physically, emotionally and mentally able to handle child care responsibilities and emergencies and shall be free from any mental, emotional, or physical health problems which might impair such ability or otherwise adversely affect the children.

☐ Restricted based on hours of care (certain number of hours, non-traditional work hours)

Describe:

☑ Restricted to care by relatives

Describe:

The Office of Early Childhood will allow only the child's relative to provide care. The capacity of in-home care provided by relatives will be restricted to a total of three children with no more than two children under the age of two.

☐ Restricted to care for children with special needs or medical condition
Describe:

☑ Restricted to in-home providers that meet some basic health and safety requirements
Describe:
The OEC will revise Connecticut's Child Care Subsidy Program (Care 4 Kids) regulations to establish health and safety requirements for in-home relative providers to include criminal background checks, orientation training and professional development.

☐ Other
Describe:

☐ No.

4.2 Assessing Market Rates and Child Care Costs

The new law revises the requirement for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval. (see http://www.acf.hhs.gov/programs/occ/resource/ccdf-reauthorization-faq).

The MRS or alternative methodology must be developed and conducted no earlier than two years before the date of submission of the Plan (instead of two years before the effective date of the Plan, as previously required for the MRS).

The State must consult with the State Advisory Council, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the MRS or alternative methodology, including by posting the results on the Internet.

The State must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the State must take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, **to the extent practicable**, reducing the number of families receiving CCDF relative to the number served as of November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it takes to support increased stability and reduced provider turnover when setting payment rates.

4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative Methodology. Did the State/Territory conduct a statistically and valid and reliable MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?

☑ MRS

☐ Alternative Methodology.

Describe:

☐ Both.

Describe:

☐ Other.

Describe:

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities which could include worker organizations prior to developing and conducting

the MRS or alternative methodology.

Describe:

The Office of Early Childhood's (OEC) Commissioner is Co-chair of the Early Childhood Cabinet (SAC) and findings on results of Market Rate Survey were shared. The results of the Market Rate Survey were reviewed and analyzed by the staff and contractors. The Market Rate Survey was published for public review.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable.

To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory.

Describe:

The Office of Early Childhood contracted with Connecticut's CCR&R (United Way of Connecticut) to conduct a comprehensive state-wide Market Rate Survey. Information on provider charges was solicited through a standard telephone survey. The survey questions captures information on a weekly changes by setting type (licensed child care center/group child care home, family child care homes, and licensed-exempt providers), and age group (infant, toddler, preschool, school age), capacity, town and region. This information included provider, town, region, weekly cost, and capacity including the number of spaces available and number of spaces with enrollments. The 2016 Care 4 Kids payment rates, effective January 1, 2016 are analyzed against the Market Rate and determination of percentile of Market Rate is identified for each setting and age, center vs. home-based and infant/toddler, preschool, school age. This information was reviewed by the Lead Agency. The results revealed gaps, for some of the rates, between the cost of providing quality services and the revenue sources available to support programs. Additional cost analysis and consideration for rate changes to some of the subsidy rates continue.

Data collection was conducted by trained staff at the CCR&R agency, with expertise in conducting this and other surveys. The sample size of the survey to the total number of

providers in the state equals 29% for centers and 64% for family based settings. This survey is representative of Connecticut's licensed and license-exempt child care providers. The survey was conducted between May, 2015 and November, 2015 and includes the data form the most recent survey communications with the providers. The survey includes statistically valid and reliable data sets from providers across the state and from each of the five geographical regions that the subsidy rates are set.

4.2.4 Describe how the market rate survey reflects variations in the price of child care services by:

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

The Market Rate Survey included Connecticut's five geographical regions including: Eastern, North Central, North West, South West and South Central.

b) Type of provider:

licensed child care center/group child care home, family child care homes, and license-exempt providers settings were surveyed.

c) Age of child:

birth - 12

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

The Market Rate Survey included programs that meet licensing requirements, national accreditation standards, and serving children with special needs.

4.2.5 Describe the process used by the State to make the results of the market rate survey widely available to the public.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016)

12/16/2015

b) Date report containing results were made widely available, no less than 30 days after the

completion of the report 01/14/2016

c) How the report containing results was made widely available and provide the link where the report is posted if available

Office of Early Childhood posted the results on the agency's website at www.ct.gov/oec and linked to communications regarding the CCDF Public Comment period. Additional survey and summary information was made available on the United Way of Connecticut's 2-1-1 website http://www.211childcare.org/reports/

4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS or alternative methodology) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children).

☐ Note - If the payment rates are not set by the State/Territory, check here

Describe how many jurisdictions set their own payment rates

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

Rate $ 201 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 4th (north central region

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

Rate $ 205 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 72nd (north central region)

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

Rate $ 201 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 4th (north central region)

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

Rate $ 205 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 72nd (north central region)

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

Rate $ 160 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 6th (north central region)

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

Rate $ 158 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 21st (north central region)

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

Rate $ 95 per weekly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 50th (north central region)

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region
Rate $ 98 per weely unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 61st (north central region)

i) Describe the calculation/definition of full-time care:

Full Time Care is 35 to 50 hours per week

j) Provide the effective date of the payment rates : January 1, 2016

k) Provide the link to the payment rates : http://www.ctcare4kids.com/
Rate $ 98 per weely unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 61st (north central region)

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care.

In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to

these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check which types of tiered payment or rate add-on, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates, amount or percentage of the tiered rate/add-on, and indicate if the rates were set based on the MRS or another process.

☐ Tiered rate/rate add-on for non-traditional hours.

Describe:

☑ Tiered rate/rate add-on for children with special needs as defined by the State/Territory.

Describe:

The Office of Early Childhood provides a 15% tiered rate for any provider caring for a child with special needs. The OEC is in the process of modifying its payment system to allow for a new tiered reimbursement of 25%.

☐ Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on).

Describe:

☑ Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory.

Describe:

The OEC has tiered rates for reimbursing providers who have achieved national accreditation: NAEYC, NAFCC, National School Age Child Care Alliance, and Council on Accreditation of Services for Families and Children.

☐ Tiered rate/rate add-on for programs serving homeless children.

Describe:

☐ Other tiered rate/rate add-on beyond the base rate.

Describe:

☐ None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology

Describe:

In 2014, the Connecticut General Assembly and the SEIU Bargaining Unit ratified an agreement to approve a general rate increase to all licensed and license-exempt child care providers serving infants/toddlers, preschool, and school age children. Due to this agreement, significant rate increases have been made during the past three years and additional increases are scheduled for 2017.

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014.

For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

Describe:

The OEC uses a tiered rate system to address the cost of quality. In prior years, this was based on setting type, accreditation and accommodation for special needs as described in Section 4.3.2 of this plan. Connecticut is moving to increase the access to high quality child care services. Connecticut expects an increase in the number of children served in high quality settings and for a longer eligibility period of 12 months, instead of 8 months. However, the total number of children served with child care subsidies is expected to be lower than the

total in November of 2014 due to the increase in cost of care and number of months in the subsidy program.

4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access

The CCDF plan shall provide a summary of data and facts relied on by the State/Territory to certify that payment rates are sufficient to ensure equal access. (658E (c)(4)(A)) Equal access is not limited to a single percentile alone but is inclusive of various metrics or benchmarks that would offer children receiving CCDF access to the same services (type of care, quality of care) as children not receiving CCDF.

4.4.1 What data and facts did the State use to determine equal access (i.e., what is your metric or benchmark of equal access - such as percentile that rates cover or proportion of costs covered)? Check all that apply and describe.

☑ Payment rates are set at the 75th percentile or higher of the most recent survey.

Describe:

Infant/toddler care in licensed family child care home rates are at or above the 75th percentile for 2 of the 5 regions but, at the 72nd percentile for the most populated region.

☑ Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.

☐ Rates based on data on the cost to the provider of providing care meeting certain standards

Describe:

☑ Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile.

Describe:

Rates for preschool subsidies are below the 75th Percentile based on market rates for total number of spaces throughout the state. However, the average rate (across 5 regions) is 83% of the rate (in dollar) at the 75th percentile - for Preschool family based and 63% of the Preschool center based rate. Preschool rates are in alignment with state-

funded preschool through School Readiness and child day care contracted full-day/full-year spaces. Infant/toddler center-based rates are below the 75th Percentile, but the average rate is equal to 66% of the rate (in dollars) at the 75th percentile. For licensed school age care (center and family) the rates are below the 75th percentile for the half-time rate compared to above the 75th percentile for the full time rate.

☑ Data on the proportion of children receiving subsidy being served by high-quality providers.

Describe:

Connecticut's Child Care Subsidy (Care 4 Kids) program served approximately 20% of the children in high-quality, accredited facilities. This includes 17% (2,488 of 14,343) Infants & Toddlers + 33% (5,190 of 15,498) Preschool Age children + 8% (1,096 of 13,043) School Age children. The percent of children served in licensed facilities was approximately 62% which includes 70% (10,093 of 14,343) infants/toddlers + 76% (11,713 of 15,498) preschool children + 40% (5,190 of 13,043) school age children.

☑ Data on where children are being served showing access to the full range of providers. .

Describe:

The Office of Early Childhood does not restrict parent choice. Families can select any licensed provider that is operating legally in Connecticut or is licensed and in good standing in an adjacent state. Providers must meet required health and safety standards. The OEC contracts with Connecticut's CCR&R (United Way of Connecticut) to provide resource and referral services to parents.

☑ Data on how rates set below the 75th percentile allow CCDF families access to the same quality of care as families not receiving CCDF.

Describe:

Rates for preschool subsidies are below the 75th Percentile based on market rates for total number of spaces throughout the state. However, the average rate (across 5 regions) is 83% of the rate (in dollar) at the 75th percentile - for Preschool family based and 63% of the Preschool center based rate. Preschool rates are in alignment with state-funded preschool through School Readiness and child day care contracted full-day/full-year spaces. Infant/toddler center-based rates are below the 75th Percentile, but the average rate is equal to 66% of the rate (in dollars) at the 75th percentile. For licensed

school age care (center and family) the rates are below the 75th percentile for the half-time rate compared to above the 75th percentile for the full time rate.

☑ Feedback from parents, including parent survey or parent complaints.

Describe:

Parent Surveys were conducted as part of the OEC's Need Assessments in 2014 and 2015.

☐ Other.

Describe:

4.4.2 Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

☐ Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016.

Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

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

Parents can choose their provider from anywhere in the state. Providers must meet the health and safety standards, background checks and professional development requirements. Incentives are given to providers for serving children with special needs (15%). For providers achieving national accreditation receive a 5% incentive is given. The OEC staff analyzed access and utilization to licensed, license exempt, accredited, unlicensed center-based, family based, and family friends and neighbor care. All of these settings are being utilized in each of Connecticut's five regions.

