



**CHILD CARE AND DEVELOPMENT FUND PLAN**

**FOR: CONNECTICUT**

**FFY 2010-2011**

This Plan describes the CCDF program to be conducted by the State/Territory for the period 10/1/09 – 9/30/11. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

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

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Public reporting burden for this collection of information is estimated to average 162.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

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**[Form ACF 118 Approved OMB Number: 0970-0114 expires 04/30/2012]**

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## AMENDMENTS LOG

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

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

**Instructions for Amendments:**

- 1) Lead Agency completes the first 3 columns of the Amendment Log and sends a photocopy of the Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional Office contact. Lead Agency also should indicate the Effective Date of the amended section in the footer at the bottom of the amended page(s). A copy of the Log, showing the latest amendment pending in ACF, is retained as part of the Lead Agency's Plan.
- 2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
- 3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

**Note:** This process depends on repeated subsequent use of the same Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain "old" plan pages that are superseded by amendments in a separate appendix to its Plan. This is especially important as auditors will review CCDF Plans and examine effective date of changes.

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

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## **PART 1 ADMINISTRATION**

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

### **1.1 Lead Agency Information** (as designated by State/Territory Chief Executive Officer)

Name of Lead Agency: **State of Connecticut, Department of Social Services**  
Address of Lead Agency: **25 Sigourney Street Hartford, Connecticut 06106**  
Name and Title of the Lead Agency's Chief Executive Officer:  
**Michael P. Starkowski, Commissioner**  
Phone Number: **(860) 424-5008**  
Fax Number: **(860) 424-5129**  
E-Mail Address: **Michael.Starkowski@ct.gov**  
Web Address for Lead Agency (if any): **[www.ct.gov/dss](http://www.ct.gov/dss)**

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

Name of the State/Territory Child Care Contact (CCDF): **Peter Palermino**  
Title of State/Territory Child Care Contact: **Program Manager**  
Address: **DSS Family Services Unit, 25 Sigourney Street,  
Hartford, Connecticut 06106**  
Phone Number: **(860) 424-5006**  
Fax Number: **(860) 424-5335**  
E-Mail Address: **[peter.palermino@ct.gov](mailto:peter.palermino@ct.gov)**  
Phone Number for CCDF program information (for the public) (if any):  
**1 (800) 811-6141**  
Web Address for CCDF program information (for the public) (if any):  
**<http://www.ct.gov/dss/cwp/view.asp?a=2353&q=305178>**

### **1.3 Estimated Funding**

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2009 through September 30, 2010. (§98.13(a))

CCDF: \$ **51,394,837**  
Federal TANF Transfer to CCDF: \$ **0**  
Direct Federal TANF Spending on Child Care: \$ **0**

Mandatory Funds: \$ 18,738,357  
 State CCDF Maintenance of Effort Funds: \$ 18,738,358  
 State Matching Funds: \$ 18,178,031  
 Total Funds Available: \$ 88,311,226

**We also include reference to the “child care stimulus” funds as appropriated to Connecticut by the American Recovery and Reinvestment Act (ARRA) of 2009. Connecticut will receive \$13,685,624. See Attachment 1.3**

**1.4 Estimated Administration Cost**

The Lead Agency estimates that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed 5 percent): **\$ 3,000,000 ( 3.6%)**. (658E(c) (3), §§98.13(a), 98.52).

**This estimate for administrative funds will also support the oversight, expenditure and necessary reporting for the ARRA funds.**

**1.5 Administration of the Program**

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

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

**Table 1.5.1: Administration of the Program**

Service/Activity	Agency	Non-Government Entity (see Guidance for definition)
Determines individual eligibility:		
a) TANF families	United Way of CT	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b) Non-TANF families	United Way of CT	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



Service/Activity	Agency	Non-Government Entity (see Guidance for definition)	
Assists parents in locating care	United Way of CT	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Makes the provider payment	DSS	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Quality activities	See Section 5.1.3 and 5.1.4	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Other:		<input type="checkbox"/> Yes	<input type="checkbox"/> No

**1.5.2. Describe** how the Lead Agency maintains overall internal control for ensuring that the CCDF program is administered according to the rules established for the program (§98.11).

**The Lead Agency follows all state rules for financial and program management to insure compliance with state and federal audit requirements. The Lead Agency monitors all contracted entities for compliance with state and federal regulations. The Lead Agency uses personnel from a variety of internal units – Financial Management, Quality Assurance, Human Resources, Contract Administration, Information Technology, Assistance Programs, Legal and Administrative Hearings to offer guidance, review laws/ regulations, etc.**

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

a) Fiscal Reporting

**Fiscal reporting is completed by the Lead Agency’s Division of Financial Management and Analysis. This office develops all controls and processes to formally prepare and submit the ACF-696 Financial Report.**

b) Data Reporting

**Data reporting as required by the ACF 800 and 801 is coordinated by the Lead Agency’s Bureau of Assistance Programs, Family Services**

**Division with cooperation for the Lead Agency's Information Technology (IT) division. The ACF-801 is submitted quarterly and the ACF-800 is submitted annually via electronic submissions.**

C) Error Rate Reporting

**See response to Section 1.8 – Connecticut is included in the third phase of error rate reporting, which will begin effective October 1, 2009.**

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

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

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

**The Lead Agency is appropriated state general funds to administer the Care 4 Kids child care voucher/certificate program, a variety of child care quality programs and necessary administrative activities. All such activities, as described herein this plan, meet federal CCDF rules and regulations.**

No.

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

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

Donated directly to the State?

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

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

b) **Provide** information below for each entity:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_

Type: \_\_\_\_\_

No.

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

Yes (**respond to 1.6.5**), and:

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

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

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

No.

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

Yes (**respond to 1.6.5**), and

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

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

No.

**1.6.5** If the Lead Agency indicated “yes” to 1.6.3 or 1.6.4, **describe** Lead Agency efforts to ensure that pre-K programs meet the needs of working parents: (§98.53(h)(2))

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

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

No.

## **1.7 Improper Payments**

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

Yes, and these strategies are:

**Connecticut uses the phrase “benefit error” to describe improper payments that are either overpayments or underpayments.**

**Underpayments occur when the parent does not receive all the benefits to which entitled due to an administrative error. Errors caused by the family and/or child care provider not reporting correct information are not considered underpayments, except for provider billing errors where the agency is notified within thirty days of the payment date. Underpayments are corrected regardless of when the error occurred or whether the case is active or closed.**

**Overpayments occur when the amount paid exceeds the benefit that would have been issued if the payment were calculated correctly based on accurate information that was reported, verified and acted on in a timely manner. Overpayments are classified as administrative, parent or provider caused. Overpayments caused by parents or providers are further classified as intentional or unintentional. No overpayment exists if the amount is less than ten dollars in any month.**

**The starting date of the error varies depending on whether the error is intentional (fraud) or due to a change in circumstances vs. circumstances that existed at the time of application or redetermination. If the error was intentional or existed at application or redetermination, the error begins in the first service month paid.**

**Errors that occur following a change in circumstances generally start in the month following the change. This policy avoids errors when a change is reported and acted upon timely, and accounts for adverse action and other due process requirements. An error is considered intentional if the parent or provider knowingly withheld or provided false information on matters affecting eligibility, benefits or services provided. Only a court of law or an administrative hearing official can determine if fraud occurred. The error is considered unintentional if there was clearly no intent to commit fraud or to obtain benefits or payments under false pretenses; or the parent or provider did not purposefully withhold or provide erroneous information (for example, the parent waited to report a change until the redetermination instead of reporting the change immediately); or illness, a family emergency or other good cause reasons exist for not reporting information timely or accurately; or the error was due to a delay in taking action as the result of an administrative hearing request.**

Connecticut has developed the following strategies:

**Measurement and Prevention**

- Targeted Verification - Provider Photo ID, Second/Third Shift Verification, Employer contacts
- Targeted training in error prone areas
- 6 month redetermination cycles
- A dedicated quality assurance unit
- Corrective action planning
- Clear instructions on forms and notices
- 800 Fraud Hotline
- Formal quality control case reviews performed quarterly
- Regulatory provisions to conduct site visits and audits
- Coordination between eligibility/payment and agency fraud investigations staff
- All Child Care Management Information System (CCMIS) transactions are time and date stamped by user ID
- Data imaging of incoming and outgoing documents

**Error Detection**

- Inquiry Access to Other State Databases:
  - Department of Labor (DOL) wage and UCB files
  - DOL employment and training records for TANF recipients
  - Department of Corrections
  - Motor Vehicle records
  - Medicaid, Food Stamps, State Supplement and TANF records via DSS' Eligibility Management System (EMS)

**Error Detection (in Eligibility)**

- Dedicated quality assurance and monitoring unit at the vendor site
- Procedure manuals, processing guides, worker alerts and targeted training
- Separation of eligibility and payment functions
- System security levels by function
- Tracking of system transactions
- System edits and audit trails
- Ad hoc reporting and monitoring to measure error prone circumstances
- Period management evaluation of operations processes

**Reports and Data Matching**

- Assign all household members a unique agency client identifier
- Match unlicensed providers against the state child abuse/neglect registry
- Department of Public Health day care licensing
- Criminal Background checks
- Various CCMIS/ EMS data matches
- Fleeing Felon Match
- Extensive Use of ad hoc reporting tools monitor error prone circumstances

**Collections and Penalties**

- Mandatory recoupment policies
- Closed case collections
- Criminal Prosecution
- Administrative Disqualification Hearings
- Progressive parent disqualification penalties
- Lifetime provider fraud disqualification and state licenses forfeiture

The Lead Agency operates a statewide fraud early detection (FRED) program to comply with requirements of Public Act 05-280 and an Active Case Assessment Program (ACAP). These programs help to identify, investigate and determine if applications are fraudulent prior to granting assistance and review ongoing active cases. Investigators regularly make site visits to the parent's home or the child care location. .

The Lead Agency and the United Way of CT conduct numerous activities that are designed to assure quality and reduce the number and amount of administrative and client-caused errors. Some of these activities include the following:

- case reviews of actions taken on active and closed cases;
- worker performance assessments;
- electronic data matches with several state databases;
- state and federal criminal background checks for day care providers;
- matching providers to the state's child abuse and neglect registry;
- ongoing worker training;
- data integrity reporting; and matching provider Social Security Numbers with the IRS.

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

Yes, and these planned strategies are: \_\_\_\_\_

No.

**PART 2  
DEVELOPING THE CHILD CARE PROGRAM**

**2.1 Consultation and Coordination**

**2.1.1** Lead Agencies are required to *consult* with appropriate agencies and *coordinate* with other Federal, State, local, tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)).

**Indicate** the entities with which the Lead Agency has a) **consulted** and b) **coordinated** (as defined below), by checking the appropriate box(es) in Table 2.1.1.

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

*Coordination* involves the coordination of child care and early childhood development services, including efforts to coordinate across multiple entities, both public and private (for instance, in connection with a State Early Childhood Comprehensive System (SECCS) grant or infant-toddler initiative). **At a minimum, Lead Agencies must coordinate with** (1) other Federal, State, local, Tribal (if applicable), and/or private agencies responsible for providing child care and early childhood development services, (2) public health (including the agency responsible for immunizations and programs that promote children’s emotional and mental health), (3) employment services / workforce development, (4) public education, and (5) Temporary Assistance for Needy Families (TANF), and (6) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

**Table 2.1.1 Consultation and Coordination**

<b>Agency</b>	<b>a) Consultation in Development of the Plan</b>	<b>b) Coordination with Service Delivery</b>
Representatives of local government	<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/>
Other Federal, State, local, Tribal (if applicable), and/or private agencies providing child care and early childhood development services.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> *
Public health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> *
Employment services / workforce development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> *

<b>Agency</b>	<b>a) Consultation in Development of the Plan</b>	<b>b) Coordination with Service Delivery</b>
Public education	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> *
TANF	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> *
Indian Tribes/Tribal Organizations, when such entities exist within the boundaries of the State	<input type="checkbox"/>	<input type="checkbox"/> *
State/Tribal agency (agencies) responsible for:		
State pre-kindergarten programs	<input type="checkbox"/>	<input type="checkbox"/>
Head Start programs	<input type="checkbox"/>	<input type="checkbox"/>
Programs that promote inclusion for children with special needs	<input type="checkbox"/>	<input type="checkbox"/>
Other (See guidance):	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Emergency preparedness	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

\* **Required.**

**For each box checked in Table 2.1.1, (a) identify** the agency(ies) providing the service and **(b) describe** the consultation and coordination efforts. Descriptions must be provided for any consultation or coordination required by statute or regulation.

**The Lead Agency partnered with community organizations and the Connecticut Child Day Care Council to schedule three public hearings to review the CCDF federal law/regulations, Connecticut child care laws/regulations, and the draft *Connecticut Strategic Direction for Supporting Families, Children and Caregivers* plan. The Lead Agency notified various advocacy, state/local governmental and community based organizations such as the Early Childhood Education Alliance, the Connecticut Head Start State Collaboration Office (Connecticut-HSSCO), the Connecticut Head Start Association, the Connecticut Child Care Center Directors Forum and the School Readiness Councils, which represent up to 60 municipalities and towns.**

**The Lead Agency is responsible for coordinating child care services and other programs, which affect families and children in Connecticut. As such, the Lead Agency works in consort with other partners (federal, state and local, public and private, government and community-based) to administer services and foster linkages between agencies, organizations, advocates, clients and community groups in an effort to coordinate services and to**



**develop a comprehensive and integrated child care/children's health and development network.**

**The Lead Agency works to facilitate federal funding streams within the Connecticut child care/early childhood system and acts as a conduit for information flowing to and from the community. The Lead Agency published its strategic direction for supporting families, children and caregivers as part of its draft CCDF Plan. The guiding principles, service objectives, and service strategies are attached (see [Attachment 2.1.1.A](#)).**

**Following are key organizations that the Lead Agency has consulted, coordinated and developed collaborative arrangements. We have attached documents (see [Attachment 2.1.1.B](#)) that describe specific collaboration activities.**

#### **Early Childhood Education Cabinet**

**Legislation passed in June 2005 by the General Assembly established the Governor's Early Childhood Education Cabinet. The Cabinet is comprised of Commissioners from state departments including the Lead Agency, and agencies with primary responsibility for early childhood issues, child care providers, and business and community representatives. The Cabinet developed Connecticut's Early Childhood Investment Framework, which is referenced in Attachment 2.1.1.A.**

#### **Early Childhood Partners Project**

**The Early Childhood Partners (ECP) project is the Connecticut name for the federal Early Childhood Comprehensive Systems Initiative (CECCS). ECP has created a performance-based, outcome-driven strategic plan to support all Connecticut families so their children arrive at school healthy and ready to succeed. ECP is the successor to the Healthy Child Care Connecticut project that had been developed by the federal Maternal and Child Health (MCH) and Child Care bureaus. The Connecticut Department of Public Health (DPH) is the lead agency for maternal and child health services in Connecticut and is coordinating the development of the strategic plan. The CCDF Lead Agency is a member. The Plan has provided guidance for the leadership structure of the new Early Childhood Education Cabinet.**

#### **United Way of Connecticut - Care 4 Kids Program**

**United Way of Connecticut has been selected by the Lead Agency to manage the daily operations of the Care 4 Kids child care subsidy program. Services provided by the contractor include: application, eligibility and redetermination processing, tracking of provider information, invoice processing, and fraud detection.**

### United Way of Connecticut 211-Child Care

211-Child Care is the statewide resource and referral service operated by the United Way of Connecticut that links parents to child care resources. 211-Child Care maintains a statewide database, which contains information on, fees, capacity, hours of operations, etc. They also operate a statewide recruitment project to expand the number of child care facilities in Connecticut.

### Child Day Care Council

The Child Day Care Council is a legislatively mandated body that serves as a forum for Connecticut citizens interested in child care and as an advisory committee to the Lead Agency on child care issues and the development of the CCDF Plan. The CCDF Administrator is the Lead Agency commissioner designee to the Council. The Lead Agency provides administrative support to the Council.

### Commission on Children

The Commission on Children is a legislative agency and charged with recommending public policy on behalf of children. The Lead Agency has partnered with the Commission to develop various consumer education materials such as the *Are You Ready, Watch Me Grow, and Healthy Expectations* brochures and recently co-chaired and co-authored Connecticut's first strategic plan for infant-toddlers titled: *First Words, First Steps – The Importance of the Early Years*.

### Connecticut Department of Public Health (DPH)

DPH is the state agency responsible for the licensing, regulation and inspection of child day care centers, group homes and family day care homes. DPH is also the state lead agency for immunization and maternal and health issues. The Lead Agency funds licensing enforcement personnel at DPH and has developed a formal working protocol with DPH regarding the Lead Agency's child care voucher/certificate program.

### Connecticut Department of Education (SDE)

SDE is the agency responsible for public and special education. In addition, SDE provides oversight for state Head Start funds, the federal Child Care and Adult Nutrition program, the state funded Family Resource Centers and School Readiness pre-school programs. SDE staff provides technical assistance to licensed and licensed exempt child care facilities and public schools. The Lead Agency partners with SDE to manage the state's School Readiness preschool initiative.

### Connecticut Department of Children and Families (DCF)

The Department of Children and Families is one of the nation's few consolidated child welfare agencies to offer child protection, behavioral health, juvenile justice and prevention services. This comprehensive approach to helping children enables DCF to offer quality services regardless of how their problems arise. To ensure the safety of children in whatever setting they are found, including licensed and informal child care settings, DCF conducts child abuse/neglect investigations as needed. The Lead Agency partners with DCF to obtain background abuse/neglect checks for informal child care providers enrolled in the state's certificate program. In addition, DCF and DSS coordinate various family support initiatives implemented by both agencies.

### Connecticut Department of Public Safety (DPS)

DPS is the agency responsible for criminal background checks and all communications with the Federal Bureau of Investigation. DPS conducts criminal investigations for licensed and informal child care providers. The Lead Agency partners with DPS to provide background criminal checks for certain informal child care providers enrolled in the state's child care voucher/certificate program.

### Head Start

There are several Head Start and Early Head Start grantees and delegate agencies in Connecticut, primarily funded with federal funds and supplemented by state funds administered by SDE. The Lead Agency participates on the SDE Head Start Advisory Committee that advises SDE on matters related to state Head Start funds.

### Connecticut Statewide Head Start Collaboration Office (CSHTCO)

The Director of the CSHTCO is housed in the Lead Agency and works with the CCDF Administrator on a variety of related topics that cross the early childhood services network. In addition, the Director works with nearly all of the organizations listed in this section to integrate Head Start and early childhood program standards and best practices.

### Board of Trustees for State Community and Technical Colleges

This institution provides early childhood academic instruction, operates early childhood child care centers that serve as training laboratories and provides scholarships for early caregivers to attend training required for licensure or to expand their academic and/or professional development. The Board of Trustees for State Community and Technical Colleges has been designated by the Lead Agency to coordinate the state's voluntary career development system for early care professionals entitled *Connecticut Charts*

*A Course.* This project also provides professional counseling, a training approval process, a *Statewide Accreditation Facilitation Project* that provides opportunities for child care facilities to receive training and support as they strive to attain their national accreditation status and a *Statewide Provider Registry* that serves as a repository for individual early care personnel credentials.