Unmet requirement - Identify the requirement(s) to be implemented payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The OEC has contracted with the Connecticut Economic Resource Center (CERC), including a group of national advisors (Ajay Chaudhry, U.S. Department of Health and Human Services, Anne Mitchell, Early Childhood expert in policy research and David Murphey, Child Trends) to conduct a comprehensive state-wide unmet needs study regarding the supply and demand of child care services. The study will assess the degree to which parents can with reasonable effort enroll in an affordable child care program that meets their needs and supports their child's development. This study will allow OEC to examine several potential policy changes and funding structures to increase access to affordable child care. The OEC will increase tiered reimbursement for special need from 15% to 25% effective July 1, 2016. Pleminary findings of the unmet need study have been submitted for review and analysis. Analysis will be completed May 1, 2016 and policy and changes to funding structures will be implemented by September 30, 2016.

Projected start date for each activity: 10/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity Office

of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Connecticut Economic Resource Center (CERC), including a group of national advisors (Ajay Chaudhry, U.S. Department of Health and Human Services, Anne Mitchell, Early Childhood expert in policy research and David Murphey, Child Trends), United Way of Connecticut

4.5 Payment Practices and Timeliness of Payments

The CCDBG Act of 2014 added a provision that requires States and Territories to describe in the Plan how the State/Territory's payment practices for CCDF child care providers reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory - so as to provide stability of funding and encourage more child care providers to participate in the subsidy program. To the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences due to holidays or unforeseen circumstances such as illness. (658E(c)(2)(S))

4.5.1 Describe the status of State/Territory's payment practices for CCDF child care providers that reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented,

substantially implemented, other)

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

4.5.2 Describe how the payment practices to child care providers who serve CCDF-assisted children reflect generally accepted payment practices of other child care providers in the State/Territory to ensure stability of funding to encourage more child care providers to serve children who receive CCDF assistance. Check all that apply and describe.

The Lead Agency

☐ Pays prospectively prior to the delivery of services.

Describe:

☑ Pays within no more than 21 days of billing for services.

Describe:

Based on Connecticut's General Statutes: Payments are issued within 15 days for billing for services.

☑ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance.

Describe including the State/Territory's definition of occasional absences

Based on Connecticut's General Statutes: Occasional absences does not affect provider payments, however frequent absences which exceed 25% of the current care schedule could result in a change in the child care certificate care level.

☑ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe

Specify percent and describe

Based on Connecticut's General Statutes: An occasional absence does not affect provider payments.

☑ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month.

Specify the number of absence days allowed and paid for and describe

Based on Connecticut's General Statutes: An occasional absence does not affect provider payments.

☑ Pays on a full-time or part-time basis (rather than smaller increments such as hourly)

Describe:

- Quarter time (1-15 hours weekly)
- Half-time (16- 34 hours weekly)
- Full-time (35- 50 hours weekly)
- Full-time plus (51 - 65 hours weekly)

☐ Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)

Describe:

☑ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment

Describe:

Based on Connecticut's General Statutes: Written notices of action are sent to both providers and families within 10 days.

☑ Has a timely appeal and resolution process for payment inaccuracies and disputes.

Describe:

Based on Connecticut's General Statutes: The appeal process is open to families only. Families have 60 days to request a fair hearing. The OEC has 30 day to schedule a hearing. After a hearing is completed, OEC has 60 day to finalize a hearing decision.

☐ Other.

Describe:

☐ For those options not checked above, explain why these options are not generally accepted payment practices in your State/Territory.

4.5.3 Check and describe the strategies the State/Territory will use to ensure the timeliness of payments.

☑ Policy on length of time for making payments.

Describe length of time:

Based on Connecticut's General Statutes: Payments are issued within 15 days for billing for services.

☑ Track and monitor the payment process

Describe:

The Office of Early Childhood receives a monthly provider payment report which details the number of providers paid within the 15 day bill cycle. The report is reviewed by the OEC staff. If the report shows payments not issued within the 15 day cyle, the OEC works with Connecticut's Child Care Subsidy Program (Care 4 Kids) to correct the problem.

☑ Use of electronic tools (e.g., automated billing, direct deposit, etc.)

Describe:

The Office of Early Childhood pays via direct deposit or Electronic Transfer payment.

☐ Other.

Describe:

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

The CCDBG Act of 2014 added a provision that the State/Territory will develop and implement strategies to increase the supply and improve the quality of child care services for children in underserved areas, infants and toddlers, children with disabilities, and children who receive care during non-traditional hours. (658 E(c)(2)(M))

4.6.1 Has the State/Territory conducted data analysis of existing and growing supply needs?

☑ Yes.

Describe data sources

The OEC has contracted with the Connecticut Economic Resource Center (CERC), including a group of national advisors (Ajay Chaudhry, U.S. Department of Health and Human Services, Anne Mitchell, Early Childhood expert in policy research and David Murphey, Child Trends) to conduct a comprehensive state-wide unmet needs study regarding the supply and demand of child care services. The study also will assess the degree to which parents can with reasonable effort enroll in an affordable child care program that meets their needs and supports their child's development. This study will allow OEC to examine potential policy changes and funding mechanism that would impact access to affordable child care.

☐ No.

If no, how does the State/Territory determine most critical supply needs?

4.6.2 Describe what method(s) is used to increase supply and improve quality for:

a) Infants and toddlers (check all that apply)

- [ ] Grants and contracts (as discussed in 4.1.3)
- [x] Family child care networks
- [ ] Start-up funding
- [x] Technical assistance support
- [ ] Recruitment of providers
- [x] Tiered payment rates (as discussed in 4.4.1)
- [ ] Other.

Describe

b) Children with disabilities (check all that apply)

- [ ] Grants and contracts (as discussed in 4.1.3)
- [ ] Family child care networks
- [ ] Start-up funding
- [x] Technical assistance support
- [ ] Recruitment of providers
- [x] Tiered payment rates (as discussed in 4.4.1)
- [ ] Other.

Describe

c) Children who receive care during non-traditional hours (check all that apply)

- [ ] Grants and contracts (as discussed in 4.1.3)
- [ ] Family child care networks
- [ ] Start-up funding
- [ ] Technical assistance support
- [ ] Recruitment of providers
- [ ] Tiered payment rates (as discussed in 4.4.1)
- [ ] Other.

Describe

d) Homeless children (check all that apply)

- [ ] Grants and contracts (as discussed in 4.1.3)
- [x] Family child care networks
- [ ] Start-up funding
- [x] Technical assistance support
- [ ] Recruitment of providers
- [ ] Tiered payment rates (as discussed in 4.4.1)
- [x] Other.

Describe

The Office of Early Childhood will establish a Protective Service Category.

4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs. (658E(c)(2)(Q))

Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

- [x] Fully implemented and meeting all Federal requirements outlined above.

Describe

Connecticut's state funded School Readiness Grants and Child Day Care Contracts serve the 50 lowest income communities in the state in addition to other high need communities. The federal Preschool Development Grant serves 13 high needs communities. Connecticut's Child Care Subsidy Program (Care 4 Kids) is available state wide. The OEC Needs Assessment analyzed gaps in services for high need communities against the supply of early care and education programs and Connecticut's Child Care subsidy (Care 4 Kids) subsidies in order to determine if Connecticut is meeting the needs of its most vulnerable populations. The results of the needs assessment will allow the OEC to prioritize and allocate state and federal funds to increase access for families to programs providing high quality care.

- [ ] Not implemented. If not implemented, the State/Territory must provide a State/Territory-

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

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

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the pre-service/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards do not endanger the health and safety of CCDF children in license-exempt care. States and Territories are required to have

standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

Pre-licensure and annual unannounced inspections of licensed CCDF providers and annual inspections of license-exempt CCDF providers are now required. The CCDBG Act of 2014 requires States and Territories to establish qualifications and training for licensing inspectors and appropriate inspector-to-provider ratios. It also requires States and Territories to conduct criminal background checks for all child care staff members, including staff members who don¿t care directly for children but have unsupervised access to children and lists specific disqualifying crimes. States and Territories must certify that all child care providers comply with child abuse reporting requirements of Child Abuse Prevention and Treatment Act (CAPTA), mandatory reporting of known and suspected instances of child abuse and neglect).

5.1 Licensing Requirements and Standards

Each State is required to certify it has in effect licensing requirements applicable to all child care services provided within the State (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(I)(i))

5.1.1 The State/Territory certifies that it has licensing requirements applicable to child care services provided within the State.

(658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

Family child care homes are private family homes caring for not more than six children, including the provider's own children not in school full time, where the children are cared for not less than three nor more than twelve hours during a twenty-four hour period and where care is given on a regularly recurring basis, except that care may be provided in excess of twelve hours but not more than seventy-two consecutive hours to accommodate a need for extended care or intermittent short-term overnight care. During the regular school year, a maximum of three additional children who are in school full time, including the provider's own children, are permitted, except that if the provider has more than three children who are in

school full time, all of the provider's children are permitted.

Group child care homes provide a program of supplementary care: (a) to not less than seven or more than twelve related or unrelated children on a regular basis, or (b) that meets the definition of a family child care home except that it operates in a facility other than a private family home.

Child care centers provide a program of supplementary care to more than twelve related or unrelated children outside their own home on a regular basis.

5.1.2 Does your State/Territory exempt any child care providers from its licensing requirements?

☑ Yes.

Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers

The Office of Early Childhood will limit licensed exempt providers to:

- Relatives caring for children
- Programs administered by a public school system or municipal agency

The capacity of care provided by relatives will be restricted to a total of three children with no more than two children under the age of two.

The health, safety and development of children who receive services from these license exempt providers will be ensured by requiring the same background checks and professional development requirements based on health and safety standards. Compliance with health and safety requirements will be monitored through on-site inspections of programs administered by public school systems, municipal agencies.

☐ No.

5.1.3 Describe the status of the State/Territory's development and implementation of child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

☐ Fully implemented and meeting all Federal requirements outlined above. Describe using

5.1.4 and 5.1.5 below.

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

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

The OEC sets ratio limits for all licensed child care, group and family home providers in OEC licensing regulations.

Unmet requirement - Identify the requirement(s) to be implemented child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Restrict total capacity of unlicensed relative providers to three children with no more than two children under the age of two. Change Connecticut's Child Care Subsidy Program (Care 4 Kids) regulations. Provide notice of new requirements to providers of Care 4 Kids within 30 days of passage of new regulations.

Restrict total capacity of licensed exempt programs administered by a public school system or municipal agency (same ratio and group size as center-based):

1. Infant State/Territory age definition Under 3 years

Ratio 1:4 Group size 8

2. Toddler State/Territory age definition Under 3 years

Ratio 1:4 Group size 8

3. Preschool State/Territory age definition 3-5 years

Ratio 1:10 Group size 20

4. School age State/Territory age definition - At least 5 years of age by January 1 of the current school year, and less that 13 years of age or less than 19 with special needs, and attending school.

Ratio 1:10 Group size 20

Projected start date for each activity: 10/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Connecticut's Child Care Subsidy Program (Care 4 Kids)

5.1.4 Describe how the State/Territory child care standards for providers receiving CCDF address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

a) Licensed Center-Based Care

1. Infant

- State/Territory age definition:

Under 3 year

- Ratio:

1:4

- Group Size:

8

2. Toddler
- State/Territory age definition:

Under 3 years
- Ratio:

1:4
- Group Size:

8

3. Preschool:
- State/Territory age definition:

3-5 years
- Ratio:

1:10
- Group Size:

20

4. School-Age
- State/Territory age definition:

At least 5 years of age by January 1 of the current school year, and less that 13 years of age or less than 19 with special needs, and attending school.
- Ratio:

1:10
- Group Size:

20

5. If any of the responses above are different for exempt child care centers, describe:

License exempt programs administered by a public school system or municipal agency will follow ratios and group size as licensed child care centers.

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups.

When there is a mixed age group, the lower required ratio for the ages of the youngest child shall prevail.

b) Licensed Group Child Care Homes:

1. Infant
   - State/Territory age definition:

Under 3 years
   - Ratio:

1:4
   - Group Size:

8

2. Toddler
   - State/Territory age definition:

Under 3 years
   - Ratio:

1:4
   - Group Size:

8

3. Preschool:
   - State/Territory age definition:

3-5 years
   - Ratio:

1:10

- Group Size:

20

4. School-Age
   - State/Territory age definition:

At least 5 years of age by January 1 of the current school year, and less than 13 years of age or less than 19 with special needs, and attending school.
   - Ratio:

1:10
   - Group Size:

20

5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day

All children in the facility must be included in ratio and group size. Programs serving children less than 3 years or school age must hold appropriate endorsements.

6. If any of the responses above are different for exempt group child care homes, describe

☐ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care:

1. Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

Describe the ratios:

The provider shall care for no more than two children under the age of two, including his/her own children, except that the provider may care for up to six children under the

age of two years when an approved assistant or substitute is present. In addition to the six children counted in the regular capacity, the provider may have three additional children who are attending school full time before and after school during the school year only.

Describe the group size:

The provider shall care for no more than two children under the age of two, including his/her own children, except that the provider may care for up to six children under the age of two years when an approved assistant or substitute is present. In addition to the six children counted in the regular capacity, the provider may have three additional children who are attending school full time before and after school during the school year only.

Describe the threshold for when licensing is required:

Relatives caring for children will have a limited capacity of three children, with no more than two children under the age of two. Additional children including unrelated children would require licensing.

Describe the maximum number of children that are allowed in the home at any one time:

The provider shall care for no more than two children under the age of two, including his/her own children, except that the provider may care for up to six children under the age of two years when an approved assistant or substitute is present. In addition to the six children counted in the regular capacity, the provider may have three additional children who are attending school full time before and after school during the school year only.

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

The provider shall care for no more than two children under the age of two, including his/her own children, except that the provider may care for up to six children under the age of two years when an approved assistant or substitute is present. In addition to the six children counted in the regular capacity, the provider may have three additional children who are attending school full time before and after school during the school year only.

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:

The provider shall care for no more than two children under the age of two, including

his/her own children, except that the provider may care for up to six children under the age of two years when an approved assistant or substitute is present. In addition to the six children counted in the regular capacity, the provider may have three additional children who are attending school full time before and after school during the school year only.

2. If any of the responses above are different for exempt family child care home providers, describe

Relatives caring for children will have a limited capacity of three children, with no more than two children under the age of two.

d) Any other eligible CCDF provider categories:

Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

Describe the ratios:

1:3

Describe group size:

3

Describe the threshold for when licensing is required:

4

Describe maximum number of children that are allowed in the home at any one time:

3

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

yes, related children must be included in the ratio

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:

No more then 2 children under the age of two at anytime.

5.1.5 Describe how the State/Territory child care standards address required

qualifications for providers appropriate to each type of setting, including the minimum age allowed,minimum education level, any specific content required related to the age of children. (658E(c)(2)(H))

a) Licensed Center-Based Care:

1. Infant lead teacher

A designated head teacher shall be on site for sixty percent (60%) of the time the child care center is in operation on a weekly basis. There shall be at least two (2) staff eighteen (18) years of age or older on the premises when one (1) or more children are in attendance. A designated head teacher shall be twenty years of age or older, have personal qualifications needed to supervise people and have either: (a) a high school diploma or equivalency certificate and at least one thousand eighty (1080) hours of documented supervised experience over a nine (9) month span of time in a program which serves children of the same age and developmental stage who are served at the center and one of the following: a current center-based Child Development Associate Credential, or 12 credits in early childhood education or child development from an accredited institution of higher education or approval by the department as a head teacher prior to January 1, 1994, or (b) a four (4) year college degree in early childhood education or child development from an accredited institution of higher education and at least three hundred sixty (360) hours of documented supervised experience and at least one semester of student teaching with children of the same ages and developmental stages who are served at the center. and assistant teacher qualifications

and assistant teacher qualifications:

A second program staff person who works under the supervision of the head teacher shall be eighteen (18) years of age or older and have at least one of the following: a high school diploma, an equivalency certificate, or at least five hundred forty (540) hours documented experience in working with unrelated children of the same age(s) to be served in the child care center.

2. Toddler lead teacher

A designated head teacher shall be on site for sixty percent (60%) of the time the child care center is in operation on a weekly basis. There shall be at least two (2) staff eighteen (18) years of age or older on the premises when one (1) or more children are in attendance. A designated head teacher shall be twenty years of age or older, have personal qualifications needed to supervise people and have either: (a) a high school

diploma or equivalency certificate and at least one thousand eighty (1080) hours of documented supervised experience over a nine (9) month span of time in a program which serves children of the same age and developmental stage who are served at the center and one of the following: a current center-based Child Development Associate Credential, or 12 credits in early childhood education or child development from an accredited institution of higher education or approval by the department as a head teacher prior to January 1, 1994, or (b) a four (4) year college degree in early childhood education or child development from an accredited institution of higher education and at least three hundred sixty (360) hours of documented supervised experience and at least one semester of student teaching with children of the same ages and developmental stages who are served at the center. and assistant teacher qualifications

and assistant teacher qualifications:

A second program staff person who works under the supervision of the head teacher shall be eighteen (18) years of age or older and have at least one of the following: a high school diploma, an equivalency certificate, or at least five hundred forty (540) hours documented experience in working with unrelated children of the same age(s) to be served in the child care center.

3. Preschool lead teacher

A designated head teacher shall be on site for sixty percent (60%) of the time the child care center is in operation on a weekly basis. There shall be at least two (2) staff eighteen (18) years of age or older on the premises when one (1) or more children are in attendance.

A designated head teacher shall be twenty years of age or older, have personal qualifications needed to supervise people and have either: (a) a high school diploma or equivalency certificate and at least one thousand eighty (1080) hours of documented supervised experience over a nine (9) month span of time in a program which serves children of the same age and developmental stage who are served at the center and one of the following: a current center-based Child Development Associate Credential, or 12 credits in early childhood education or child development from an accredited institution of higher education or approval by the department as a head teacher prior to January 1, 1994, or (b) a four (4) year college degree in early childhood education or child development from an accredited institution of higher education and at least three hundred sixty (360) hours of documented supervised experience and at least one semester of student teaching with children of the same ages and developmental stages

who are served at the center. and assistant teacher qualifications

and assistant teacher qualifications:
A second program staff person who works under the supervision of the head teacher shall be eighteen (18) years of age or older and have at least one of the following: a high school diploma, an equivalency certificate, or at least five hundred forty (540) hours documented experience in working with unrelated children of the same age(s) to be served in the child care center.
4. School-Age lead teacher
A designated head teacher shall be on site for sixty percent (60%) of the time the child care center is in operation on a weekly basis. There shall be at least two (2) staff eighteen (18) years of age or older on the premises when one (1) or more children are in attendance.
A designated head teacher shall be twenty (20) years of age or older, have the personal qualities needed to supervise others, a high school diploma or equivalency certificate, at least five hundred forty (540) hours of documented supervised experience over at least a nine (9) month span including working with children of the same ages and developmental stages who are served in the child care center and one of the following: twelve (12) credits in early childhood education or child development, elementary education, recreation, group social work or a related field from an accredited institution of higher or a four (4) year college degree in elementary education, recreation, group social work, or a related field from an accredited institution of higher education, with at least two hundred seventy (270) hours of documented supervised experience. and assistant teacher qualifications.

and assistant teacher qualifications:
A second program staff person who works under the supervision of the head teacher shall be eighteen (18) years of age or older and have at least one of the following: a high school diploma, equivalency certificate, or at least five hundred forty (540) hours documented experience in working with unrelated children of the same age(s) to be served in the group child care home.
5. Director qualifications:
Director qualifications: the child care center shall have a designated director who shall have within one year of being hired or designated at least three credits in the administration of early childhood.

b) Licensed Group Child Care Homes:

1. Infant lead teacher

A designated head teacher shall be on site for sixty percent (60%) of the time the group child care home is in operation on a weekly basis. There shall be at least two (2) staff eighteen (18) years of age or older on the premises when one (1) or more children are in attendance. A designated head teacher shall be twenty (20) years of age or older, have personal qualifications needed to supervise people and have a high school diploma or equivalency certificate and at least one thousand eighty (1080) documented hours of experience over a nine (9) month span of time working with children of the same ages and developmental stages to be served in the group child care home, or a four (4) year college degree in early childhood education or child development from an accredited institution of higher education, at least three hundred sixty (360) hours of documented supervised experience and at least one semester of student teaching with children of the same ages and developmental stages who are served in the group child care home and assistant qualifications.

and assistant qualifications:

A second program staff person who works under the supervision of the head teacher shall be eighteen (18) years of age or older and have at least one of the following: a high school diploma, equivalency certificate, or at least five hundred forty (540) hours documented experience in working with unrelated children of the same age(s) to be served in the group child care home.

2. Toddler lead teacher

A designated head teacher shall be on site for sixty percent (60%) of the time the group child care home is in operation on a weekly basis. There shall be at least two (2) staff eighteen (18) years of age or older on the premises when one (1) or more children are in attendance.