#### Connecticut Department of Developmental Services (DDS)

DDS is the state's lead agency for serving families and children with special needs and specifically intervention services for children, birth to three. The Lead Agency is a member of the Connecticut Birth to Three Coordinating Council. The Lead Agency and DDS have partnered to coordinate issues pertaining to children with special needs.

#### Connecticut Department of Labor (DOL)

DOL is the state's lead agency for providing employment and training services. DOL is the state's welfare-to-work agency and has developed a partnership with the Lead Agency to assist TANF clients attain employment or training opportunities. The Lead Agency's contractor for the child care voucher/certificate program has developed an operations protocol to insure TANF clients receive child care financial assistance. The Lead Agency has previously partnered with DOL to implement a Child Care Apprenticeship program.

#### Connecticut Department of Emergency Management & Homeland Security (DEMHS)

The Lead Agency has been working with several agencies and organizations convened by DEMHS to explore strategies to develop an emergency preparedness plan for child care facilities, their enrolled children and personnel.

#### School Readiness Councils

There are approximately 70 school readiness councils that are established by state law to received state school readiness funds. Each council is required to have the lead municipal official and school superintendent as decision-makers for funds distribution and local policy setting. The Lead Agency participates in monthly meetings with school readiness council liaisons in order to solicit ongoing information regarding early childhood concerns and program/services recommendations.

**Statewide Child Care Advocacy Organizations**

The Lead Agency consults with and provides technical assistance to various statewide advocacy organizations including, but not limited to: the Connecticut Association for Infant Mental Health, Connecticut School-Age Child Care Alliance, the Connecticut Association for Education of Young Children, Connecticut Family Day Care Association Network, Connecticut Early Childhood Education Council, Connecticut Association for Human Services, Connecticut Child Care Centers Directors Forum, Connecticut Voices for Children.

**2.1.2 Emergency Preparedness and Response Plan for Child Care and Early Childhood Programs.** Lead Agencies are encouraged to develop an emergency preparedness and response plan for child care and other early childhood programs operating in the State/Territory. The plan should include provisions for continuity of services and child care assistance payments to families and providers in the event of an emergency or disaster. Indicate which of the following best describes the current status of your efforts in this area. **Check only ONE.**

- Planning.** Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.
- Developing.** A plan is being drafted. Include the plan as Attachment 2.1.2, if available.
- Developed.** A plan has been written but has not yet been implemented. Include the plan as Attachment 2.1.2, if available.
- Implementing.** A plan has been written and is now in the process of being implemented. The plan is included as Attachment 2.1.2.
- Other. Describe:**

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

The Connecticut Department of Public Health (DPH) has developed a “flip chart” [http://www.ct.gov/dph/lib/dph/daycare/pdf/dph\\_Emer\\_guide\\_eng.pdf](http://www.ct.gov/dph/lib/dph/daycare/pdf/dph_Emer_guide_eng.pdf) on emergency care provisions and has been coordinating training sessions to child care providers throughout the state in 2008 and 2009. Plans are being made to expand this effort to a variety of child care settings in future years. DPH has worked with the Connecticut Department of Emergency Management and Homeland Security (DEMHS) to alert local emergency management directors. Planning and implementation of the guidelines and training was done in collaboration with the statewide Child Safety & Crisis

**Response Committee to address safety and crisis preparedness and response issues affecting children.**

**The Department of Public Health developed, printed and distributed (Spring 2008) 4500 Emergency Care Guidelines (Spanish & English) to all licensed child care centers and family day care homes. Eight regional (2 hour) trainings were held in the Summer and Fall of 2008 and very well attended by child care providers (660 individuals participated). Additional trainings were provided to child care associations/ groups. An opportunity for Train-the-Trainers may be established to provide training on the DPH model to continue training of child care providers. DPH has already developed the curriculum and PowerPoint presentation based on research and consolidation of preparedness best practices in other states and from NACCRRRA documents. Presentations/training was held at the Connecticut Association for the Education of Young Children (CAEYC) meetings held in the Fall of 2007 and 2008.**

**DPH in coordination with DEMHS has developed a child care preparedness “ready” kit (on wheels) which will be shared with centers in the 10 mile emergency preparedness zone during a special training for/in the event of an emergency at the Millstone nuclear power plant.**

**The Child Safety Child Care Subcommittee have outlined training needs for early care & education providers in diverse settings including centers and family day care homes, after-school, summer and school vacation camps, family resource centers, in-home & informal child care providers. The Department of Emergency management and Homeland Security have been involved and have shared information regarding child care providers with the local Emergency Management Directors for incorporation into local preparedness efforts.**

**In addition, planning and preparedness for child care has been incorporated into statewide and local Emergency Preparedness documents as required by the Connecticut Department of Emergency Preparedness and Homeland Security. Most notably, plans, training and information for the 10-mile Emergency Planning Zone (area in the 10 mile radius around the Millstone Nuclear Power Plant) including documents such as “ Nuclear Power Plant Emergency Preparedness for Child Care - Providers in the Millstone Emergency Planning Zone (EPZ)” have been made available to providers and families. The following text is from the planning guide and is mailed to all homes within the 10 mile EPZ each year with details regarding sheltering in place or evacuation:**

*What If Your Children Are In School Or Day Care?*

*Communities within 10 miles of Millstone Power Station have plans in place to provide for the safety of school populations. The Superintendent may decide to conduct an early dismissal or to make preparations for a precautionary transfer of students to a pre-designated location. Schools calling for early dismissal will follow the same procedures as they do for snow days.*

*Families will be notified of the precautionary transfer of students and where they may pick up their children. Parents are asked not to arrive at schools before being notified in order to avoid delays. Children will be accounted for and supervised at all times. School authorities will assure that the student is released only to an authorized person. School nurses bring all medicines prescribed for students and health alert information. Classes that are away from school on field trips are contacted and directed to go to a host community.*

*Licensed child day care centers, group day care homes and family day care homes are required to develop emergency response plans. Day care providers have been encouraged to work with their local public safety officials in developing these plans. Plans include procedures for sheltering, relocating and evacuating children and staff if necessary. Check with your day care provider and make yourself aware of their plans in case of an emergency.*

**Additional planning to be accomplished includes but is not limited to:**

- **More fully develop a strategic plan based on the planning document from May of 2007.**
- **Explore potential for incorporating Emergency preparedness training (1-2 hours) for child care providers in the Connecticut Charts-A-Course Training, CDC Director's Credential courses, and/or First Aid training and/or refresher courses.**
- **Work to improve communication and planning between schools, kindergartens, local child care providers and local and state emergency preparedness staff for preparedness and response to disasters.**
- **Develop resources, information and strategies for parents and staff regarding what to do in an emergency if/when child in day care. Provide questions for parent to ask providers, including what the back-up is if a child care provider is not available during or after a disaster.**

- **Incorporate the needs of children during and after a disaster as they relate to school health issues, children’s mental, emotional and psychological needs**

**A representative from Connecticut’s Child Safety committee was appointed to the National Commission on Children and Disasters. This appointment will help to maintain a link between Connecticut and national best practices for emergency preparedness for children.**

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

**An example of actions, pertaining to child care facilities, that would occur if there were an incident at the Millstone Power Plant, include Emergency Alert System messages and public sirens in the communities, identifying steps to take – Remain Alert, Shelter in Place, or Evacuate, and if and when to administer Potassium Iodide (KI) – which has been distributed throughout the EPZ communities.**

**In addition, the Department of Public Health in their Emergency Operations Center (EOC) or the state EOC will implement calling all of the licensed child care centers to make them away of the emergency situation at millstone. It is the intent to use an automated phone system and to include licensed family day care homes. DPH maintains the listing and phone numbers for all licensed child care in the state and has Geographic Information System mapping to identify the facilities within the 10 mile EPZ. Facilities within schools will be notified by other means through the school and communities’ Emergency Preparedness routines. Other providers such as Kith and Kin receive notification in the same manner as the general public in the EPZ, via EAS on the radios, televisions, and community sirens & notification systems.**

**The Child Care Subcommittee of the Child Safety & Crisis Response Committee is examining state level issues including the review of impacts and needed changes to local or state agency policies and local or state regulations to include provision for continuation of child care services during and after emergencies and disasters.**

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

**See answer to 2.1.2 a**

**d) Describe how the Lead Agency is coordinating with other State/Territory agencies, private, and/or non-profit charitable**



organizations to ensure that child care and early childhood programs are included in planning, response, and recovery efforts.

**The Lead Agency is a member of the Connecticut Child Safety and Crisis Response Committee that meets quarterly. In addition, the CCDF Administrator is a co-chair of a Child Care subcommittee of the larger Crisis Response Committee. Representatives from a variety of child care and emergency management organizations meet to develop strategies and keep others informed.**

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

- Planning.** Are there steps under way to develop a plan?
- Yes, and **describe** the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
- No.
- Developing.** A plan is being drafted. Include the draft as **Attachment 2.1.3** if available.
- Developed.** A plan has been written but has not yet been implemented. Include the plan as **Attachment 2.1.3** if available.
- Implementing.** A plan has been written and is now in the process of being implemented. Include the plan as **Attachment 2.1.3**.
- Other (describe):**

**There are reports regarding Connecticut's Early Childhood collaboration efforts that can be accessed by visiting the following web sites so they will not be include as an attachment:**

*Ready by 5 Fine by 9*

[http://www.ctearlychildhood.org/QuickLinks/customer-files/ready5\\_fine9.pdf](http://www.ctearlychildhood.org/QuickLinks/customer-files/ready5_fine9.pdf)

*Early Childhood Investment Plan Recommendations –*

[http://www.ctearlychildhood.org/images/customer-files/Summary\\_report\\_w\\_apps.pdf](http://www.ctearlychildhood.org/images/customer-files/Summary_report_w_apps.pdf)

[http://www.ctearlychildhood.org/Content/Connecticut s Early Childhood Investment Plan Part I .asp](http://www.ctearlychildhood.org/Content/Connecticut_s_Early_Childhood_Investment_Plan_Part_I.asp)

*Presentation to the CT General Assembly Appropriations Committee: 4th Year Early Childhood RBA*

<http://www.ctearlychildhood.org/images/customer-files/march09RBAAPPROPPT.ppt>

*First Words, First Steps – The Important of the Early Years –*

[http://www.ct.gov/dss/lib/dss/infanttoddler\\_report\\_lb\\_pe10\\_16\\_08.pdf](http://www.ct.gov/dss/lib/dss/infanttoddler_report_lb_pe10_16_08.pdf)

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

**The Early Childhood Education Cabinet has listed accomplishments over the past two years at the following website:**

<http://www.ctearlychildhood.org/FileManagerRecursive/customer-Files/18monthaccomplishments.pdf>

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

**The Lead Agency works as a partner within the Early Childhood Education Cabinet to ensure coordination.**

**Work continues on the following programs and funding streams:**

1. **Care 4 Kids subsidy program (state and federal CCDF)**
2. **Lead Agency Child Care Center Contract Program (state and federal CCDF/TANF/SSBG funds) and state Pre-K school readiness program (state/TANF funds)**
3. **CT Charts a Course professional development program (state and federal CCDF funds)**
4. **Statewide Resource and Referral program (state and federal CCDF)**

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

**See response to 2.1.3 a and b**

**d) Describe** how the State/Territory's plan supports, or will support, continued coordination among the programs. Are changes anticipated in the plan?

**The Early Childhood Education Cabinet is responsible for designing an accountability process using the nationally know Results Based Accountability (RBA) system to review the ongoing work as set forth in the Investment Plan. We would expect changes to the Plan based on state and federal funding decisions and or assessments/evaluations to certain programs and services.**

## **2.2 Public Hearing Process**

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

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

**The public hearing notice was published on 4/28/09. The public hearing also provided an opportunity to comment on the ARRA funds Connecticut will receive. See Attachment 2.2.**

b) Manner of notifying the public about the public hearing:

**Posted on DSS Website, Emails and announced at Child Day Care Council Meeting**

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

**May 13, 2007, 4:00 PM – 7:00 PM**

**May 18, 2007, 4:00 PM – 7:00 PM**

**May 20, 2007, 1:00 PM – 3:00 PM**

d) Hearing site(s):

**New Haven – LULAC Head Start Site,  
Norwich – Southeastern Mental Health Authority (SMHA), and  
New Britain - Research and Education Center for the Hospital  
for Special Care**

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

**The CCDF Plan was available through the DSS Website, emails upon request and other early childhood websites. Printed copies were available upon request and at all public hearings.**

f) Below is a brief summary of the public comment process.

**Three (3) Public Hearings were held across the state in May 2009. The public hearings were hosted by representatives from the Child Day Care Council, and state officials from the Departments of Public Health and Social Services. Representatives from child care settings, child and family advocacy organizations, public health and nurses associations, and parents gave written and verbal testimony and comments. These comments and recommendations have been incorporated into the Child Care and Development Fund Plan where appropriate.**

**Over 100 people participated in the CCDF Public Hearings - 46 in New Haven, 10 in Norwich and 44 in New Britain, as well as staff from the State of Connecticut Departments of Public Health and Social Services. The participants represented the following:**

**Child Day Care/Early Learning/Child Development Centers (private & publically funded), Family Day Care Home Providers, Nursery Schools, Head Start Centers & Home Based Programs, Homeless Shelter CDC, YMCAs/YWCAs, Charter Schools, Parents, Care4Kids Families, All Our Kin, CT Parent Power, State of Black CT Alliance, School Readiness Councils, School Readiness Centers, Early Learning (Young Children) Councils/Organizations, CT Head Start Association, Advocates/Coalitions, Discovery Communities, Child & Family Organization, LEARN, CAHS, CT Voices for Children, CAEYC, Board of Education, Catholic Charities, SEIU (Service Employees International Union), Child Development InfoLine, Accreditation Facilitation Project, CT Charts-A-Course, CT Departments of Public Health and Social Services, the Office of Policy and Management and the Administration for Children and Families, Region 1.**

**The hearing began with an overview by the Child Care Administrator of the proposed CCDF plan. The public was invited to share ideas and suggestions as to how to spend the CCDF and Stimulus funding and plan for early care and education services in the state. The document contains details regarding how Connecticut used federal CCDF funding in the past and areas that are to be focused on. The plan includes the one-time \$13.6 million in ARRA Stimulus funding provided for child care. The plan includes potential uses where the state may spend the Stimulus funding, and outlines the three**

**categorical areas required – Quality Expansion, Quality Infant/Toddler and Child Care Services. ARRA requires special reporting and tracking, separate accounts and is short-term. Until the state budget is finalized, the CCDF funding will be in draft format.**

**There were many comments received during the three public hearings. The most frequent comment referred to the interest in maintaining funding for quality enhancement activities that supports education consultation, training of providers, licensing support for family day care homes. The need for Infant/Toddler slots in the state was mentioned.**

**There was discussion regarding quality enhancement, Accreditation Facilitation Project (AFP), CT Charts-A-Course scholarships, resource and referral services 2-1-1, C4K and licensing staff as well as federal drawdown, federal law, allowable expenditures, access to caregivers and consumers.**

**Written comments were received, including requests for ARRA funding for specific projects and programs relating to quality and infant/toddler care and the education and training of providers.**

**Comments were received that the draft plan is good for kids. The plan is good, however funding is not enough. There was frustration expressed by advocates that the final state budget was not completed so they were not able to see the implications on the CCDF budget.**

**There was concern for the use of a less comprehensive Market Rate Survey from the previous survey completed by UCONN. Providers expressed concern for rates remaining the same.**

**A number of concerns were raised about the impact of changes to the Care 4 Kids program such as: parents frightened they won't be able to pay for quality child care or basic needs, concern for the working poor who struggle to keep kids in quality, safe environments, C4K cuts could limit access to quality care settings, number of state funded slots will be reduced because of funding loss, loss of C4K funding compromises CDC's ability to cover operating costs and repay CHEFA loans, possible loss in number of Family Day Care Homes if parents are unable to pay for child care.**

**Discussion regarding provider certificates. Need to spend wisely, strategically identify priorities, and to move the planning regarding infants and toddlers to implementation of programs and activities.**

### **2.3 Public-Private Partnerships**

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

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

**The Lead Agency is committed to the continued expansion and development of cooperative public-private ventures. To this end, the Lead Agency encourages employer groups and business associations to promote family support policies such as, flex-time and flexible work hours, promote child care tax credit programs, collaborate with the State Departments of Labor, and Economic and Community Development to integrate family and child care policies with economic policies and inform employers about family needs and work force trends, collaborate with the Connecticut General Assembly to develop model child care policies and financing strategies which promote public-private partnerships.**

**A few examples of public-private partnerships follow:**

**Child Care Facilities Loan Fund – the Lead Agency has partnered with the Connecticut Health and Educational Facilities Authority (CHEFA), the major commercial banks doing business in the state and a community investment corporation to provide loan opportunities to child care providers. The Lead Agency is also collaborating with a community development organization, the Local Initiatives Support Corporation (LISC) to provide technical assistance to child care providers participating in financing projects.**

**Care for Kids Program – The Lead Agency contracts with United Way of Connecticut, Inc. a private non-profit organization to manage the state’s child care subsidy program.**

**Connecticut Early Childhood Investment Initiative - Family, Community and State Co-Investment and Public-Private Partnerships**

- 1. Created a formal public-private partnership between the Cabinet, the William Caspar Graustein Memorial Fund and the Children’s Fund of Connecticut to fund and support 23 communities with high numbers of vulnerable young children to develop B-9 strategic plans. Plans for all communities will be completed and published by December 2009.**

- 2. Over the biennium, co-invested just over 1 million dollars in state funds with \$800,000 in foundation funds to support the community development process. Developed new public-private Collaborative Management Team to guide implementation and accountability**
- 3. Created a public-private partnership between the Cabinet and Graustein Memorial Fund to expand investment in parental civic engagement. Over the biennium, co-invested \$200,000 in Cabinet funds matched dollar-for-dollar by the Memorial Fund. A Collaborative Management Team including the Cabinet, Graustein Memorial Fund, CT Children’s Trust Fund and Commission on Children guides this work.**
- 4. Co-invested with several community foundations in preschool facility expansion through a partnership with the Connecticut Health and Education Financing Authority**
- 5. Co-invested with the Annie E. Casey Foundation, Graustein Memorial Fund, Children’s Fund of Connecticut, and other funders in the Leadership in Action Program to assist Bridgeport to increase the school readiness of its entering kindergartners**

## PART 3 CHILD CARE SERVICES OFFERED

### **3.1 Description of Child Care Services**

**3.1.1 Certificate Payment System.** **Describe** the overall child care certificate process, including, **at a minimum**:

- a) a description of the form(s) of the certificate (§98.16(k)):

**The child care certificate is a document authorizing monthly payments for specific child care services. It names the parent(s), the child(ren) to receive child care and the child care provider. The certificate also states the amount of the state and parent share. The certificate/voucher contractor hired by Lead Agency maintains the original certificate with copies to the parent and the provider.**

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

**Parents are informed that the certificate can be used at any appropriate (as defined in state regulations) child care setting they choose as long as the parent remains eligible for child care assistance. The certificate can be used at multiple child care settings. Parents are provided information on the certificate program by, but not limited to, the Lead Agency staff, certificate/voucher contractor, the 211-Child Care project which is the statewide resource and referral service funded by the Lead Agency that assists parents with choosing child care.**

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

**Not Applicable**



- d) **Attach** a copy of your eligibility worker’s manual, policy handbook, administrative rules or other printed guidelines for administering the child care subsidy program as **Attachment 3.1.1**.