A designated head teacher shall be twenty (20) years of age or older, have personal qualifications needed to supervise people and have a high school diploma or equivalency certificate and at least one thousand eighty (1080) documented hours of experience over a nine (9) month span of time working with children of the same ages and developmental stages to be served in the group child care home, or a four (4) year college degree in early childhood education or child development from an accredited institution of higher education, at least three hundred sixty (360) hours of documented supervised experience

and at least one semester of student teaching with children of the same ages and developmental stages who are served in the group child care home and assistant qualifications.

and assistant qualifications:
A second program staff person who works under the supervision of the head teacher shall be eighteen (18) years of age or older and have at least one of the following: a high school diploma, equivalency certificate, or at least five hundred forty (540) hours documented experience in working with unrelated children of the same age(s) to be served in the group child care home.
3. Preschool lead teacher
A designated head teacher shall be on site for sixty percent (60%) of the time the group child care home is in operation on a weekly basis. There shall be at least two (2) staff eighteen (18) years of age or older on the premises when one (1) or more children are in attendance. A designated head teacher shall be twenty (20) years of age or older, have personal qualifications needed to supervise people and have a high school diploma or equivalency certificate and at least one thousand eighty (1080) documented hours of experience over a nine (9) month span of time working with children of the same ages and developmental stages to be served in the group child care home, or a four (4) year college degree in early childhood education or child development from an accredited institution of higher education, at least three hundred sixty (360) hours of documented supervised experience and at least one semester of student teaching with children of the same ages and developmental stages who are served in the group child care home and assistant qualifications.

and assistant qualifications:
A second program staff person who works under the supervision of the head teacher shall be eighteen (18) years of age or older and have at least one of the following: a high school diploma, equivalency certificate, or at least five hundred forty (540) hours documented experience in working with unrelated children of the same age(s) to be served in the group child care home.
4. School-Age lead teacher
A designated head teacher shall be on site for sixty percent (60%) of the time the group child care home is in operation on a weekly basis. There shall be at least two (2) staff eighteen (18) years of age or older on the premises when one (1) or more children are in

attendance. A designated head teacher shall be twenty (20) years of age or older, have personal qualifications needed to supervise people and have a high school diploma or equivalency certificate and at least one thousand eighty (1080) documented hours of experience over a nine (9) month span of time working with children of the same ages and developmental stages to be served in the group child care home, or a four (4) year college degree in early childhood education or child development from an accredited institution of higher education, at least three hundred sixty (360) hours of documented supervised experience and at least one semester of student teaching with children of the same ages and developmental stages who are served in the group child care home and assistant qualifications.

and assistant qualifications:

A second program staff person who works under the supervision of the head teacher shall be eighteen (18) years of age or older and have at least one of the following: a high school diploma, equivalency certificate, or at least five hundred forty (540) hours documented experience in working with unrelated children of the same age(s) to be served in the group child care home.

☐ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care home provider qualifications

The provider shall be no less than twenty (20) years of age and physically, emotionally and mentally able to handle child care responsibilities and emergencies and shall be free from any mental, emotional, or physical health problems which might impair such ability or otherwise adversely affect the child care children. The provider must hold a valid first aid certificate.

The provider may have substitutes and assistants in the facility only after the intended staff member has submitted a staff approval application to the agency and it has been approved in writing.

Substitute: Any person twenty (20) years of age or older who meets the same requirements as the provider

Assistant: Any adult who meets the same requirements as the provider.

d) Other eligible providers qualifications:

not applicable

5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and

Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics.

(658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

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

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

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

Provide a citation and a link if available

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

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

Since 2014 the OEC has required all licensed family providers and unlicensed family, friends and neighbors must complete a four hour pre-service training on health and safety topics. The topic includes child development, safe sleep practices, healthy and safety care environments.As part of the orientation training each participant receives a fire extinguisher, carbon monoxide detector and developmentally appropriate resources.To date 6,000 providers have been trained. Each provider receives a certificate of completion and is then approved to receive child care subsidy. The OEC plans on continuing this training for all relative providers.

Unmet requirement - Identify the requirement(s) to be implemented Prevention and control of infectious diseases (including immunization)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Change Connecticut's Office of Early Childhood Licensing regulations to establish health and safety requirements for license -exempt Care 4 Kids providers in all 12 topic areas. Change licensing regulations that govern family child care, group child care homes and child care centers to include health and safety requirements not currently required.

Projected start date for each activity: 07/15/2015

Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented Administration of medication, consistent with standards for parental consent

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

- Change Connecticut's Office of Early Childhood Licensing regulations to establish health and safety requirements for license - exempt Care 4 Kids providers in all 12 topic areas. Change licensing regulations that govern family child care, group child care homes and child care centers to include health and safety requirements not currently required.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented Prevention of and response to emergencies due to food and allergic reactions

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

- Change Connecticut's Office of Early Childhood Licensing regulations to establish health and safety requirements for license - exempt Care 4 Kids providers in all 12 topic areas. Change licensing regulations that govern family child care, group child care

homes and child care centers to include health and safety requirements not currently required.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Change Connecticut's Office of Early Childhood Licensing regulations to establish health and safety requirements for license -exempt Care 4 Kids providers in all 12 topic areas. Change licensing regulations that govern family child care, group child care homes and child care centers to include health and safety requirements not currently required.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented Prevention of shaken baby syndrome and abusive head trauma

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Change Connecticut's Office of Early Childhood Licensing regulations to establish health and safety requirements for license -exempt Care 4 Kids providers in all 12 topic areas. Change licensing regulations that govern family child care, group child care homes and child care centers to include health and safety requirements not currently required.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Change Connecticut's Office of Early Childhood Licensing regulations to establish health and safety requirements for license -exempt Care 4 Kids providers in all 12 topic areas. Change licensing regulations that govern family child care, group child care homes and child care centers to include health and safety requirements not currently required.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Change Connecticut's Office of Early Childhood Licensing regulations to establish health and safety requirements for license -exempt Care 4 Kids providers in all 12 topic areas. Change licensing regulations that govern family child care, group child care homes and child care centers to include health and safety requirements not currently required.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented Precautions in transporting children (if applicable)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Change Connecticut's Office of Early Childhood Licensing regulations to establish health and safety requirements for license -exempt Care 4 Kids providers in all 12 topic areas. Change licensing regulations that govern family child care, group child care homes and child care centers to include health and safety requirements not currently required.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The

Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented Prevention of sudden infant death syndrome and use of safe sleeping practices

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

- Change Connecticut's Office of Early Childhood Licensing regulations to establish health and safety requirements for license - exempt Care 4 Kids providers in all 12 topic areas. Change licensing regulations that govern family child care, group child care homes and child care centers to include health and safety requirements not currently required.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children Basics* for best practices and recommended time needed to address these training requirements.

☐ Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training

requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016.

Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

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

Overall Target Completion Date (no later than September 30, 2016) 07/01/2017

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

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

Since 2014, the OEC has required all licensed family providers and unlicensed family, friends and neighbors to complete a four hour pre-service training on health and safety topics. The topic includes child development, safe sleep practices, healthy and safety care environments.As part of the orientation training each participant receives a fire extinguisher, carbon monoxide detector and developmentally appropriate resources.To date, 6,000 providers have been trained. Each provider receives a certificate of completion and is then approved to receive child care subsidy. The OEC plan on continuing this training for all relative providers.

Unmet requirement - Identify the requirement(s) to be implemented pre-service (prior to initial service) or orientation (period from when service started) appropriate to the provider setting that address each of the requirements relating to the required topic areas

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Request for waiver to allow for the necessary time for the OEC to develop new legislation to require all CCDF provider to complete a mandatory orientation training on required health and safety topic areas. The legislation will enable the OEC to enforce this mandatory requirement. The OEC will establish a 6 month orientation period for all license center, family/ group homes and license exempt program providers to complete the 18 hours training on all health and safety topics for all.

Projected start date for each activity: 10/01/2015
Projected end date for each activity: 07/01/2017
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the required topic areas

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Request for waivers to allow for the necessary time for the OEC to develop new legislation to require all CCDF provider to complete a mandatory orientation training on required health and safety topic areas. The legislation will enable the OEC to enforce this mandatory requirement.

All license center, family/group homes and licensed exempt program will need to complete 1% of hours worked for annual professional development, e.g. full-time teacher total hours worked annually = 2080 20 hours annually of professional development. All licensed exempt relative providers will need to complete 4 hours orientation health and safety training within 60 days of providing care and within the first 6 months of providing care receive a First Aid / CPR certificate. For ongoing professional development relatives will be required to maintain current First Aid /

CPR certicates.

Projected start date for each activity: 10/01/2015
Projected end date for each activity: 07/01/2017
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

5.1.7 Does the State/Territory have health and safety requirements for any of the following optional areas?

☑ Nutrition (including age appropriate feeding).

Describe:

Licensed providers receiving Connecticut's Child Care Subsidy (Care 4 Kids) will need to comply with the licensure requirements regarding nutrition.Connecticut's regulations will be amended.

☑ Access to physical activity.

Describe:

Licensed providers receiving Connecticut's Child Care Subsidy (Care 4 Kids) will need to comply with the licensure requirements regarding physical activity.

☐ Screen time.

Describe:

☐ Caring for children with special needs.

Describe:

☐ Recognition and reporting of child abuse and neglect.

Describe:

☐ Other subject areas determined by the State/Territory to be necessary to promote child

development or to protect children's health and safety.

Describe:

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from these CCDF health and safety requirements.

Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics?

☐ Yes, all relatives are exempt from all health and safety training requirements.

If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care.

☐ Yes, some relatives are exempt from health and safety training requirements.

If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

☐ No, relatives are not exempt from CCDF health and safety training requirements.

5.2 Monitoring and Enforcement Policies and Practices

5.2.1 The State/Territory certifies that the State/Territory shall have in effect policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements. (658E(c)(2)(J))

☐ Yes.

The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities as of March 1, 2016. List the policy citation

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

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

All licensed providers are monitored pursuant to Section 19a-87b (family child care homes), and Section 19a-80 (group child care homes and child care centers).

All licensed providers are monitored pursuant to Section 19a-87b (family child care homes), and Section 19a-80 (group child care homes and child care centers).

Unmet requirement - Identify the requirement(s) to be implemented policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Establish policies and procedures to monitor and inspect license- exempt providers and programs administered by a public school system or municipal agency based on specified health & safety requirements. -May 2016.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Develop a system to track completion of orientation and annual professional development hours.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The OEC will change Care 4 Kids regulations to require license-exempt providers and programs administered by a public school system or municipal agency to meet specified health and safety requirements and complete annual inspections, and address enforcement policies

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

The United Way of Connecticut

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The OEC will develop an inspection form and a system for tracking inspection results forprograms administered by a public school system or municipal agency inspection form and a system for tracking inspection results

Projected start date for each activity: 07/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

The United Way of Connecticut

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Train inspectors

Projected start date for each activity: 07/15/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

The United Way of Connecticut

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Develop a system to track completion of orientation and annual professional development hours

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

The United Way of Connecticut

5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives). While the law does not specify strategies to meet these requirements, States and Territories could consider implementing a differential monitoring approach as long as the full complement of licensing and CCDF health and safety standards was representative and the frequency was at least annually.

a) **Licensing Inspectors** - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))

☐ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting:

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than

November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 11/19/2016

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

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

All child care licensing staff undergoes extensive in office and in the field training in line with written policies and procedures which cover the topics of general expectations of conduct during inspections, initial licensing, conducting inspections and complaints, application of the regulations pertaining to each license type. All staff are required to complete diversity training.

Unmet requirement - Identify the requirement(s) to be implemented ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State¿s licensure requirements.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The OEC will identify and approve trainings in all 12 topic areas that will meet the requirements.The OEC will make available to and require all Licensing Inspectors to complete the required trainings in all health and safety topic areas.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 11/19/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

The United Way of Connecticut

b) **Inspections for Licensed CCDF Providers** - It will require licensing inspectors to perform inspections, with not less than one prelicensure inspection, for compliance with health, safety, and fire standards, of each such child care provider and facility in the State/Territory. It will require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))

☑ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits

Inspections for Licensed CCDF Providers and Ratio of Licensing Inspectors- section 19a-87b (family child care homes), and section 19a-80(b) (group child care homes and child care centers).

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

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

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

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

c) **Inspections for License-Exempt CCDF Providers (except those serving relatives)**) - It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

☐ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements:

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 11/19/2016

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

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

The OEC will identify health and safety requirements that all license- exempt Care 4 Kids providers will need to meet.

Unmet requirement - Identify the requirement(s) to be implemented policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B))).

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The OEC will change Care 4 Kids regulations to require license- exempt providers to meet specified health and safety requirements and complete annual inspections, and address enforcement policies

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 11/19/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The OEC will develop a license-exempt inspection form and a system for tracking inspection results.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 11/16/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Train inspectors

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 11/19/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

d) **Ratio of Licensing Inspectors**) - It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))

☑ Yes.

The State/Territory certifies that it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors:

Inspections for Licensed CCDF Providers and Ratio of Licensing Inspectors- section 19a-87b (family child care homes), and section 19a-80(b) (group child care homes and child care centers.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented,

substantially implemented, other)

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

e) **Child Abuse and Neglect Reporting** - That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)) (658E(c)(2)(L))

☑ Yes.

Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s):

Child Abuse and Neglect Reporting-Section 17a-101 of Connecticut General Statutes, and sections 19a-87b-10(j)(3) and 19a-79-3a(8)(E) of the Regulations of Connecticut State Agencies

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

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

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

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from inspection requirements.

Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

☑ Yes, all relatives are exempt from all inspection requirements.

If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care.

The health, safety and development of children who receive services from license- exempt relatives providers will be ensured by: a) requiring the same background checks and completing an orientation training related to health and safety b) restricting total capacity to three children with no more than two children under the age of two; and c) requiring the relative provider to maintain current First Aid and CPR certification.

☐ Yes, some relatives are exempt from inspection requirements.

If the State/Territory exempts some relatives from the inspection requirements, describe

which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

☐ No, relatives are not exempt from inspection requirements.

5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds to conduct criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories must have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as other adults in the household that may have unsupervised access to children. These provisions must be in place no later than September 30, 2017.

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification ; and National Sex Offender Registry. Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.
Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The State/Territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific

disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.
Fees for background checks - Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.
Transparency - The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website (also see section 2.3) or other publicly available venue.
Appeals process - The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.
Privacy considerations - Lead Agency may not publicly release the results of individual background checks.

5.3.1 Describe the status of the State/Territory's requirements, policies, and procedures for criminal background checks for child care staff members and child care providers.

☐ Fully implemented and meeting all Federal requirements outlined above.

List the policy citation within the Lead Agency's rules and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

☑ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2017) 09/30/2017

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

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

The OEC has drafted a statutory proposal to bring Connecticut's law into compliance with CCDF reauthorization. The OEC has met with the Governor's office to begin the process for changing State statute.

Unmet requirement - Identify the requirement(s) to be implemented. Requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The OEC will enter into discussions with the vendor regarding utilizing the Connecticut Department of Public Health's Long Term Care's system with adaptations that comply with CCDF reauthorization.

Projected start date for each activity: 10/01/2015
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Public Health

5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3rd party meet the requirements, protecting the privacy of child care staff members, and providing opportunities for applicants to appeal the results of background checks.

Describe:

The OEC is exploring an online system with mechanisms to expedite the process. These mechanisms include the ability to have child care centers enter their own information into the system. Additionally, this system will allow the OEC to transition from the current use of paper and ink fingerprints to electronic fingerprints. The system has built in protections to safeguard highly confidential FBI information.

5.3.3 Describe how the State/Territory is assisting other States process background checks, including which agency/entity is responsible for working with other states

Describe:

The State of Connecticut is very transparent with respect to criminal conviction information. It has criminal conviction information readily available on the state's judicial website; sex offender registry information is also readily available. In addition, the OEC will work with the Department of Children and Families to ensure that child abuse registry information is accessible to other states.

5.3.4 Does the State have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

☐ Yes.

Describe:

☑ No.

5.3.5 Does the Lead Agency disqualify child care staff members based on their conviction for other crimes not specifically listed above?

☑ Yes.

Describe:

OEC has added the following "disqualifying" language to our licensing legislative proposal: "has a criminal or protective service record in this state or any other state that the commissioner reasonably believes renders the person unsuitable to provide child care."

☐ No.

5.3.6 Does your State State/Territory exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and

uncles, 98.41(A)(ii)(A)) from background checks?

☐ Yes, all relatives are exempt from all background check requirements.

☐ Yes, some relatives are exempt from the background check requirements. If the State /Territory exempts some relatives from background check requirements, describe which relatives are exempt. from which requirements (some or all).

Describe.

☑ No, relatives are not exempt from background checks.

5.3.7 Describe how fees charged for completing the background checks do not exceed the actual cost of processing and administration, including how the State State/Territory ensures that 3rd party vendors or contractors do not charge fees that exceed the actual cost of processing and administration, if applicable.

Lead Agencies can report that no fees are charged if applicable:

Describe.

A requirement will be added to statute that fees charged will not exceed the actual cost of processing and administration.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue:

Describe.

Policies will be published on OEC's website. Many of the policies are already specified on the state police's website.

5.3.9 Does the Lead Agency release aggregated data by crime?

☐ Yes.

List types of crime included in the aggregated data:

☑ No.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring, registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a "career ladder" that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children's development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated

into Section 6.

6.1 Training and Professional Development Requirements

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements 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 across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

6.1.1 Describe the status of the State's training and professional development requirements 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.

a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).

b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood

Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.)

c) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)

d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF

e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

☐ Fully implemented and meeting all Federal requirements outlined above. Describe using 6.1.2 through 6.1.6 below.

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

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

Connecticut utilizes a regional technical assistance network, a college and university system, and web-based learning applications to provide ongoing training and professional learning reflecting research and best practice. Professional learning activities encompass health and safety requirements and Connecticut's Early Learning and Develop Standards (ELDS) which include social/emotional and intellectual habits.

Connecticut is in the final stages of developing Core Knowledge and Competencies (CKC's) for professionals working with children and their families. These competencies are designed to address professionals working in a variety of sectors and settings. These evidence based competencies incorporate the knowledge and application of Connecticut's ELDS and strategies to support English language learners and children with special needs. Connecticut has recently developed additional learning standards which address social/emotional and intellectual habits from birth through school age. The competencies provide a roadmap for professional learning design to serve diverse adult learners from career entry to mastery level.

The Early Childhood Cabinet (SAC) used federal resources to support the creation of Connecticut's Birth - 5 Early Learning and Development Standards (ELDS) and Connecticut's Core Knowledge Competencies (CKC) Framework. To date the Cabinet has adopted the Connecticut's Birth - 5 Early Learning Standards for state-wide implementation. The Core Knowledge and Competencies Framework will be finalized January 2016 for state-wide distribution. Members of the Early Childhood Cabinet (SAC) will serve on the state-wide Continuous Quality Improvement (CQI) Advisory Committee. The CQI will oversee all policy decisions for the design and delivery of state-wide professional learning activities.

The Office of Early Childhood implements a state wide NAEYC Accreditation Facilitation Project (AFP). In existence since 1991, this project assists early childhood community- and school-based programs to achieve NAEYC Accreditation. The AFP provides cohort based supports including monthly meetings and individualized on-site assistance to licensed center-based providers; and free training and technical assistance to achieve performance of NAEYC's 10 Program Standards to all settings. A planned curriculum and statewide implementation policies ensure uniformity of high quality delivery and consistency and equity of access for participants. The technical assistance providers are a regionally based network of early childhood experts with training in NAEYC Accreditation, facilitation, and best practices.

The Connecticut's OEC Licensing Division requires that all licensed center-based providers complete annual professional development hours based on 1% of hours worked per year.

Providers supported through Indian tribes / tribal organizations that receive child care subsidies are eligible for all OEC approved professional learning activities.

Unmet requirement - Identify the requirement(s) to be implemented Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Connecticut is developing a Quality Improvement System (QIS) to improve the quality and delivery of professional learning in all types of settings including center, school, and family based programs. Connecticut will provide professional learning activities using a combination of strategies and supports including training, professional learning communities, online tools and resources, and in-person support such as coaching and consultation. The Office of Early Childhood will partner with Connecticut's CCR&R (United Way of Connecticut) to implement the QIS. The QIS will enhance Connecticut's current regional technical assistance network and serve as the umbrella for all professional learning opportunities. The Continuous Quality Improvement (CQI) Advisory Committee will oversee all policy decisions for state-wide professional learning activities. This will ensure consistency, continuity, and quality of all professional learning.

Projected start date for each activity: 01/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

Unmet requirement - Identify the requirement(s) to be implemented Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Connecticut will require all **center-based and group home licensed providers** who receive a Care 4 Kids subsidy to complete 18 hours of trainings within the first 6 months of employment on the following topics:

1. Medication Administration
2. Prevention of and response to emergencies due to food and allergic reactions
3. First Aid
4. CPR
5. Handling and storage of hazardous materials and appropriate disposal of bio contaminants (OSHA)
6. Prevention and control of infectious diseases (including immunization)
7. SIDS prevention and safe sleep practices
8. Building and physical premises safety (including playground and vehicle)
9. Shaken baby syndrome and head trauma
10. Emergency preparedness
11. Precautions in transporting children (if applicable)
12. Child Development
13. Recognition and reporting of abuse and neglect

And require 1% of hours worked annually on the following topics:

- Medication Administration (renewed at expiration)
- First Aid/ CPR (renewed at expiration)
- OSHA
- Any other health and safety topic where content has been modified or updated
- Other related topic areas to build knowledge and skills in working with children and families.

Connecticut will require for all **licensed family child care providers** who received a Care 4 Kids subsidy to complete 18 hours within the first 6 months of providing service on the following topics:

1. Medication Administration
2. Prevention of and response to emergencies due to food and allergic reactions

3. First Aid
4. CPR
5. Handling and storage of hazardous materials and appropriate disposal of bio contaminants (OSHA)
6. Prevention and control of infectious diseases (including immunization)
7. SIDS prevention and safe sleep practices
8. Building and physical premises safety (including playground and vehicle)
9. Shaken baby syndrome and head trauma
10. Emergency preparedness
11. Precautions in transporting children (if applicable)
12. Child Development
13. Recognition and reporting of abuse and neglect

And 18 hours annually on the following topics:

- Medication Administration(renewed at expiration)
- First Aid/ CPR (renewed at expiration)
- OSHA
- Any other health and safety topic where content has been modified or updated
- Other related topic areas to build knowledge and skills in working with children and families.

Connecticut will require for all **licensed exempt providers** who received a Care 4 Kids subsidy to complete 18 hours within the first 6 months of providing service on the following topics:

1. Medication Administration
2. Prevention of and response to emergencies due to food and allergic reactions
3. First Aid
4. CPR
5. Handling and storage of hazardous materials and appropriate disposal of bio contaminants (OSHA)
6. Prevention and control of infectious diseases (including immunization)
7. SIDS prevention and safe sleep practices
8. Building and physical premises safety (including playground and

vehicle)

9. Shaken baby syndrome and head trauma

10. Emergency preparedness

11. Precautions in transporting children (if applicable)

12. Child Development

13. Recognition and reporting of abuse and neglect

And 1% of hours worked annually on the following topics:

- Medication Administration (renewed at expiration)
- First Aid/ CPR (renewed at expiration)
- OSHA
- Any other health and safety topic where content has been modified or updated
- Other related topic areas to build knowledge and skills in working with children and families.