**Note:** If these materials are available on the web, the Lead Agency may provide the appropriate Web site address in lieu of attaching hard copies to the Plan.

**Please visit the following website to access the Connecticut child care subsidy program regulations that serve as the worker manual/policy handbook:**

<http://www.ct.gov/dss/cwp/view.asp?a=2353&q=305180>

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

- Yes, and **describe** the type(s) of child care services available through the grant or contract, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))
- No.

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

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

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

- Yes, and the limits and the reasons for those limits are (§§98.16(g)(2), 98.30(e)(1)(iv)):
- No.

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

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

**3.2.1 Provide** a copy of your payment rates as **Attachment 3.2.1**.

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

Yes.

No, and other payment rates and their effective date(s) are provided as **Attachment 3.2.2**.

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

a) The month and year when the local market rate survey(s) was completed (§98.43(b)(2)): **May 2009**

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

**3.2.4** Does the Lead Agency use its **current** Market Rate Survey (a survey completed no earlier than 10/1/07) to set payment rates?

Yes.

No.

**3.2.5** At what percentile of the **current** Market Rate Survey is the State payment rate ceiling set? **See Attachment 3.2.6**

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

The payment rates listed in Attachment 3.2.1 remain at the 60<sup>th</sup> percentile of the market survey conducted in May 2001. These rates were based on a statistical formula developed for the Lead Agency by the University of Connecticut that utilized statewide and regional cost adjustment factors to smooth errors/variances inherent to random sampling.

The payment rates for "providers exempt from licensing", including relatives and in-home providers, are set as a percentage of the state minimum wage as of January 2002. Those rates as follows:

**One-third of the minimum wage - one child**  
**Two-thirds of the minimum - two children**  
**Full Minimum Wage - three children**

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

**See Attachment 3.2.6**

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

Yes. If, yes, **describe**.

No.

**See Attachment 3.2.6**

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

Yes. If yes, **describe**:

No.

**Connecticut provides a 5% bonus per child for licensed facilities achieving and maintaining national accreditation standards and enroll children from the Lead Agency's certificate/voucher program.**

**CT pays a 15% bonus payment per special needs child.**

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

**See Attachment 3.2.6**

### **3.3 Eligibility Criteria for Child Care**

#### **3.3.1 Age Eligibility**

a) Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are physically and/or mentally incapable of self-care? (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

- Yes. If yes, **define** physical and mental incapacity in Appendix 2, and **provide** the upper age limit 19
- No.

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

- Yes, and the upper age is 19
- No.

#### **3.3.2 Income Eligibility**

**Complete** columns (a) and (b) in Table 3.3.2 below based upon 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 SMI.

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	IF APPLICABLE	
			Income Level, lower than 85% SMI, if used to limit eligibility	
			© \$/month	(d) % of SMI [Divide © by (a), multiply by 100]
1	\$4,324	\$3,675	\$2,117/3,175	50/75%
2	\$5,537	\$4,706	\$2,768/4,153	50/75%
3	\$6,839	\$5,813	\$3,419/5,129	50/75%
4	\$8,142	\$6,921	\$4,071/6,106	50/75%
5	\$9,445	\$8,028	\$4,722/7,083	50/75%

**The Lead Agency uses the State Median Income (SMI) for each year as published by the Federal Register. These numbers represent the Connecticut numbers based on the March 26, 2009 Federal Register and are effective July 1, 2009.**

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

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

Yes. If yes, **provide** the requested information from Table 3.3.2 and **describe**. Allowance to remain eligible until income reaches 75% SMI. **Note:** This information can be included in a separate table, or by placing a “/” between the entry and exit levels in the above table.

No.

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

c) These eligibility limits in column (c) became or will become effective on:

**July 1, 2009**

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

**See Attachment 3.3.2**

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

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

**See Attachment 3.3.2**

No.

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

**The income of all family members is included.**

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

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

**See Appendix 2**

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

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

**See Appendix 2**

No.

### 3.3.4 Eligibility Based Upon Receiving or Needing to Receive Protective Services

a) Does the Lead Agency provide child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

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

Yes.  
 No.

No.

b) Does the Lead Agency provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities? (§§98.20(a)(3)(ii), 98.16(f)(7))

Yes. (**NOTE:** This means that for CCDF purposes the Lead Agency considers these children to be in protective services.)

No.

**3.3.5 Additional Conditions for Determining CCDF Eligibility**

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

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

**3.4 Priorities for Serving Children and Families**

**3.4.1** At a minimum, CCDF requires Lead Agencies to give priority for child care services to children with special needs, or in families with very low incomes.

**Complete** Table 3.4.1 below regarding eligibility priority rules. For columns (a) through (c), **check** only one box if reply is “Yes”. Leave blank if “No”. **Complete** column (e) only if you check column (d).

**Table 3.4.1 Priorities for Serving Children**

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

\* **Required**

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

**See Attachment 3.4.2**

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

**See Attachment 3.4.2**

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

- Yes, and the additional priority rules are: **(Terms must be listed and defined in Appendix 2)**
- No.

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

- Yes.
- No.

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

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

**The Lead Agency maintains a Wait List only for the child care subsidy program and only if projected expenditures will exceed the approved annual state fiscal year budget allocation. See Attachment 3.4.6 for the Wait List regulations.**

- a) Whether the waiting list is maintained for all eligible families or for certain populations? **See above.**
- b) Whether the waiting list is maintained for the entire State/Territory or for individual localities? **See above.**
- c) What methods are employed to keep the list current? **See above.**

- No.



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

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

- a) **Attach** the sliding fee scale as **Attachment 3.5.1**.
- b) **Describe** how the sliding fee scale is administered, including how the family's contribution is determined and how the co-payment is assessed and collected:

**The family contribution is determined for the family regardless of the number of children in care.**

- c) The attached sliding fee scale was or will be effective as of July 1, 2009.
- d) Does the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

- Yes, and **describe** those additional factors:
- No.

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

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

**3.5.3** The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: \$

The Lead Agency must **select ONE** of these options:

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

**Only families receiving cash assistance and participating in an approved training program are exempt from a family contribution.**

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

Yes.

No.

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

**All families with earnings are required to pay a range from 2% to 10% of their annual/monthly gross income. If there is more than one child, the family is not required to pay any additional fee. The required Connecticut co-payment follows national studies indicating the level families can pay at various income levels.**

## **PART 4 PARENTAL RIGHTS AND RESPONSIBILITIES**

### **4.1 Application Process / Parental Choice**

**4.1.1 Describe** the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §98.16(k), 98.30(a) through (e)). At minimum, describe:

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

**Parents (TANF and non-TANF) are informed about child care financial assistance by the Lead Agency regional office staff, the CT Department of Labor employment staff, CT Department of Children and Families staff who work with adoptive and foster parents, the five regional Workforce Investment Boards' employment staff and other contracted entities. Informational brochures, direct conversation, phone discussion and strategies developed by community-based organizations serving similar clients, serve as the basic communication strategies. Families are informed about the 211-Child Care service to discuss child care options and what constitutes good child care. All of the organizations identified in Section 2.1 inform their respective constituents, as appropriate.**

b) How parents can apply for CCDF services

**Applications are provided at various state, community and municipal settings and mailed to potential eligible families. Families are required to submit their applications, which include necessary verifications, by mail or schedule appointments when necessary.**

c) What documentation parents provide as part of their application to determine eligibility

**Families are required to submit their applications, which include necessary verifications, by mail or schedule appointments when necessary.**

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

**Parents (TANF and non-TANF) are informed about child care financial assistance by the Lead Agency regional office staff and other contracted entities. Informational brochures, direct conversation,**

**phone discussion and strategies developed by community-based organizations serving similar clients, serve as the basic communication strategies. Families are informed about the 211-Child Care service to discuss child care options and what constitutes good child care. All of the organizations identified in Section 2.1 inform their respective constituents, as appropriate.**

e) What steps the Lead Agency has taken to reduce barriers to initial and continuing eligibility for child care subsidies

**The Lead Agency’s contractor for the child care subsidy program completes eligibility determination. Child care subsidy staff can travel to meet with families if necessary. Bilingual and bicultural staff assists where possible. Eligibility is primarily granted for six months or on a month-to-month basis, if warranted.**

f) **Attach** a copy of your parent application for the child care subsidy program as **Attachment 4.1.1**.

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

- Yes, and **describe** how the process is different:
- No.

**4.1.3** What is the length of eligibility period upon initial authorization of CCDF services?

**Six months**

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

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

**4.1.4 Describe** how the Lead Agency ensures that parents are informed about their ability to choose from among family child care and group home child care, center-based care and in-home care, including faith-based providers in each of these categories.

**The Lead Agency contracts with United Way of Connecticut, which is also the statewide resource and referral agency, to inform and counsel parents about choosing child care and provide community forums to parents and providers; development and distribution of educational brochures, videos, public service announcements; collaboration with other agencies identified in Section 2.1 and organizations that have similar target populations; coordination with statewide and local media; distribution of child care informational packets at the Lead Agency regional offices and the Connecticut Department of Labor, which is coordinating the state's welfare-to-work project. 211-Child Care maintains a statewide data base, which contains information on, fees, capacity, hours of operations, etc. of child care centers, group home child care and family day care home providers.**

**4.1.5 Describe** how the Lead Agency reaches out and provides services to eligible families with limited English proficiency, including how the Lead Agency overcomes language barriers with families and providers.

**All form and notices are available in Spanish. Interpreter services by telephone are used for other languages, if necessary. Bilingual staff are available to answer the Call Center and discuss individual case needs.**

## **4.2 Records of Parental Complaints**

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

**The Lead Agency's Office of Legal Counsel, Regulations and Administrative Hearings handles parental complaints concerning due process in the Child Care Assistance Program. The Lead Agency's contractor for the voucher/certificate program has designed a grievance/mediation process for parents and child care providers as a first step before a formal administrative hearing by the Lead Agency.**

**Complaints concerning other components of the CCDF program are filed directly with the Lead Agency. The Lead Agency requires all contracted program components to maintain a file of complaints and report as necessary.**

**Complaints concerning licensed child care providers are reported to the either the state Department of Public Health (licensing issues such as staff ratios or illegal operation) or the state Department of Children and Families (abuse and neglect issues). Parents and providers are advised to contact those agencies for appropriate information.**

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

**Provide** a detailed description of the Lead Agency procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31))

**Connecticut state laws guarantee unlimited access for parents at all licensed child care settings, including those parents eligible for CCDF financial assistance. Child care settings that are exempt from licensing requirements are also informed that they must allow parents unlimited access to their children.**

### **4.4 Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain Child Care**

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

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

NOTE: The TANF agency, not the Child Care Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record. The TANF agency that established these criteria or definitions is:

#### **Connecticut Department of Social Services.**

- "appropriate child care":
- "reasonable distance":
- "unsuitability of informal child care":
- "affordable child care arrangements":

**See Attachment 4.4**

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

**5.1 Quality Targeted Funds and Set-Asides**

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

**5.1.1 Infants and Toddlers:**

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

- a) **Describe** the activities provided with these targeted funds

**The Lead Agency contracts with state supported child care centers to use the funds to support a variety of activities such as: health and mental health consultation for families and children, professional development for staff whom work with the infants and toddlers (under the age of 3), parent education and support. Activities also support early language, literacy, pre-reading, and early math concepts development.**

- b) **Identify** the entities providing the activities

**The entities are licensed child care centers which may also serve preschool and school-age children.**

- c) **Describe** the expected results of the activities.

**Healthier and literate children, staff with improved skills, improved parenting skills and a better understanding to child development.**

**Connecticut will receive \$655,215 from the ARRA to support quality activities for infants and toddlers. Decisions have not been made concerning these funds. See Attachment 1.3.**

**5.1.2 Resource and Referral Services:**

- a) **Describe** the activities provided with these targeted funds

**Consumer education, community seminars, direct counseling and education service for parents seeking child care assistance. Maintenance of child care provider data base that includes information concerning fees, openings, etc. Development and distribution of relevant brochures and educational materials. Conduct activities to increase child care capacity and quality improvement activities.**

- b) **Identify** the entities providing the activities

**The Lead Agency will contract with the United Way of Connecticut's 211-Child Care project, which provides statewide resource and referral services.**

- c) **Describe** the expected results of the activities.

**Educated consumers on a variety of subject areas concerning quality child care, consumers who locate child care, providers who can list vacant slots and learn of other fees**

**5.1.3 School-Age Child Care:**

- a) **Describe** the activities provided with these targeted funds

**Not applicable**

- b) **Identify** the entities providing the activities

**Not applicable**

- c) **Describe** the expected results of the activities.

**Not applicable**

**5.1.4** The law requires that not less than 4% of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including targeted funds) during the 1-year period: October 1, 2009 through September 30, 2010:

**\$3,330,340 (4%)**

**Connecticut will receive \$1,131,375 from ARRA to support quality activities. Decisions have not been made concerning these funds. See Attachment 1.3.**



**5.1.5 Check** each activity in Table 5.1.5 that the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the targeted funds for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h)). **CHECK ALL THAT APPLY.**

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

Activity	Check if undertaking/will undertake	Name and type of entity providing activity	Check if non-governmental entity
Comprehensive consumer education	<input checked="" type="checkbox"/>	See Below	<input checked="" type="checkbox"/>
Grants or loans to providers to assist in meeting State and local standards	<input type="checkbox"/>		<input type="checkbox"/>
Monitoring compliance with licensing and regulatory requirements	<input checked="" type="checkbox"/>		<input type="checkbox"/>
Professional development, including training, education, and technical assistance	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Improving salaries and other compensation for child care providers	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Activities to support a Quality Rating System	<input checked="" type="checkbox"/>		<input type="checkbox"/>
Activities in support of early language, literacy, pre-reading, and early math concepts development	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Activities to promote inclusive child care	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1) and (2))	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>

**Non Governmental:**

**United Way of Connecticut, Numerous non-profit child care centers, Numerous community based non-profit organizations, & Independent consultants.**

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

*a. comprehensive consumer education –*

**Includes a variety of strategies such as: funding the United Way of Connecticut 211-Child Care project which is the statewide resource and referral agency to counsel parents about choosing child care and provide community forums to parents and providers; development and distribution of educational brochures, videos, public service announcements; collaboration with other agencies identified in Section 2.1 and organizations that have similar target populations; coordination with statewide and local media; distribution of child care informational packets at the Lead Agency regional offices and the Connecticut Department of Labor, which is coordinating the state's welfare-to-work project. Annual reports are submitted that document activities negotiated to assess of service is utilized. Annual monitoring is also completed.**

*b. grants or loans to providers to assist in meeting State and local standards –*

**Not applicable**

*c. monitoring of compliance with licensing and regulatory requirements –*

**Child care licensing and enforcement personnel are supported by the state Department of Public Health (DPH) to conduct inspections to insure basic health and safety standards are met. Staff are supervised by state managers.**

*d. professional development, training and technical assistance –*

**The Lead Agency supports a variety of activities such as: the Connecticut Community-Technical Colleges Systems' *Connecticut Charts a Course* project, a comprehensive early caregiver career development system which includes a scholarship program for income eligible providers; a program targeted to kith and kin providers; a statewide Accreditation Facilitation Project; the Provider Registry System; the University of Connecticut Cooperative Extension Systems' newsletter entitled, *All Children Considered*, which is distributed to all licensed and informal child care providers; the training program in child development to caregivers on basic child health and development issues; technical**

**assistance to child care advocacy and member organizations. Annual reports are collected to measure compliance with negotiated activities and annual monitoring is completed.**

*e. compensation for child care providers –*

**The Lead Agency provides compensation through scholarship assistance offered by the *Connecticut Charts a Course* project and supports compensation through its contracted child care center programs and its Child Care Assistance Program. Annual reports are collected to measure compliance with negotiated activities and an annual monitoring is completed.**

*f. early language, literacy and numeracy development -*

**See Section 5.2**

*g. inclusive child care –*

**The Lead Agency was co-facilitator of the former Map to Inclusion project with the Connecticut Department of Mental Retardation. Curriculum was developed and integrated into of the Connecticut Charts a Course professional development system and is offered via the Training Program in Child Development. The CT certificate/voucher program provides special reimbursements for children with special needs.**

*h. Healthy Child Care America and other health activities –*

**The Lead Agency has participated as a member of the Healthy Child Care Connecticut (HCCCT) initiative, which has now been replaced by the Early Childhood Partners project. This project is the Connecticut's response to the federal Maternal and Child Health's Early Childhood Comprehensive Systems Plan. Program activities are assessed by the CT Department of Public Health.**

*i. other quality activities that increase parental choice, and improve the quality and availability of child care –*

**The Lead Agency contracts with the United Way of Connecticut 211-Child Care project to conduct a recruitment program to expand the number of licensed family child care providers. The Lead Agency is a partner with the State Department of Education to implement the state's School Readiness initiative that expands opportunities for three and four year olds in selected communities throughout Connecticut. The school readiness project also assists**

child care providers to enhance program services such as nutrition, health care, parent education, literacy, etc. The Lead Agency is facilitating a review of child care opportunities for homeless children and has begun to discuss the potential of designing a pilot program to analyze and address the issues of providing child care services to children between six weeks and 12 years of age, who reside in shelters for the homeless. Some sheltered children may have additional mental health needs resulting from being homeless and family situations, including family violence that they may have witnessed. The establishment of a mental health support system for both the child/family and child care staff is an integral part of the design discussion. The intent of the pilot program and its associated research is to demonstrate best practices for providing care to sheltered children. Program components will permit sufficient flexibility in funding and programmatic requirements to allow for attendance fluctuations, transportation needs and substitution of housing search and other shelter-related activities that assist families in establishing themselves in the community, for job search and work requirements. All activities if funded require annual activity reports based on negotiations to certain tasks/activities.

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

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

- Planning.** The State is planning for the development of early learning guidelines. Expected date of plan completion: \_\_\_\_ If possible, respond to questions 5.2.2 through 5.2.4.
- Developing.** The State is in the process of developing early learning guidelines. Expected date of completion: \_\_\_\_ If possible, respond to questions 5.2.2 through 5.2.4.
- Developed.** The State has approved the early learning guidelines, but has not yet developed or initiated an implementation plan. The early learning guidelines are included as **Attachment 5.2.1, if available.**
- Implementing.** In addition to having developed early learning guidelines, the State has embarked on implementation efforts which may include dissemination, training or embedding guidelines in the professional development system. The guidelines are available via the following web site:

[http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool\\_framework.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool_framework.pdf)

- Revising.** The State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as **Attachment 5.2.1.**
- Other. Describe:**

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

**No change to the preschool early learning guidelines.**

**The Lead Agency has contracted with an independent consultant and completed *Connecticut's Guidelines Early Learning for the Development of Infant and Toddler Learning*. This work complements the work and guidance presented in the Preschool Curriculum and Assessment Frameworks for Children in Preschool Programs. Planning activities have begun to disseminate these guidelines.**

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

- Yes. If yes, **identify standards:** visit the following web site [http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool\\_framework.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool_framework.pdf)
- No.

**[http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool\\_framework.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool_framework.pdf) for a copy of Connecticut's Preschool Curriculum Framework.**

**[http://www.sde.ct.gov/sde/lib/sde/word\\_docs/curriculum/language\\_arts/2006\\_CT\\_ELA\\_Curriculum\\_Framework.doc](http://www.sde.ct.gov/sde/lib/sde/word_docs/curriculum/language_arts/2006_CT_ELA_Curriculum_Framework.doc) (2006) and (2008)**

**For evidence of the preschool curriculum guidelines incorporated into the K-12 content standards of English language arts, math, science and social studies programs.**

**[http://www.sde.ct.gov/sde/lib/sde/word\\_docs/curriculum/language\\_arts/csde\\_pk\\_8\\_elacurriculumstandards\\_edited.doc](http://www.sde.ct.gov/sde/lib/sde/word_docs/curriculum/language_arts/csde_pk_8_elacurriculumstandards_edited.doc) or [http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/CT\\_Standards\\_Early\\_Learning.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/CT_Standards_Early_Learning.pdf)**

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

Yes. If yes, **describe:** see response to 5.2.1.b.

No.

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

Birth to three. Guidelines are not available;

Age 3 to five. Guidelines are available

[http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool\\_framework.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool_framework.pdf)

Five years or older. Guidelines are included as **Attachment 5.2.1**

If any of your guidelines are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

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

Yes.

No.

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

Yes. If yes, **describe.**

**Visit the following web site:**

[http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool\\_framework.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool_framework.pdf)

No.

**5.2.3 Implementation of Voluntary Early Learning Guidelines.**

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

**Check all that apply:**

- Disseminating materials to practitioners and families
- Developing training curricula
- Partnering with other training entities to deliver training
- Aligning early learning guidelines with licensing, core competencies, and/or quality rating systems
- Other. **Describe:**

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

**Check all that apply:**

- Publicly funded (or subsidized) child care
- Head Start
- Education/Public pre-k
- Early Intervention
- Child Care Resource and Referral
- Higher Education
- Parent Associations
- Other. **Describe:**

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

- Publicly funded (or subsidized) child care as funded by the State Department of Education
- Head Start
- Education/Public pre-k
- Early Intervention
- Child Care Resource and Referral
- Higher Education
- Parent Associations
- Other. **Describe:**

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

**Visit the following web site:**

[http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool\\_framework.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Early/Preschool_framework.pdf)

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

**We allow individual programs to describe whatever curriculum they choose to use, as long as the standards in the Preschool Curriculum and Assessment Frameworks are addressed. This allows for the uniqueness of programs.**

Materials developed to support implementation of the guidelines are included as **Attachment 5.2.3**. If these are available on the web, provide the appropriate Web site address.

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

- a) Validating the content of the early learning guidelines  
**Validated by a panel of national experts.**
  
- b) Assessing the effectiveness and/or implementation of the guidelines  
**The effectiveness in implementing standards is assessed in the reviews of the annual requests submitted by programs to the CT Department of Education and monitoring visits to approve and provide technical assistance for lesson planning and implementation.**

**Also, the “Training Wheels” initiative is an innovative professional development opportunity focused on supporting preschool program staff. It is yielding information about teacher growth in their understanding and implementation of the cycle of intentional teaching using Connecticut’s Preschool Curriculum and Assessment Frameworks. This cycle includes planning and implementing learning activities designed to address specific learning standards, observing and documenting children’s progress across the benchmarks for these standards, and then planning new learning activities and individualized teaching strategies based on the information collected. CT does not currently collect effectiveness data but some communities have been monitoring progress.**

- c) Assessing the progress of children using measures aligned with the guidelines  
**Programs use the Preschool Assessment Framework (PAF) tool. CT does not currently collect data, but towns have made efforts in looking at progress over time. The PAF tool is used for the purpose of making instructional decisions.**
  
- d) Aligning the guidelines with accountability initiatives  
**We continue to review/discuss how to best address this. It fits in the accountability plan in that all programs must use Connecticut’s Preschool Curriculum Framework, Preschool Assessment Framework and *Connecticut’s Guidelines Early Learning for the Development of Infant and Toddler Learning*, as a common base for curriculum design and assessment.**



Written reports of these efforts are included as **Attachment 5.2.4**. If these are available on the web, **provide** the appropriate Web site address (reports must still be attached to Plan):

**5.2.5 Plans for Professional Development. Indicate** which of the following best describes the current status of the Lead Agency’s efforts to develop a professional development plan for early childhood providers that includes all the primary sectors: child care, Head Start, and public education. **NOTE: Check ONLY ONE box that best describes the status of your State’s professional development plan.**

- Planning.** Are steps underway to develop a plan?  
 Yes, and **describe** the entities involved in the planning process, the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.  
 No.
- Developing.** A plan is being drafted. The draft or planning documents are included as **Attachment 5.2.5**, if applicable.
- Developed.** A plan has been written but has not yet been implemented. The plan is included as **Attachment 5.2.5**, if applicable.
- Implementing.** A plan has been written and is now in the process of being implemented, or has been implemented. The plan is included as **Attachment 5.2.5**.
- Revising.** The State previously developed a professional development plan and is now revising that plan, or has revised it since submitting the 08-09 State Plan. The revisions or the revised plan are included as **Attachment 5.2.5**.
- Other. Describe:**

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

**Currently the state has adopted an Early Childhood Education Investment Plan, which calls for the development of a multi –year workforce professional development plan to assure compliance with state law and selected national program standards and accreditation around staff qualifications. CT Charts-a-Course (CCAC) continues to receive funding through the Lead Agency as the state’s professional development and program improvement system for early care and education.**

Please access the CCAC web site for updated information:  
<http://www.ctcharts-a-course.org/>

*CT Charts- A-Course*, the state’s professional development system began planning in 1990 as a result of the original CCDBG legislation. The system has been in various stages of planning, implementation and expansion since that time. The current system houses the following components:

- **Career Ladder** – Recognizes the training and educational achievements of individuals who work with young children in all settings.
- **Scholarships** – Funds income eligible child care providers working the field and wishing to pursue to training in early care and education.
- **Career Counseling** – assists child care providers in the development of Individual Professional Development Plans
- **Training Approval Board** – sets standards for and approves all CCAC trainers and training content.
- **Provider Registry** – maintains data on caregiver credentials, degrees
- **Training Articulation** – assures seamless articulation from entry level –training to baccalaureate degrees in early childhood education.
- **Accreditation Facilitation Projects** – supports quality improvement and the acquisition of national accreditation standards in center –based, school-age and family child care, through 5 regional accreditation facilitation support projects and director training initiatives.

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

	Yes	No
Specific goals or desired outcomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A link to Early Learning Guidelines	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Continuum of training and education to form a career path	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Articulation from one type of training to the next	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Quality assurance through approval of trainers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Quality assurance through approval of training content	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A system to track practitioners’ training	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Assessment or evaluation of training effectiveness	<input checked="" type="checkbox"/>	<input type="checkbox"/>

State Credentials – Please state for which roles (e.g. infant and toddler credential, directors’ credential, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialized strategies to reach family, friend and neighbor caregivers	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

**There is no definitive “plan”. Please access the CCAC web site for appropriate information. <http://www.ctcharts-a-course.org/>**

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

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

**Note: Check either yes or no for each item):**

	<b>Yes</b>	<b>No</b>
Statewide	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To Center-based Child Care Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To Group Home Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To Family Home Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To In-Home Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other ( <b>describe</b> ):	<input type="checkbox"/>	<input type="checkbox"/>

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

**CT Charts-a- Course has developed standardized research-based workshops in early language and literacy, which are delivered through the Training Program in Child Development. (TPCD). Early math concepts’ workshops have been incorporated in the training.**

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

- Yes. **Describe**, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts.

**CT Charts-a-Course has developed educational bonuses \$TART (Supports, Training and Retention for Teachers), based on training and advancement on the CCAC career ladder. Caregivers can acquire 15 hours of early language and literacy training at no cost.**

- No. **Describe** any plans to offer incentives to encourage provider training and education, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts?

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

- Yes. **Describe** how the professional development plan's effectiveness/goal is assessed.

**CT Charts-A-Course prepared and submitted a Results-Based Accountability (RBA) template to document targeted results for caregivers.**

<http://www.ctcharts-a-course.org/docs/2008RBAtemplate.pdf>

- No. **Describe** any plans to include assessments of the professional development plan's effectiveness/goal achievement.

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

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

- 1. Percentage of the early care and education workforce enrolled in the Registry.**
- 2. Percentages of programs achieving NAEYC re-accreditation status**
- 3. Percentage of teachers in the Provider Registry who meet current and future publicly funded teacher qualification goals.**
- 4. Credentials of staff enrolled in the Provider Registry who are receiving scholarship assistance in order to meet current and future teacher qualification goals.**
- 5. Number of Early Childhood Administration Course Participants**

- No. **Describe** any plans to include assessments of specific professional development initiatives or components' effectiveness.

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

- Yes. **Describe** how assessment informs the professional development plan.

**This information is included in the RBA templates.**

- No. **Describe** any plans to include assessment to inform the professional development plan.

## PART 6 HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

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

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. **Note: This database typically contains information on licensing requirements for meeting State or local law to operate (§98.40). This database does not contain registration or certification requirements specific only to participation in the CCDF program.**

In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements.

The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: <http://nrc.uchsc.edu/>.

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

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

### **6.1 Health and Safety Requirements for Center-Based Providers** (658E(c)(2)(F), §98.41, §98.16(j))

- 6.1.1** Are all center-based providers paid with CCDF funds subject to licensing under State law per the NRCHSCC's compilation? **Note:** Some States use the term certification or registration to refer to their licensing regulatory

process. Do not check “Yes” if center-based providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

- Yes. Answer 6.1.2, skip 6.1.3, and go to 6.2.
- No. **Describe** which center-based providers are exempt from licensing under State law and answer 6.1.2 and 6.1.3.

**Programs administered by a public school system or administered by a municipal agency and located in a public school building; programs administered by a private school that is in compliance with the State Board of Education; drop-in programs administered by a nationally chartered boys'/girls' club; recreation operations and religious educational activities administered by a religious institution exclusively for children whose parents or legal guardians are members of such religious institution.**

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

- Yes, and the changes are as follows:
- No.

**6.1.3** For center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- a) The prevention and control of infectious disease (including age-appropriate immunizations)
- b) Building and physical premises safety
- c) Health and safety training
- d) Other requirements for center-based child care services provided under the CCDF

**In the Connecticut voucher/certificate program know as the Care 4 Kids program (C4K), the parent furnishes the child care center with information on forms (Provider/Parent Agreement) received from the Lead Agency’s contractor to administer C4K. The provider completes and signs the Provider/Parent Agreement attesting to the**

**following: local town code enforcement and minimum health and safety standards will be met, including the availability of a working telephone, fire extinguisher, and smoke alarm; the absence of a conviction for a felony, violent crime and/or a protective services record for staff; proof that all children in care are age appropriately immunized against diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, haemophilus influenza type B, hepatitis and varicella (chicken pox). The provider assures that their staff meet similar staff training requirements for licensed child care centers.**

**6.2 Health and Safety Requirements for Group Home Child Care Providers**

(658E(c)(2)(F), §§98.41, 98.16(j))

**6.2.1** Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? **Note:** Some States use the term certification or registration to refer to their licensing regulatory process. Do not check “Yes” if group home child care providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

Yes. Answer 6.2.2, skip 6.2.3, and go to 6.3.

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

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

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

Yes, and the changes are as follows:

No.

**6.2.3** For group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

a) The prevention and control of infectious disease (including age-appropriate immunizations)

**Not applicable.**

b) Building and physical premises safety

**Not applicable.**



c) Health and safety training

**Not applicable.**

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

**Not applicable.**

**6.3 Health and Safety Requirements for Family Child Care Providers**

(658E(c)(2)(F), §§98.41, 98.16(j))

**6.3.1** Are all family child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? **Note:** Some States use the term certification or registration to refer to their licensing regulatory process. Do not check “Yes” if family child care providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

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

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

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

Yes, and the changes are as follows:

No.

**6.3.3** For family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

a) The prevention and control of infectious disease (including age-appropriate immunizations)

**Not applicable.**

b) Building and physical premises safety

**Not applicable.**

c) Health and safety training

**Not applicable.**

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

**Not applicable.**

**6.4 Health and Safety Requirements for In-Home Child Care Providers**

(658E(c)(2)(F), §§98.41, 98.16(j))

**Note:** Before responding to Question 6.4.1, **check** the NRCHSCC's compilation of licensing requirements to verify if **in-home child care** as defined by CCDF and your State is covered. If not, **check** no for 6.4.1. Do not check “Yes” if in-home child care providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

**6.4.1** Are all in-home child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation?

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

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

1. **neighbors or relatives who provide care in the home of the child**
2. **relatives (i.e. grand parent, aunt, uncle) of the child who provide care at the relatives' home**

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

Yes, and the changes are as follows:

No.

**6.4.3** For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

a) The prevention and control of infectious disease (including age-appropriate immunizations)

b) Building and physical premises safety

c) Health and safety training

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

**In the C4K program, the eligible parent must provide the in-home provider with information on the Provider/Parent Agreement form.**

**Such provider must complete and sign the Provider/Parent Agreement attesting to the following:**

- the provider is 18 years of age or older;
- local town code enforcement and minimum health and safety standards will be met, including the availability of a working telephone, fire extinguisher, and smoke alarm;
- the total number of children in care during;
- the absence of a conviction for a felony, violent crime and/or a protective services record for staff;
- all instances of suspected child abuse or neglect will be reported to the state child welfare agency;
- all children in care are age-appropriately immunized;
- the provider is not working another job during the hours the child is in care;
- changes in the site or location of care will be reported promptly to Lead Agency;

**In addition, the Lead Agency has agreements with the CT Department of Children and Families and the CT Department of Public Safety to conduct child abuse/neglect and criminal background checks for all unlicensed providers at the time of initial application and at least one time per year thereafter. State and federal criminal background checks are mandated for all non-relative providers and for any provider suspected of having committed a sex crime or crime against persons in Connecticut or any other state. Information concerning criminal and child abuse/neglect background checks can be released to the parent to the extent necessary to provide the parent with the ability to make an informed choice about continuing care with the provider.**

## **6.5 Exemptions to Health and Safety Requirements**

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

**Indicate** the Lead Agency's policy regarding these relative providers:

- All** relative providers are subject to the same requirements as described in sections 6.1 - 6.4 above, as appropriate; there are **no exemptions** for relatives or different requirements for them.
- All** relative providers are **exempt** from all health and safety requirements.

- Some or all** relative providers are subject to different health and safety requirements from those described in sections 6.1 - 6.4. The following a) describes those requirements and b) identifies the relatives they apply to:

## **6.6 Enforcement of Health and Safety Requirements**

6.6.1 Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) **Describe** how health and safety requirements are effectively enforced, including at a minimum:

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

Yes, and **indicate** the provider categories subject to routine unannounced visits and the frequency of those visits:

No.

**The Department of Public Health (DPH) is the agency with statutory authority to enforce licensing requirements applicable to child day care centers, group day care homes and family day care homes in Connecticut.**

**At least every two years, unannounced site visits, inspections or investigations of licensed child day care centers or group day care homes are conducted by licensing enforcement specialists. New programs are inspected prior to initial licensure. Site visits are required prior to licensure for all family day care home applicants. Thereafter, the DPH is required to make unannounced visits to "at least thirty three and one third percent" (33 1/3%) of the licensed family day care homes each year.**

**Any inspection conducted by the DPH shall include an inspection for evident sources of lead poisoning. The DPH investigates all complaints received on licensed child day care facilities and facilities alleged to be operating illegally without a license. The DPH has statutory authority to refuse to license, suspend or revoke an existing license or take any other action against a license as set forth in regulations.**

**The DPH provides information to parents and shares information concerning the results of enforcement visits when requested.**

b) Are child care providers subject to background checks?

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

No.

**The Department of Public Health is the agency with statutory authority to assure that all licensed child care providers (child day centers, group day care homes and family day care homes) and appropriate staff receive appropriate background checks. Such providers must report any criminal conviction of the owner, conductor, operator, or maintainer of the facility or any person residing in the household or employed within.**

**The Lead Agency assures that providers exempt from licensing, specifically those providers who are not relatives and provide care in the child's home, receive appropriate background checks. In addition, the Lead Agency can require background checks to those providers exempt from licensing if there is a reason to believe that a conviction has occurred.**

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

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

**Family Day Care Homes must notify, within 24 hours, the Department of Public Health of: (1) the death of any enrolled child, if the child died while at the facility or if a child death occurs due to a contagious disease and, (2) when any injury to a child that occurs while the child is at the facility which results in the child being admitted to a hospital or the child's death.**

No.

**Child Day Centers and Group Day Care Homes do not have specific reporting requirement unless it is deemed a report of abuse, neglect, or reportable disease and laboratory finding.**

d) Describe any other methods used to ensure that health and safety requirements are effectively enforced:

**Child day care centers and group day care homes must notify the Department of Public Health, no later than the next business day, of (1) the death of a child enrolled at the facility, if the child dies while at the facility or at a facility sponsored event and (2) any injury of a child that occurs while the child is at the facility, or at a facility sponsored event, that results in the child's admission to a hospital.**

**6.7 Exemptions from Immunization Requirements**

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

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

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

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

**PART 7 is Not Applicable to the State of Connecticut**

*(Only the Territories complete Part 7)*

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

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

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

**7.1.1** For all center-based care, the following health and safety requirements apply to child care services provided under the CCDF for:

- a) The prevention and control of infectious disease (including age-appropriate immunizations)
- b) Building and physical premises safety
- c) Health and safety training
- d) Other requirements for child care services provided under the CCDF

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

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

- a) The prevention and control of infectious disease (including age-appropriate immunizations)
- b) Building and physical premises safety
- c) Health and safety training
- d) Other requirements for child care services provided under the CCDF

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

**7.3.1** For all family child care, the following health and safety requirements apply to child care services provided under the CCDF for:

- a) The prevention and control of infectious disease (including age-appropriate immunizations)
- b) Building and physical premises safety
- c) Health and safety training
- d) Other requirements for child care services provided under the CCDF

**7.4 Health and Safety Requirements for In-Home Child Care Providers in the Territories** (658E(c)(2)(F), §98.41(a), §98.16(j))

**7.4.1** For all in-home care, the following health and safety requirements apply to child care services provided under the CCDF for:

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



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

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

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

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

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

**7.6.1** Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) **Describe** how health and safety requirements are effectively enforced, including at a minimum:

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

Yes, and **indicate** the provider categories subject to routine unannounced visits and the frequency of those visits:

No.

b) Are child care providers subject to background checks?

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

No.