Projected start date for each activity: 01/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

United Way of Connecticut

6.1.2 Describe how the State provides ongoing training and professional development, provides for a progression of professional development (such as allows an individualto build on entry- and mid-level training and education both in terms of the skills and knowledge they attain but also in terms of credit that leads toward a higher level credential or certification, including articulation agreements) reflecting research and best practice to meet the developmental needs of participating children and improve the quality and stability of the child care workforce:

☑ State/Territory professional standards and competencies.

Describe.

Connecticut is in the final stages of developing a set of Core Knowledge and Competencies (CKC) Framework for professionals working with children and their families. The competencies are designed to address the knowledge and skills necessary

to provide high quality services in a variety of sectors and settings. These evidence-based competencies incorporate the knowledge and application of Connecticut's ELDS and support English language learner and children with special needs. The CKCs Framework provides a shared language for providers and those who support their development.

This Framework serves pre-service teacher preparation. Most of Connecticut's community colleges offer coursework towards the completion of a CDA credential. Upon completion, these courses transfer to an associate level early childhood degree. In Connecticut, the associate to bachelor degree articulation is supported between its 2- and 4- year early childhood degree programs.

Connecticut established the Early Childhood Teacher Credential (ECTC) in 2009. The ECTC is a credential that is issued through the Connecticut Office of Early Childhood which validates that an individual meets teacher competencies in six standard areas as established by NAEYC Professional Preparation Standards. The majority of Connecticut's 2 - and 4 - year colleges and universities offering early childhood degrees have ECTC approved plans of study. The ECTC approval ensures the use of Connecticut's Early Learning and Development Standards (ELDS) in all coursework. The ECTC approved institutions provide a mixed delivery access (face to face, online, hybrid) to support all areas of the state.

The ECTC also offers an "Individual Review Route" to assess knowledge and competencies for individuals who have bachelors or associate's degrees from non-ECTC approved institutions. The Credential is awarded after a thorough review an individual's portfolio.

☑ Career ladder or lattice.

Describe.

Connecticut's Career Ladder provides an easy to understand progression of professional development from entry level training through the various degree programs. The Career Ladder is designed to reflect current state and national qualifications and standards for teaching young children. Individuals may enter at any level of the career ladder as long as they meet the requirements for that particular level.

☑ Articulation agreements between two- and four-year postsecondary early childhood education or degree programs.

Describe.

Associate to bachelor early childhood degree articulation is supported through general transfer agreements in the state, as well as the ECTC approval process. The majority of Connecticut's 2- and 4-year colleges and universities offering early childhood degrees have ECTC approved plans of study. The ECTC approval facilitates the articulation of credits from 2- to 4 - year institutions.

☑ Community-based training approved by a state regulatory body to meet licensing or regulatory requirements.

Describe.

The Office of Early Childhood implements a state wide NAEYC Accreditation Facilitation Project (AFP). The AFP provides cohort based supports including monthly meetings and individualized on-site assistance to licensed center-based providers; and free training and technical assistance to achieve performance of NAEYC's 10 Program Standards to all settings. A planned curriculum and statewide implementation policies ensure uniformity of high quality delivery and consistency and equity of access for participants. The technical assistance providers are a regionally based network of early childhood experts with training in NAEYC Accreditation, facilitation, and best practices.

The OEC's Program Leadership Initiative offers three supports: (1) 5 three-credit courses for current program administrators. Each course meets a Connecticut Director Credential competency area (Administration and Supervision, Leadership, Finance, Personnel, and Family, School and Community); (2) technology training open to all program leaders of center, school and family based programs; and (3) non-credit professional development (leadership audience specific to content).

Connecticut is developing a Quality Improvement System (QIS) to improve program quality in all types of settings, including center, school, and family based programs. Connecticut will provide professional learning activities using a combination of strategies and supports including training, professional learning communities, online tools and resources, and in-person support such as coaching and consultation. The Office of Early Childhood will partner with Connecticut's CCR&R (United Way of Connecticut) to develop the QIS. The QIS will greatly enhance our current regional technical assistance network and serve as the umbrella for all professional learning opportunities. The Continuous Quality Improvement (CQI) Advisory Committee will serve as advisors of the QIS. The CQI Advisory Committee will oversee all policy decisions for state wide professional

learning activities. This will ensure consistency, continuity and quality of all professional learning activities statewide.

☑ Workforce data, including recruitment, retention, registries or other documentation, and compensation information.

Describe.

The Office of Early Childhood operates a robust professional registry which collects workforce data, including retention, compensation, and educational attainment for all professionals working in staff state funded programs.

☑ Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework.

Describe.

The Continuous Quality Improvement (CQI) Advisory Committee will serve as advisors of the QIS. The CQI will oversee all policy decision for state-wide professional learning activities. This will ensure consistency, continuity, and quality of all professional learning.

☑ Continuing education unit trainings and credit-bearing professional development.

Describe.

Connecticut utilizes a regional technical assistance network, a college and university system, and web-based learning applications to provide ongoing training and professional development reflecting research and best practice. Professional learning activities will encompass health and safety requirements, social/emotional, intellectual habits and early learning and development standards. Connecticut is in the final stages of developing a set of Core Knowledge and Competencies (CKC) Framework for professionals working with children and their families. The framework is designed to address a variety of sectors and settings. These evidence based competencies incorporate the knowledge and application of CT's ELDS and strategies to support English language learners and children with special needs. Connecticut has recently developed additional learning standards addressing social/emotional and intellectual habits from birth through school age. The competencies provide a roadmap for professional learning design to serve diverse adult learners from career entry to mastery level.

The OEC's Program Leadership Initiative offers 5 three-credit courses for current program administrators in Connecticut's programs for young children. Each course meets

a Connecticut Director Credential competency area (Administration and Supervision; Leadership; Finance; Personnel; Family, School and Community).

☑ State-approved trainings.

Describe.

The Office of Early Childhood staff in collaboration with the CQI Advisory Committee will approve all professional learning activities.

☐ Inclusion in state and/or regional workforce and economic development plans.

Describe.

☐ Other.

Describe.

6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC

Describe.

Through regular and ongoing communication, the Office of Early Childhood in collaboration with the CQI Advisory Committee will develop training requirements and a schedule of professional learning activities aligned to the required CCDF professional development topics.

6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements

Describe.

Connecticut is in the final stages of developing a Core Knowledge and Competencies Framework for professionals working with children and their families. The Competencies Framework is designed to address a variety of sectors and settings. These evidence based competencies incorporate the knowledge and application of Connecticut's ELDS and strategies to support English language learners and children with special needs. Connecticut has recently developed additional standards addressing social/emotional and intellectual habits from birth through school age. The competencies provide a roadmap for professional learning design to serve diverse learners from career entry to mastery level. These serve criteria for approving training requirements.

6.1.5 Describe how the State's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable)

Describe.

All professional learning activities are open to all providers including Indian tribes or tribal organizations serving CCDF families.

6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring 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 disabilities, and Native Americans, including Indians and Native Hawaiians.

Describe.

Connecticut is in the final stages of development of a Core Knowledge and Competencies (CKC) for professionals working with children and their families. The Framework is designed to a variety of sectors and settings. These evidence based competencies incorporate the knowledge and application of CT's ELDS and strategies to support English language learners and children with special needs. CT has recently developed additional standards addressing social/emotional and intellectual habits from birth through school age. These serve as criteria for approving training requirements including all settings and ages.

6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.

☑ Financial assistance for attaining credentials and post-secondary degrees.

Describe.

The Office Early Childhood offers scholarship dollars for attaining credentials and post-secondary degrees. Scholarship funds are available for eligible providers across the state, covering all geographic regions and tribal organizations.

☐ Financial incentives linked to education attainment and retention.

Describe.

☐ Registered apprenticeship programs.

Describe.

☐ Outreach to high school (including career and technical) students.

Describe.

☐ Policies for paid sick leave.

Describe.

☐ Policies for paid annual leave.

Describe.

☐ Policies for health care benefits.

Describe.

☐ Policies for retirement benefits.

Describe.

☑ Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services).

Describe.

The OEC Licensing Regulations require all licensed center-based and group homes have a social service consultant.

The Early Childhood Consultation Partnership (ECCP®) is a statewide, evidence-based, mental health consultation program designed to meet the social and emotional needs of children birth to five in early care or education settings. The program builds the capacity of caregivers at an individual, family, classroom, or center-wide level. It provides support, education, and consultation to caregivers in order to promote enduring and optimal outcomes for young children.

☑ Other.

Describe.

Connecticut's General Assembly required the Office of Early Childhood to develop a plan and a set of recommendations to assist early childhood providers that accept state funds to: 1) obtain a bachelor's degree with a concentration in early childhood education; 2) increase salaries or provide incentives to staff member who hold a bachelor's degree; and 3) retain staff members that hold bachelor's degree.

6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language.

Describe.

The Quality Improvement System (QIS) will include physical 'hubs' or resource centers to help recruit providers for whom English is not their first language. The 'hubs' will identify providers with knowledge of working with families whom English is not their first language.

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.

☑ Informational materials in non-English languages

☑ Training and technical assistance in non-English languages

☑ CCDF health and safety requirements in non-English languages

☐ Provider contracts or agreements in non-English languages

☑ Website in non-English languages

☑ Bilingual caseworkers or translators available

☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce

☐ Other.

Describe.

☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

☐ Yes.

The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe that training and technical assistance for providers

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

Unmet requirement - Identify the requirement(s) to be implemented Use CCDF for activities to improve quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Connecticut will offer state-wide training and technical assistance for supporting providers who serve families experiencing homelessness. The trainings and technical assistance will include identifying families who may be experiencing homelessness, strategies for serving homeless children and families, and types of resources available to assist families. The trainings will be offered online and face-to- face. Technical assistance will also be available to programs serving families experiencing homelessness.

Projected start date for each activity: 03/02/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Mckinney-Vento Coordinator, United Way, State Head Start Collaboration Officer

6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

6.2.1 If checked yes to 7.1 in the next section, check which content is included training and professional development activities. Check all that apply.

☑ Yes, If yes,

a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

The Office of Early Childhood uses a variety of measures and metrics include:

- Increase in number of programs participating in training on ELDS, CKC and all required health and safety topics;
- Increase in number and capacity of programs achieving licensure;
- Increase in number of program achieving national accreditation (e.g. NAEYC, NAFCC);
- Decrease in numbers of licensing violations;
- Increase in number of individual achieving degrees or credentials; and
- Satisfaction measures for parents and child care staff

b) Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe:

Quality Enhancement

☑ Other funds.

Describe:

State funded Pre-K, state quality enhancement

c) Check which content is included in training and professional development activities. Check all that apply.

☑ Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c.

Describe:

Connecticut provides professional learning activities using a combination of strategies and supports including training, professional learning communities, online tools and resources and in-person support such as coaching and consultation.

☑ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2).

Describe:

Connecticut provides professional learning activities using a combination of strategies and supports including training, professional learning communities, online tools and resources and in-person support such as coaching and consultation.

The Early Childhood Consultation Partnership (ECCP®) is a statewide, evidence-based, mental health consultation program designed to meet the social and emotional needs of children birth to five in early care or education settings. The program builds the capacity of caregivers at an individual, family, classroom, or center-wide level. It provides support, education, and consultation to caregivers in order to promote enduring and optimal outcomes for young children.

☑ Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development.

Describe:

Connecticut provides professional learning activities using a combination of strategies and supports including training, professional learning communities, online tools and resources and in-person support such as coaching and consultation.

☑ Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards.

Describe:

Connecticut provides professional learning activities using a combination of strategies and supports including training, professional learning communities, online tools and resources and in-person support such as coaching and consultation.

☐ On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development.
Describe:

☑ Using data to guide program evaluation to ensure continuous improvement.
Describe:
Connecticut provides professional learning activities using a combination of strategies and supports including training, professional learning communities, online tools and resources and in-person support such as coaching and consultation.

☐ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment.
Describe:

☑ Caring for and supporting the development of children with disabilities and developmental delays.
Describe:
Connecticut provides professional learning activities using a combination of strategies and supports including training, professional learning communities, online tool and resources and in-person support such as coaching and consultation.

☐ Supporting positive development of school-age children.
Describe:

☐ Other.
Describe:

d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

☑ Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling

☐ State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities

☑ Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education

☐ Other.

Describe:

☐ No.

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas?

States and Territories are encouraged to consult with Caring for our Children for best practices and recommended time needed to address training hour requirements.

☑ Yes. If yes, describe:

a) Licensed Center-Based Care

1) Number of pre-service or orientation hours and any required areas/content

18 hours within the first six months of employment on the following topics:

1. Medication Administration
2. Prevention of and response to emergencies due to food and allergic reactions
3. First Aid
4. CPR
5. Handling and storage of hazardous materials and appropriate disposal of bio contaminants (OSHA)
6. Prevention and control of infectious diseases (including immunization)
7. SIDS prevention and safe sleep practices
8. Building and physical premises safety (including playground and vehicle)

9. Shaken baby syndrome and head trauma
10. Emergency preparedness
11. Precautions in transporting children (if applicable)
12. Child Development
13. Recognition and reporting of abuse and neglect

2) Number of on-going hours and any required areas/content

1% of hours worked annually on the following topics:

1. Medication Administration (renewed at expiration)
2. First Aid/ CPR (renewed at expiration)
3. OSHA
4. Any other health and safety topic where content has been modified or updated
5. Other related topic areas to build knowledge and skills in working with children and families.

b) Licensed Group Child Care Homes

1) Number of pre-service or orientation hours and any required areas/content

18 hours within the first six months of employment on the following topics:

1. Medication Administration
2. Prevention of and response to emergencies due to food and allergic reactions
3. First Aid
4. CPR
5. Handling and storage of hazardous materials and appropriate disposal of bio contaminants (OSHA)
6. Prevention and control of infectious diseases (including immunization)
7. SIDS prevention and safe sleep practices
8. Building and physical premises safety (including playground and vehicle)
9. Shaken baby syndrome and head trauma
10. Emergency preparedness
11. Precautions in transporting children (if applicable)
12. Child Development

13. Recognition and reporting of abuse and neglect

2) Number of on-going hours and any required areas/content

1% of hours worked annually on the following topics:

1. Medication Administration(renewed at expiration)
2. First Aid/ CPR (renewed at expiration)
3. OSHA
4. Any other health and safety topic where content has been modified or updated
5. Other related topic areas to build knowledge and skills in working with children and families.

c) Licensed Family Child Care Provider

1) Number of pre-service or orientation hours and any required areas/content

18 hours within the first six months of providing service on the following topics:

1. Medication Administration on the following topics:
2. Prevention of and response to emergencies due to food and allergic reactions
3. First Aid
4. CPR
5. Handling and storage of hazardous materials and appropriate disposal of bio contaminants (OSHA)
6. Prevention and control of infectious diseases (including immunization)
7. SIDS prevention and safe sleep practices
8. Building and physical premises safety (including playground and vehicle)
9. Shaken baby syndrome and head trauma
10. Emergency preparedness
11. Precautions in transporting children (if applicable)
12. Child Development
13. Recognition and reporting of abuse and neglect

2) Number of on-going hours and any required areas/content

18 hours annually on the following topics:

1. Medication Administration(renewed at expiration)
2. First Aid/ CPR (renewed at expiration)
3. OSHA
4. Any other health and safety topic where content has been modified or updated
5. Other related topic areas to build knowledge and skills in working with children and families.

d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content

Licensed-exempt programs administered by public school systems, municipal agencies:

18 hours within the six months of providing service on the following topics:

1. Medication Administration
2. Prevention of and response to emergencies due to food and allergic reactions
3. First Aid
4. CPR
5. Handling and storage of hazardous materials and appropriate disposal of bio contaminants (OSHA)
6. Prevention and control of infectious diseases (including immunization)
7. SIDS prevention and safe sleep practices
8. Building and physical premises safety (including playground and vehicle)
9. Shaken baby syndrome and head trauma
10. Emergency preparedness
11. Precautions in transporting children (if applicable)
12. Child Development
13. Recognition and reporting of abuse and neglect

Licensed exempt relative providers

1) Number of orientation hours: 4 hours orientation health and safety training within 60 days of providing care and within the first 6 months of providing care receive a First

Aid / CPR certificate.

2) Number of on-going hours and any required areas/content

Licensed-exempt programs administered by public school systems, municipal agencies

1 % of hours annually on the following topics:

1. Medication Administration (renewed at expiration)
2. First Aid/ CPR (renewed at expiration)
3. OSHA
4. Any other health and safety topic where content has been modified or updated
5. Other related topic areas to build knowledge and skills in working with children and families.

Licensed exempt relative providers

For ongoing professional development relatives will be required to maintain current First Aid / CPR certicates.

☐ No

6.2.3 Describe the status of the State/Territory's policies and practices to strengthen provider's business practices.

☐ Fully implemented - as of March 1, 2016.

Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance

☑ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned

activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

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

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

The OEC's Program Leadership Initiative offers three supports: (1) 5 three-credit courses for current program administrators. Each course meets a Connecticut Director Credential competency area (Administration and Supervision, Leadership, Finance, Personnel, and Family, School and Community); (2) technology training open to all program leaders of center, school and family based programs; and (3) non-credit professional development (leadership audience specific to content).

The OEC scholarship assistance fund identifies credit-coursework related to successfully running a business as eligible expenses.

Unmet requirement - Identify the requirement(s) to be implemented Policies and practices to strengthen provider¿s business practices.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Technical assistance will be expanded to support family child care providers participating in Connecticut's Child Care Subsidy program (Care 4 Kids).

Projected start date for each activity: 01/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity The Office of Early Childhood

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

The United Way of Connecticut

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will 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, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State's early learning and development guidelines appropriate for children from birth to kindergarten entry.

☑ The State assures that the early learning and development guidelines are:
- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
- Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
- Updated as determined by the State. List the date or frequency

Connecticut's Early Learning and Development Standards were adopted and will be reviewed every five years.

☑ Fully implemented and meeting all Federal requirements outlined above - as of March 1, 2016. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below

☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated

electronically into an Implementation Plan summary report.

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

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

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

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with to complete implement this activity

6.3.2 Check for which age group(s) the State has established early learning and development guidelines:

☐ Birth-to-three

Provide a link:

☐ Three-to-Five

Provide a link:

☑ Birth-to-Five

Provide a link:

http://www.ct.gov/oec/cwp/view.asp?a=4541&q=536726

☑ Five and older (check if State/Territory has standards for five and older that complement

academic but cover child development areas not covered by k-12 academic standards).

Describe and provide a link:

http://www.ct.gov/oec/cwp/view.asp?a=4541&q=536726

Connecticut's Early Learning and Development Standards conducted various alignment studies including to the Common Core State Standards in the areas of mathematics and English language arts. Alignment studies were also conducted to the Connecticut's Kindergarten Science Curriculum Standards and Connecticut's Social Studies Framework. Connecticut also recently developed additional standards addressing social/emotional and intellection habits from birth through school age.

☐ Other.

Describe:

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children's cognitive, physical, social and emotional development and support children's overall well-being?

☑ Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

☐ Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to the technical assistance and describe.

☑ Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's early learning and development guidelines.

Describe:

The Office of Early Childhood uses a variety of strategies to provide technical assistance to child care providers based on the Connecticut's Early Learning and Development Standards. An example of a statewide initiative is the collaboration

between the OEC and the Center for Early Childhood Education at Eastern Connecticut State University in developing training materials and videos for child care providers. This 10- part video collection provides training on the Connecticut's ELDS and working with children birth - 5 years in a variety of child care settings. The videos can be accessed on the Center of Early Childhood Education's website. The website is accessible to the general public. Accompanying guidance for use of the videos in a variety of professional learning settings is also available. Finally, the Center has developed a searchable web- based library to assist trainers, coaches and higher education faculty in providing professional development. In additional professional development is provided through:

- Webinars
- Regional face to face trainings
- Video library
- Written guidance on ELDS for English Language learners, children with special needs and engaging families

☐ The technical assistance is linked to the State's/Territory's quality rating and improvement system.

Describe:

☑ Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines.

Describe:

The Office of Early Childhood has used a variety of strategies to technical assistance to child care providers based on the Early Learning and Development Standards.

- Webinars
- Regional face to face trainings
- Video library
- Written guidance on ELDS for English Language learners, children with special needs and engaging families

☑ Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

The Office of Early Childhood has used a variety of strategies to technical assistance to child care providers based on the Early Learning and Development Standards.

- Webinars

- Regional face to face trainings
- Video library (see description above)
- Written guidance on ELDS for English Language learners, children with special needs and engaging families

☐ Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

b) Indicate which funds are used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☑ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

State Pre-K, state quality enhancement

6.3.4 Check here to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used to deny children eligibility to participate in the CCDF program
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

☑ Yes.

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

1) Supporting the training and professional development of the child care workforce (as described in Section 6)

2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)

3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services

4) Improving the supply and quality of child care programs and services for infants and toddlers

5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)

6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)

7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children

8) Supporting providers in the voluntary pursuit of accreditation

9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development

10) 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, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

7.1.1 What are your overarching goals for quality improvement?

Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services

The OEC will ensure that a greater number of children have access to high quality early care and education. Specifically, the state is working to increase the following:

·Increase the number and capacity of programs that achieve licensing and maintain compliance with licensing standards

- Increase the number of NAEYC and NAFCC accredited programs
- Increase the number of programs that meet other quality standards

These goals were selected through a subcommittee of Connecticut's Early Childhood Cabinet (SAC) and serves as the framework for a QIS improvement system, in part because of the state's strong licensing standards and existing investment in accreditation. The OEC conducted a statewide survey of providers regarding their current access to quality improvement services and is conducting an unmet needs study to help identify areas where access to high quality programs is not equitable.