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

- Yes, and **describe** the Territory's reporting requirements and how such injuries are tracked (if applicable):
- No.

d) Describe any other methods used to ensure that health and safety requirements are effectively enforced:

### **7.7 Exemptions from Territorial Immunization Requirements**

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

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

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

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

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

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

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents

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

## APPENDIX 2 ELIGIBILITY AND PRIORITY TERMINOLOGY

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

- *in loco parentis* –  
**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.**
  
- *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) –  
**See Special Needs Child definition below.**
  
- *protective services* –  
**a family service plan for safeguarding children who are considered by the state’s child welfare service agency to be at risk of abuse or neglect.**
  
- *residing with* –  
**living with on a regular basis, including taking meals together and sleeping in the same home.**
  
- *special needs child* –  
**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 a physician;**
  - (b) **mental retardation or autism 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 and state-certified mental health professional acting within his or her scope of practice;**

- (d) **a speech, language, vision or hearing impairment that has been diagnosed by a physician or state certified health care professional acting within his or her scope of practice; or**
  - (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.**
- *very low income* –  
**Under 50 percent of the state's median income level.**
- **List and define** any additional terminology related to conditions of eligibility and/or priority established by the Lead Agency:
  - (a) *Actual charge* –  
**The fee charged by the provider for all children attending the same program as determined in subsection (a) of section 17b-749-13 of the Regulations of Connecticut State Agencies;**
  - (b) *Accredited provider* –  
**A child care provider whose program has earned national accreditation or who has completed approved course or degree work pursuant to subsection (d) of section 17b-749-13 of the Regulations of Connecticut State Agencies;**
  - (c) *Certificate of payment* –  
**The document issued by the CCAP administrator authorizing payment of CCAP assistance for a specific child to a specified child care provider;**
  - (d) *Child care* –  
**The care and supervision of an eligible child for not more than twelve hours in a twenty-four hour day, excluding therapy, medical treatment and public or private school or academic programs;**
  - (e) *Child care agreement* –  
**The form prescribed by the department used to collect and document information concerning provider eligibility and the agreement between the parent and the provider for the provision of child care services;**
  - (f) *CCAP administrator* –  
**The unit designated by the department or an organization acting under contract with the department and acting under its direction that is responsible for the day-to-day administration of the CCAP program;**

(g) *Countable income* –

**Gross income less allowable deductions and excluded income;**

(h) *Earned income* –

**Compensation for personal services, including but not limited to wages, salaries, commissions, bonuses and earnings from self-employment or contractual agreements;**

(i) *Eligible child* –

**A child residing with the applicant who is under the age of thirteen or under the age of nineteen with special needs, who needs child care during the hours the parent is participating in employment or an approved employment services activity;**

(j) *Eligible provider* –

**a licensed child care provider or child care provider who is exempt from licensing that meets the requirements specified in section 17b-749-12 of the Regulations of Connecticut State Agencies;**

(k) *Employment services activity* –

**Education, training, job search or other activity pursued by a parent receiving TANF cash assistance which is designed to eliminate barriers to employment or increase earnings and which has been approved by the Department of Social Services, the state Department of Labor or the designee of either agency in accordance with the requirements of the TANF State Plan submitted by the Department pursuant to section 402 (a) of Public Law 104-193;**

(l) *Family* –

**The group of individuals who live together in the same household whose circumstances are taken into consideration when determining eligibility for the CCAP program pursuant to section 17b-749-03 of the Regulations of Connecticut State Agencies;**

(m) *Foster child* –

**A child placed in a foster home by the Connecticut Department of Children and Families for whom the parent receives foster care payments;**

(n) *Licensed provider* –

**A day care center, group or family day care home licensed by the Department of Public Health to provide child day care services pursuant to section 19a-77 of the Connecticut General Statutes;**

(o) *Parent* –

**A person with whom the child resides who is either the child's parent by blood, marriage, adoption or a spouse or former spouse of such**

**individuals, a legal guardian, a caretaker relative under the cash assistance program or other person standing in loco parentis;**

**(p) *Self-employed* –**

**Being directly engaged in an income producing trade or business started and carried on in good faith for the purpose of making a living and presented to the general public as being engaged in selling goods and/or services regularly with repetition and continuity of operation as one's occupation;**

**(q) *Teenage parent* –**

**A parent under the age of twenty;**

**(r) *Unlicensed child care provider* –**

**Any provider operating legally in Connecticut that is exempt from licensing as a child day care services provider pursuant to subsection (b) of section 19a-77 of the Connecticut General Statutes.**

**(s) *attending* (a job training or educational program; include minimum hours if applicable)**

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

**(t) *job training and educational program* -**

**(a) A state day program accredited by the State Department of Education or the New England Association of Schools and Colleges, a general equivalency diploma program, or an adult education, technical high school or vocational secondary school program which shall lead to a high school level diploma or certificate; and**

**(b) An employment services activity approved by the Department of Social Services, the Department of Labor or the designee of either agency in accordance with the State Plan requirements for the TANF program, including but not limited to education activities below the post-secondary level, job skills training, job readiness activities, job development and placement activities, job search, work experience, drug or alcohol rehabilitation.**

**(u) *working* (include minimum hours if applicable) –**

**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.**



### **APPENDIX 3: ADDITIONAL CERTIFICATIONS**

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

- 1. Assurance of compliance with Title VI of the Civil Rights Act of 1964:**  
<http://www.hhs.gov/forms/HHS690.pdf>
- 2. Certification regarding debarment:**  
<http://www.acf.hhs.gov/programs/ofs/grants/debar.htm>
- 3. Definitions for use with certification of debarment:**  
<http://www.acf.hhs.gov/programs/ofs/grants/debar.htm>
- 4. HHS certification regarding drug-free workplace requirements:**  
<http://www.acf.hhs.gov/programs/ofs/grants/drugfree.htm>
- 5. Certification of Compliance with the Pro-Children Act of 1994:**  
<http://www.acf.hhs.gov/programs/ofs/grants/tobacco.htm>
- 6. Certification regarding lobbying:**  
<http://www.acf.hhs.gov/programs/ofs/grants/lobby.htm>

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

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## REQUIRED ATTACHMENTS

List all attachments included with this Plan.

### STATE PLAN FOR CONNECTICUT CHILD CARE AND DEVELOPMENT FUND

#### ATTACHMENTS

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## ATTACHMENT 1.3

### AMERICAN RECOVERY AND REINVESTMENT ACT (ARRA)

The Lead Agency has received notification to the ARRA funds targeted to child care. These funds can be used for federal fiscal year 2009 and 2010. The total available funds are **\$13,685,624**. These are solely CCDF Discretionary federal funds and do not require Connecticut to match the federal funds with state funds.

The available federal funding categories and levels are as follows:

Quality Expansion .....	\$ 1,131,375
Quality Infant/Toddler.....	\$ 655,215
Child Care Services .....	\$11,899,034
<b>Total ARRA .....</b>	<b>\$13,685,624</b>

For the purposes of this draft CCDF Plan, the Lead Agency has prepared the following preliminary allocation plan:

Federal Fiscal Year 2009	
Care 4 Kids Program .....	\$10,100,000
Federal Fiscal Year 2010	
Care 4 Kids Program .....	\$1,799,034
Quality Infant-Toddler .....	\$ 655,215
Quality Expansion .....	\$1,131,375
<b>Total ARRA .....</b>	<b>\$13,685,624</b>

We do not propose any changes to the Care 4 Kids eligibility and payment program provisions. The available funds will be used to support access for families to receive child care assistance.

We are seeking ideas to support **one-time only** expenditures and projects for the quality infant-toddler and quality expansion funds. We have identified a few considerations as follows;

- expand dissemination of the Infant/Toddler Early Learning Guidelines
- develop direct deposit and electronic invoicing capabilities for the Care 4 Kids program.
- explore cooperative ventures with Early Head Start providers in order to leverage other ARRA funds.
- develop a statewide Emergency Preparedness Plan for early care providers.
- supplement training, scholarship assistance and accreditation support services to assist caregivers obtain credentials and degrees.
- consider special grants to licensed providers who may incur short-term declines in revenue.
- provide grants to competitive municipalities participating in the State Department of Education school readiness program in order to purchase materials such as books, toys, and other learning materials.

## ATTACHMENT 2.1.1.A

### PRINCIPLES, OBJECTIVES, STRATEGIES

#### A. GUIDING PRINCIPLES

The guiding principles were adopted in 1990 when DSS completed the first CCDF federal plan. Numerous child care providers, advocates and other constituents participated in that process. While not a requirement for federal plan approval, we have always included this information in each submission. We added a principle that addressed workforce issues in our plan submitted in 2001, added a principle to support President Bush's

*Good Start, Grow Smart* initiative in 2003, added a principle that addresses fraud and improper payments in 2005, added a principle that addresses emergency child preparedness in 2007, included reference to the goals and principles identified by the Early Childhood Education Cabinet and Governor Rell's Early Childhood Investment Plan in 2007.

The Connecticut Child Care and Early Education system will:

- offer families a broad range of accessible, affordable, comprehensive and quality child care services.
- allow families to choose the most appropriate child care service and be informed about how to locate and evaluate child care opportunities.
- allow for a smooth transition when families change child care services.
- provide appropriate services and training opportunities for caregivers, including caregivers exempt from licensing.
- ensure that caregivers maintain basic health and safety standards.
- ensure that all available federal funds are maximized and combined into one universal child care program to support targeted families and children.
- establish eligibility guidelines which address income and child care need.
- establish a payment system, which addresses family co-payments, provider payments differentiated by licensed and unlicensed caregivers, and age of child.
- establish various incentives and cost models to address teacher turnover and compensation levels that will expand and retain the number of early education professionals.

- ensure the coordination and on-going planning for all local, state and federal early childhood services and programs.
- establish guidelines and content standards to promote early learning skills that will help children be ready for school.
- establish guidelines to assure that all state and federal funds are properly paid to those clients and child care providers, which meet the eligibility and payment requirements, and to establish preventive mechanisms to avoid improper payments from being made at all.
- establish coordinated emergency planning and crisis response training opportunities for center based and family/home child care providers, to address safety issues that impact children in child care, after-school, recreational and summer-camp settings.

## **B. OBJECTIVES**

Connecticut proposes the following objectives that support the federal CCDF goals, the Guiding Principles and Governor Rell's Early Childhood Investment Plan. The objectives remain essentially the same as included in the prior two-year federal plan.

- **increase child care capacity** - the establishment, expansion or recruitment of new child care facilities/providers and support for existing child care providers in order to expand the number of child care "arrangements" available to families seeking child care assistance.
- **increase financial assistance** to families in order to make child care affordable - the efficient provision of affordable child care subsidies (certificates or vouchers) and/or contracts to early childhood programs in order to assist low income working families and families transitioning off public cash assistance.
- **enhance quality and school readiness services** - the establishment of critical support services to enhance developmentally appropriate educational opportunities for children and professional opportunities for caregivers.
- **provide opportunities for children** in the state to: 1) reach appropriate developmental milestones from birth to age 5; 2) begin kindergarten with the knowledge, skills and behaviors needed for success in school; and 3) have K-3 education experiences that extend children's birth-to-5 learning and ensure consistent progress in achieving reading mastery.
- **enhance health and safety provisions** - the establishment of policies and support services to assure children have access to healthy and safe child care settings

- **identify and address the safety, crisis response and emergency preparedness** issues affecting children in schools, child care providers, after school programs, youth camps and other settings and to inventory emergency preparedness activities, address the communication, training and practice/exercise needs of the providers
- **expand linkages and leveraging of available funds** - the coordination of child care and early childhood education services among state agencies, state and local community organizations, businesses and child care providers.
- **increase number of early care and education professionals and promote retention** - the establishment of incentive and cost models to increase and retain early education teachers in order to address the high turnover rate.
- **reach, inform, and support primary caregivers of infants and toddlers** – further dissemination and training of the Early Learning Guidelines for Infants and Toddlers.
- **establish guidelines and standards that support early learning for children ages 0-5** - the development, implementation and evaluation of standards on early literacy, language, pre-reading and numeracy skills that help children to succeed in preschool, kindergarten and beyond.
- **establish preventive mechanisms to avoid improper payments** and establish guidelines to assure that all state and federal funds are properly paid to those clients and child care providers, which meet the eligibility and payment requirements.
- **ensure the coordination and on-going planning for all local, state and federal early childhood services and programs** – work with early childhood partners to maximize collaboration opportunities.

## **C. STRATEGIES**

Connecticut proposes the following strategies:

### **1. INCREASE CHILD CARE CAPACITY**

The state and federal welfare reform initiative will continue to require families with children to find employment or participate in employment activities. The supply of child care providers and/or child care spaces must continue to expand in order to meet this demand.



Proposed strategies include:

- continue to educate the business community about **tax credits** that can be accessed for establishing new child care facilities and subsidizing employee child care needs.
- continue to administer the **Child Care Facilities Loan Fund** program to assist with the new construction, acquisition or expansion of child care facilities.
- continue to convene caregiver recruitment sessions throughout the state to **increase the number of family day care home providers**.
- coordinate with **local community, public housing and economic development projects** to include child care as a community development project and explore micro-enterprise and small business funding opportunities.
- educate public cash assistance recipients about child care as a career opportunity and **expand child care occupational training programs**.
- expand **linkages with Head Start and other early care and education programs** to coordinate various funding streams that can finance full-day, full-year programs.
- expand programs and spaces for children under age 13 through the state's **State Child Day Care Center Program** and **School Readiness programs**.
- support **kith and kin providers** with necessary educational and training opportunities and link them with the formal child care community.
- expand linkages with **Schools of the 21<sup>st</sup> Century** programs that provide services for school-age children.

## **2. INCREASE FINANCIAL ASSISTANCE TO FAMILIES**

The ability for families to afford the fees charged by caregivers is a major factor that continues to determine the families' participation and selection of certain caregivers.

Proposed strategies include:

- expand **child care financial assistance opportunities for low-**

**income working families** with earnings up to 75% of the state median income level and with children under the age of 13 (under 19 if they have special needs).

- increase the number of **families transitioning from public cash assistance to work** who use public funded child care including the Care 4 Kids Program, state-supported centers and school readiness programs.
- continue to administer a **school-age child care contract program** targeting available state and federal funds to eligible organizations that provide before and after school child care at school and community settings for working families earning less than 75% of the state median income level.
- continue to administer a **child care center contract program** directing available state and federal funds to eligible child care centers that provide **infant / toddler, preschool and school-age** services. Activities funded by this initiative are designed to provide high quality, safe, age-appropriate environments and a full range of social, educational, recreational and nutritional services to children and support services to their families. Enrollment will be targeted to families earning less than 75% of the state median income level.
- encourage families to pursue **child support**.
- continue to partner with the Connecticut Department of Education in the administration of the state's **School Readiness program** to selected communities.

### **3. Enhance Quality and School Readiness Services**

CCDF funds have supported quality initiatives since its inception in 1990 and currently supports several thousand Connecticut children (ages 13 and under) in comprehensive, quality early learning and school readiness programs.

Proposed strategies include:

- continue to provide **consumer education and information materials** that educate current and potential child care consumers
- continue to support the state's **child care resource and referral** program to provide the following services:
  - ◆ counseling and consumer information

- ◆ data on the types of child care opportunities, fees, special service considerations, etc
- ◆ technical assistance and information for child care providers
- ◆ community education and collaboration activities
- continue to provide **technical support and training opportunities** for new and existing child care providers with an emphasis on infant/toddler and school-age child care providers
- continue to establish strategies **effectively to use the media** to provide information and education to parents and child care professionals.
- continue to support a **voluntary professional development system** for early caregivers.
- continue to support to the **statewide program to assist caregivers to achieve accreditation** status by appropriate national organizations.
- continue to support **quality enhancements for the priority school communities** as defined in the state’s School Readiness legislation in collaboration with the State Department of Education.
- continue to support a **newsletter** that is distributed to all child care providers, libraries, legislators, schools, etc.
- continue to implement **background checks for informal child care providers** seeking approval to participate in the Care 4 Kids program in collaboration with the Departments of Public Safety and Children and Families.
- continue to implement training and educational opportunities for **relative and other license-exempt providers**.
- **promote the development of all of the state’s young children** by providing opportunities for children in the state to: 1) reach appropriate developmental milestones from birth to age five; 2) begin kindergarten with the knowledge, skills and behaviors needed for success in school; and 3) have K-3 education experiences that extend children’s birth-to-5 learning and ensure consistent progress in achieving reading mastery.

#### **4. ENHANCE HEALTH AND SAFETY PROVISIONS**

Connecticut must assure that procedures are in effect to ensure that child care providers that provide services for which assistance is

provided under the CCDF comply with all applicable state or local health and safety requirements.

Proposed strategies include:

- continue to fund **child care licensing personnel** at the Connecticut Department of Public Health (DPH) to monitor child care facilities. Please access the web sites (Attachment 3) for DPH and the National Resource Center for Health and Safety in Child Care to review the Connecticut licensing and regulatory requirements.
- strengthen Connecticut's regulations with regard to children's health and safety in child care.
- continue to work with the Departments of Public Safety (**criminal background checks**) and Children and Families (**child abuse and neglect checks**) for child care providers exempt from licensing requirements.
- continue to implement health and safety provisions for child care providers exempt from licensing requirements who apply for assistance from the Care 4 Kids Program. (Attachment 4).
- continue to develop the plans to coordinate emergency planning and crisis response training opportunities for center based and family/home child care providers, to address safety issues that impact children in child care, after-school, recreational and summer-camp settings.

## **5. EXPAND LINKAGES AND LEVERAGING OF AVAILABLE FUNDS**

Connecticut should continue the many coordination and planning activities.

Proposed strategies include:

- continue to coordinate efforts with sister state agencies, the Early Childhood and Education Cabinet, Connecticut Head Start State Collaboration office, Head Start Directors Association, State Directors Forum, School Readiness Liaisons Network, Connecticut After School Network, Connecticut Child Day Care Council, Medicaid Managed Care Council, child care provider memberships groups, Early Childhood Alliance, Connecticut Voices for Children, Connecticut Association for Human Services, etc.

- continue strategic discussions on infant-toddler issues as developed in the ***First Words, First Steps – The Importance of the Early Years***. See DSS web site as follows:  
[http://www.ct.gov/dss/lib/dss/infanttoddler\\_report\\_lb\\_pe10\\_16\\_08.pdf](http://www.ct.gov/dss/lib/dss/infanttoddler_report_lb_pe10_16_08.pdf)
- continue the variety of strategic discussions originated by the Early Childhood and Education Cabinet including the ***Ready by Five, Fine by Nine – Connecticut’s Early Investment Plan***. See the following web site: [www.ctearlychildhood.org](http://www.ctearlychildhood.org)
- continue to review the economic impact of the child care industry.
- continue to coordinate recruitment efforts with the United Way of Connecticut 211 Child Care and the Department of Public Health child care licensing staff and with several state and local organizations to increase the supply of child care providers.
- continue to work with the Department of Labor and the Job First Employment Services program to enhance opportunities for parents through job opportunities training, transportation, and child care.
- continue to establish linkages with employment and training organizations and businesses to provide necessary supports for their employees seeking child care assistance.
- continue to coordinate efforts with the DSS Fraud Recovery Division to mitigate client fraud and improper payments through Quality Control - review of payment and eligibility accuracy.
- continue to develop strategies to link state and local agencies with early childhood programs for children with special needs, in collaboration with the Connecticut Department of Developmental Services, Connecticut Department of Public Health and the Connecticut Department of Education’s Early Childhood and Special Education bureaus.
- continue to coordinate with the Department of Children and Families and other appropriate state and local agencies to create strategies around family support initiatives.
- continue to coordinate efforts with the various DSS units: Family Support (services to TANF eligible families), Child Support (encourage single mothers to seek financial assistance from the absent parent), Housing (services for homeless families with children), Community Services (build links between child care services and Domestic Violence programs), Elderly Services (coordinate intergenerational programs and educate and train grandparents who are child care providers), Client Fraud (improper payments), Quality Control (payment and eligibility accuracy)

and Medical Care Administration (coordinate activities that assure all children in child care have access to health care).

**6. INCREASE THE NUMBER OF EARLY CARE WORKFORCE**

*Connecticut, like the nation as a whole, is experiencing significant turnover in child care staffing. The causes may include depressed levels of compensation and benefits, working conditions, advancement opportunities and inadequate recruitment, along with many competing opportunities available in the larger economy, but the magnitude of those factors is unknown. We do know that the child care market cannot remedy the low wage scale for staff merely through family fees, but rather requires targeted, multiple funding mechanisms. The impact of the recent economic downturn makes these needs much greater.*

***Proposed strategies include:***

- continue to study the extent and nature of the turnover of child care staff in the state
- continue to research the credentials and pattern of compensation of caregivers.
- continue to examine mechanisms to supplement compensation and benefits for caregivers in connection with levels of professional development
- continue to examine apprenticeship opportunities as they apply to the child care workforce.
- continue to develop the Early Childhood Workforce Plan and create opportunities for highly-skilled early childhood education.

**7. ESTABLISH EARLY LEARNING GUIDELINES**

The ***Good Start, Grow Smart initiative***, as in 2003, has encouraged state-federal partnerships among CCDF, other federal early care and education programs and state early care initiatives in order to promote early learning principles and school readiness. There is sufficient research underway throughout the United States to support this objective and Connecticut has already addressed much of this as a result of past state legislation.

***Proposed strategies include:***

- continue to disseminate the *Preschool Curriculum Framework for Children in Preschool Programs* document and present workshops, as necessary, to discuss the content.
- continue to require the use of the *Preschool Curriculum Framework for Children in Preschool Programs* document in Connecticut funded school

readiness programs and encourage other early care programs to adopt it.

- continue to disseminate the *Connecticut Preschool Assessment Framework* document for assessing preschool children and present workshops to early care programs in order to discuss the content, objectives and benefit to supporting early learning.
- further develop the committee work to establish a conceptual framework for Early Readiness for Children from Birth to Age Nine.
- continue to disseminate the Connecticut Guidelines for the Development of Infant & Toddler Early Learning and seek to reach, inform, and support infants and toddlers' primary caregivers —whether parents or child care providers.

## **ATTACHMENT 2.1.1.B**

### **COLLABORATION EFFORTS**

#### **Connecticut Department of Education**

DSS and SDE:

1. Are represented on the Connecticut Birth to Three State Interagency Coordinating Council, which is forum for policy review and advocacy on issues regarding young children with disabilities.
2. Are represented on the Child Day Care Council, which is a forum for policy review and advocacy on child care issues.
3. Are represented on the Head Start Advisory Committee, which advises the Commissioner of Education on state Head Start funding and programming.
4. Are represented on the Connecticut Charts a Course Advisory Committee, which has developed and operates the state's professional development system for child care providers.
5. Jointly fund and administer the state School Readiness and Quality Enhancement grant programs for designated CT communities.
6. Jointly fund training for child care providers through the CT Charts a Course professional development system including activities to augment the statewide Accreditation Facilitation Project, the Scholarship Assistance Program and the Provider Registry.
7. Develop model agreements between Head Start and local education agencies in collaboration with the Head Start Association and member agencies.
8. Produce necessary materials to support parents and providers to use in transitioning their children from preschool to school.
9. Develop programs to promote family involvement in School Readiness and other early care programs.
10. Develop curricula for child care providers and fund training on a variety of issues.
11. Collaborate to support Family Resource Centers in designated CT communities.
12. Collaborate to ensure young children with disabilities and special needs are provided equal access and equal benefit in child care programs.
13. Collaborate to develop, implement and evaluate training and technical assistance on issues related to serving young children with disabilities and special needs in child care.
14. Collaborate on the rules and procedures that apply to child care subsidy reimbursements and parent fees.



15. Collaborate in the implementation of the Preschool Curriculum Framework and Preschool Assessment Framework, the Connecticut system for a curriculum framework and child performance indicators.
16. Collaborate in the development of the early learning guidelines for infants and toddlers.
17. Collaborate with the Connecticut Association for Infant Mental Health, which provides statewide opportunities to enhance knowledge and to promote a positive influence on the social emotional health and development of infants, young children and their families. This includes work with early childhood workforce initiatives and development of core competencies in the mental health of young children.

### ***Connecticut Department of Children and Families***

DSS and DCF have collaborated as follows:

1. Transfer of child care funds from DSS to DCF to conduct background checks when informal child care providers seek child care financial assistance.
2. Share information on pertinent department policies that may affect child care assistance for targeted populations and caregivers.
3. Establish protocols and report needs for sharing information on target groups, e.g. foster and adoptive children.
4. Provide education to child care providers and parents on child abuse/neglect prevention and behavioral/mental health issues.
5. Support curriculum development for training and education efforts for early childhood caregivers.
6. Collaborate on the Connecticut Birth to Three Interagency Coordinating Council, a forum for policy review and advocacy on issues regarding young children with disabilities.
7. DSS and DCF are represented on the Child Day Care Council, which is a forum for policy review and advocacy on child care issues.
8. Participate on the Child Day Care Council, a forum for policy review and advocacy on child care issues.
9. Contribute as representatives of a workgroup on Homeless Families with Children addressing early care and education needs of sheltered children and children at risk of homelessness.
10. Partner to provide DCF funded mental health interventions to DSS funded child day care centers.

### ***Connecticut Department of Public Health***

DSS and DPH:

1. DPH updates the database of licensed providers for 211-Child Care, Connecticut's resource and referral project, funded by DSS.
2. DPH updates the database of licensed providers for DSS's child care subsidy program and allows the subsidy program vendor to notify DPH when they learn about over-capacity and/or unlicensed operating situations
3. DPH notifies DSS of all license suspensions and revocations and regulatory violations from complaint investigations against child care providers upon request.
4. DPH expedites the licensing process for new programs funded through the CT School Readiness project or the Child Care Facilities Loan Fund.
5. DSS and DPH educate informal providers regarding immunization issues.
6. DSS and DPH are represented on the Connecticut Birth to Three Interagency Coordinating Council, which is a forum for policy review and advocacy on issues regarding young children with disabilities.
7. DSS and DPH are represented on the Child Day Care Council, which is a forum for policy review and advocacy on child care issues.
8. DSS and DPH are represented on the Head Start-State Collaboration project, which has done extensive planning on issues regarding young children and families.
9. DSS and DPH participate on the Homeland Security emergency evacuation procedures planning initiative.
10. DSS and DPH collaborate on providing technical assistance to license applicants and licensees on workforce development, child care, and regulatory issues through a variety of mechanisms.
11. DPH participates on the SDE After School Advisory Council, the CT Infant-Toddler Initiative, and the DCF Early Childhood Consultation Project.

### ***Connecticut Department of Labor***

DSS and DOL:

1. Work together on an ongoing basis to examine programs and practices that serve families on public assistance producing recommendations regarding child care subsidy regulations, fine tuning client-centered assessments, encouraging parent participation on planning advisory bodies, and participating on committees to plan operational changes to the employment and training programs in response to state legislative initiatives.

2. Participate in monthly meetings with representatives from Workforce Investment Boards and their contracted service providers to clarify the child care subsidy application procedures and troubleshoot issues regarding child care access for families participating in job related activities.
3. Provide opportunities for child care subsidy staff to meet and share program information with groups of public assistance families interested in applying for child care assistance.
4. Share staff contact lists with Workforce Investment Boards, their service providers and child care subsidy staff to facilitate case processing and problem resolution.
5. Provide training to DOL and Workforce Investment Board staff regarding how families on public assistance can access and use the child care subsidy program.
6. Distribute printed materials, brochures and videos on choosing quality child care and on how to contact and apply for child care subsidies for use by DOL staff and Workforce Investment Board staff and program participants.
7. Share data elements between the DOL Case Management System and the Child Care Management System.
8. Continue to discuss strategies for addressing child care provider work force and wage issues.
9. Continue to develop training opportunities through DOL systems for people interested in child care careers.

### ***Connecticut Department of Developmental Services***

#### DSS and DDS:

1. Are represented on the Connecticut Birth to Three Interagency Coordinating Council, which provides for forums for policy review and advocacy on various issues regarding young children with special needs and caregivers to support such children.
2. Participate on the Infant-Toddler Early Learning Guidelines workgroup to develop curriculum guidelines that are aligned with existing preschool and K-12 guidelines.

### ***Connecticut Department of Social Services - other units***

#### DSS Other Units:

1. Continued to have outreach liaisons work with various elderly groups in the community to share information with grandparents raising grandchildren on making child care choices and to assist them with the child care subsidy application process.
2. Participated in the Grandparents as Parents Support GAPS Network monthly meetings to disseminate child care subsidy program information and to hear the concerns of the state's elderly population in regard to the program in order to better address the needs of this population.

3. Prepared and distributed printed program materials at community functions targeted at relative care givers, grandparents and elderly groups.
4. Provided a bridge between the child care subsidy program and the Department's Bureau of Child Support Enforcement (BCSE) to aid caretaker relatives and grandparents in obtaining the services of BCSE.
5. Coordinated efforts with DSS to ensure that elderly child care providers are capable of providing safe and appropriate care to children and that they are informed of the state services available through the Department.
6. Established regular contacts with the Department's regional offices to share program and application information and materials with staff and with families receiving public assistance.
7. Provided training and technical assistance to Department staff on the child care subsidy regulations and the use of the data base to facilitate service delivery to families on public assistance.
8. Established and maintained a referral process to expedite the resolution of individual child care subsidy case issues for families on public assistance. The process included tracking the issues and providing clarification and training as necessary.
9. Implemented fraud initiatives with Client Fraud and Recoveries Unit to support the national CCDF objective concerning improper payments.
10. Maintained work protocols with Administrative Hearings' staff to review all formal hearings requested by clients.

**ATTACHMENT 2.2  
PUBLIC HEARING NOTICE**

**CHILD CARE SERVICES IN CONNECTICUT – PUBLIC HEARINGS**

The state is preparing a comprehensive child care plan to access federal funds, including the new child care stimulus funds for programs and services over the next two years. The Connecticut Department of Social Services (DSS) Family Services & Child Care Team\*, in collaboration with the State Child Day Care Council is convening three public hearings to provide Connecticut residents an opportunity to comment on child care services in Connecticut. DSS must prepare the state's Child Care Plan to access federal funds. The plan must be submitted to Washington, D.C. by July 1, 2009. Your participation in this process is welcomed.

Please share this schedule with others and encourage their involvement.

The draft plan will be available after May 11, 2009 on the DSS web site [www.ct.gov/dss](http://www.ct.gov/dss)  
Go to Publications and click on *CT Draft Federal Plan 2009-2011*.

To submit written comments: send email to [julie.bisi@ct.gov](mailto:julie.bisi@ct.gov) or mail to ATTN: Child Care Division – CCDF Plan, Connecticut Department of Social Services, 25 Sigourney Street, Hartford, CT 06106, no later than June 8, 2009.

LOCATION	DATE	TIME	MEETING SPONSOR / LOCATION	ADDRESS
<b>NEW HAVEN</b>	<b>Wednesday, May 13, 2009</b>	<b>4:00 – 7:00 PM</b>	LULAC Head Start	250 Cedar Street, New Haven (203) 777-4006
<b>NORWICH</b>	<b>Monday, May 18, 2009</b>	<b>4:00 – 7:00 PM</b>	Southeastern Mental Health Authority (SMHA)	Uncas on Thames Campus 401 West Thames St., Bldg 301 Norwich (860) 859-4500
<b>NEW BRITAIN</b>	<b>Wednesday, May 20, 2009</b>	<b>1:00 – 3:00 PM</b>	“New Initiatives That Help Connecticut Babies and Toddlers Grow and Develop” Research and Education Center for the Hospital for Special Care	370 Osgood Avenue (corner of Corbin), In the Auditorium, New Britain (860) 223-2761

\* The DSS Family Services & Child Care Team is prepared to answer questions concerning this information. Reach them by calling in-state toll-free 1-800-811-6141 and press 6 at any time during the message to be connected or (860) 424-5598 from within the local calling area or from out of state.

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**ATTACHMENT 3.2.1 PAYMENT RATES**

**Care 4 Kids**

*(Connecticut's Child Care Assistance Program)*

**WEEKLY PROVIDER REIMBURSEMENT RATES**

**EFFECTIVE: January 1, 2002**



<b>Full-Time Plus Care - 51 to 65 hours/week</b>		Eastern*	North Central*	Northwest*	South Central*	Southwest*
<b>Child Care Centers or Group Child Care Homes or School Operated Programs</b>	Infant/Toddler	229	254	267	280	304
	Pre-School	182	201	212	222	241
	School-Age	162	180	189	199	215
<b>Family Child Care Homes</b>	Infant/Toddler	175	194	204	214	232
	Pre-School	176	195	205	215	233
	School-Age	162	180	189	199	215
<b>Care by a Relative or Care in the Child's Home or Recreational Programs</b>	Infant/Toddler	116	116	116	116	116
	Pre-School	116	116	116	116	116
	School-Age	116	116	116	116	116

<b>Full-Time Care - 35 to 50 hours/week</b>		Eastern*	North Central*	Northwest*	South Central*	Southwest*
<b>Child Care Centers or Group Child Care Homes or School Operated Programs</b>	Infant/Toddler	171	189	199	209	227
	Pre-School	135	150	158	165	179
	School-Age	122	135	142	149	162
<b>Family Child Care Homes</b>	Infant/Toddler	131	145	152	160	173
	Pre-School	131	145	152	160	173
	School-Age	122	135	142	149	162
<b>Care by a Relative or Care in the Child's Home or Recreational Programs</b>	Infant/Toddler	89	89	89	89	89
	Pre-School	89	89	89	89	89
	School-Age	89	89	89	89	89

<b>Half-Time Care - 16 to 34 hours/week</b>		Eastern*	North Central*	Northwest*	South Central*	Southwest*
<b>Child Care Centers or Group Child Care Homes or School Operated Programs</b>	Infant/Toddler	116	129	135	142	154
	Pre-School	93	103	109	114	124
	School-Age	80	89	94	99	107
<b>Family Child Care Homes</b>	Infant/Toddler	89	99	104	109	118
	Pre-School	90	100	105	110	120
	School-Age	80	89	94	99	107
<b>Care by a Relative or Care in the Child's Home or Recreational Programs</b>	Infant/Toddler	53	53	53	53	53
	Pre-School	53	53	53	53	53
	School-Age	53	53	53	53	53

<b>Quarter-Time Care - 1 to 15 hours/week</b>		Eastern*	North Central*	Northwest*	South Central*	Southwest*
<b>Child Care Centers or Group Child Care Homes or School Operated Programs</b>	Infant/Toddler	58	64	68	71	77
	Pre-School	47	52	54	57	62
	School-Age	40	45	47	49	53
<b>Family Child Care Homes</b>	Infant/Toddler	44	49	52	54	59
	Pre-School	45	50	53	55	60
	School-Age	40	45	47	49	53
<b>Care by a Relative or Care in the Child's Home or Recreational Programs</b>	Infant/Toddler	27	27	27	27	27
	Pre-School	27	27	27	27	27
	School-Age	27	27	27	27	27

**TOWNS SERVED BY DSS REGIONS**

East Region	North Central Region	Northwest Region	South Central Region	Southwest Region
Ashford	Andover	Barkhamsted	Ansonia	Bridgeport
Bozrah	Avon	Beacon Falls	Bethany	Darien
Brooklyn	Berlin	Bethel	Branford	Easton
Canterbury	Bloomfield	Bethlehem	Chester	Fairfield
Chaplin	Bolton	Bridgewater	Clinton	Greenwich
Colchester	Bristol	Brookfield	Cromwell	Monroe
Columbia	Burlington	Canaan	Deep River	New Canaan
Coventry	Canton	Cheshire	Derby	Norwalk
East Lyme	East Granby	Colebrook	Durham	Stamford
Eastford	East Hartford	Cornwall	East Haddam	Stratford
Franklin	East Windsor	Danbury	East Hampton	Trumbull
Griswold	Ellington	Goshen	East Haven	Weston
Groton	Enfield	Hartland	Essex	Westport
Hampton	Farmington	Harwinton	Guilford	Wilton
Killingly	Glastonbury	Kent	Haddam	
Lebanon	Granby	Litchfield	Hamden	
Ledyard	Hartford	Middlebury	Killingworth	
Lisbon	Hebron	Morris	Lyme	
Mansfield	Manchester	Naugatuck	Madison	
Montville	Marlborough	New Fairfield	Meriden	
New London	New Britain	New Hartford	Middletown	
No Stonington	Newington	New Milford	Middlefield	
Norwich	Plainville	Newtown	Milford	
Plainfield	Plymouth	Norfolk	New Haven	
Pomfret	Rocky Hill	North Canaan	North Branford	
Preston	Simsbury	Oxford	North Haven	
Putnam	Somers	Prospect	Old Lyme	
Salem	Southington	Redding	Old Saybrook	
Scotland	South Windsor	Ridgefield	Orange	
Sprague	Stafford	Roxbury	Portland	
Sterling	Suffield	Salisbury	Seymour	
Stonington	Tolland	Sharon	Shelton	
Thompson	Vernon	Sherman	Wallingford	
Union	West Hartford	Southbury	West Haven	
Voluntown	Wethersfield	Thomaston	Westbrook	
Waterford	Windsor	Torrington	Woodbridge	
Willington	Windsor Locks	Warren		
Windham		Washington		
Woodstock		Waterbury		
		Watertown		
		Winchester		
		Wolcott		
		Woodbury		

*\* see other side for a listing of towns by region*



**ATTACHMENT 3.2.3  
2009 RATE SURVEY &  
RATE SURVEY METHODOLOGY SUMMARY**

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**Overview**

The Lead Agency used a telephone survey conducted by 211-Child Care during May 2009. 211 Child Care is Connecticut's statewide child care resource and referral agency operated by the United Way of Connecticut. 211 Child Care maintains a database of all licensed day care providers in Connecticut. The master list of currently licensed day care centers, group and family day care homes is provided to 211 by the state's child care licensing agency, the Connecticut Department of Public Health.

**Questionnaire**

Provider charges were measured through the administration of a standardized telephone survey. The questions are used to capture provider fees for resource and referral purposes. Providers were asked to report their full-time weekly charges by the type of setting and age group.

<b>Age Groups</b>	<b>Center</b>	<b>Family Homes</b>
Infant	0 -17 months	0 - 23 months
Toddlers	18-35 months	0 - 23 months
Preschool	3-4 years	2-5 years
School Age	5-12 years	5-12 years

**SURVEY QUESTIONS**

**Infants**

1. Do you accept Infants < 24 months? (Centers = Infants < 36 months)
2. What do you currently charge for full time care for an infant in your program attending 35 hours or more?

(For programs that begin care for children 18months+, use the word Toddler in place of Infant)

**Preschool**

3. Do you accept children ages 2-5 years old? (Centers = Children 3-5 years old)
4. What do you currently charge for full time care for a preschool aged child in your program attending 35 hours or more?

**ATTACHMENT 3.2.3**  
(Continued)

**2009 RATE SURVEY METHODOLOGY SUMMARY**

**School Age**

5. Do you accept before/after school aged children? (5-12 years attending school full day)
6. What do you currently charge for before and/or after school care for a part time school aged child?

**Sample Design**

The sample was designed to optimize the accuracy of the rate estimates. All licensed facilities were eligible for inclusion in the survey sample. The following chart lists the number of providers that participated in the survey. In Connecticut, group day care homes represent only a small fraction of the number of licensed facilities - forty-six statewide. Thus, the Lead Agency does not distinguish between child care centers and group day care homes for setting rates or for reimbursement purposes. Both facility types are included in one category and paid at the same rates.

<b>Provider Type</b>	<b>Total Licensed</b>	<b>Total Respondents</b>	<b>Percent</b>
Center/Group Homes	1,608	581	36%
Family Homes	2,675	1,622	61%

Provider charges were measured separately for infants/toddlers, preschool and school age children. Only facilities that provided care to children in the appropriate age category were included in the analysis. The following table lists the number of facilities that participated by age group.

<b>Age Groups</b>	<b>Center</b>	<b>Family Homes</b>
Infant/Toddler	478	1,553
Preschool	581	1,622
School Age	396	657

Estimates were based on the full-time rate charges reported by each facility between May 1, 2009 and May 31, 2009. The licensed capacity of each facility was used to establish the frequency of the charges within the data set and the percentile value. Estimates for school-age children are measured at the part-time rate during the school year.

**ATTACHMENT 3.2.6  
CONNECTICUT PAYMENT RATES  
RATIONALE FOR EQUAL ACCESS PROVISION**

Connecticut child care providers participating in the Care 4 Kids (C4K or Connecticut’s subsidy/certificate/voucher program) have been reimbursed at payment levels established through a market survey that was conducted in 2001. Market rate ceilings were set at the 60<sup>th</sup> percentile of the 2001 survey estimates and have been in effect since January 1, 2002. The 2001 percentile rankings adjusted to the 2009 market survey results range between the 13<sup>th</sup> and 89<sup>th</sup> percentiles.

While percentile rankings may be used to represent ideal target payment levels, they do not directly measure the ability of low and moderate income families to access child care. This can only be done by assessing utilization patterns, industry business practices, caseload trends, co-payment levels and the availability of care during non-standard work hours. Also, because the C4K program significantly supports the child care market in Connecticut, the Lead Agency must act with caution when establishing reimbursement rates to avoid having targeted rate levels drive the market price. The market should dictate provider fees, not state programs.

Where children are enrolled is a critical indicator of whether or not the market rates provide equal access. To determine if C4K reimbursement rates are sufficient, the Lead Agency evaluated the proportion of children enrolled in more costly licensed settings for indications of any significant changes or trends. The following table illustrates the ratios of actual child enrollments in licensed and unlicensed settings for the period the current reimbursement rates have been in effect.

**CHILD CARE UTILIZATION BY SETTING**

	<b>January 2002</b>	<b>January 2003</b>	<b>January 2004</b>	<b>January 2005</b>	<b>August 2006</b>	<b>June 2007</b>	<b>August 2008</b>	<b>May 2009</b>
<b>Licensed</b>	31%	39%	44%	47%	57%	62%	64%	66%
<b>Unlicensed</b>	69%	61%	56%	53%	43%	38%	36%	34%

The data shows that enrollments in licensed child care settings have increased steadily since the market rates were first implemented in January 2002. There is no indication of a reverse trend.

In evaluating utilization for equal access, consideration must also be given to other factors that influence a parent’s choice to use unlicensed care (i.e. in-home and relative caregivers such as grandmothers, aunts, uncles). For example, national surveys conducted by universities and advocacy groups consistently indicate that safety is the most important consideration for parents with young children regardless of economic status. Connecticut parents tend to place infant-toddlers with unlicensed caregivers for this reason. Also, licensed providers may not provide infant care due to required staffing ratios or other financial reasons. Another parent consideration in choosing unlicensed caregivers is availability. Many low-income families receiving C4K tend to work second and third shift jobs or on weekends in a higher proportion than the general public. Licensed care is generally not available during these non-standard work hours. Similarly, many child day care centers do not accept school-age children due to costs associated with providing

part-time before and after school care. Thus, availability and personal preference frequently cause parents to choose unlicensed caregivers over licensed settings.

Another factor that was considered is the number of licensed centers and family day care homes that accept C4K children as a percentage of the total number of licensed settings. The Lead Agency assessed provider participation rates by comparing the unduplicated count of providers that had at least one child enrolled in the facility on June 19, 2009, to the total number of licensed programs statewide on the same day. Figures on the total number of licensed providers were provided by the Department of Public Health.

**LICENSED PROVIDER PARTICIPATION AS OF 6/19/2009**

	Centers	Family Homes
<b>Facilities with C4K Children Enrolled</b>	1,119	1,009
<b>Total Number Licensed Statewide</b>	1,608	2,675
<b>Percent Participating in Care 4 Kids</b>	<b>70%</b>	<b>38%</b>

The results show that 70 percent of centers and 38 percent of family homes had children enrolled in Care 4 Kids. This demonstrates that CCDF subsidized families are able to access broad range of child care settings statewide.

Section 3.2.5 of the State Plan asks the Lead Agency for the percentile rankings of the market rates. The following table lists the rate ceilings that correspond to the data collected in the May 2009 market survey. We report in Section 3.2.8 (page 35) that we also provide tiered reimbursements that supplement the reimbursement rates. For example, we provide a 5 percent rate increase for accredited facilities. The impact on the percentile rankings is significant for these accredited settings.

**Percentile Survey Results Shown by Setting, Age Group, and Weekly Market Rates**

	Infants/Toddlers		Preschool		School Age Part-Time	
	Weekly Rate [1]	2009 Percentile Ranking	Weekly Rate [1]	2009 Percentile Ranking	Weekly Rate [1]	2009 Percentile Ranking
<b>Non-Accredited Centers</b>	196	13 <sup>th</sup>	155	17 <sup>th</sup>	100	72 <sup>nd</sup>
<b>Accredited Centers</b>	206	23 <sup>rd</sup>	163	21 <sup>st</sup>	105	75 <sup>th</sup>
<b>Non-Accredited Family Homes</b>	150	14 <sup>th</sup>	150	37 <sup>th</sup>	100	89 <sup>th</sup>
<b>Accredited Family Homes</b>	158	28 <sup>th</sup>	158	39 <sup>th</sup>	105	89 <sup>th</sup>

[1] The weekly rate equals the 60<sup>th</sup> percentile of the 2001 market survey estimate

Another consideration in our assessment was review of the standard business practices of the licensed provider community. For example, most licensed providers provide sibling reductions to families with multiple children enrolled in the facility. Typically, provider fees for the second child are reduced by 10 percent. It is important to note that Connecticut does not reduce its market rate for families with two or more children enrolled in the same facility. Also, it is not uncommon for fees to vary by family within the same facility. Providers may negotiate or adjust rates based on the circumstances of the individual family.

It is also important to recognize that Connecticut has a comparatively low parent fee scale. The average co-payment is approximately 4 percent of the countable income – averaging \$110 per month across all priority categories. Child support, TANF and the earnings of minor family members are excluded from the co-payment calculation along with some other specific sources of income. Non-custodial parents with formal support agreements also receive an income deduction equal to the amount of their child support payment and co-payments are not assessed to unemployed TANF parents.

Lastly, one of the program objectives is to provide as many families as possible with the opportunity to access a broad range of child care services. Nationally, recommended market rate target levels ranging up to the 75<sup>th</sup> percentile are being advocated. If applied to Connecticut, the estimated cost of increasing market rates for licensed child care providers to the 75<sup>th</sup> percentile of the 2009 survey estimates is \$32 million per year. A minimum of 3,200 families and 5,100 children would need to be displaced from the program to offset the cost of the increase. We believe that we have accomplished our goal of making child care services available and affordable to eligible low and moderate income families.

## **ATTACHMENT 3.3.2 INCOME GUIDELINES**

The following excerpt from the Child Care Assistance Program Regulations contains the income eligibility guidelines for the Care 4 Kids Program.

### **Sec. 17b-749-05. Financial Eligibility Requirements**

#### **Gross Income Eligibility**

- (1) Gross countable family income for applicants and recipients shall be less than fifty percent of the state median income level for the appropriate family size as established by the Department of Health and Human Services. The commissioner shall have discretion to increase the income limit to up to seventy-five percent of the state median income level for all CCAP recipients or for both applicants and recipients. The commissioner may also, upon the request of the commissioner of Children and Families, waive the gross income limit for families who need child care assistance for a child who was adopted from the Department of Children and Families after October 1, 1999 and whose countable income does not exceed the maximum level established for participation pursuant to 42 CFR section 98.20 of the federal Child Care and Development Fund Regulations. Adoptive families for whom the income limit is waived shall be responsible for paying the maximum fee required pursuant to subsection (f) of section 17b-749-13 of the Regulations of Connecticut State Agencies.
- (2) A family whose income equals or exceeds the established income limit shall be ineligible for CCAP, unless the income exceeds the limit for not more than one calendar month due to an extra pay period or other temporary increase.
- (3) Income shall be counted in the month it is received by the family member, except to the extent the income is averaged in accordance with requirements of subsection (d) of this section.
- (4) The department shall adjust the state median income standards annually. For new applicants, the adjusted standards shall take effect beginning on or after July 1 of each year. For families receiving child care assistance on June 30, the adjusted standards shall take effect not later than the first redetermination completed after July 1 of each year.

#### **(a) Countable Income**

- (1) In determining the gross income, the following types of income shall be counted except as specified in subdivision (2) of this section:
  - (A) unearned income of all adult and child family members; and
  - (B) gross earnings of all parents and adult family members.
- (2) The following types of income shall be excluded from the gross income determination:

- (A) TFA cash assistance benefits;
- (B) child support payments;
- (C) income paid by the Census Bureau to low-income temporary census workers;
- (D) the value of Food Stamp benefits;
- (E) the earnings of a family member who is under the age of eighteen who is not the parent of a child for whom assistance is requested;
- (F) earned income credit payment, including advanced payments;
- (G) cash contributions from non-profit charitable agencies or organizations;
- (H) interest and dividends totaling less than six hundred dollars per calendar year;
- (I) lump sum payments from unearned income sources totaling less than six hundred dollars per calendar year;
- (J) income tax refunds;
- (K) special need payments issued by the department on behalf of a cash assistance recipient that are paid to a vendor;
- (L) income from the sponsor of a non-citizen;
- (M) grants, loans and scholarships paid to students;
- (N) cash gifts received on an irregular basis, the aggregate of which does not exceed twelve hundred dollars per calendar year;
- (O) the value of goods and services given as in-kind income rather than cash payments;
- (P) reimbursements for expenditures that do not represent a benefit or gain to the recipient;
- (Q) disaster assistance paid under the Disaster Relief Act of 1974, as amended, including the Individual and Family Grant (IFG) program, and comparable disaster assistance provided by states, local governments and private organizations, and any interest earned on funds from this source;
- (R) payments made by the Department of Labor to meet the cost of pursuing employment;
- (S) state or federal government rental subsidies;
- (T) security deposits returned by a landlord to the family;

- (U) payments made under means-tested energy assistance programs and utility subsidies;
- (V) payments received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970; and
- (W) payments made pursuant to the American Recovery and Reinvestment Act of 2009, P. L. 111-5, directly to an individual who is an applicant for or recipient of benefits or services under any state or local program financed in whole or in part with state funds that provides such benefits or services based on need.



## **ATTACHMENT 3.4.2 PRIORITY ELIGIBILITY GUIDELINES**

The following excerpt from the Child Care Assistance Program Regulations contains the priority eligibility guidelines for the Care 4 Kids Program.

### **Sec. 17b-749-08. Prioritization for Child Care Funding**

- (a) Each family shall be assigned to an applicable priority group. Within available funding, the department shall accept applications and authorize payments based on the following order of priorities:
- (1) parents receiving TFA cash assistance who are employed or participating in an approved employment services activity and working parents who are completing an approved employment services activity that started before the family's TFA cash assistance was discontinued pursuant to subdivision (e)(3) of section 17b-749-04 of the Regulations of Connecticut State Agencies;
  - (2) working parents whose cash assistance benefits were discontinued within six calendar months prior to the date of application for CCAP;
  - (3) parents under the age of twenty not receiving cash assistance who attend high school;
  - (4) working parents with gross countable family income below fifty percent of the state median income;
  - (5) working parents with gross countable family income between fifty and seventy-five percent of the state median income who request assistance for a child who was adopted from the Department of Children and Families; and
  - (6) all other working parents with gross countable family income between fifty and seventy-five percent of the state median income.
- (b) A family's priority status shall not be affected if the parent is removed from cash assistance due to the application of a TFA program sanction.
- (c) The commissioner may establish additional priority groups from time to time based on exceptional public need that result from unforeseen circumstances. When establishing additional priority groups, the commissioner shall designate a target expenditure level for each additional priority group created if such level is not otherwise specified by legislative action. Additional priority groups may be added or deleted based on available funding.
- (d) The CCAP administrator shall maintain a list of any additional priority groups established. The list shall include the expenditure level specifically allocated to each additional priority group. A copy of the listing of additional priority groups shall be made available to the public upon written request.

## **ATTACHMENT 3.4.6 WAIT LIST GUIDELINES**

The following excerpt from the Child Care Assistance Program Regulations contains the priority eligibility guidelines for the Care 4 Kids Program.

### **Sec. 17b-749-09. Application Process**

#### **(a) Application Dispositions**

- (1) If the family is eligible and funding is available for the parent's priority group, the application shall be approved. A notice of eligibility for the program shall be issued to the parent if the information needed to enroll the provider and determine payment eligibility has not been submitted. The notice shall identify any action the parent is required to take to determine payment eligibility and the specified time frames.
- (2) If at least one child has been determined eligible for payment, a certificate of payment eligibility shall be issued to the parent and the approved provider. The parent shall also be notified of any actions that need to be completed to secure payment eligibility for other children in the home and the date for completing such actions.
- (3) If a family is eligible but funding is not available for the parent's priority group, the family shall be assigned to the wait list if the wait list is open pursuant to section 17b-749-10 of the Regulations of Connecticut State Agencies. If the wait list is closed, the application shall be denied.
- (4) If the application is denied, a copy of the notice shall be sent to any provider for whom a completed child care agreement form was submitted with the application.

#### **(b) Applications Assigned to the Wait List**

- (1) The CCAP administrator shall maintain a wait list if sufficient funding is not available to keep the program open for all priority groups. If a family meets the eligibility requirements for the program but funding is not available for the parent's priority group, the family shall be assigned to the wait list unless the wait list is closed pursuant to section 17b-749-10 of the Regulations of Connecticut State Agencies. Parents and their providers shall be notified if the family is placed on the wait list.
- (2) If the commissioner chooses to close the wait list to some or all priority groups, applicants who fall into priority groups to whom the wait list is closed shall be denied. Action to close the wait list shall not be subject to an administrative hearing.

**Sec. 17b-749-10. Wait list**

**(a) Assignment to the Wait List**

- (1) Families shall be assigned to a wait list based on their priority group and the date of application. Families qualifying for more than one priority group shall be assigned to the priority group with the highest likelihood of selection for CCAP participation.
- (2) Families assigned to the wait list shall be required to notify the CCAP administrator of changes in address and to submit updated documentation of eligibility upon request by the CCAP administrator. The parent shall have a minimum of fifteen days to supply the requested documentation. Where updated information indicates a change in family circumstances, the CCAP administrator may reassign eligible families to the appropriate priority group or remove ineligible families from the wait list. The parent shall be notified of any changes made to their priority group status or eligibility for the wait list.
- (3) Parents shall inform the CCAP administrator in writing of any changes in address.

**(b) Selection from the Wait List**

- (1) As funding becomes available, the CCAP administrator shall select families from the wait list beginning in order of the highest priority group. The family's application shall be processed in accordance with the requirements of section 17b-749-09 of the Regulations of Connecticut State Agencies. If the program is not opened to all families within a particular priority group or groups, the CCAP administrator shall select families based on the date of the original application upon which assignment to the wait list was based. Selection from the next lower category may begin only after all families in the higher priority categories have been given an opportunity to participate.
- (2) Families shall be notified of their selection from the wait list, of any required actions and the specified time frames for completing the actions. The CCAP administrator shall have the option to specify the effective date of initial eligibility based on funding or other administrative considerations. If a date is specified, the family shall also be notified of the effective date.
- (3) The parent shall have a minimum of fifteen days to respond in writing to the notice of selection from the wait list. The family shall be denied if the parent does not respond timely.
- (4) Families selected from the wait list may be required to submit a new application and updated verification of family circumstances. Applications of families selected from the wait list shall be processed in a manner identical to applications not assigned to the wait list.

**(c) Removal from the Wait List**

- (1) Families shall be removed from the wait list under the following circumstances:
  - (A) when the family is selected from the wait list;
  - (B) if the parent requests removal;
  - (C) if the parent does not update information when requested or reply timely to the notice of selection from the wait list;
  - (D) if any mail sent to the parent is returned due to an unreported change in address;
  - (E) when a change in family circumstances renders the family ineligible; or
  - (F) if a change in CCAP regulations renders the family ineligible.
- (2) At the discretion of the commissioner, families may be removed from the wait list if CCAP is expected to remain closed to the family's priority group for at least twelve months.
- (3) Families removed from the wait list shall be issued a denial notice if they are not selected for participation in CCAP.

**(d) Closing the Wait List**

- (1) The commissioner shall have discretion to close the wait list for some or all priority groups. The decision to close the wait list shall be based on available funding, the number of families already assigned to the wait list and the likelihood of selecting newly added families from the list within twelve months.
- (2) If the wait list is closed, families for whom funding is not available shall have their application denied.
- (3) The commissioner shall have the option of reopening the wait list to some or all of the priority groups if additional funding becomes available or if a sufficient number of families are selected from the list to warrant reopening the list.

**ATTACHMENT 3.5.1  
SLIDING FEE SCHEDULE  
CONNECTICUT DEPARTMENT OF SOCIAL SERVICES  
Care 4 Kids Program  
SELECTED ANNUAL STATE MEDIAN INCOME GUIDELINES  
Effective July 1, 2009**

<b>Family Size</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
<b>20% SMI</b>	10,161.63	13,288.29	16,414.94	19,541.60	22,668.26	25,794.91	26,381.16	26,967.41	27,553.66	28,139.90	28,726.15	29,312.40
<b>30% SMI</b>	15,242.45	19,932.43	24,622.42	29,312.40	34,002.38	38,692.37	39,571.74	40,451.11	41,330.48	42,209.86	43,089.23	43,968.60
<b>40% SMI</b>	20,323.26	26,576.58	32,829.89	39,083.20	45,336.51	51,589.82	52,762.32	53,934.82	55,107.31	56,279.81	57,452.30	58,624.80
<b>50% SMI</b>	25,404.08	33,220.72	41,037.36	48,854.00	56,670.64	64,487.28	65,952.90	67,418.52	68,884.14	70,349.76	71,815.38	73,281.00
<b>55% SMI</b>	27,944.49	36,542.79	45,141.10	53,739.40	62,337.70	70,936.01	72,548.19	74,160.37	75,772.55	77,384.74	78,996.92	80,609.10
<b>75% SMI</b>	38,106.12	49,831.08	61,556.04	73,281.00	85,005.96	96,730.92	98,929.35	101,127.78	103,326.21	105,524.64	107,723.07	109,921.50
<b>100% SMI</b>	50,808.16	66,441.44	82,074.72	97,708.00	113,341.28	128,974.56	131,905.80	134,837.04	137,768.28	140,699.52	143,630.76	146,562.00

The family share of the approved cost is a percentage of the assistance unit's gross income:

<b>Family Share</b>	<b>AU Income Range</b>
2%	0% to less than 20% SMI
4%	20% to less than 30% SMI
6%	30% to less than 40% SMI
8%	40% to less than 50% SMI
10%	50% to less than 75% SMI

**CCAP-POL-09-01, Issued March 26, 2009**

**Source: Federal Register Vol. 74, No. 48, 3-14-2009**

**CONNECTICUT DEPARTMENT OF SOCIAL SERVICES**  
**Care 4 Kids Program**  
**SELECTED MONTHLY STATE MEDIAN INCOME GUIDELINES**  
 Effective July 1, 2009

Family Size	1	2	3	4	5	6	7	8	9	10	11	12
<b>20% SMI</b>	846.80	1,107.36	1,367.91	1,628.47	1,889.02	2,149.58	2,198.43	2,247.28	2,296.14	2,344.99	2,393.85	2,442.70
<b>30% SMI</b>	1,270.20	1,661.04	2,051.87	2,442.70	2,833.53	3,224.36	3,297.65	3,370.93	3,444.21	3,517.49	3,590.77	3,664.05
<b>40% SMI</b>	1,693.61	2,214.71	2,735.82	3,256.93	3,778.04	4,299.15	4,396.86	4,494.57	4,592.28	4,689.98	4,787.69	4,885.40
<b>50% SMI</b>	2,117.01	2,768.39	3,419.78	4,071.17	4,722.55	5,373.94	5,496.08	5,618.21	5,740.35	5,862.48	5,984.62	6,106.75
<b>55% SMI</b>	2,328.71	3,045.23	3,761.76	4,478.28	5,194.81	5,911.33	6,045.68	6,180.03	6,314.38	6,448.73	6,583.08	6,717.43
<b>75% SMI</b>	3,175.51	4,152.59	5,129.67	6,106.75	7,083.83	8,060.91	8,244.11	8,427.32	8,610.52	8,793.72	8,976.92	9,160.13
<b>100% SMI</b>	4,234.01	5,536.79	6,839.56	8,142.33	9,445.11	10,747.88	10,992.15	11,236.42	11,480.69	11,724.96	11,969.23	12,213.50

The family share of the approved cost is a percentage of the assistance unit's gross income:

<u>Family Share</u>	<u>AU Income Range</u>
2%	0% to less than 20% SMI
4%	20% to less than 30% SMI
6%	30% to less than 40% SMI
8%	40% to less than 50% SMI
10%	50% to less than 75% SMI

CCAP-POL-09-01, Issued March 26, 2009

Source: Federal Register Vol. 74, No. 48, 3-14-2009



Si quisiera recibir este material en español  
sírvese llamar al 1-888-214- 5437.

## Application Form

Care 4 Kids ■ 1344 Silas Deane Hwy ■ Rocky Hill, CT 06067-1339

**Deaf and hearing-impaired individuals may use TTD/TTY line 1-877-455-9169**

Care 4 Kids operates the child care assistance program for the State of Connecticut. The purpose of this form is to collect information we need to determine if you are eligible to receive a certificate from the Care 4 Kids program.

To apply for child care benefits, follow these easy steps:

- **Complete this application form.** If you have any questions or need help, call **1-888-214-5437**.
- **Complete the parent provider agreement form (PPA),** with your child care provider. If your provider is new to the Care 4 Kids program, your provider also needs to fill out the enclosed W-9 form and return it with the completed PPA. Each provider must complete a separate PPA so, if you have more than one provider or need another PPA, call **1-888-214-5437**.
- **Provide all needed Verification.** Follow the **CHECKLIST** to see what verifications are required. If you send copies of the requested verifications with your application, we can process your application faster. Do not send original verifications. Care 4 Kids will not return original documents. If you do not have all the verifications, you may still send in your application but you must send the required information as soon as possible.
- **Send your completed application, parent provider agreement (PPA) and verifications** to the Care 4 Kids address at the top of this page. Be sure to put enough postage on your envelope. If you have chosen a child care provider, include the completed PPA. **Please make sure your application and PPA are signed and dated.**
- **Note:** You may submit the completed application, even if you have not yet selected a child care provider. If you need help finding a licensed child care provider, call 2-1-1 Child Care at **211 or 1-800-505-1000**.

Certain information that you have given on this form must be verified before Care 4 Kids can grant assistance. The following list will give you an idea of the documents that may be used to prove your statements.

**Income from Employment** – You may use copies of pay stubs or a statement from your employer on company letterhead.

**Self-Employment** – You may use tax records, your last tax return or receipts of business income and expenditures.

**Social Security Income** – Current award notice, copy of current check or statement from social security

**Schedule** – Time card or statement from employer on company letterhead verifying your schedule

**Child Support Paid** – Copy of a cancelled check, money order or wage stub showing deduction

**Foster Care Payment** – Copy of your foster care stipend check or award letter from Department of Children and Families

**Rental Income** – Copy of leases, business records or income tax records

**CHECKLIST** **Do not forget to send in verifications requested**

.....**THE CARE 4 KIDS GOAL IS TO PROCESS YOUR APPLICATION WITHIN 30 DAYS**.....



**Section 1: Applicant Information (Tell us who you are) ◀**

The applicant is the parent or adult responsible for the child(ren). If the parent of the child in need of care is under the age of 18 and living with another adult, then that adult is considered the applicant and must complete and sign this application.

Have you ever applied for cash, medical or food stamp assistance from the **Department of Social Services**? (Answering this question will not affect your eligibility.)

If **yes**, what is your DSS client identification number? \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Apt \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

Social Security Number (optional) \_\_\_\_\_ Is this application for child care assistance for a Foster Child?  Yes  No

Sex:  Female  Male Marital Status:  Married  Single  Separated

Race: (circle all that apply) **AA** - American Indian/Alaskan Native **A** - Asian **B** - Black  
**NP** - Native Hawaiian/Pacific Islander **W** - White **U** - Unknown

Hispanic:  Yes  No  Marque aquí si desea recibir cartas y formularios en español.  
 (Check here if you want to receive letters and forms in Spanish.)

**Section 2: Children Information (Tell us about all the children living in your home) ◀**

**TABLE A: CHILDREN WHO NEED CHILD CARE**

- In this section, please list only those children who need child care assistance from this program.
- To be eligible, most children must be under age 13. Children with special needs may be eligible up to age 19. Special needs may include a physical or mental impairment, a severe behavioral disturbance or developmental delay. Special needs must be confirmed by a health care professional and the child must need extra supervision, care or assistance in the child care setting.
- All children in Care 4 Kids must be up-to-date on their shots (immunizations).
- *By law we need to ask your child's race.* Identify your child's race by circling **all the races that apply** in the column "Race of Child" in **Table A**.

**KEY AA** - American Indian/Alaskan Native **A**- Asian **B** - Black **NP** - Native Hawaiian/Pacific Islander **W**- White **U** - Unknown

First name, Middle initial, Last name	Date of birth	Relationship of child to Applicant	Sex	Is this child Hispanic?	Social Security Number (optional)	Is this child a US citizen?	Does this child have special needs?	Race of child	Is this child up to date with shots?
1.			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<b>AA</b> <b>NP</b> <b>A</b> <b>W</b> <b>B</b> <b>U</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
2.			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<b>AA</b> <b>NP</b> <b>A</b> <b>W</b> <b>B</b> <b>U</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<b>AA</b> <b>NP</b> <b>A</b> <b>W</b> <b>B</b> <b>U</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
4.			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<b>AA</b> <b>NP</b> <b>A</b> <b>W</b> <b>B</b> <b>U</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
5.			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<b>AA</b> <b>NP</b> <b>A</b> <b>W</b> <b>B</b> <b>U</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO

**TABLE B: CHILDREN UNDER 18 IN HOME WHO DO NOT NEED CHILD CARE**

- Please list any other children under 18 living in your home who do not need child care.

First name, middle initial, last name	Date of birth	Sex	Relationship of child to Applicant	Social Security Number ( <i>optional</i> )
1.		<input type="checkbox"/> M <input type="checkbox"/> F		
2.		<input type="checkbox"/> M <input type="checkbox"/> F		

Do any of the children listed above have their own children living in your home?  Yes  No

If YES, please list the names of the under 18 parent(s) and the name(s) of their children:

Under 18 Parent(s): \_\_\_\_\_ Child/ren: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Section 3: Adult Information (Tell us about all other adults living in your home) ◀**

**TABLE C: ADULTS IN THE HOME OTHER THAN THE APPLICANT**

- Please list **all** other adults **over 18**, excluding yourself, living in your home. Include your spouse and any relatives and non-relatives who live in your home.
- If more space is needed, please write the information on another piece of paper and attach it to the application.

First name, middle initial, last name	Date of birth	Sex	Relationship to Applicant	Social Security Number ( <i>optional</i> )	Is this person unable to provide child care because of a disability?	Is this person a parent of child living in the home?
1.		<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO Name of child _____
2.		<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO Name of child _____

**Section 4: Child Support Paid (Tell us about Child Support you pay) ◀**

If you or another adult living in your home pays child support for a child who does not live with you, that amount may be used to reduce your income when determining income eligibility for assistance.

Do any adults in your home pay child support for a child who does not live with you?  YES  NO

If YES, payment is made to \_\_\_\_\_ payment is made by \_\_\_\_\_

What is/(are) the name(s) of the child(ren) being paid for? \_\_\_\_\_

How much is paid? \$ \_\_\_\_\_ per \_\_\_\_\_ date payments started \_\_\_\_\_  
 (time period)

 **Please send us verification that an adult in your home pays child support.**

**Section 5: Work/Education/Training Activities** ◀

- Please list all parents and other adults, including your self, who are working, in training or in school. Include parents or other persons responsible for the children in the home and their spouses.
- Be sure to include work, training or school information. Fill out information and schedule for each activity (*i.e., working, in training, in school*) a parent/adult participates in.

**1. Name of Parent or Other Adult:** \_\_\_\_\_

Type of Activity:     Work     Education     High School     Self-Employed     Training  
 Other(*describe*) \_\_\_\_\_ Do you work at home?     Yes     No

Name of Employer/Program/School \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Start Date of Work/Program/School \_\_\_\_\_ Name of Employment Services Case Manager, if any \_\_\_\_\_

**PARENT/ADULT SCHEDULE BY DAY**

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Start time*	AM	AM	AM	AM	AM	AM	AM
	PM	PM	PM	PM	PM	PM	PM
End time*	AM	AM	AM	AM	AM	AM	AM
	PM	PM	PM	PM	PM	PM	PM

\* - Fill in the time you are required to start the activity and the time the activity ends including meal and break times.

If workdays or hours of work vary, please explain: \_\_\_\_\_

How long does it take you to **get to** this activity **from the** child care setting? \_\_\_\_\_

How long does it take you to **get from** this activity **to the** child care setting? \_\_\_\_\_

Do you take public transportation to or from this activity?     Yes     No. If yes,

What is the bus route number? \_\_\_\_\_

**2. Name of Parent or Other Adult:** \_\_\_\_\_

Type of Activity:     Work     Education     High School     Self-Employed     Training  
 Other(*describe*) \_\_\_\_\_ Do you work at home?     Yes     No

Name of Employer/Program/School \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Start Date of Work/Program/School: \_\_\_\_\_ Name of Employment Services Case Manager, if any: \_\_\_\_\_

**PARENT/ADULT SCHEDULE BY DAY**

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Start time*	AM	AM	AM	AM	AM	AM	AM
	PM	PM	PM	PM	PM	PM	PM
End time*	AM	AM	AM	AM	AM	AM	AM
	PM	PM	PM	PM	PM	PM	PM

\* - Fill in the time you are required to start the activity and the time the activity ends including meal and break times.

If work days or hours of work vary, please explain: \_\_\_\_\_

How long does it take you to **get to** this activity **from the** child care setting? \_\_\_\_\_

How long does it take you to **get from** this activity **to the** child care setting? \_\_\_\_\_

Do you take public transportation to or from this activity?     Yes     No

If yes, What is the bus route number \_\_\_\_\_


**Section 6: Income Information (Tell us about your family income) ◀**

 **Please send us verification of all income your family receives.** (See page 1, for a list of documents you can use to verify your family's income)

- Please list all the income your family receives including:
  - Gross earnings **before taxes or deductions** for all parents and adult family members in your home
  - Unearned income **before deductions** for all adults & children in your home (*such as SSI, Social Security, etc.*)

Persons with Income →	Name _____	Name _____	Name _____	Name _____
<b>Wages</b>	\$ _____ <i>* per wk bwk sm mo (circle one)</i>	\$ _____ <i>* per wk bwk sm mo (circle one)</i>	\$ _____ <i>* per wk bwk sm mo (circle one)</i>	\$ _____ <i>* per wk bwk sm mo (circle one)</i>
<b>Self-employment</b>	\$ _____ <i>per week or month (circle one)</i>	\$ _____ <i>per week or month (circle one)</i>	\$ _____ <i>per week or month (circle one)</i>	\$ _____ <i>per week or month (circle one)</i>
<b>SSI</b>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>
<b>Social Security</b>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>
<b>Rental Income</b>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>
<b>Unemployment Compensation</b>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>
<b>DCF Stipend</b>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>	\$ _____ <i>per month</i>
<b>Other Income</b> <i>(e.g. Alimony, pensions, worker's compensation, veterans benefits dividends /interest (if over \$600/year))</i>	\$ _____ Type: _____ <i>* per wk bwk sm mo (circle one)</i>	\$ _____ Type: _____ <i>* per wk bwk sm mo (circle one)</i>	\$ _____ Type: _____ <i>* per wk bwk sm mo (circle one)</i>	\$ _____ Type: _____ <i>* per wk bwk sm mo (circle one)</i>

*\* per: weekly (wk), bi-weekly (bwk), semi-monthly (sm), monthly (mo)*

 **Please send copies of your MOST RECENT paycheck stub(s) with this application. Processing of your application will be delayed if the most recent pay stubs are not submitted.**

- If you are paid **once a week**, send copies of the last four paycheck stubs.
- If you are paid **every other week or twice a month**, send copies of the last two paycheck stubs.
- If you are paid **once a month**, send a copy of the last paycheck stub.
- If you are **self-employed**, send a copy of your most recent state or U.S. tax return, including the schedules **or** your most recent quarterly state or U.S. tax filing.

Do you receive Food Stamps?     YES     NO (Answering this question will not affect your child care benefit.)  
 Do you receive housing assistance?     YES     NO (Answering this question will not affect your child care benefit.)  
 Do you receive child care assistance from another source?     YES     NO  
 If YES, from whom: \_\_\_\_\_ How much? \$ \_\_\_\_\_ How often? \_\_\_\_\_

## Section 7: Parent's Rights & Responsibilities ◀

- Please read the following section carefully or have it read to you. If there is anything you do not understand, you may call **Care 4 Kids** at 1-888-214-KIDS (5437) and ask that it be explained to you.
- When you have read the section or had it read to you, please sign in the space provided at the bottom of this page.
- You have certain rights and there are certain rules you need to follow.
- You have the right to file an application, withdraw an application or discontinue your participation in **Care 4 Kids** at any time. You have the right to choose any eligible child care provider.
- You have the right to be treated fairly by **Care 4 Kids** without regard to race, color, religion, sex or sexual orientation, marital status, national origin, ancestry, age, political beliefs or disability. You have the right to request forms and notices in Spanish. All non-English speaking participants have the right to the services of an interpreter.
- You have the right to ask for a review of any decision made by **Care 4 Kids** on your application/enrollment. You have the right to speak to a supervisor or mediator and the right to request a hearing from the Department of Social Services (DSS).

### I understand and agree that:

- I must report any changes in my situation to **Care 4 Kids** within 10 days of the change, including but not limited to changes in address, income, household size, child care provider, hours of employment or training, additional hours of care, etc.
- **Care 4 Kids** may verify the information I have given on this form. I understand that if I am eligible for **Care 4 Kids**, benefits will not begin any earlier than 15 days before the date the application is received.
- The information on this form is confidential. DSS or its agent will only use this information to administer a DSS program. Information may be shared with others as permitted by law.
- **Care 4 Kids** employees may provide my child care provider with information about my eligibility for **Care 4 Kids** and the amount of the **Care 4 Kids**' payment.
- On request, **Care 4 Kids** may be required to provide information on program applicants and participants to law enforcement officials.
- The child care arrangement is between my provider and me. DSS and **Care 4 Kids** are not responsible for the child care arrangement.
- The Department of Social Services may conduct an unscheduled home visit.
- **Care 4 Kids** may not pay the full amount charged by my provider. I am responsible for paying all additional provider charges.
- Providers must meet state health, safety and licensing requirements to be eligible for payment.
- I may be required to repay any benefits received in error, including administrative errors. I may be subject to criminal prosecution for fraud if I knowingly supply any false information to **Care 4 Kids** or fail to report changes on time. I also may be disqualified from the program. In order to remain eligible, I must cooperate with the **Care 4 Kids** and DSS quality control process.

**Applicants please read and sign:** I have read my rights and responsibilities or have had them read to me in a language I understand. I certify under penalty of perjury that all the information provided is true and correct to the best of my knowledge.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Did another person help you fill out this form?  YES  NO

If yes, printed name: \_\_\_\_\_ Signature: \_\_\_\_\_

## CHECKLIST Do not forget to send in all verifications requested

Mail this application to: **Care 4 Kids** ▪ 1344 Silas Deane Hwy ▪ Rocky Hill, CT ▪ 06067-1339

The Connecticut Department of Social Services sponsors the Care 4 Kids program.  
All Department of Social Services programs are administered in a non-discriminatory manner,  
consistent with equal employment opportunities and affirmative action requirements.