For some state-funded programs, there are quality improvement goals established in in Connecticut General Statutes (C.G.S.) Section 10-16p, revised through Public Acts 11-54, 12-50 and 14-39 and 15-134. These goals include the attainment of a Qualified Staff Member (QSM) status for teachers in each classroom and attainment of NAEYC Accreditation or Head Start approval.

7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

☑ Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Quality set-aside dollars

☑ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

State Quality Enhancement, state funded pre-k, federal PDG grant

☑ Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Quality set aside funds including infant-toddler

☑ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

State Quality Enhancement, Early Head Start-Child Care partnership

☑ Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Quality set aside

☑ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

State Quality Enhancement

☑ Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Quality set aside

☑ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

State Quality Enhancement, SEIU union

☐ Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Supporting accreditation. If checked, respond to 7.7. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

quality set aside

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☐ Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☐ Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

☐ Yes, the State/Territory has a QRIS operating State/Territory-wide.
Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available

☐ Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide.
Provide a link, if available

☑ No, but the State/Territory is in the development phase
☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

☐ Participation is voluntary
☐ Participation is mandatory for providers serving children receiving subsidy.
If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.)

☐ Participation is required for all providers
☐ Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels
☐ Supports and assesses the quality of child care providers in the State/Territory
☐ Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers
☐ Embeds licensing into the QRIS.
Describe:

☐ Designed to improve the quality of different types of child care providers and services
☐ Describes the safety of child care facilities
☐ Addresses the business practices of programs
☐ Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled

☐ Provides, to the maximum extent practicable, 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.
If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality

☐ Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

☐ Licensed child care centers
☐ Licensed family child care homes
☐ License-exempt providers
☐ Early Head Start programs
☐ Head Start programs
☐ State pre-kindergarten or preschool program
☐ Local district supported pre-kindergarten programs
☐ Programs serving infants and toddlers
☐ Programs serving school-age children
☐ Faith-based settings
☐ Other.
Describe:

7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

Describe:

The OEC will monitor progress towards the following outcomes:

·number programs that achieve licensing and

·number of programs that maintain compliance with licensing standards

- the number of programs that achieve NAEYC
- the number of programs that maintain NAEYC

- the number of programs that achieve NAFCC accreditation
- the number of programs that maintain NAFCC accreditation.
- quantity and satisfaction measures of quality improvement supports delivered

7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and 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.

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers?

Check all that apply and describe.

☑ Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe:

The QIS will include physical locations that will serve as as "hubs" or resource centers to help child care providers in offering high quality, age appropriate care though learning communities, trainings and workshops, and individual technical assistance.

☑ Establishing or expanding the operation of community or neighborhood-based family child care networks.

Describe:

The QIS will expand the capacity and availability of family child care networks throughout the state to achieve goals such as NAFCC accreditation.

☑ Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

The QIS will ensure that all professional development and training opportunities are offered for providers caring for infant and toddler in all setting types (homes, schools, centers).

☐ Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care.

Describe:

☑ Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists.

Describe:

The QIS will ensure that infant-toddler care specialists are trained and available to provide individualized support to programs seeking licensure, accreditation, or increasing their ability to serve the most vulnerable infants and toddlers.

☑ 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:

Connecticut's Birth to Three system (IDEA Part C) is one of the OEC's three divisions and will serve as members on the CQI Advisory Committee who will approve trainings specific to supporting infants and toddlers with disabilities.

☐ Developing infant and toddler components within the State's/Territory's QRIS.

Describe:

☐ Developing infant and toddler components within the State's/Territory's child care licensing regulations.

Describe:

☑ Developing infant and toddler components within the early learning and development guidelines.

Describe:

Connecticut's Early Learning and Development Standards are for children from birth - five.

☐ Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care.

Describe:

☐ Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being.

Describe:

☐ Other.

Describe:

7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The OEC will monitor the number and percentage of support activities (trainings, workshops, individual TA) a) provided by trainers and consultants with infant-toddler expertise and b) target explicitly designed activities for programs that serve programs that serve infants and toddlers. The OEC will also track outcome measures such as licensed and accredited capacity for infant toddler care.

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system

☑ State/Territory has a CCR&R system operating State/Territory-wide.

Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary

The State's CCR&R system is operated by a single, statewide organization: The United Way of Connecticut. It currently maintains a robust data system on available childcare throughout the state accessible online and via phone request and provides training and technical assistance to a significant number of programs throughout the state. Its role is currently being expanded to develop an infrastructure for the QIS system and will manage the implementation of the delivery of quality and improvement activities.

☐ State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide.

Describe:

☐ State/Territory is in the development phase

7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

Through expansion of the role of the State's CCR&R, the OEC will have a standardized seamless system for tracking quality improvement activities delivered and enhancing the monitoring and reporting of state quality improvement activities.

7.5 Facilitating Compliance with State Standards

7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate

child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards?

Describe:

The QIS system will support unlicensed programs to become licensed. The QIS will provide ongoing technical assistance to comply with licensing standards.

7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The OEC will measure the number and capacity of programs that achieve licensing and maintain compliance with licensing standards.

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings.

Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children

not applicable

7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

not applicable

7.7 Accreditation Support

7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

☑ Yes, the State/Territory has supports operating State/Territory-wide.

Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation

The Office of Early Childhood implements a state wide NAEYC Accreditation Facilitation Project (AFP). In existence since 1991, this project assists early childhood community- and school-based programs to achieve NAEYC Accreditation. CT has the third largest number of NAEYC Accredited programs in the country, and the largest number of accredited programs per capita in the United States.

Connecticut is developing a Quality Improvement System (QIS) to improve the quality of and provide technical assistance to all types of settings including center, school and family based programs. Support provided by the AFP will be a function of the QIS. The Office of Early Childhood will partner with Connecticut's CCR&R (United Way of Connecticut) to operate the QIS. The QIS will provide cohort based supports including monthly meetings and individualized on-site assistance to licensed center-based providers and free training and technical assistance to achieve performance of NAEYC's 10 Program Standards to all settings.

The Continuous Quality Improvement (CQI) Advisory Committee will oversee all policy decisions for state-wide technical assistance. This will ensure consistency, continuity, and quality of all technical support.

The QIS will include NAFCC Accreditation support for family home-based providers. Supports will be provided by trained facilitators with expertise in home-based settings and best practices, and will parallel the established support for center- based programs (on-site visits, cohort meetings, and training) with appropriate modifications to content, format, and intensity as necessitated for home-based providers.

☐ Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide.

Describe:

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

Connecticut's Early Childhood Professional Registry will monitor progress and achievement of NAEYC and NAFCC accreditation. The data tracked includes benchmarks in each accreditation system including submission of required documents to national accrediting bodies, achievement of staff qualifications requirements in each system and for CT's qualifications requirements, and the number of individuals who have achieved compliance with CCDF Professional Development Requirements.

7.8 Program Standards

7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development?

Please describe:

not applicable

7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

not applicable

7.9 Other Quality Improvement Activities

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten.

not applicable

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

8.1.1 Describe how the State ensures that their definitions for violations have been modified, staff trained, and program integrity procedures revised to reflect new

requirements.

Describe:

The Office of Early Childhood will ensure all new requirements pertaining to program integrity be reflected in amended regulations and all policy transmittals to clarify and direct implementation.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements.

Check all that apply.

- [x] Issue policy change notices
- [ ] Issue new policy manual
- [x] Staff training
  - [ ] Orientations
  - [x] Onsite training
  - [ ] Online training
- [x] Regular check-ins to monitor implementation of the new policies.

  Describe:

  Regular and ongoing communication regarding policy and program integrity.

- [ ] Other.

  Describe:

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF.

The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

Definition: "Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93).Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as "vendors").The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified."

Describe:

The Office of Early Childhood maintains overall responsibility for the administration of the CCDF program and has established comprehensive controls to direct and monitor vendor performance. The OEC follows all federal and state rules governing financial and program management and ensures compliance with state and federal audit requirements. The OEC maintains sole responsibility for issuing policy directives and monitors all contracted entities for compliance. Vendors are required to meet the performance standards establish in their contract. The OEC utilizes management reports and audits to monitor compliance.

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency.

Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

☑ Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), 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))

☐ Run system reports that flag errors (include types)

Describe:

☐ Review of enrollment documents, attendance or billing records

☑ Conduct supervisory staff reviews or quality assurance reviews

☐ Audit provider records

☑ Train staff on policy and/or audits

☑ Other.

Describe:

Through a memorandum of agreement between the OEC and Department of Social Services (DSS), the OEC utilizes the DSS Fraud Early Detection Unit (FRED) as a system to detect and prevent errors before the agency approves benefits. This program is a fraud prevention program.

☐ None.

Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

☑ Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), 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))

☐ Run system reports that flag errors (include types)

Describe:

☐ Review of enrollment documents, attendance or billing records

☑ Conduct supervisory staff reviews or quality assurance reviews

☐ Audit provider records

☑ Train staff on policy and/or audits

☐ Other.

Describe:

☐ None.

Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

8.1.5 Which activities (or describe under "Other") the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory?

The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under "Other") the Lead Agency will use for unintentional program violations?

☐ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount:

☑ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

☑ Recover through repayment plans

☑ Reduce payments in subsequent months

☑ Recover through State/Territory tax intercepts

☐ Recover through other means

☐ Establish a unit to investigate and collect improper payments.

Describe:

☐ Other.

Describe:

☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines

b) Check which activities the Lead Agency will use for intentional program violations or fraud?

☐ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount:

☑ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

☑ Recover through repayment plans

☑ Reduce payments in subsequent months

☑ Recover through State/Territory tax intercepts

☐ Recover through other means

☐ Establish a unit to investigate and collect improper payments.

Describe composition of unit below

☐ Other.

Describe:

☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, include action steps and completion timelines:

c) Check which activities the Lead Agency will use for administrative error?

☐ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount:

☑ Coordinate with and refer to other State/Territory agency (e.g., State/Territory

collection agency, law enforcement)

- [x] Recover through repayment plans
- [x] Reduce payments in subsequent months
- [x] Recover through State/Territory tax intercepts
- [ ] Recover through other means
- [ ] Establish a unit to investigate and collect improper payments.

  Describe composition of unit below

- [ ] Other.

  Describe:

- [ ] None.

  Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

- [x] Disqualify client.

  If checked, please describe, including a description of the appeal process for clients who are disqualified:

  The Office of Early Childhood disqualifies clients following a criminal conviction or an administrative disqualification hearing adjudication. The penalty is progressive: 3 months, 6 months, and 12 months for the 1st, 2nd, and 3rd offense. The disqualification penalty may be appealed through the administrative hearing process conducted by the OEC.

- [x] Disqualify provider.

  If checked, please describe, including a description of the appeal process for providers who are disqualified:

  A lifetime disqualification penalty is imposed on providers following a criminal conviction.

The only recourse is an appeal to a court of jurisdiction.

☑ Prosecute criminally

☐ Other.

Describe: