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**Child Care and Development Fund (CCDF) Plan**

**For**

**State/Territory:** **Louisiana**

**FFY 2014-2015**

This Plan describes the CCDF program to be administered by the State/Territory for the period 10/1/2013 – 9/30/2015. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

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

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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.

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

**Form ACF-118 Approved OMB Number expires**

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**PART 1**

**ADMINISTRATION**

This section provides information on how the CCDF program is administered, including the designated Lead Agency, funding information, the administrative structure, program integrity and accountability policies and strategies, coordination efforts, and emergency preparedness plans and procedures.

**1.1 Contact Information**

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)

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

Identify the Lead Agency and Lead Agency's Chief Executive Officer designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals and disallowance notifications to the designated contact identified here. (658D(a), §98.10)

Name of Lead Agency: Department of Children and Family Services  
Address of Lead Agency: P.O. Box 3776, Baton Rouge, LA 70821  
Name and Title of the Lead Agency's Chief Executive Officer: Suzy Sonnier, Secretary  
Phone Number: 225-342-7475  
Fax Number: 225-342-8636  
E-Mail Address: suzy.sonnier@la.gov  
Web Address for Lead Agency (if any): [www.dcfslouisiana.gov](http://www.dcfslouisiana.gov)

**1.1.2. Who is the CCDF administrator?**

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. **If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information. (§§98.16(a) and (c)(1))**

**a) Contact Information for CCDF Administrator:**

Name of CCDF Administrator: Gail B. Kelso  
Title of CCDF Administrator: Director, Child Development and Early Learning Section, Louisiana Department of Children and Family Services

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Address of CCDF Administrator: P.O. Box 94065, Baton Rouge, LA  
70804-9065

Phone Number: 225-342-0694

Fax Number: 225-219-4248

E-Mail Address: gail.kelso@la.gov

Phone Number for CCDF program information (for the public) (if any):  
225-342-0694

Web Address for CCDF program (for the public) (if any):  
[www.childcare.la.gov](http://www.childcare.la.gov)

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

<http://stellent:8080/LADSS/outlineParts.do?agency=OFS&chapterID=6>

Web address for CCDF program administrative rules: (if any):  
[www.doa.louisiana.gov/osr/lac/books.htm](http://www.doa.louisiana.gov/osr/lac/books.htm)

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

Name of CCDF Co-Administrator: NA

Title of CCDF Co-Administrator: \_\_\_\_\_

Address of CCDF Co-Administrator: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Description of the role of the Co-Administrator: \_\_\_\_\_

## **1.2 Estimated Funding**

### **1.2.1. What is your expected level of funding for the first year of the FY 2014 – FY 2015 plan period?**

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period from October 1, 2013 through September 30, 2014. (§98.13(a)).

FY 2012 Federal CCDF allocation (Discretionary, Mandatory and Matching):

**\$82,238,438**

Federal TANF Transfer to CCDF: **\$0**

Direct Federal TANF Spending on Child Care: **\$0**

State CCDF Maintenance-of-Effort Funds: **\$5,219,488**

State Matching Funds: **\$16,488,022**

**Reminder** – Lead Agencies are reminded that not more than 5 percent of the aggregate CCDF funds, including federal funds and required State Matching funds, shall be expended on administration costs (§98.52) once all FY2014 funds have been liquidated. State Maintenance-of-Effort funds are not subject to this limitation.

### **1.2.2. Which of the following funds does the Lead Agency intend to use to meet the CCDF Matching and maintenance-of-effort (MOE) requirements described in 98.53(e) and 98.53(h)?**

Check all that apply. Territories not required to meet CCDF Matching and MOE requirements should mark  N/A here.

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**Note:** The Lead Agency must check at least public and/or private funds as matching, even if pre-kindergarten (pre-k) funds also will be used.

Public funds to meet the CCDF Matching Fund requirement. Public funds may include any general revenue funds, county or other local public funds, State/Territory-specific funds (tobacco tax, lottery), or any other public funds.

If checked, identify source of funds:

DCFS will use the refunded portion of the LA School Readiness Tax Credit (SRTC) as state match in the CCDF program which is the amount refunded to the taxpayer after being applied against any tax liability. The matching funds will be used to finance subsidy payments. The SRTCs are a comprehensive effort to support Quality Start by offering incentives to families, child care providers, child care professionals, and employees through state tax credits that vary based on the quality of the child care setting and the experience and education of the child care staff as determined by Quality Start.

DCFS will also use the refunded portion of the Louisiana Child Care Tax Credit as state match in the CCDF program. This refundable tax credit is available for child care expenses for which a Louisiana resident is eligible pursuant to the federal income tax credit. The taxpayer must meet the same tests for earned income, qualifying dependents, and qualifying expenses as required by the Internal Revenue Service. This credit is equal to a percentage of the federal credit for child care expenses claimed on the resident individual's federal tax return based on their federal adjusted gross income. The Louisiana Child Care Tax Credit is refundable only for families with earned income of less than \$25,000 per year.

If known, identify the estimated amount of public funds the Lead Agency will receive: **\$11,541,615**

Private donated funds to meet the CCDF Matching Funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes. (98.53(f))

If checked, are those funds:

donated directly to the State?

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

If checked, identify the number of entities designated to receive private donated funds and provide name, address, contact, and type \_\_\_\_\_

If known, identify the estimated amount of private donated funds the Lead Agency will receive: \$ \_\_\_\_\_

State expenditures for pre-k programs to meet the CCDF Matching Funds requirement. If checked, Provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%): **30%**

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If percentage is more than 10% of the Matching fund requirement, describe how the State will coordinate its pre-k and child care services:

The Early Childhood Care and Education Act (Act 3 of the 2012 LA Legislature) charges the State Board of Elementary and Secondary Education (BESE) to develop an integrated system of early care and education focused on school readiness. This system requires a quality rating system based on kindergarten readiness or progress towards readiness that issues letter grades for all programs receiving public funds, streamlined licensing regulations, and coordinated funding and enrollment strategies. Under the authority of BESE, the Louisiana Department of Education (LDE) will coordinate closely with the CCDF lead agency (DCFS) and the Department of Health and Hospitals (DHH). Through this work DCFS and LDE are working toward development of a system that ensures school readiness for all children, improves access and information for parents, and increases professional knowledge of all early care and education workforce.

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for Matching Funds requirement: \$4,946,407

Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents:

### Full Day Care and Education:

The Local Education Agency (LEA) must provide written notice of the availability of before- and after-school enrichment activities to all parents of children enrolled in prekindergarten programs in the system or partial system. The precise start and end times of the full day program shall be determined by the LEA and may vary at different school sites; however, those times shall be based on a needs assessment of the community served. The needs assessment must be kept on file at the school site.

- The LEA must make before-and after-school enrichment activities services available for all children enrolled in the school system's or partial system's prekindergarten classes. These services shall be provided at no cost to parents/guardians of children attending prekindergarten through LA 4 Prekindergarten Program funds and may be provided for other children (living in the school district and enrolled in the LA 4 Prekindergarten Program) at no cost or may be provided for a fee that is not more than the average per pupil cost excluding the cost of providing space and utilities.

Before-and after-school enrichment activities services are components of the total prekindergarten program, and therefore, shall support positive child development. The environment shall provide a variety of appropriate activities for children to self-select.

Before-and after-school enrichment activities services for prekindergarten age children may be coordinated with existing before/after enrichment activities programs funded by other sources.

- If before-and after-school enrichment activities are provided on the school campus, prekindergarten children shall be cared for in rooms with prekindergarten or kindergarten age children as long as the adult to child ratio does not exceed 1 to 10 and the group size is not greater than 20 children.

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- If the before-and after-school enrichment activities site is located on the school campus, the person supervising personnel during the before- and after-school enrichment activities portion of the day shall be either a school administrator or a teacher having the same qualifications as the prekindergarten teacher (see Section II) and be present at the before- and after-school enrichment activities site at all times when prekindergarten children are present.
- The entire site shall be checked after the last child departs to ensure that no child is left unattended at the site. Documentation shall include date, time, and signature of staff conducting the visual check and shall be reviewed periodically and signed/initialed by the school principal (or the highest authority) to ensure that the procedure is consistently followed.

## Transportation:

Transportation services shall be made available to all prekindergarten students to ensure that each child is present for the educational/instructional portion of the day and summer programs. Transportation to and from the before-and after-school enrichment activities site may be provided.

- Families of children eligible for free or reduced price meals may not be charged transportation fees for transportation for the instructional portion of the day.
- Field trips are part of the instructional program and shall not be considered as transportation costs.

The Department also contracts with Board of Elementary and Secondary Education (BESE) – regulated (public schools) or approved through *Brumfield vs. Dodd* (non-public schools) to provide before-and after-school care. These school settings allow parents the confidence to have their prekindergarten aged children cared for at one location throughout the school and after-school day.

- State expenditures for pre-k programs to meet the CCDF Maintenance of Effort (MOE) requirements. If checked,
- The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.53(h)(1). Estimated percentage of MOE Fund requirement that will be met with pre-k expenditures (not to exceed 20%): \_\_\_\_\_
- If percentage is more than 10% of the MOE requirement, describe how the State will coordinate its pre-k and child care services to expand the availability of child care: \_\_\_\_\_
- If known, identify the estimated amount of pre-k funds the Lead Agency will receive for MOE Fund requirement: \$\_\_\_\_\_
- Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents: \_\_\_\_\_

### **1.2.3 Describe the activities for which quality funds (including targeted quality funds for infants and toddlers, school-age children, and resource and referral) will be used in FY 2014 - 2015.**

In as much detail possible, list the activities that will be funded, the estimated amount of CCDF quality funds that will be used for each activity, and how these activities relate to

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the Lead Agency’s overall goal of improving the quality of child care for low-income children.

<b>Activity</b>	<b>Estimated Amount of CCDF Quality Funds (check which targeted funds will be used, if any)</b>	<b>Purpose</b>	<b>Projected Impact and Anticipated Results (if possible)</b>
<p><b>Child Care Resource and Referral, Training and Technical Assistance</b></p>	<p>SA/CCR&amp;R target - \$345,226 Quality Expansion target - \$2,000,000</p> <p>Check if targeted funds for this activity:  <input type="checkbox"/> Infant/Toddler Targeted Funds  <input checked="" type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds (\$345,226 needed)  <input checked="" type="checkbox"/> Quality Expansion (\$3,529,988 needed)</p>	<p>Parent referrals, community information and capacity building. Provider training and on-site technical assistance (TA)</p>	<p>Parents and individuals have information about availability of child care options and subsidy. Providers have access to low-cost face to face training in their community and TA at their site. Training and TA are focused on supporting providers to participate in the current TQRIS and at least 25% of all training each quarter will support the transition to the new outcome-based TQRIS. All providers will have access to information.</p>
<p><b>Infant Toddler Quality Initiative</b></p> <p>1. Pilot infant toddler (IT) PD specialist career ladder 2. Increase IT reimbursement to providers with 3-5 stars in pilots in 2014 and statewide in 2015 3. Pilot model of coaching for Early Intervention (EI)</p>	<p>\$2,044,344</p> <p>Check if targeted funds for this activity:  <input checked="" type="checkbox"/> Infant/Toddler Targeted Funds  <input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds  <input type="checkbox"/> Quality Expansion</p>	<p>1. Improve technical assistance by defining roles, training/experience needed and identifying approved training. 2. Reimburse IT providers known to be providing high quality care 3. Train EI and child care provider in selected pilot networks</p>	<p>1. IT programs in 13 pilot networks will have access to high quality support 2. providers will improve quality to receive additional payment 3. EI and providers in 5 pilots will collaborate to support inclusion</p>



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Activity	Estimated Amount of CCDF Quality Funds (check which targeted funds will be used, if any)	Purpose	Projected Impact and Anticipated Results (if possible)
<b>LA Center for Afterschool Learning (LACAL)</b>	<u>\$50,000</u>  Check if targeted funds for this activity: <input type="checkbox"/> Infant/Toddler Targeted Funds <input checked="" type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds ( <u>\$345,226 needed</u> ) <input type="checkbox"/> Quality Expansion	Pilot training and TA focused on providers of school age services standards and competencies.	10 programs each year will receive services and 100 participants are expected to attend the annual conference.
<b>QRIS Assessment and Child Care Mental Health Consultation</b> 1. Environment Rating Scale (ERS) assessment (practice and official) 2. Mental Health Consultation	<u>\$ 1,700,000.</u>  Check if targeted funds for this activity: <input type="checkbox"/> Infant/Toddler Targeted Funds <input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds <input checked="" type="checkbox"/> Quality Expansion ( <u>\$total of 3,529,988 needed</u> )	1. Assessment is used to determine quality rating and inform program improvement. 2. Consultation provides support to staff on children's social-emotional development in centers participating in QRIS and in pilot networks.	1. Programs will receive reliable assessment and information for program improvement. 2. Consultation will be available to support centers serving low-income children and children in foster care as well as 13 pilot network settings.
<b>LA Pathways Child Care Career Development System</b>	<u>\$ 1,000,000.</u>  Check if targeted funds for this activity: <input type="checkbox"/> Infant/Toddler Targeted Funds <input type="checkbox"/> School-Age/Child Care Resource and Referral Targeted Funds <input checked="" type="checkbox"/> Quality Expansion ( <u>\$total of 3,529,988 needed</u> )	1. Registry and assessment of staff qualifications for QRIS 2. Scholarship	1. Individuals and providers are recognized for their training and education 2. Individuals receive financial support to attain education goals. In FY 2011-2012, 1087 scholarships were awarded for college tuition, Child Care Development Association (CDA) assessment and administrative training.

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## 1.2.4 Will the Lead Agency distribute quality funds to counties or local entities?

Note: This question is to obtain information on whether the Lead Agency retains decision making responsibilities regarding the quality dollars at the State/Territory level or if funds are distributed to local entities

Does the State maintain decisions at the State level, or are funds distributed to locals that have some decisions on how funds are spent.

- No, the Lead Agency will not distribute any quality funds directly to local entities
- Yes, all quality funds will be distributed to local entities
- Yes, the Lead Agency will distribute a portion of quality funds directly to local entities. Estimated amount or percentage to be distributed to localities
- Other. Describe. \_\_\_\_\_

## 1.3. CCDF Program Integrity and Accountability

Program integrity is defined to include efforts that ensure effective internal controls over the administration of CCDF funds. The Lead Agency is responsible for monitoring programs and services, ensuring compliance with the rules of the program, promulgating rules and regulations to govern the overall administration of the plan and oversee the expenditure of funds by sub-grantees and contractors. (§ 98.11(b))

Accountability measures should address administrative error, which includes unintentional agency error, **as well as address** program violations, both unintentional and intentional, that may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

### 1.3.1. Describe the strategies the Lead Agency will utilize to ensure effective internal controls are in place.

The **description** of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities.

The Case Review System provides an automated and efficient method for reviewing cases for any program and replaces manual case reading summaries when conducting case validations. Case readings are important in that they identify the most error-prone areas of the program. The Case Review System can be used to obtain important statistical reports notating error trends and actions taken to correct deficiencies, if needed; errors that may cause improper payments; and corrective measures to prevent incorrect or ineligible benefits.

Fifteen percent (15%) of all Child Care Assistance Program (CCAP) cases must be reviewed. Case readings are completed by first level and upper level Supervisory staff and Regional Program Coordinators. Social Service Analyst Supervisors (SSASs) must conduct 40 formal case readings per month of which a percentage must be CCAP cases and Regional Program

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Coordinators must conduct 120 formal case readings, 30 of which must be CCAP case readings per month.

Ineligible benefits may be caused by client, provider, or administrative error:

- Inadvertent Household Error (IHE) or Administrative Error (AE) claims for clients or providers on active cases have no threshold.
- Cases that are Intentional Program Violation (IPV) and cases that Quality Control have found to be valid that are in active open or active closure status have no threshold.
- Cases that are IPV, IHE, AE or provider error claims have a \$125.00 threshold for non-participating clients/providers.

The client and provider are contacted to discuss the overpayment. The client or provider may make a lump sum payment. A payment schedule may be negotiated with the recipient or provider. Repayment plans for providers are usually negotiated for three or six months. In no instance will the repayment plan for a currently participating provider extend more than 12 months.

### 1.3.2 Describe the processes the Lead Agency will use to monitor all sub-recipients.

Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements (98.11 (a) (3))

**Definition:** A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. OMB Circular A-133 Section 210 provides additional information on the characteristics of a **sub-recipient** and **vendor** ([http://www.whitehouse.gov/omb/circulars/a133\\_compliance\\_supplement\\_2010](http://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2010)). The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments. **N/A**

### 1.3.3. Describe the activities the Lead Agency will have in place to identify program violations and administrative error to ensure program integrity using the chart below.

Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to **areas identified through the Error Rate Review** process (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

Type of Activity	Identify Program Violations	Identify Administrative Error
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<b>Type of Activity</b>	<b>Identify Program Violations</b>	<b>Identify Administrative Error</b>
Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid))	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Run system reports that flag errors (include types)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Review of attendance or billing records	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Audit provider records	<input type="checkbox"/>	<input type="checkbox"/>
Conduct quality control or quality assurance reviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents	<input type="checkbox"/>	<input type="checkbox"/>
Conduct supervisory staff reviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct data mining to identify trends	<input type="checkbox"/>	<input type="checkbox"/>
Train staff on policy and/or audits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other. Describe: DCFS proposes to have the External Audit Investigations Unit of the Bureau of Audit and Compliance Services review supporting documentation for Manual Payments issued, to ensure appropriate review and approval of such payments as well as compliance with applicable DCFS policy. Any discrepancies indicating possible fraud will be referred to the Fraud and Recovery (F& R) unit for investigation.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>

**For any option the Lead Agency checked in the chart above other than none, please describe:**

The OFS-FA Web System Clearance Summary automatically completes clearances that are normally completed manually. Clearance Summary helps to reduce the error rate. This system is reviewed at application and redetermination. Clearance Summary interfaces with the Work Number, Social Security and Veteran's Administration, Louisiana Quarterly Wage, Louisiana Unemployment Compensation System, Child Support Enforcement System, Federal Department of Defense Employment, Louisiana Prisoner Match System, and public assistance programs from other states. The Public Assistance Reporting System (PARIS) reports duplicate participation for SNAP, TANF, and Medicaid in all 50 states. The Clearance Summary checks PARIS – interstate matches on Public Assistance at application, redetermination, and Simplified Reporting (SR). PARIS files provide information on public assistance participation in 49 other states, the District of Columbia, and Puerto Rico.

On August 1, 2010, the Department implemented a statewide automated time and attendance process called Tracking of Time Services (TOTS). TOTS uses two technology based systems: 1.) Biometric technology, specifically, finger imaging, and 2.) Interactive Voice Response (IVR) to document attendance. This automated process submits attendance electronically to the

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Department for each eligible child. TOTS reduces manual processes, saves time for staff and providers, and improves the frequency and accuracy of payments to providers. Providers and CCAP participants are required to participate in TOTS to receive CCAP payments and benefits for child care services.

Quality Control (QC) Reviews are conducted every three years as required by federal regulations set forth by the Administration for Children and Families (ACF). Louisiana's sampling plan will continue to be submitted for federal approval in accordance with requirements of the "Measuring Improper Authorizations for Payment in the Child Care Development Fund (CCDF) Program Instructions" and regulations at 45 CFR 98 subpart K.

The Case Review System provides an automated and efficient method for reviewing cases for any program and replaces manual case reading summaries when conducting case validations. It is used to obtain important statistical reports notating error trends and actions taken to correct deficiencies, if needed; errors that may cause improper payments; and corrective measures to prevent incorrect or ineligible benefits.

Fifteen percent (15%) of all CCAP cases must be reviewed. Case readings are completed by first level and upper level Supervisory staff and Regional Program Coordinators. Social Service Analyst Supervisors (SSAS) must conduct 40 formal case readings per month of which a percentage must be CCAP cases and Regional Program Coordinators must conduct 120 formal case readings, 30 of which must be CCAP case readings per month.

The DCFS Training Section develops training materials used to train staff working in CCAP and to assist employees with their everyday tasks. All training materials are available on the DCFS Policy Management System.

Regional Coordinators domiciled in the nine regions throughout the state conduct meetings with parish supervisory staff to provide training and guidance on new policy or retrain on policies that are problematic or error prone. Supervisory staff trains first line staff in groups or on an individual basis. These trainings are held on an ongoing basis, as needed.

Child Care Resource and Referral (CCR&R) Agencies were also trained and contracted to assist child care providers on how to properly use the TOTS system, which included the TOTS Provider Portal and reports within the portal. CCR&R agencies receive a list of new providers and are available to support any provider as needed with either phone or onsite training.

**If the Lead Agency checked none, please describe what measures the Lead Agency has or plans to put in place to address program integrity: N/A**

### **1.3.4. What strategies will the Lead Agency use to investigate and collect improper payments due to program violations or administrative error?**

Check and describe in the chart below which strategies, if any, the Lead Agency will use for each of the following areas: Unintentional program violations (UPV), intentional program violations (IPV) and/or fraud, and administrative error as defined in your State/Territory. **The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud (98.60(i)).**

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Strategy	UPV	IPV and/or Fraud	Administrative Error
Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount. <b>See Below</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe: <b>See Provider Investigations below.</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recover through repayment plans	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Reduce payments in subsequent months	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recover through State/Territory tax intercepts	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recover through other means. Describe _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Establish a unit to investigate and collect improper payments. Describe composition of unit. <b>See Below.</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other. Describe _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**For any option the Lead Agency checked in the chart above other than none, please describe:**

Ineligible benefits may be caused by client, provider, or administrative error:

- Inadvertent Household Error (IHE) or Administrative Error (AE) claims for clients or providers on active cases have no threshold.
- Cases that are Intentional Program Violation (IPV) and cases that Quality Control have found to be valid that are in active open or active closure status have no threshold.
- Cases that are IPV, IHE, or AE or provider error claims have a \$125.00 threshold for non-participating clients/providers.

Provider Investigations: The Fraud and Recovery Unit initiates an investigation in which fraudulent activity is suspected with a provider (Class A center, Class R (Family Child Day Care Home – in provider’s home), or Class U (In-Home – in child’s home). During the course of an investigation, the US Department of Health and Human Services may be contacted to assist with or to take the lead of the investigation.

Recovery/Methods of Repayment: A recipient or a provider may make a lump sum payment or a payment schedule may be negotiated with the recipient or provider. Repayment plans for providers are usually negotiated for three or six months. In no instance will the repayment plan for a currently participating provider extend more than 12 months.

Recipient claims reduced to judgment because of a civil suit are referred to the Louisiana Department of Revenue for offset of any income tax refunds due the debtor.

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The Fraud and Recovery Unit (FRU), established in 1974, is the investigative body within the Program Integrity and Improvement Section, which is authorized by state law (46:114) to conduct investigations into allegations of fraud, waste, and abuse in public assistance programs administered by the DCFS, and to seek criminal prosecution in state and federal courts. FRU is also responsible for recovering any ineligible benefits paid to recipients and CCAP providers regardless of the reason. The FRU consists of thirty-three (33) employees domiciled in State Office and in each of the nine DCFS regions.

## 1.3.5. What type of sanction, if any, will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

- None
- Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified.

Clients may be found to have committed Fraud/IPV:

- through an Administrative Disqualification Hearing, or
- by signing a waiver of right to an Administrative Disqualification Hearing, or
- by a court of appropriated jurisdiction, or
- by a Disqualification Consent Agreement in cases referred for prosecution.

The client's household will be unable to receive LI-CC during the disqualification period:

- 12 months for the first violation
- 24 months for the second violation
- permanently for the third violation

When a participant's case is referred by the Fraud and Recovery Unit, the Appeals Bureau reviews the record and sends to the Division of Administrative Law that:

- Conducts an Administrative Disqualification Hearing (ADH)
- Sends advance notice of the hearing to the provider or participant's household by either first-class mail or certified mail with a return receipt requested at least 30 days prior to the date of the hearing.
- Conducts the hearing.
- Arrives at a decision.
- Notifies the Fraud and Recovery Unit of the decision.

- Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified.

A child care provider is disqualified from receiving CCAP payments if the department determines that certain acts or violations have been committed by the provider as follows:

Intentional Program Violation (IPV):

- 12 months for the first violation
- 24 months for the second violation
- permanently for the third violation

Non-fraudulent violations of the terms of the CCAP Provider Agreement:



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- three months for the first violation
- six months for the second violation
- 12 months for the third and subsequent violations

Providers are not offered administrative appeal regarding matters of payment.

Class A providers may appeal decisions regarding refusal of the department to grant a license or revocation of licensure. FCDCH providers may appeal decisions regarding refusal or termination of registration, including dates of eligibility.

Prosecute criminally

Other. Describe. \_\_\_\_\_

**1.3.6. Based on responses provided from Question 14 in the most recent ACF-402 report, please describe those actions the Lead Agency has taken or plans to take to reduce identified errors in the table below.**

Territories not required to complete the Error Rate Review should mark  N/A here.

<b>Activities identified in ACF-402</b>	<b>Cause/Type of Error (if known)</b>	<b>Actions Taken or Planned</b>	<b>Completion Date (Actual or planned) (if known)</b>
Louisiana DCFS has submitted the ACF-402 on July 30, 2012 for case reviews completed for FFY 2011.	Missing or insufficient documentation  Agency miscalculation  Unprocessed Changes  Data Entry Errors.	Louisiana will continue to conduct individual case reviews by supervisors and Regional Program Coordinators.	Ongoing

**1.4. Consultation in the Development of the CCDF Plan**

Lead Agencies are required to *consult* with appropriate agencies in the development of its CCDF Plan (§98.12, §98.14(a),(b), §98.16(d)).

**Definition:** *Consultation* involves the meeting with or otherwise obtaining input from an appropriate agency in the development of the State or Territory CCDF Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments. (§§98.12(b), 98.14(a)(1))

**1.4.1. Identify and describe in the table below who the Lead Agency consulted with in the development of the CCDF Plan (658D(b)(2), §§98.12(b), 98.14(b)).**



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<b>Agency/Entity</b>	<b>Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan</b>
<input checked="" type="checkbox"/> <b>Representatives of general purpose local government (required)</b>  This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies.	Discussion with the LA Municipal Association resulted in dissemination of draft plan and request for comments and input to those leaders in areas with Community Network Pilots (CNP) in order to facilitate collaboration. LEA Superintendents were invited to review and comment via LDG.
<b>For the remaining agencies, check and describe (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan.</b>	
<input checked="" type="checkbox"/> State/Territory agency responsible for public education  This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21 <sup>st</sup> Century Community Learning Centers), or higher education.	DCFS staff have been co-located with LDE staff in order to facilitate collaboration related to Act 3. LDE staff have been instrumental in the development and review of this Plan.
<input checked="" type="checkbox"/> State/Territory agency responsible for programs for children with special needs  This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs	Lead agency is a member of the Part C State Interagency Coordinating Council (SICC). The draft Plan was submitted for review and comments which were incorporated as appropriate.
<input checked="" type="checkbox"/> State/Territory agency responsible for licensing (if separate from the Lead Agency)	The Licensing Section is also administered by the lead agency. Staff provided information and reviewed the Plan prior to submission.
<input checked="" type="checkbox"/> State/Territory agency with the Head Start Collaboration grant	The Head Start State Collaboration Office interacts daily with the CCDF Administrator and was part of the development of this Plan.
<input checked="" type="checkbox"/> Statewide Advisory Council authorized by the Head Start Act	BrightStart (SAC) reviewed, provided comments to the Plan.
<input type="checkbox"/> Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services	
<input checked="" type="checkbox"/> State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	LDE is the home of CACFP. Staff provided information and reviewed the Plan.
<input checked="" type="checkbox"/> State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant	The MIECHV director reviewed and commented on the plan.
<input checked="" type="checkbox"/> State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children’s emotional and mental health)	The Tulane Institute for Infant and Early Childhood Mental Health was engaged in the preparation of the plan as well as the Office of Public Health.
<input checked="" type="checkbox"/> State/Territory agency responsible for child welfare	The Child Welfare program is housed in DCFS which provides opportunities

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<b>Agency/Entity</b>	<b>Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan</b>
	for consultation on the use and administration of child care services with the Child Welfare program including quality initiatives.
<input type="checkbox"/> State/Territory liaison for military child care programs or other military child care representatives	
<input type="checkbox"/> State/Territory agency responsible for employment services/workforce development	
<input checked="" type="checkbox"/> State/Territory agency responsible for Temporary Assistance for Needy Families (TANF)	The TANF program is housed in DCFS which provides opportunities for consultation on the use and administration of child care services with the TANF program including quality initiatives.
<input type="checkbox"/> Indian Tribes/Tribal Organizations <input type="checkbox"/> N/A: No such entities exist within the boundaries of the State	
<input type="checkbox"/> Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	
<input checked="" type="checkbox"/> Provider groups, associations or labor organizations	The draft Plan was presented to the LA Advisory Council on Child Care and Early Childhood Education. While its members which include the Child Care Association of LA (CCAL), LA Early Childhood Association, and the LA Association for the Education of Young Children (LAEYC) additional meetings were held to ensure that all interested stakeholders were consulted.
<input type="checkbox"/> Parent groups or organizations	
<input checked="" type="checkbox"/> Local community organizations (child care resource and referral, Red Cross)	CCR&R agencies are DCFS contractors. Agency staff were asked to review and comment on the draft Plan. Their comments were incorporated as appropriate.
<input checked="" type="checkbox"/> Other	The LA Partnership for Children and Families whose members include United Way, LA Education's Next Horizon, and others were asked to review the plan and provided extensive comments.

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

At a minimum, the description should include:

**Please NOTE all dates are tentative**

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- a) Date(s) of notice of public hearing: tentative date: **5/17/2013**  
**Reminder** - Must be at least 20 days prior to the date of the public hearing.
- b) How was the public notified about the public hearing? **Newspaper, website, and email distribution to interested parties**
- c) Date(s) of public hearing(s): tentative date **6/10/2013**  
**Reminder** - Must be no earlier than 9 months before effective date of Plan (October 1, 2013).
- d) Hearing site(s): **DCFS Iberville Bldg, Baton Rouge, LA**
- e) How was the content of the Plan made available to the public in advance of the public hearing(s)? **Posted on DCFS website**
- f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan?

**All comments will be reviewed by the lead agency staff and executive management and incorporated into the plan as appropriate.**

### **1.4.3. Describe any strategies used by the Lead Agency to increase public consultation on the Plan or access to the public hearing.**

For example, translating the public hearing notice into multiple languages, using a variety of sites or technology (e.g., video) for the public hearing, holding the hearing at times to accommodate parent and provider work schedules. \_\_\_\_\_

## **1.5. Coordination Activities to Support the Implementation of CCDF Services**

Lead Agencies are required to *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)).

**Definition** - *Coordination* involves child care and early childhood and school-age development services efforts to work across multiple entities, both public and private (such as in connection with a State Early Childhood Comprehensive System (SECCS) grant or the State Advisory Council funded under the Head Start Act of 2007). (658D(b)(1)(D), §§98.12(a), 98.14(a)(1))

Note: Descriptions of how governments are organized for each State are provided at: [http://www2.census.gov/govs/cog/all\\_ind\\_st\\_descr.pdf](http://www2.census.gov/govs/cog/all_ind_st_descr.pdf).

### **1.5.1. Identify and describe in the table below with whom the Lead Agency coordinates in the delivery of child care and early childhood and school-age services (§98.14(a)(1)).**

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	<b>Agency/Entity (check all that apply)</b>	<b>Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services</b>	<b>Describe results expected from the coordination</b>  Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
<input checked="" type="checkbox"/>	<p>Representatives of general purpose local government <b>(required)</b></p> <p>This may include, but is not limited to: representatives from counties and municipalities, local education representatives, or local public health agencies.</p>	<p>Collaboration with LDE will provide regular communication describing efforts to improve school readiness at the community level through coordination of early care and education services initially in the Community Network Pilots and then in networks throughout LA.</p>	<p>Through coordination partners will increase access to training and support across early education settings. Parents will have more information about goal of school readiness and be engaged to develop options that build local capacity.</p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for public education <b>(required)</b></p> <p>This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21<sup>st</sup> Century Community Learning Centers), or higher education;</p>	<p>Act 3 requires collaboration to streamline access, align standards, improve quality, and maximize funding of early care and education services.</p>	<p>The goal of improved access, quality, and child outcomes across the early care and education system may be more readily seen in mixed or diverse delivery. The School Readiness Tax Credit (SRTC) for teachers and staff is available in quality rated child care centers. This refundable credit encourages recruitment and retention in child care.</p> <p>Diverse delivery provides parents access to high quality choices based on their family's needs.</p>
<input checked="" type="checkbox"/>	<p>Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services <b>(required)</b></p>	<p>Through BrightStart (SAC) ongoing interaction with providers and agencies is facilitated. In addition Mental Health Consultation (MHC) is offered to providers in the QRIS and the CNP.</p>	<p>Enhanced service coordination at the state and local level. Through MHC all children, staff and families receive support to achieve healthy behavioral, social, and emotional development.</p>

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<p><b>Agency/Entity (check all that apply)</b></p>	<p><b>Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services</b></p>	<p><b>Describe results expected from the coordination</b></p> <p>Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.</p>
<p><input checked="" type="checkbox"/> State/Territory agency responsible for public health <b>(required)</b></p> <p>This may include, but is not limited to, the agency responsible for immunizations and programs that promote children’s emotional and mental health</p>	<p>Regular interaction and ongoing meetings related to implementation of Act 3 and participation in SAC. In addition this agency is an integral partner in developing and responding to child care emergency and disaster planning.</p>	<p>Improved communication and coordination related to regulation for providers.</p>
<p><input checked="" type="checkbox"/> State/Territory agency responsible for employment services / workforce development <b>(required)</b></p>	<p>CCR&amp;R participate in Workforce Investment Board meetings.</p>	<p>Enhanced use of Workforce Investment Activity (WIA) funds for professional learning that will articulate to post secondary credit for caregiver/teachers. These funds will augment those distributed through the LA Pathways Scholarship to individuals who work with or want to work with Louisiana’s young children.</p>
<p><input checked="" type="checkbox"/> State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies<b>(required)</b></p>	<p>Lead Agency is TANF agency. DCFS has developed Community Partners who are local human service agencies to support outreach and communication efforts at the local level. Community Partners will be asked to review draft Plan and provide comments. In addition, DCFS will provide information to LDE about Community Partners to facilitate local outreach efforts related to early care and education opportunities.</p>	<p>Families will have information and improved access to early childhood services.</p>
<p><input checked="" type="checkbox"/> Indian Tribes/Tribal Organizations <b>(required)</b></p> <p><input type="checkbox"/> N/A: No such entities exist within the boundaries of the State</p>	<p>Tribal leaders were consulted on the plan draft and asked if needs for early care and education services have been identified in their tribes.</p>	<p>The goal is to ensure that all families have access to high quality services.</p>

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<p><b>Agency/Entity (check all that apply)</b></p>	<p><b>Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services</b></p>	<p><b>Describe results expected from the coordination</b></p> <p>Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.</p>	
<p><b>For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery</b></p>			
<input type="checkbox"/>	<p>State/Territory agency with the Head Start Collaboration grant</p>	<p>An integral partner in the Child Development and Early Learning Section, the Head Start State Collaboration Office (HSSCO) Director participates in initiatives to support coordination.</p>	<p>Alignment of standards and access to training and technical assistance.</p>
<input type="checkbox"/>	<p>State/Territory agency responsible for Race to the Top – Early Learning Challenge (RTT-ELC)  <input checked="" type="checkbox"/> N/A: State/Territory does not participate in RTT-ELC</p>		
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)</p>	<p>Information will be provided for distribution to contracted sponsors to use in training.</p>	<p>Providers not involved in Act 3 efforts will have access to information about school readiness goals.</p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for programs for children with special needs             This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs</p>	<p>Lead Agency staff are members of the State Interagency Coordinating Council (SICC) and a SAC workgroup on Inclusion has begun meeting.</p>	<p>An expected result of this coordination is the development of a process for determination of special need for use in CCAP funding. This will be used in Community Network Pilots to support greater inclusion of children with special needs who also qualify for CCAP.</p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant</p>	<p>Staff are part of the SAC and involved in planning and implementation of Act 3.</p>	<p>Better coordination of services particularly related to transition of children to prekindergarten services.</p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for child welfare</p>	<p>Frequent interaction to review number of children served and to examine policy/process.</p>	<p>Policy alignment, optimal use of funds and process streamlining.</p>
<input type="checkbox"/>	<p>State/Territory liaison for military child care programs or other military child care representatives</p>		

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	<b>Agency/Entity (check all that apply)</b>	<b>Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services</b>	<b>Describe results expected from the coordination</b>  Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
<input checked="" type="checkbox"/>	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	Staff participate in opportunities when appropriate.	Access to national models and best practice.
<input checked="" type="checkbox"/>	Local community organizations (child care resource and referral, Red Cross)	Ongoing interaction.	Improved coordination of services especially those related to emergency preparation, planning and recovery
<input checked="" type="checkbox"/>	Provider groups, associations or labor organizations	Through frequent meetings and engagement at conferences.	Enhanced provider communication.
<input checked="" type="checkbox"/>	Parent groups or organizations	Intentional contact to provide information.	Communication and information from parents
<input checked="" type="checkbox"/>	Other: Advocacy groups	Ongoing interaction through SAC and individually	Improved access to information and resources across agencies, public/private entities, etc.

**1.5.2. Does the State/Territory have a formal early childhood and/or school-age coordination plan?**

Lead Agencies are not required to have an early childhood nor a school-age coordination plan, but the State/Territory may have such plans for other purposes, including fulfilling requirements of other programs.

- Yes. If yes,
  - a) Provide the name of the entity responsible for the coordination plan(s): **Early Care and Education Network – LDE/BESE**
  - b) Describe the age groups addressed by the plan(s): **birth to five**
  - c) Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):
    - Yes
    - No
  - d) Provide a web address for the plan(s), if available: \_\_\_\_\_
- No



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### 1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs?

(658D(b)(1)(D), §98.14(a)(1))

Check which entity(ies), if any, the State/Territory has chosen to designate.

State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.

If yes, describe entity, age groups and the role of the Lead Agency \_\_\_\_\_

State Advisory Council (as described under the Head Start Act of 2007).

If yes, describe entity, age groups and the role of the Lead Agency

BrightStart serves as the SAC and was designated by the Governor in 2009 to support coordination of services (birth to five) across agencies with broad stakeholder involvement.

Local Coordination/Council

If yes, describe entity, age groups and the role of the Lead Agency \_\_\_\_\_

Other.

Describe \_\_\_\_\_

None

### 1.5.4. 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? (§98.16(d))

Yes. If yes, **describe** these activities or planned activities, including the tangible results expected from the public-private partnership

Community Network Pilots require involvement of child care programs serving publicly funded children and encourages the involvement of community organizations. BrightStart has identified a Pilot Advisory Workgroup to ensure that efforts and success related to pilot activities are identified and shared. In addition the SRTC includes a business credit to provide support directly to child care or to CCR&R agencies.

No.

### 1.6. Child Care Emergency Preparedness and Response Plan

It is recommended, but not required, that each Lead Agency develop a plan to address preparedness, response, and recovery efforts specific to child care services and programs. Plans should cover the following areas: 1) planning for continuation of services to CCDF families; 2) coordination with other State/Territory agencies and key partners; 3) emergency preparedness regulatory requirements for child care providers; 4) provision of temporary child care services after a disaster; and 5) rebuilding child care after a disaster. For further guidance on developing Child Care Emergency Preparedness and Response Plans see the Information Memorandum (CCDF-ACF-IM-2011-01) located on the Office of Child Care website at:

<http://www.acf.hhs.gov/programs/occ/resource/im-2011-01>



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### 1.6.1. 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.
- Developed.** A plan has been developed and put into operation as of October 6, 2011, if available. Provide a web address for this plan, if available: **draft**
- Other. Describe:**

### 1.6.2. Indicate which of the core elements identified in the Information Memorandum are or will be covered in the Lead Agency child care emergency preparedness and response plan.

Check which elements, if any, the Lead Agency includes in the plan.

- Planning for continuation of services to CCDF families
- Coordination with other State/Territory agencies and key partners
- Emergency preparedness regulatory requirements for child care providers
- Provision of temporary child care services after a disaster
- Restoring or rebuilding child care facilities and infrastructure after a disaster
- None

**PART 2**

**CCDF SUBSIDY PROGRAM ADMINISTRATION**

This section focuses on the child care assistance program. Lead Agencies are asked to describe their efforts to inform parents about the CCDF subsidy program and application policies and procedures, eligibility criteria, sliding fee scale, payment rate policies and procedures, and how Lead Agencies ensure continuity of care and parental choice of high quality settings for families.

**2.1. Administration of the Program**

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b), §98.11(a))

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

Identify the level at which the following CCDF program rules and policies are established.

- Eligibility rules and policies (e.g., income limits) are set by the:
  - State/Territory
  - Local entity. If checked, identify the type of policies the local entity(ies) can set \_\_\_\_\_
  - Other. Describe: \_\_\_\_\_
- Sliding fee scale is set by the:
  - State/Territory
  - Local entity. If checked, identify the type of policies the local entity(ies) can set \_\_\_\_\_
  - Other. Describe: \_\_\_\_\_
- Payment rates are set by the:
  - State/Territory
  - Local entity. If checked, identify the type of policies the local entity(ies) can set \_\_\_\_\_
  - Other. Describe: **Market Rate Survey: A survey of providers to determine the rates charged for child care.**

**2.1.2. How is the CCDF program operated in your State/Territory?**

In the table below, identify which agency(ies) performs these CCDF services and activities.

Implementation of CCDF Services/Activities	Agency (Check all that apply)
<b>Who determines eligibility?</b>	<input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____

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Implementation of CCDF Services/Activities	Agency (Check all that apply)
<p><b>Note:</b> If different for families receiving TANF benefits and families not receiving TANF benefits, please describe: _____</p>	<input type="checkbox"/> Local government agencies such as county welfare or social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input checked="" type="checkbox"/> Other. Describe. <b>TANF/FITAP applicants and recipients, who need Child Care Assistance in order to satisfactorily participate in the STEP Program, as determined by their worker, are categorically eligible for CCAP payments when they select an eligible provider. An application form is not required. The need for Child Care Assistance is explored with the participant during the Family Assessment (OFS 4FA) which is completed at initial application.</b>
<p><b>Who assists parents in locating child care (consumer education)?</b></p>	<input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ <input type="checkbox"/> Local government agencies such as county welfare or social services departments <input checked="" type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____
<p><b>Who issues payments?</b></p>	<input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ <input type="checkbox"/> Local government agencies such as county welfare or social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____
<p><b>Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc)</b></p>	<p><b>Payments are issued to the provider electronically through direct deposit into the child care provider's bank account or by stored value card.</b></p>
<p><b>Other. List and describe:</b></p>	

## 2.2. Family Outreach and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a)-(e). **Note** - For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

### 2.2.1. By whom and how are parents informed of the availability of child care assistance services under CCDF? (658E(c)(2)(A), §98.30(a))

Check all agencies and strategies that will be used in your State/Territory.

- CCDF Lead Agency
- TANF offices
- Other government offices
- Child care resource and referral agencies

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- Contractors
- Community-based organizations
- Public schools
- Internet (provide website): [www.dcfslouisiana.gov](http://www.dcfslouisiana.gov)
- Promotional materials
- Community outreach meetings, workshops or other in-person meetings
- Radio and/or television
- Print media
- Other. Describe: **Child Care Providers also inform parents of availability of assistance.**

### 2.2.2. How can parents apply for CCDF services?

Check all application methods that your State/Territory has chosen to implement.

- In person interview or orientation
- By mail
- By Phone/Fax
- Through the Internet (provide website) [www.dcfslouisiana.gov](http://www.dcfslouisiana.gov)
- By Email
- Through a State/Territory Agency
- Through an organization contracted by the State/Territory
- Other. Describe:

**Community Partners - DCFS community partners are local organizations that already serve the public, such as school health centers, food pantries, Councils on Aging and churches. They provide more convenient ways for clients to access services without having to visit a DCFS office. Community partner services range from assistance with online applications to information about DCFS services.**

### 2.2.3. Describe how the Lead Agency provides consumer education to parents applying for CCDF assistance to promote informed choices. about the quality of care provided by various providers in their communities.

Lead Agencies must certify that the State/Territory 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)(G), §98.33).

For example, memorandums of understanding with resource and referral agencies to provide consumer education to families applying for CCDF assistance, providing parents with provider lists showing licensing history and/or Quality Rating and Improvement System (QRIS) ratings, or informational brochures that address importance of quality and different care options available.

**The application form for the Child Care Assistance Program (CCAP) identifies provider types that may be chosen to provide care. A Child Care Assistance Program brochure, which informs parents of the various provider types they may select from, is given or mailed with each application.**

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The agency website also informs parents of the provider types they may select from and lists the contracted CCR&R agencies for parents to contact for information and assistance.

When parents apply for CCAP, a CCAP Rate and Availability Verification Letter is issued and parents are given contact information for their regional contracted CCR&R agency for assistance in selecting a provider.

The CCR&R agencies provide consumer education and referrals to parents and include how to recognize quality child care while providing referrals to child care that meets the family's specific needs. These referral conferences also provide information about how to access the licensing compliance history and describe the complaint process. In addition CCR&R agencies provide information and direct parents to the Quality Start Child Care Rating System website where they can find out more about the rating system. Various searches are available such as search by parish, by name of center, and by star rating.

### **2.2.4. Describe how the Lead Agency will support child care programs to increase the likelihood that CCDF-served children receive higher quality care as defined in your State/Territory.**

*For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to participate in the subsidy program such as tiered reimbursement, or incentives used to support high quality programs in rural, suburban, urban, and low-income communities.*

The Quality Start Child Care Rating System places an incentive on caring for children in the subsidy and/or child welfare system by issuing quarterly bonuses. These quarterly bonuses encourage providers to accept low-income children and children in protective services while supporting the center to maintain rates which are accessible to all families. The bonus amounts are 3, 8, 13.5, and 20 percent of CCAP payments during the previous quarter for 2 – 5 star-rated centers respectively. These efforts are designed to support equal access to quality child care for low-income children.

To increase access to care for low-income children with special needs, higher special needs rates may be paid for children up to age 18, if verified by a physician or licensed psychologist that special care is required and verification is obtained that the provider is delivering that specialized care. This special needs care includes, but is not limited to, specialized facilities/equipment, lower staff ratio, and/or specially trained staff.

To encourage the availability of infant and toddler care for low-income families, separate higher maximum rates may be paid for the care of infants and toddlers (children under the age of three) if the child care provider charges a higher rate for those children. Community Network Pilot participants with 3-5 stars will receive a higher reimbursement rate to support their movement to the outcomes-based rating system.

To incentivize participating in the voluntary quality rating and improvement system, Louisiana has implemented the Louisiana School Readiness Tax Credits (SRTC). The SRTC is a package of tax credits which are available to families, child care providers, child care teachers and directors, and businesses that support and/or participate in Quality Start. The SRTC particularly incentivizes higher quality for CCDF-served children as the credit for providers is based on the number of children served who receive Child Care Assistance or are in protective services, and

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increases in amount with the number of stars. Similarly, the credit for families increases based upon the number of stars of the center.

Mental Health Consultation services are also available to providers participating in QRIS.

## 2.2.5. Describe how the Lead Agency promotes access to the CCDF subsidy program? Check the strategies implemented by your State/Territory.

- Provide access to program office/workers such as:
  - Providing extended office hours
  - Accepting applications at multiple office locations
  - Providing a toll-free number for clients
  - Email/online communication
  - Other. Describe:
- Using a simplified eligibility determination process such as:
  - Simplifying the application form (such as eliminating unnecessary questions, lowering the reading level)
  - Developing a single application for multiple programs
  - Developing web-based and/or phone-based application procedures
  - Coordinating eligibility policies across programs. List the program names.

Child Care Assistance Program (CCAP), Family Independence Temporary Assistance Program (FITAP), Kinship Care Subsidy Program, Supplemental Nutrition Assistance Program (SNAP) and the Strategies to Empower People (STEP) Program (TANF)

- Streamlining verification procedures, such as linking to other program data systems
- Providing information multi-lingually
- Including temporary periods of unemployment in eligibility criteria (job search, seasonal unemployment). Length of time \_\_\_\_\_ (Note: this period of unemployment should be included in the Lead Agency's definition of working, or job training/educational program at 2.3.3).
- Other. Describe: \_\_\_\_\_
- Other. Describe: **DCFS Community Partners**
- None

## 2.2.6. Describe the Lead Agency's policies to promote continuity of care for children and stability for families.

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

- Provide CCDF assistance during periods of job search. Length of time \_\_\_\_\_
- Establish two-tiered income eligibility to allow families to continue to receive child care subsidies if they experience an increase in income but still remain below 85% of State median income (SMI)
- Synchronize review date across programs. List programs:

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Child Care Assistance Program (CCAP), Family Independence Temporary Assistance Program (FITAP), Kinship Care Subsidy Program, Supplemental Nutrition Assistance Program (SNAP) and the Strategies to Empower People (STEP) Program (TANF)

- Longer eligibility re-determination periods (e.g., 1 year). Describe:

Eligible Low-Income Child Care (LI-CC) cases are assigned certification periods of up to 12 months.

Certification periods may be shortened if it is known that a change is expected to occur within 12 months that affects eligibility or the amount of benefits, such as the only child in care will reach age 13 and is not disabled, a participant will complete a job training or educational program, or for a FITAP case no later than the month following the expected date of delivery of a child.

LI-CC cases have certifications that match the Supplemental Nutrition Assistance Program. Eligible STEP-Child Care cases can, in rare instances, be certified for a period not to exceed 24 months.

For protective services cases, the Case Plan is reviewed every six months including the need for child care and, if indicated, child care could be reauthorized for an additional three to six months.

- Extend periods of eligibility for families who are also enrolled in either Early Head Start or Head Start and pre-k programs. Describe \_\_\_\_\_
- Extend periods of eligibility for school-age children under age 13 to cover the school year. Describe \_\_\_\_\_
- Minimize reporting requirements for changes in family's circumstances that do not impact families' eligibility, such as changes in income below a certain threshold or change in employment
- Individualized case management to help families find and keep stable child care arrangements. Describe:

A Family Success Agreement (FSA) is a mutually-developed contract between a work-eligible FITAP recipient, on behalf of their family, and the department. The FSA sets forth mutual and time-bound responsibilities, expectations, activities, and goals designed to transition the family from receipt of FITAP (TANF) to self-sufficiency.

When developing the FSA, the following things are identified:

- barriers and possible solutions to those barriers, and how the barriers impact the clients ability to obtain and retain employment, and
- support systems available to the client through family or friends and how they can be used to ensure success.

Clients are held responsible for arranging activities, services, and resources whenever possible. These include arranging child care and transportation, registering for educational activities, and any other activities that lead to self-sufficiency.



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In addition, when a TANF case loses eligibility due to earned income at the time of closure, there is a seamless transition from STEP- CC to LI-CC to ensure continuity of care.

- Using non-CCDF Funds to continue subsidy for families who no longer meet eligibility, such as for children who turn 13 years of age during the middle of a program year
- Other. Describe Additional need for care is authorized for school age children during holiday/summer breaks.
- None

### 2.2.7. How will the Lead Agency provide outreach and services to eligible families with limited English proficiency?

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

- Application in other languages (application document, brochures, provider notices)
- Informational materials in non-English languages
- Training and technical assistance in non-English languages
- Website in non-English languages
- Lead Agency accepts applications at local community-based locations
- Bilingual caseworkers or translators available
- Outreach Worker
- Other: See Below.
- None

**If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered.**

The Department of Children and Family Services (DCFS) has contracted with the Language Line which provides immediate access to interpreters in over 170 languages. Applications for assistance and forms are available in Spanish and Vietnamese.

### 2.2.8. How will the Lead Agency overcome language barriers with providers?

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

- Informational materials in non-English languages
- Training and technical assistance in non-English languages
- CCDF health and safety requirements in non-English languages
- Provider contracts or agreements in non-English languages
- Website in non-English languages
- Bilingual caseworkers or translators available
- Other: See Below
- None



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**If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered.**

DCFS has contracted with the Language Line which provides immediate access to interpreters in over 170 languages.

## 2.2.9. Describe how the Lead Agency documents and verifies applicant information using the table below. (§98.20(a))

Check the strategies that will be implemented by your State/Territory. **Attach** a copy of your parent application for the child care subsidy program(s) as **Attachment 2.2.9** or provide a web address, if available

[http://www.dcfslouisiana.gov/assets/docs/searchable/ChildDevEarlyLearning/CCAP/CCAP\\_002\\_Frm\\_Application\\_for\\_Child\\_Care\\_Assistance.pdf](http://www.dcfslouisiana.gov/assets/docs/searchable/ChildDevEarlyLearning/CCAP/CCAP_002_Frm_Application_for_Child_Care_Assistance.pdf)

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

<b>The Lead Agency requires documentation of:</b>	<b>Describe how the Lead Agency documents and verifies applicant information:</b>
<input type="checkbox"/> Applicant identity	The Lead Agency does not require an applicant to verify identity when applying for the Child Care Assistance Program (CCAP). Verifying identity is not a federal regulation and therefore, not required for CCAP eligibility.
<input checked="" type="checkbox"/> Household composition	A Child Care Assistance household is defined as individuals who live together. The child must be living with the head of household more than half the time to be included as a household member. Factors affecting the composition of the household must be verified only if questionable. The following individuals who live together must be included in the Child Care Assistance household: head of household; head of household's legal spouse or non-legal spouse (including a disabled adult parent who is unable to care for himself/herself and his/her children who are in need of care as verified by a doctor's statement or by worker determination); and all children under the age of 18 who are dependent on the head of household and/or spouse or non-legal spouse including foster children, the Minor Unmarried Parent (MUP) who is not legally emancipated, and the MUP's children.
<input type="checkbox"/> Applicant's relationship to the child	The Lead Agency does not require that the applicant be related to the child for whom they are applying for CCAP. Verifying relationship is not a federal regulation and therefore, not required for CCAP eligibility. The Lead Agency accepts the client's

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The Lead Agency requires documentation of:	Describe how the Lead Agency documents and verifies applicant information:
	statement as sufficient documentation for verifying relationship to a child. Additionally, when the Lead Agency verifies the age of a child, the verification provided generally shows that the applicant's relationship corresponds to the client's statement.
<input checked="" type="checkbox"/> Child's information for determining eligibility (e.g., identity, age, etc.)	Staff must verify the age of each child in the household under 18 years of age: at initial certification, and when adding a child. The preferred documents for verifying a child's age include an official birth record, or a baptismal certificate from a church with valid records. If these do not exist, other sources of verification include passports, naturalization papers, United States Citizenship and Immigration Services (USCIS) documentation, insurance policies over three years old, church records, medical records, U.S. Census records, immunization or other Health Unit records, school records, or other reliable documents. The document must include the child's name and date of birth.
<input checked="" type="checkbox"/> Work, Job Training or Educational Program	Employment and Training (E&T) activity hours must be verified for each Training or Employment Mandatory Participant (TEMP). The anticipated date of completion for a job-training or educational program must be verified. Acceptable forms of verification include: check stubs, a Current Past or Anticipated Wage Verification Letter (OFS 87) form, statement from the employer, self-employment records, statement from job-training or educational program, or an official class schedule.
<input checked="" type="checkbox"/> Income	Non-exempt income must be verified at initial application, redetermination, and when reported as an interim change. Sources of earned income verification may include pay stubs; W-2 forms income tax returns, sales records, and employers' statements. Sources of unearned income verification may include SIEVS query, award letters, BENDEX, SDX, court orders to verify support payments and statement. Staff must document verification and computation of household income at the initial application, when a change is reported, and at each redetermination or subsequent application (recording all sources, amounts, dates and computations).
<input checked="" type="checkbox"/> Other. Describe	Sufficient evidence of immunity or immunization against vaccine-preventable diseases recommended by the Office of Public Health schedule must be provided for each child in need of care less than 18 years of age. Sufficient evidence that such an immunization program is up-to-date or in progress may be substituted for proof of immunity or immunization and must be obtained at initial application, redetermination, and when assistance is requested for an additional child.

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

Time limit for making eligibility determinations. Describe length of time:

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The application for assistance must be processed and a notice of decision must be sent within 30 days of the application date.

- Track and monitor the eligibility determination process
- Other. Describe

Applications which pend over 30 days and redeterminations which are not extended or closed by the last workday of the month must be reported as being out of conformity. Each case that is not processed within these timeframes is reported on the Out of Conformity Parish Report (OFS OC 1). The report includes an explanation of the reason the case was processed untimely and the corrective action taken to eliminate or minimize its recurrence.

None

**2.2.11. Are the policies, strategies or processes provided in questions 2.2.1 through 2.1.10 different for families receiving TANF?** (658E(c)(2)(H) & (3)(D), §§98.16(g)(4), 98.33(b), 98.50(e))

- Yes. If yes, describe:

TANF/FITAP applicants and recipients who need Child Care Assistance in order to satisfactorily participate in the STEP Program, as determined by their worker, are categorically eligible for CCAP payments when they select an eligible provider. An application form is not required. The need for Child Care Assistance is explored with the participant during the Family Assessment (OFS 4FA) which is completed at initial application.

No.

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

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

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE:** The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

- a) Identify the TANF agency that established these criteria or definitions:  
State/Territory TANF Agency: **The Department of Children and Family Services**

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

- "appropriate child care": child care provided by any state-licensed facility; child care provided by a state-registered provider; or child care provided by a state-certified relative or private party of the parent's choice.
- "reasonable distance": within a reasonable distance, which is defined as within 30 minutes, from the participant's home or worksite
- "unsuitability of informal child care": child care is unavailable or unsuitable if basic health and safety standards are not met.
- "affordable child care arrangements": child care is unavailable if costs exceed established maximum limits for the state-administered CCAP.

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

- In writing  
 Verbally  
 Other: \_\_\_\_\_

## **2.3. Eligibility Criteria for Child Care**

In order to be eligible for services, children must (1) be under the age of 13, or under the age of 19 if the child is physically or mentally disabled or under court supervision; (2) reside with a family whose income is less than 85 percent of the State's median income for a family of the same size; and (3) reside with a parent or parents who is working or attending job training or an educational program; or (4) be receiving or needs to receive protective services. (658P(3), §98.20(a))

### **2.3.1. How does the Lead Agency define the following eligibility terms?**

- residing with - Customarily residing more than half of the time with the parent or guardian who is applying for Child Care Assistance. A child is considered to be residing with a parent or guardian during scheduled absences lasting up to six weeks, if there are definite plans for the child to return to live with that parent or guardian.
- *in loco parentis*: *in loco parentis* – An individual who is responsible for the care, supervision, and financial support of a child residing with the individual more than half of the time, if the child's parent is not living in the home.

### **2.3.2. Eligibility Criteria Based Upon Age**

a) The Lead Agency serves children from 0 weeks to the end of the month of the child's 12<sup>th</sup> birthday (may not equal or exceed age 13).

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

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Yes, and the upper age is the end of the month of the child's 18<sup>th</sup> birthday (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity –

Physically, mentally, or emotionally incapable of caring for oneself as verified by a physician or licensed psychologist, or by receipt of SSI (applies to children age 13 through 17).

No

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

Yes, and the upper age is end of the month of the child's 18<sup>th</sup> birthday (may not equal or exceed age 19)

No.

### 2.3.3. Eligibility Criteria Based Upon Work, Job Training or Educational Program

a) How does the Lead Agency define “working” for the purposes of eligibility? Provide a narrative description below, including allowable activities and if a minimum number of hours is required.

**Reminder** – Lead Agencies have the flexibility to include any work-related activities in its definition of working including periods of job search and travel time. (§§98.16(f)(3), 98.20(b))

- **working:** Employed an average of 30 hours or more per week and paid at least at the federal minimum hourly wage, except for those receiving cash assistance

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program? (§§98.16(g)(5), 98.20(b))

Yes. If yes, how does the Lead Agency define “attending job training or educational program” for the purposes of eligibility? Provide a narrative description below.

**Reminder** – Lead Agencies have the flexibility to include any training or education-related activities in its definition of job training or education, including study time and travel time.

- attending job training or educational program: Present at the training site for job training or in the classroom for educational programs for a minimum average of 30 hours per week.
- No.

**2.3.4. Eligibility Criteria 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, how does the Lead Agency define “protective services” for the purposes of eligibility? Provide a narrative description below.

**Reminder** – Lead Agencies have the flexibility to define protective services beyond formal child welfare or foster care cases. Lead Agencies may elect to include homeless children and other vulnerable populations in the definition of protective services.

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

- *protective services* – those services offered on behalf of individuals under 13 years of age who are in danger or threatened with danger, of abuse, neglect or exploitation, or are without proper custody or guardianship; and the need for such services has been determined by the state agency charged with responsibility for the provision of abuse/neglect complaint investigations. Only children in protective care are eligible for respite care. The State considers children in foster care to be in protective services.

No.

b) 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.

**2.3.5. Income Eligibility Criteria**

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

- *income*: any type of payment that is of gain or benefit to a household. Income is either non-exempt or exempt from the budgeting process.

b) Which of the following sources of income, if any, will the Lead Agency exclude or deduct from calculations of total family income for the purposes of eligibility

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determination? Check any income the Lead Agency chooses to exclude or deduct, if any.

- Adoption subsidies
- Foster care payments
- Alimony received or paid
- Child support received
- Child support paid
- Federal nutrition programs
- Federal tax credits
- State/Territory tax credits
- Housing allotments, Low-Income Energy Assistance Program (LIHEAP) or energy assistance
- Medical expenses or health insurance related expenses
- Military housing or other allotment/bonuses
- Scholarships, education loans, grants, income from work study
- Social Security Income
- Supplemental Security Income (SSI)
- Veteran's benefits
- Unemployment Insurance
- Temporary Assistance for Needy Families (TANF)
- Worker Compensation
- Other types of income not listed above:

Loans, gifts, contributions, reimbursements, in-kind income, disaster relief employment income; earnings received through Corporation for National and Community Service (CNCS); disaster unemployment compensation benefits, and allowable expenses associated with producing self-employment income.

None

c) Whose income will be excluded, if any, for purposes of eligibility determination? Check anyone the Lead Agency chooses to exclude, if any.

- Children under age 18
- Children age 18 and over – still attending school
- Teen parents
- Unrelated members of household
- All members of household except for parents/legal guardians
- Other:

The earnings of a household member under the age of 18 (unless the child must be included as a Temporary Employment Mandatory Participant (TEMP)), or a Minor Unmarried Parent (MUP) who is not legally-emancipated and whose children do not need child care assistance.

None

d) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF



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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 if lower than 85% SMI	
			(c) \$/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1	N/A	N/A	N/A	N/A
2	3723	3165	2060	55
3	4599	3609	2545	55
4	5475	4654	3030	55
5	6351	5398	3515	55

**Reminder** - Income limits must be provided in terms of State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. (§98.20(a)(2)). FY 2013 poverty guidelines are available at <http://aspe.hhs.gov/poverty/13poverty.cfm>

e) Will the Lead Agency have “tiered eligibility” (i.e., a separate income limit at re-determination to remain eligible for the CCDF program)?

Yes. If yes, **provide** the requested information from the table in 2.3.5d and **describe** \_\_\_\_\_.

**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.

f) SMI Year **2012** and SMI Source **Department of Health and Human Services, Administration for Children and Families**

g) These eligibility limits in column (c) became or will become effective on: **August 1, 2012**

**2.3.6. Eligibility Re-determination**

a) Does the State/Territory follow OCC’s 12 month re-determination recommendation? (See Program Instruction on Continuity of Care <http://www.acf.hhs.gov/programs/occ/resource/im2011-06>)

Yes

No. If no, what is the re-determination period in place for most families?

6 months

24 months

Other. Describe \_\_\_\_\_

Length of eligibility varies by county or other jurisdiction. Describe \_\_\_\_\_



**b) Does the Lead Agency coordinate or align re-determination periods with other programs?**

Yes.

No. If no, **check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.**

Head Start and/or Early Head Start Programs. Re-determination period \_\_\_\_\_

Pre-kindergarten programs. Re-determination period \_\_\_\_\_

TANF. Re-determination period:

Redeterminations are not conducted on STEP-Child Care cases. The STEP-Child Care participant remains eligible as long as the participant meets FITAP/STEP eligibility requirements and there is a need for child care.

SNAP. Re-determination period:

Certification periods for CCAP and SNAP are matched whenever possible. The CCAP certification may be shortened to match the SNAP redetermination or Periodic Report month.

Medicaid. Re-determination period \_\_\_\_\_

SCHIP. Re-determination period \_\_\_\_\_

Other. Describe \_\_\_\_\_

**c) Describe under what circumstances, if any, a family's eligibility would be reviewed prior to redetermination. For example, regularly scheduled interim assessments, or a requirement for families to report changes.**

Due to CCAP reporting requirements, families must report changes that affect their eligibility for the program or the agency payment amount.

**d) Describe any action(s) the State/Territory would take in response to any change in a family's eligibility circumstances prior to re-determination**

The agency advises the client of his/her responsibility to report changes and the types of changes he/she must report by giving the client a change report form at certification, redetermination, and any time the client reports a change using the change report form.

When a change is reported the agency makes a determination on the effect of the reported change on the household's eligibility and benefits.

Action is taken within 10 days to request the necessary verification, make the change, and notify the household. A reported change may result in an increase in payment amount, a decrease in payment amount, no change in payment amount, or ineligibility.

Additionally, the household's certification period may be shortened if the agency is aware of a change that is expected to occur within 12 months that affects eligibility.

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e) Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See [Information Memorandum on Continuity of Care](http://www.acf.hhs.gov/programs/occ/resource/im2011-06) for examples <http://www.acf.hhs.gov/programs/occ/resource/im2011-06> ).

Depending on the type of change, the household may not have to provide verification.

CCAP households may report changes by using a Child Care Assistance – Report of Changes form, by mail, FAX, e-mail, telephone, in person or through someone acting on their behalf. CCAP households included in a SNAP household have lesser reporting requirements since Louisiana follows Simplified Reporting rules for SNAP.

f) Does the Lead Agency use a simplified process at re-determination?

Yes. If yes, describe:

An eligibility determination must be conducted on LI-CC Child Care Assistance cases at least every 12 months.

On the 12th of each month, a Redetermination Notice is automatically generated and mailed to clients the next working day for LI-CC cases with redeterminations due the following month.

The notice informs the client that their redetermination is due; to submit an online application using the CAFÉ Customer Portal; and how to set up an account in CAFÉ. The notice also informs the client that their verification must be received no later than the first day of the last month of the certification period and that the timely reapplication date is the 15th day of the last month of the certification period. If the 15th falls on a weekend or holiday, the timely reapplication date is the next working day. The client has timely reapplied if the application is received or postmarked on or before the timely reapplication date.

No.

### 2.3.7. Waiting Lists

**Describe the Lead Agency's waiting list status.** Select **ONE** of these options.

- Lead Agency currently does not have a waiting list and:
  - All eligible families *who apply* will be served under State/Territory eligibility rules
  - Not all eligible families *who apply* will be served under State/Territory eligibility rules
- Lead Agency has an active waiting list for:
  - Any eligible family who applies when they cannot be served at the time of application

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- Only certain eligible families. Describe those families: \_\_\_\_\_
- Waiting lists are a county/local decision. Describe \_\_\_\_\_
- Other. Describe:

The Department of Children and Family Services (DCFS) currently does not utilize a waiting list and all eligible families who apply will be served under State/Territory eligibility rules. However, the Secretary of DCFS has the authority to implement an application “freeze” if there are insufficient funds to operate the Child Care Assistance Program.

### 2.3.8. Appeal Process for Eligibility Determinations

Describe the process for families to appeal eligibility determinations:

A Summary of Evidence is completed to provide information that is necessary to the claimant or his authorized agent in preparing for the hearing. Each applicant is informed by the application and by the appropriate notice when decisions are made affecting his case, of his right to a hearing, of the method by which a hearing may be requested and who may present his case. Detailed information concerning the Fair Hearing procedure is contained in the Fair Hearing Pamphlet, OFS 5F, which is provided by the worker when an agency conference is requested and the DCFS Bureau of Appeals when a Fair Hearing is requested. The claimant may represent himself at the hearing or be represented by any authorized agent such as legal counsel, a friend, a relative or other spokesperson.

### 2.4. Sliding Fee Scale and Family Contribution

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 (i.e., co-payment) to the cost of child care (658E(c)(3)(B) §98.42).

#### 2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1.

Will the attached sliding fee scale be used in all parts of the State/Territory?

Yes. Effective Date: August 2012

No. If no, attach other sliding fee scales and their effective date(s) as **Attachment 2.4.1a, 2.4.1b**, etc.

#### 2.4.2. What income source and year will be used in creating the sliding fee scale? (658E(c)(3)(B))

Check only one option.

- State Median Income, Year:
- Federal Poverty Level, Year:
- Income source and year varies by geographic region. Describe income source and year: \_\_\_\_\_

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Other. Describe income source and year: Both the 2012 State Median Income and the 2012 Federal Poverty Guidelines.

**2.4.3. How will the family’s contribution be calculated and to whom will it be applied?**

Check all that the Lead Agency has chosen to use. (§98.42(b))

- Fee is a dollar amount and
  - Fee is per child with the same fee for each child
  - Fee is per child and discounted fee for two or more children
  - Fee is per child up to a maximum per family
  - No additional fee charged after certain number of children
  - Fee is per family
- Fee is a percent of income and
  - Fee is per child with the same percentage applied for each child
  - Fee is per child and discounted percentage applied for two or more children
  - No additional percentage applied charged after certain number of children
  - Fee is per family
- Contribution schedule varies by geographic area. Describe: \_\_\_\_\_

Other. Describe:

TANF participants and protective services cases are categorically eligible if child care is needed. The child care costs charged by the provider are paid at 100%, not to exceed the state maximum rate.

The agency pays a certain percentage of authorized low-income child care costs that are charged by the provider. The sliding fee scale is used to determine the percentage that the agency will pay, based on the household's monthly income and the household size. The difference between the amount that the agency pays and the total amount charged by the provider for each child in care must be paid by the participant in the form of a co-payment. The provider is responsible for collecting this co-payment.

**If the Lead Agency checked more than one of the options above, describe:** N/A

**2.4.4. Will 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:

Low Income Child Care (LI-CC): Child care that is authorized for payment by the agency is based on the part-time or full-time employment and training activity hours, travel allowance (if applicable), and the time that care is actually needed and available. The

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family contribution is also based on the number of children in care. The agency does not set a maximum amount or family cap.

TANF: All STEP participants are categorically eligible if they select an eligible provider. These participants are eligible for 100% payment of eligible child care costs if the costs do not exceed the maximum allowable rates. This care can be either full-time or part-time.

Children in protective services may be eligible for 100% payment of eligible child care costs. Eligibility is determined on a case-by-case basis.

No.

### **2.4.5. 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)).

Select **ONE** of these options.

**Reminder** – Lead Agencies are reminded that the co-payments may be waived for only two circumstances - for families at or below the poverty level or on a case-by-case basis for children falling under the definition of “protective services” (as defined in 2.3.4.a).

- ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee. The poverty level used by the Lead Agency for a family of 3 is: \$\_\_\_\_\_
- SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The Lead Agency waives the fee for the following families:

TANF: Families who are STEP participants are not required to pay a fee if they select an eligible provider and the provider’s charge does not exceed the maximum allowable rate.

Children in protective services, on a case-by-case basis, are eligible for 100% payment. Providers caring for children in protective services are not allowed to charge an amount that exceeds the maximum allowable state rate.

### **2.5. Prioritizing Services for Eligible Children and Families**

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B), §98.44)

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**2.5.1. How will the Lead Agency prioritize child care services to children with special needs or in families with very low incomes?** (658E(c)(3)(B), §98.44)

Lead Agencies have the discretion to define *children with special needs* and *children in families with very low incomes*. Lead Agencies are not limited in defining *children with special needs* to only those children with physical or mental disabilities (e.g., with a formal Individual Education Plan (IEP) required under the Individuals with Disabilities Education Act (IDEA)). Lead Agencies could consider children in the child welfare system, children of teen parents, or homeless children as examples of *children with special needs*.

How will the Lead Agency prioritize CCDF services for:	Eligibility Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules
<p>Children with special needs</p> <p><b>Provide the Lead Agency definition of <i>Children with Special Needs</i></b></p> <p>A special needs child is a child through age 17 who, because of mental, physical or emotional disability, requires specialized facilities, lower staff ratio, and/or specially-trained staff to meet his or her developmental and physical needs. Incentive payments up to 25% higher than the regular rates can be allowed for a special needs child if the provider is actually providing the specialized care.</p>	<p><input type="checkbox"/> Priority over other CCDF-eligible families</p> <p><input checked="" type="checkbox"/> Same priority as other CCDF-eligible families</p> <p><input type="checkbox"/> Guaranteed subsidy eligibility</p> <p><input type="checkbox"/> Other. Describe _____</p>	<p><input type="checkbox"/> Yes. The time limit is: _____</p> <p><input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Different eligibility thresholds. Describe _____</p> <p><input checked="" type="checkbox"/> Higher rates for providers caring for children with special needs requiring additional care</p> <p><input type="checkbox"/> Prioritizes quality funds for providers serving these children</p> <p><input type="checkbox"/> Other. Describe _____</p>

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How will the Lead Agency prioritize CCDF services for:	Eligibility Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules
<p>Children in families with very low incomes</p> <p><b>Provide the Lead Agency definition of <i>Children in Families with Very Low Incomes</i> Families with income at or below the poverty level.</b></p>	<p><input type="checkbox"/> Priority over other CCDF-eligible families</p> <p><input checked="" type="checkbox"/> Same priority as other CCDF-eligible families</p> <p><input type="checkbox"/> Guaranteed subsidy eligibility</p> <p><input type="checkbox"/> Other. Describe _____</p>	<p><input type="checkbox"/> Yes. The time limit is: _____</p> <p><input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Different eligibility thresholds. Describe _____</p> <p><input type="checkbox"/> Waiving co-payments for families with incomes at or below the Federal Poverty Level</p> <p><input checked="" type="checkbox"/> Other. Describe Families with very low income are eligible for assistance at 80% which is the highest percentage of agency payment.</p>

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

**Reminder** - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF.

- Use priority rules to meet the needs of TANF families (describe in 2.5.1 or 2.5.3.)
- Waive fees (co-payments) for some or all TANF families who are below poverty level
- Coordinate with other entities (i.e. TANF office, other State/Territory agencies, and contractors)
- Other:

(a) TANF/STEP applicants and participants are eligible for 100% payment of the child care costs up to the appropriate state maximum allowable rate if they select an eligible provider.

(b) Families transitioning off of TANF/FITAP who are earning income at the time of TANF/FITAP closure receive one month of child care while their application is being considered for eligibility under the rules for low-income child care. These families continue to be eligible for 100% payment of eligible child care costs with an eligible provider during



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this month if the costs do not exceed the maximum allowable rates.

(c) Families with very low income are eligible for assistance at 80% which is the highest percentage of agency payment.

### 2.5.3. List and define any other eligibility conditions, priority rules and definitions that will be established by the Lead Agency. (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

**Reminder** – Lead Agencies are reminded that any eligibility criteria and terms provided below must comply with the eligibility requirements of §98.20 and provided in section 2.2. Any priority rules provided must comply with the priority requirements of §98.44 and provided in section 2.4.1.

If it were necessary to activate a waiting list, children in protective services, TANF/STEP applicants, and children with special needs would be served without being placed on the waiting list.

<b>Term(s)</b>	<b>Definition(s)</b>
Protective Services	Those services offered on behalf of individuals under 13 years of age who are in danger, or threatened with danger, of abuse, neglect or exploitation, or are without proper custody or guardianship; and need for such services has been determined by the state agency charged with responsibility for the provision of abuse/neglect complaint investigations. Only children in protective care are eligible for respite care. The State considers children in foster care to be in protective services.
TANF Families	Those families with dependent children who are eligible for cash assistance grants administered by DCFS, Family Independence Temporary Assistance Program (FITAP).
Special Needs Child	A child through age 17 who, because of a mental, physical, or emotional handicap, requires specialized facilities, lower staff ratio, and/or specially-trained staff to meet his or her developmental and physical needs, as verified by a physician or licensed psychologist.
Strategies to Empower People (STEP) Program	The STEP Program provides recipients of TANF/FITAP with job preparation, work and supportive services to enable them to leave the program and become self-sufficient.

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## **2.6. Parental Choice In Relation to Certificates, Grants or Contracts**

The parent(s) of each eligible child who receives or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A), §98.15(a)).

### **2.6.1. Child Care Certificates**

a) When is the child care certificate (also referred to as voucher or authorization) issued to parents? (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2))

- Before parent has selected a provider
- After parent has selected a provider
- Other. Describe \_\_\_\_\_

b) How does the Lead Agency inform parents that the child care certificate permits them to choose from a variety of child care categories, including child care centers, child care group homes, family child care homes, and in-home providers? (§98.30(e)(2))

- Certificate form provides information about choice of providers
- Certificate is not linked to a specific provider so parents can choose provider of choice
- Consumer education materials (flyers, forms, brochures)
- Referral to child care resource and referral agencies
- Verbal communication at the time of application
- Public Services Announcement
- Agency Website: [www.dcss.louisiana.gov](http://www.dcss.louisiana.gov)
- Community outreach meetings, workshops, other in person activities
- Multiple points of communication throughout the eligibility and renew process
- Other. Describe:

When an application is filed, a CCAP Rate and Availability Verification Letter (CCAP 7A) is given to the applicant to inform them of the child care settings they may select and how the provider type they choose will track their child's time and attendance.

The CCAP 7A gives parents/guardians contact information for their regional CCR&R Agency in case they need assistance in selecting a child care provider that meets their needs. However, the CCAP 7A is not considered the "Certificate"; the Notice of Certification and Payments (CCAP 13) is considered the "Certificate".

CCDF regulations require that a "Certificate" include the amount the agency will pay toward child care expenses and the length of the certification period and the CCAP 13 includes this information.

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The CCAP 13 is sent to notify households of their eligibility for CCAP, the effective begin and end dates of payments, and the maximum payment amount for each eligible child.

c) What information is included on the child care certificate? **Attach a copy of the child care certificate as Attachment 2.6.1.** (658E(c)(2)(A)(iii))

- Authorized provider(s)
- Authorized payment rate(s)
- Authorized hours
- Co-payment amount
- Authorization period
- Other. Describe:

The date child care began or will begin and the maximum DCFS payment amount for each eligible child.

d) What is the estimated proportion of services that will be available for child care services through certificates? **100%**

## 2.6.2. Child Care Services Available through Grants or Contracts

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b)). **Note:** Do not check “yes” if every provider is simply required to sign an agreement in order to be paid in the certificate program.

- Yes. If yes, **describe** the type(s) of child care services available through grants or contracts, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: \_\_\_\_\_
- No. If no, skip to 2.6.3.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following? Check the strategies, if any, that your State/Territory chooses to implement.

- Increase the supply of specific types of care
  - Programs to serve children with special needs
  - Wrap-around or integrated child care in Head Start, Early Head Start, pre-k, summer or other programs
  - Programs to serve infant/toddler
  - School-age programs
  - Center-based providers
  - Family child care providers
  - Group-home providers
  - Programs that serve specific geographic areas
    - Urban

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- Rural
- Other. Describe \_\_\_\_\_
- Support programs in providing higher quality services
- Support programs in providing comprehensive services
- Serve underserved families. Specify: \_\_\_\_\_
- Other. Describe \_\_\_\_\_

c) Are child care services provided through grants 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: \_\_\_\_\_

d) How are payment rates for child care services provided through grants/contracts determined? \_\_\_\_\_

e) What is the estimated proportion of direct services that will be available for child care services through grants/contracts? \_\_\_\_\_

**2.6.3. How will the Lead Agency inform parents and providers of policies and 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)**

Check the strategies that will be implemented by your State/Territory.

- Signed declaration
- Parent Application
- Parent Orientation
- Provider Agreement
- Provider Orientation
- Other. Describe:

This information is part of the CCAP Provider Agreement as well as in licensing requirements. CCR&R onsite technical assistance reviews the provider agreement with Family Child Day Care Home (FCDC) providers.

**2.6.4. The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. (§§98.16(g)(2), 98.30(e)(1)(iv))**

Will the Lead Agency limit the use of in-home care in any way?

- No
- Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all limits the Lead Agency will establish.
  - Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act
  - Restricted based on provider meeting a minimum age requirement

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- Restricted based on hours of care (certain number of hours, non-traditional work hours)
- Restricted to care by relatives
- Restricted to care for children with special needs or medical condition
- Restricted to in-home providers that meet some basic health and safety requirements
- Other. Describe

To be an in-home provider, individuals must be at least 18 years of age, complete and sign an In-Home Provider Agreement, complete and sign Form W-9, pay appropriate fees, verify their social security number, verify identity, verify residential address and meet certification requirements, including:

- certification that he/she has never been the subject of a validated complaint of child abuse or neglect or has never been convicted of or pled no contest to a crime listed in LA R.S. 15:587.1(C);
- submit verification of current certification in infant/child/adult Cardiopulmonary Resuscitation (CPR) and pediatric first aid;
- submit a criminal background check conducted by State Police indicating no enumerated conviction;
- complete the Health and Safety Standards Form;
- provide a statement of good health signed by a physician or his designee within the last three years. Statement must be updated every three years;
- have available at all times a working telephone that has the capability of placing outgoing calls and receiving incoming calls from the home where care is being provided; and
- participate in the system designated by the department for capturing time and attendance.

### **2.6.5. 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 Licensing Section investigates complaints (other than abuse and neglect) regarding a Department licensed facility. If the complaint is substantiated, a deficiency is written. Such deficiencies must be corrected to the satisfaction of the Licensing Section. Deficiencies involving Class A centers become part of the licensing file (except for names of individual children, etc.) which is public information and may be reviewed on the agency website.

The Licensing Section maintains files on all parental complaints and is the contact agency for information on parental complaints. The general public can request, in writing, information from complaint files. When the Licensing Section receives a request for information from a complaint file, the request is routed to the Department Bureau of General Counsel. The Department Bureau of General Counsel then determines what information contained in the file is public information and what information is not public information. The Department Bureau of General Counsel then mails a disclosure response letter to the requester detailing what information in the complaint file is available for viewing and/or copying.

The DCFS Child Welfare Section Child Protection Investigation Unit investigates complaints alleging abuse and/or neglect involving Class A Centers and Family Child Day Care Homes.

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Under the provision of La. R.S. 46:1426 and 46:56(F)(4)(c), a parent is entitled to know of each valid finding of child abuse, neglect or exploitation occurring at a facility or residence. La. R.S. 14:403 of the Louisiana Criminal Code prohibits disclosure of this information to any unauthorized person and provides criminal penalties of up to \$500 in fines/imprisonment for up to six months or both. If a complaint is not found valid, all information concerning the unsubstantiated complaint must be destroyed. Records/files of substantiated complaints of abuse and/or neglect are maintained by the Department. Complaints regarding abuse/neglect at FCDCHs are reported to local law enforcement.

### **2.7. Payment Rates for Child Care Services**

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

#### **2.7.1 Attach a copy of your payment rates as Attachment 2.7.1.**

Will the attached payment rates be used in all parts of the State/Territory?

- Yes. Effective Date: June 7, 2010  
 No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.1a, 2.7.1b**, etc.

#### **2.7.2. Which strategies, if any, will the Lead Agency use to ensure the timeliness of payments?**

- Policy on length of time for making payments. Describe length of time:

Payments are made to child care providers weekly, two weeks after care is provided. Every Monday night, Tracking of Times Services (TOTS) sends a Weekly Activity File containing attendance for the week to the Child Care Assistance Program System (CAPS) for payment. Every Tuesday night, CAPS pays for the attendance that is received in the Weekly Activity File. Deposits are available to providers within two business days. The pay cycle begins at 12:00 a.m. on Sunday and ends at 11:59 p.m. on Saturday. Providers are paid for absences on the first Tuesday following the 10th of each month following the month in which care was provided. If the 10th falls on a Tuesday, CAPS pays for attendance on the following Tuesday. Providers receive a Remittance Advice each time payment is made providing detailed payment information for payments directly deposited in their bank account or SVC account.

- Track and monitor the payment process  
 Other. Describe \_\_\_\_\_  
 None

#### **2.7.3. Market Rate Survey**

Lead Agencies must complete a local Market Rate Survey (MRS) no earlier than two years prior to the effective date of the Plan (no earlier than October 1, 2011). The MRS must be completed prior to the submission of the CCDF Plan (see [Program Instruction CCDF-ACF-PI-2009-02](http://www.acf.hhs.gov/programs/occ/resource/pi-2009-02) <http://www.acf.hhs.gov/programs/occ/resource/pi-2009-02> for more information on the MRS deadline).

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a) Provide the month and year when the local Market Rate Survey(s) was completed (§98.43(b)(2)): September 2012.

b) Provide a **summary of the results** of the survey. The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

Care Solutions, Inc., a management consulting firm under contract with the Louisiana Department of Children and Family Services (DCFS), conducted a survey of child care providers in the spring of 2012 to determine local child care market rates and other information about child care providers in the state.

DCFS subsidizes a portion of child care expenses incurred by some low income families and families receiving protective services. The survey data are used, in part, to assist the state in setting child care reimbursement rates.

### ***Survey Method***

In Louisiana, child care is provided in a variety of settings: Class A centers, Class B centers (not eligible for federal or state funding), exempt providers (such as school-based child care programs), registered and/or certified family child care home providers (may also be certified to participate in the Child Care Assistance Program), and certified in-home child care providers (certified to participate in the Child Care Assistance Program).

A mailing list of nearly 10,200 non-duplicated child care providers was compiled using lists provided by DCFS (licensing and subsidized care) and the Louisiana Department of Education (registered and/or certified family providers). Duplicates that could be identified based on matching criteria, e.g., location address, or provider or facility name, were removed prior to the initial mailing.

The survey protocol had multiple stages: first, a postcard announcement was sent to all providers to alert them to the upcoming mailing and invite them to complete the survey online. (For the first time, this year's survey included an option for online completion.) Approximately two weeks later, a first-class mailing of survey materials (questionnaire, cover letter and pre-paid business reply envelope) was sent to all providers who had not completed the survey online. This mailing was followed immediately by an email to all providers for whom the state provided an email address. There was a second mailing of survey materials to non-respondents, and a third, targeted mailing to non-respondents in specific provider categories by region in which response rates were less than 50 percent (except those on the food program list due to budget constraints). Prior to distribution, the state alerted its child care resource and referral (CCR&R) agencies; immediately following the first mailing, each CCR&R and the Child Care Association of Louisiana (CCAL) received an email containing reference copies of the survey materials.

Providers received instructions with each mailing inviting them to visit a website and complete their surveys through an online form. Of the 1,245 center-based providers who reported they currently provide child care, 353 (28 percent) completed the form online; of the 1,493 home-based providers who reported they currently provide child care, 126 (eight percent) completed the form online. (Providers who completed the form online and also returned a paper survey are counted only in the first category.) This report presents the results for the 2,738 providers in the above categories who



reported they currently provide child care.

**Rate Highlights**

The 2012 survey marked a return to the two-year interval between surveys. Rate increases during this two-year period were more similar to the single-year increases reported in 2010 than to the two-year increases in previous survey periods: every provider type except registered and/or certified family child care homes showed an increase over the last two years within one percentage point of the increase between 2009 and 2010. The exception was registered and/or certified family child care homes, who reported no increase in 2012 after an eight-percent increase in 2010. Rate increases between 2010 and 2012 ranged from just over seven percent for Class A centers to zero or near zero percent for registered and/or certified family child care homes and certified in-home child care providers.

The smaller increases seen in returns for 2012 suggest that Louisiana’s child care industry continues to experience lagging economic growth. Even as statewide population figures remained stable, provider numbers and capacity fell in three of the six categories (Class A centers, family child care homes providing subsidized child care, and certified in-home subsidized child care providers), which supports a similar conclusion. The effect on certified in-home child care providers was greatest: even as the number of providers in the category fell by more than 50% compared to 2010, rates increased only a negligible amount, suggesting that supply may exceed demand for this type of care.

**2.7.4. Describe the payment rate ceilings in relation to the current MRS using the tables below.**

Because of the flexibility that Lead Agencies have in setting payment rate ceilings, the following tables have been developed to simplify Lead Agency reporting on how their payment rate ceilings compare to their most recent MRS. These tables are not meant to collect comprehensive payment rate ceilings within a State/Territory and ACF recognizes that Lead Agencies are not required to set their payment rate ceilings at the 75<sup>th</sup> percentile. These tables allow Lead Agencies to use a common metric – the 75<sup>th</sup> percentile – as a reference point against which the Lead Agency can report their percentiles for three selected age groups in two geographic areas for licensed child care centers and licensed family child care homes.

In table 2.7.4a and 2.7.4b, *highest rate area* refers to the State or Territory’s area or geographic region with the highest maximum payment rate ceiling for child care centers (2.7.4a) and family child care homes (2.7.4b). Identify the highest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75<sup>th</sup> percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75<sup>th</sup> percentile of the most recent MRS.

**Note** - Report the “base” maximum reimbursement rate ceiling, not including any rate add-ons or tiered reimbursements. For example, if maximum reimbursement rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the

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tables below (e.g., bronze), **only** if there is no lower “base” rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, **Lead Agencies can** use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

<b>2.7.4a – Highest Rate Area (Centers)</b>	<b>(a) Monthly Payment Rate at the 75<sup>th</sup> percentile from the most recent MRS</b>	<b>(b) Monthly Maximum Payment Rate Ceiling</b>	<b>(c) Percentile if lower than 75<sup>th</sup> percentile of most recent survey</b>
Full-Time Licensed Center Infants (11 months)	584.55	400.53	9 <sup>th</sup>
Full-Time Licensed Center Preschool (59 months)	519.60	378.88	10 <sup>th</sup>
Full-Time Licensed Center School-Age (84 months)	497.95 (full-time summer care)	378.88	16 <sup>th</sup>

<b>2.7.4b – Lowest Rate Area (Centers)</b>	<b>(a) Monthly Payment Rate at the 75<sup>th</sup> percentile of the most recent MRS</b>	<b>(b) Monthly Maximum Payment Rate Ceiling</b>	<b>(c) Percentile if lower than 75<sup>th</sup> percentile of most recent survey</b>
Full-Time Licensed Center Infants (11 months)	N/A – LA has statewide payment rates	N/A – LA has statewide payment rates	N/A – LA has statewide payment rates
Full-Time Licensed Center Preschool (59 months)	N/A – LA has statewide payment rates	N/A – LA has statewide payment rates	
Full-Time Licensed Center School-Age (84 months)	N/A – LA has statewide payment rates	N/A – LA has statewide payment rates	

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In table 2.7.4c and 2.7.4d, *lowest rate area* refers to the State or Territory’s area or geographic region with the lowest maximum payment rate ceiling for child care centers and family child care homes. Identify the lowest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75<sup>th</sup> percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75<sup>th</sup> percentile of the most recent MRS.

**Note** - Report the “base” maximum reimbursement rate ceilings, not including any rate add-ons or tiered reimbursement. For example, if maximum reimbursement rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower “base” rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, **Lead Agencies can** use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

<b>2.7.4c – Highest Rate Area (FCC)</b>	<b>(a) Monthly Payment Rate at the 75<sup>th</sup> percentile of the most recent MRS</b>	<b>(b) Monthly Maximum Payment Rate Ceiling</b>	<b>(c) Percentile if lower than 75<sup>th</sup> percentile of most recent survey</b>
Full-Time Licensed FCC Infants (11 months)	N/A	N/A	N/A
Full-Time Licensed FCC Preschool (59 months)	N/A	N/A	N/A
Full-Time Licensed FCC School-Age (84 months)	N/A	N/A	N/A

<b>2.7.4d – Lowest Rate Area (FCC)</b>	<b>(a) Monthly Payment Rate at the 75<sup>th</sup> percentile of the most recent MRS</b>	<b>(b) Monthly Maximum Payment Rate Ceiling</b>	<b>(c) Percentile if lower than 75<sup>th</sup> percentile of most recent survey</b>

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<b>2.7.4d – Lowest Rate Area (FCC)</b>	<b>(a) Monthly Payment Rate at the 75<sup>th</sup> percentile of the most recent MRS</b>	<b>(b) Monthly Maximum Payment Rate Ceiling</b>	<b>(c) Percentile if lower than 75<sup>th</sup> percentile of most recent survey</b>
Full-Time Licensed FCC Infants (11 months)	N/A	N/A	N/A
Full-Time Licensed FCC Preschool (59 months)	N/A	N/A	N/A
Full-Time Licensed FCC School-Age (84 months)	N/A	N/A	N/A

**2.7.5. How are payment rate ceilings for license-exempt providers set?**

- a) Describe how license-exempt center payment rates are set:  
These providers are not eligible.
- b) Describe how license-exempt family child care home payment rates are set:  
Lead Agency determines rate based on rates paid to center based providers.
- c) Describe how license-exempt group family child care home payment rates are set:  
Not applicable, Louisiana does not have this provider type.
- d) Describe how in-home care payment rates are set:  
Lead Agency determines rate based on rates paid to family child care home payment rates.

**2.7.6 Will the Lead Agency provide any type of tiered reimbursement or differential rates on top of its base reimbursement rates for providing care for children receiving CCDF subsidies?**

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

- Differential rate for nontraditional hours. Describe \_\_\_\_\_
- Differential rate for children with special needs as defined by the State/Territory. Describe  
Children who have special needs and receive specialized care receive a higher rate.
- Differential rate for infants and toddlers. Describe  
A higher rate is paid for children under three.
- Differential rate for school-age programs. Describe \_\_\_\_\_
- Differential rate for higher quality as defined by the State/Territory. Describe

In an effort to increase the availability of quality services provided while keeping the rates affordable for families, including families who do not qualify for subsidy, the

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lead agency provides quality incentive bonus payments for certain quality criteria. This measure is provided to support child care centers participating in QRIS at 2-5 stars. These quarterly bonuses are only available to providers caring for CCDF children and children in protective services. The bonus amounts are 3,8,13.5 and 20 percent, of all payments received for care.

School Readiness Tax Credits (SRTC) are also available for centers participating in Quality Start beginning at the second star level. SRTC is a package of tax credits designed to encourage higher quality child care.

These efforts are designed to support equal access to quality care for low-income children. When established in 2007, these efforts combined to support equal access to quality care for low-income children. The MRS was used to judge the equity of bonus plus SRTC to market rate.

**Reminder** - CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. In the next three questions, Lead Agencies are asked to describe how their payment policies reflect the affordable copayments for families' provision of equal access (i.e., minimizing additional fees to parents), how payment practices are implemented consistent with the general child care market to be fair to providers (see Information Memorandum on Continuity of Care for examples <http://www.acf.hhs.gov/programs/occ/resource/im2011-06> ), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

## 2.7.7. What policies does the Lead Agency have regarding any additional fees that providers may charge CCDF parents? The Lead Agency...

- Allows providers to charge the difference between the maximum reimbursement rate and their private pay rate
- Pays for provider fees (e.g., registration, meals, and supplies). Describe
- Policies vary across region, counties and or geographic areas. Describe
- Other. Describe

Providers may establish a sliding fee scale to be used with low income families as well as those receiving Child Care Assistance. Information will be made available to providers describing how this can be done to support access.

## 2.7.8 What specific policies and practices does the Lead Agency have regarding the following:

- a) Number of absent days allowed. Describe  
Up to two absence days are paid per month.
- b) Paying based on enrollment. Describe  
Except for the absence days above, providers are paid for care provided.

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c) Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly)

Full time authorizations are for full days and are paid if the child attends 4 or more hours. Part time is paid in 6 minute increments.

d) Using electronic tools (automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe

TOTS (Tracking of Time Services) uses parental biometric imaging or Interactive Voice Response (IVR) for check in and out of child care services. Weekly transmission of information allows the state to compare attendance with authorization and pay providers by direct deposit or stored value cards.

### **2.7.9. Describe how payment rates are adequate to ensure equal access to the full range of providers based on the Market Rate Survey.**

CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. To demonstrate equal access, the Lead Agency shall provide at a minimum a summary of facts describing: (§98.43(a))

a) How a choice of the full range of providers, e.g., child care centers, family child care homes, group child care homes and in-home care, is made available (§98.43(a)(1))

Subsidized child care is provided in a variety of settings: Class A centers, Class M (military child care centers), School-Based Child Care programs, registered Family Child Day Care Homes, and certified In-Home child care providers. All are certified to participate in the Child Care Assistance Program.

b) How payment rates are adequate based on the most recent local MRS (§98.43(a)(2))

A market rate survey was conducted in Spring 2012 to determine local child care market rates and other information about child care providers in diverse settings across the state. The sample population included licensed child care centers, school based programs, certified Family Child Day Care Homes, and certified In-Home providers listed in the CCAP Provider Directory and Family Child Day Care Homes listed with the LDE CACFP throughout the state. Data gathered reflected age groups served, rates charged for these groups, whether providers did or would provide care for children with special needs and current cost for these services.

c) How family co-payments based on a sliding fee scale are affordable (§98.43(a)(3))

TANF participants and protective services cases are categorically eligible if child care is needed. The child care costs charged by the provider are paid at 100% not to exceed the state maximum rate.

The agency pays a percentage of authorized low-income child care costs that are charged by the provider. Those percentages are 80%, 60%, or 40%. The agency uses



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a sliding fee scale to determine the percentage that the agency will pay based on the household’s monthly income and household size. The difference between the amount that the agency pays and the total amount charged by the provider must be paid by the participant in the form of a co-payment.

d) Any additional facts the Lead Agency considered to determine that its payment rates ensure equal access, including how the quality of child care providers is taken into account when setting rates and whether any other methodologies (e.g., cost estimation models) are used in setting payment rates

While current reimbursement rates do not reflect additional funds available to providers participating in QRIS, through Tiered Bonus payments and SRTC providers may receive additional funds related to providing care for CCAP eligible children.

**2.8 Goals for the next Biennium**

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency’s goals for the administration of the CCDF subsidy program in the coming Biennium? For example, what progress does the State/Territory expect to make on continuing improved services to parents and providers, continuity of care for children, improving outreach to parents and providers, building or expanding information technology systems, or revising rate setting policies or practices).

**Note** – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 - Revise rule and policy rates related to children with special needs and rates paid.
Goal 2 – Investigate and make recommendations for the alignment of CCAP absence policy/payment with attendance requirements in Head Start/Early Head Start and LA prekindergarten programs.
Goal 3 – Review CNP success with common enrollment application and family engagement for possible alignment and streamlining in 2015.
Goal 4 -
Goal 5 -



**PART 3**  
**HEALTH AND SAFETY AND QUALITY IMPROVEMENT ACTIVITIES**

In this section, Lead Agencies are asked to describe their goals and plans for implementation of child care quality improvement activities. Under the Child Care and Development Block Grant Act, Lead Agencies have significant responsibility for ensuring the health and safety of children in child care through the State/Territory's child care licensing system and establishing health and safety standards for children who receive CCDF funds. Health and safety is the foundation of quality, but is not adequate to ensure that programs and staff are competent in supporting all areas of child development and promoting school success.

Quality investments and support systems to promote continuous quality improvement of both programs and the staff who work in them are a core element of CCDF. Lead Agencies have been reporting on their efforts to support program quality improvement and professional development since their initial Plans in 1999. This section allows Lead Agencies to continue to describe the steps that they are taking toward continuous quality improvement with a goal of having high quality child care options across settings for all families. While one of the key goals for CCDF is helping more low-income children access higher quality care, the Lead Agency has the flexibility to consider its goals and strategic plans for a child care quality improvement system for all families, not just those receiving assistance under CCDF.

Part 3 is organized around a template of four key components of quality which encompass most of the quality investments and initiatives undertaken by Lead Agencies over the past decade:

1. Ensuring health and safety of children through **licensing and health and safety standards**
2. Establishing **early learning guidelines**
3. Creating pathways to excellence for child care programs through **program quality improvement activities**
4. Creating pathways to an effective, well-supported child care workforce through **professional development systems and workforce initiatives.**

For each component, Lead Agencies are asked to conduct a three-step process. First, in this section, Lead Agencies will conduct a self-assessment of their programs by responding to the questions in Part 3 that describe the current status of their efforts, using common practices and best practices to list characteristics that build off those that have been reported in previous plans. Second, Lead Agencies then are asked to identify goals for making progress during the FY 2014-2015 biennium and describe their data, performance measure and evaluation capacity for each component. Third, Lead Agencies will report progress on their goals using the Quality Performance Report which is included and described in Appendix 1. The QPR will not be submitted until December 31, 2014.

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Based on information reported in past plans, it is expected that the Lead Agency will describe in these first two steps how they will continue to make systematic investments towards child care quality improvement across its early childhood and school-age spectrum – including all settings, geographic coverage and age range – that will help show progress toward these outcomes and goals. Ultimately, these child care quality improvement elements should be fully implemented and integrated. Each State/Territory is expected to fall on a continuum of progress as a result of these first two steps. Lead Agency’s individual progress will reported using the Quality Performance Report.

### **3.1. Activities to Ensure the Health and Safety of Children in Child Care (Component #1)**

This section is intended to collect information on how Lead Agencies meet the statutory and regulatory provisions related to licensing and health and safety requirements. The CCDBG statute and the CCDF regulations address health and safety primarily in two ways.

First, Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced. [Questions related to licensing requirements are in sections 3.1.1 and 3.1.2.](#) Second, Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. [Questions related to CCDF Health and Safety requirements are in sections 3.1.3 and 3.1.4.](#)

#### **3.1.1. Compliance with Applicable State/Territory and Local Regulatory Requirements on Licensing**

Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced.

**Definition:** Licensing requirements are defined as regulatory requirements, including registration or certification requirements established under State, local, or tribal law, necessary for a provider to legally operate and provide child care services in a State or locality (§98.2). This does not include registration or certification requirements solely for child care providers to be eligible to participate in the CCDF program. Those requirements will be addressed in 3.1.2.

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The relationship between licensing requirements and health and safety requirements varies by State/Territory depending on how comprehensive the licensing system is. In some States and Territories, licensing may apply to the majority of CCDF-eligible providers and the licensing standards cover the three CCDF health and safety requirements so the State/Territory has few, if any, providers for whom they need to establish additional CCDF health and safety requirements. In other cases, States and Territories have elected to exempt large numbers of providers from licensing which means that those exempted providers who care for children receiving assistance from CCDF will have to meet to the CCDF health and safety requirements through an alternative process outside of licensing **as defined by the State/Territory**. The State/Territory may also elect to impose more stringent standards and licensing or regulatory requirements on child care providers of services for which assistance is provided under the CCDF than the standards or requirements imposed on other child care providers. (§98.40(b)(1)) (658E(c)(2)(F), §98.41).

a) Is the Lead Agency responsible for child care licensing? (§98.11(a))

- Yes.
- No. Please identify the State or local (if applicable) entity/agency responsible for licensing

b) Provide a brief overview of the relationship between the licensing requirements and CCDF health and safety requirements in your State/Territory.

The DCFS, Division of Programs, Licensing Section exercises regulatory authority over licensed child care facilities for the State of Louisiana. The child care licensing standards include health and safety requirements which serve as the basis for CCDF health and safety requirements.

c) Do the State/Territory’s licensing requirements serve as the CCDF health and safety requirements?

	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
		<input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.		<input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory.
Yes, for all providers in this category	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, for some providers in	Describe _____	Describe _____	Describe _____	Describe _____

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	Center-Based Child Care	Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care <input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory.
this category				
No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	Describe	Describe	Describe	Describe

d) CCDF identifies and defines four categories of care: child care centers, family child care homes, group child care homes and in-home child care providers (§98.2). The CCDF definition for each category is listed below. For each CCDF category of care, please identify which types of providers are subject to licensing and which providers are exempt from licensing in your State/Territory in the chart below. **Note: OCC recognizes that each State/Territory identifies and defines its own categories of care. OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care but consistent with your reported 801 data.**

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
Center-Based Child Care	Center-based child care providers are defined as a 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.	Describe which types of center-based settings are subject to licensing in your State/Territory <u>Providers caring for more than 7 unrelated children for more than 12.5 hours in a seven day period.</u>	Describe which types of center-based settings are exempt from licensing in your State/Territory <u>Church-operated centers operating less than 24 hours in a seven day period.</u>  For example, some jurisdictions exempt school-based centers, centers operated by religious organizations, summer camps, or Head Start programs.
Group Home Child Care <input checked="" type="checkbox"/> N/A. Check if	Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per	Describe which types of group homes are subject to licensing	Describe which types of group homes are exempt from licensing

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CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
your State/Territory does not have group home child care.	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	Family child care provider is defined as 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. <b>Reminder</b> - Do not check if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	Describe which types of family child care home providers are subject to licensing <u>FCCH are not licensed.</u>	Describe which types of family child care home providers are exempt from licensing <u>All FCCH providers not meeting the definition of child day care center.</u>
In-Home Care	In-home child care provider is defined as an individual who provides child care services in the child’s own home. <b>Reminder</b> - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	<input checked="" type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory.  Describe which in-home providers are subject to licensing [redacted]	Describe which types of in-home child care providers are exempt from licensing [redacted]

**Note:** In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the NRCKid’s website at

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<http://nrckids.org/CFOC3> to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's.**

e) **Indicate** whether your State/Territory licensing requirements include any of the following four indicators for each category of care\*.

\* American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011) *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd Edition.* Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association. Available online: <http://nrckids.org/CFOC3>

Indicator	For each indicator, check all requirements for <b>licensing</b> that apply, if any.			
	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
<p>Do the licensing requirements include <b>child: staff ratios and group sizes</b>?</p> <p>If yes, provide the ratio for age specified.</p>	<p><input checked="" type="checkbox"/> Yes, Child: staff ratio requirement</p> <p>Infant ratio (11 months): <b>6</b></p> <p>Toddler ratio (35 months): <b>12</b></p> <p>Preschool ratio (59 months): <b>16</b></p> <p><input type="checkbox"/> No ratio requirements.</p> <p><input type="checkbox"/> Yes, Group size requirement Infant group size (11 months):</p> <p>Toddler group size (35 months):</p> <p>Preschool group size (59 months):</p> <p><input checked="" type="checkbox"/> No group size requirements.</p>	<p><input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.</p> <p><input type="checkbox"/> Yes, Child: staff ratio requirement</p> <p>Infant ratio (11 months):</p> <p>Toddler ratio (35 months):</p> <p>Preschool ratio (59 months):</p> <p><input type="checkbox"/> No ratio requirements.</p> <p><input type="checkbox"/> Yes, Group size requirement Infant group size (11 months):</p> <p>Toddler group size (35 months):</p> <p>Preschool group size (59 months):</p>	<p><input type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement by age group:</p> <p><input type="checkbox"/> No ratio requirements.</p> <p><input type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group</p> <p><input type="checkbox"/> No group size requirements.</p>	<p><input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)</p> <p><input type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement by age group:</p> <p><input type="checkbox"/> No ratio requirements.</p> <p><input type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group</p> <p><input type="checkbox"/> No group size requirements.</p>

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<b>Indicator</b>	For each indicator, check all requirements for <b>licensing</b> that apply, if any.			
	<b>Center-Based Child Care</b>	<b>Group Home Child Care</b>	<b>Family Child Care</b>	<b>In-Home Care</b>
		<input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.		<input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
		<input type="checkbox"/> No group size requirements.		
Do the licensing requirements identify specific educational <b>credentials for child care directors?</b>	<input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input checked="" type="checkbox"/> Other: <b>See Title 67, Social Services, Part III, Subpart 21, Chapter 73, Subchapter A, §7310.B.1-6 (last page)</b>	Do the licensing requirements identify specific educational <b>credentials for child care directors?</b>	<input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other:	Do the licensing requirements identify specific educational <b>credentials for child care directors?</b>
Do the licensing requirements identify specific educational <b>credentials for child care teachers?</b>	<input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input checked="" type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other:	Do the licensing requirements identify specific educational <b>credentials for child care teachers?</b>	<input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other:	Do the licensing requirements identify specific educational <b>credentials for child care teachers?</b>
Do the licensing requirements specify that directors and caregivers must attain a specific number of	<input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year <input type="checkbox"/> No training	Do the licensing requirements specify that directors and caregivers must attain a specific number of	<input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after	Do the licensing requirements specify that directors and caregivers must attain a specific number of



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For each indicator, check all requirements for <b>licensing</b> that apply, if any.				
<b>Indicator</b>	<b>Center-Based Child Care</b>	<b>Group Home Child Care</b>	<b>Family Child Care</b>	<b>In-Home Care</b>
		<input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.		<input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
<b>training hours per year?</b>	requirement <input checked="" type="checkbox"/> Other: Annually 12 hours are required in addition to health and safety training required by the Department of Health and Hospitals. For certain staff Medication Administration training, and CPR/First Aid are also required.	<b>training hours per year?</b>	first year <input type="checkbox"/> No training requirement <input type="checkbox"/> Other:	<b>training hours per year?</b>

e) Do you expect the licensing requirements for child care providers to change in FY2014-2015?

Yes. Describe

Revision and alignment of standards to Act 3 requirements followed by rulemaking and provider training is expected beginning in late 2013.

No

**3.1.2 Enforcement of Licensing Requirements**

Each Lead Agency is required to provide a detailed description of the State/Territory's licensing requirements and how its licensing requirements are effectively enforced. (658E(c)(2)(E), §98.40(a)(2)) The Lead Agency is also required to certify that that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with the applicable health and safety requirements. (658E(c)(2)(G), §98.41(d))

**Describe the State/Territory's policies for effective enforcement of the licensing requirements using questions 3.1.2a through 3.1.2e below.** This description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.

a) Does your State/Territory include **announced** and/or **unannounced** visits in its policies as a way to effectively enforce the licensing requirements?

Yes. If "Yes" please refer to the chart below and check all that apply.

No

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<b>CCDF Categories of Care</b>	<b>Frequency of Routine Announced Visits</b>	<b>Frequency of Routine Unannounced Visits</b>
<input checked="" type="checkbox"/> Center-Based Child Care	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe _____	<input checked="" type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe <b>Annual visit is in law; typically centers are visited 2-3 times per year.</b>
<input type="checkbox"/> Group Home Child Care	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe _____	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe _____
<input type="checkbox"/> Family Child Care Home	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe _____	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe _____
<input type="checkbox"/> In-Home Child Care <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b)	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe _____	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe _____

b) Does your State/Territory have any of the following procedures in place for effective enforcement of the licensing requirements? If procedures differ based on the category of care, please indicate how in the “Describe” box.

- Yes. If “Yes” please refer to the chart below and check all that apply.  
 No

<b>Licensing Procedures</b>	<b>Describe</b> which procedures are used by the State/Territory for enforcement of the licensing requirements.
The State/Territory requires providers to attend or participate in training relating to opening a child care facility prior to issuing a license.	<input type="checkbox"/> Yes. Describe _____ <input checked="" type="checkbox"/> No. <input type="checkbox"/> Other. Describe _____
The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license.	<input type="checkbox"/> An on-site inspection is conducted. <input type="checkbox"/> Programs self-certify. Describe _____ <input type="checkbox"/> No procedures in place.

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<b>Licensing Procedures</b>	<b>Describe</b> which procedures are used by the State/Territory for enforcement of the licensing requirements.
	<input checked="" type="checkbox"/> Other. Describe Centers receive inspection prior to issuing a license. Family child care homes are not subject to licensing.
Licensing staff has procedures in place to address violations found in an inspection.	<input type="checkbox"/> Providers are required to submit plans to correct violations cited during inspections. <input type="checkbox"/> Licensing staff approve the plans of correction submitted by providers. <input type="checkbox"/> Licensing staff verify correction of violation. <input checked="" type="checkbox"/> Licensing staff provide technical assistance regarding how to comply with a regulation. <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe _____
Licensing staff has procedures in place to issue a sanction to a noncompliant facility.	<input type="checkbox"/> Provisional or probationary license <input checked="" type="checkbox"/> License revocation or non-renewal <input checked="" type="checkbox"/> Injunctions through court <input type="checkbox"/> Emergency or immediate closure not through court action <input type="checkbox"/> Fines for regulatory violations <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe _____
The State/Territory has procedures in place to respond to illegally operating child care facilities.	<input checked="" type="checkbox"/> Cease and desist action <input checked="" type="checkbox"/> Injunction <input type="checkbox"/> Emergency or immediate closure not through court action <input checked="" type="checkbox"/> Fines <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe _____
The State/Territory has procedures in place for providers to appeal licensing enforcement actions.	<input checked="" type="checkbox"/> Yes. Describe: Provider may appeal to the State of Louisiana, Division of Administrative Law and to the District Court. <input type="checkbox"/> No. <input type="checkbox"/> Other. Describe _____

c ) Does your State/Territory use **background checks as a way to effectively enforce the licensing requirements?**

Yes. If “Yes” please refer to the chart below to identify who is required to have background checks, what types of checks, and with what frequency.

No

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<b>CCDF Categories of Care</b>	<b>Types of Background Check</b>	<b>Frequency</b>	<b>Who is Subject to Background Checks?</b>
<input checked="" type="checkbox"/> <b>Center-Based Child Care</b>	<input type="checkbox"/> Child Abuse Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____	<input type="checkbox"/> Director <input type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input type="checkbox"/> Other
	<input checked="" type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if State/Territory background check includes fingerprints	<input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____	<input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input checked="" type="checkbox"/> Non-teaching staff <input checked="" type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other <b>owners</b>
	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____	<input type="checkbox"/> Director <input type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input type="checkbox"/> Other _____
	<input type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____	<input type="checkbox"/> Director <input type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input type="checkbox"/> Other _____
<input type="checkbox"/> <b>Group Child Care Homes</b>  <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	<input type="checkbox"/> Child Abuse Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home _____

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<b>CCDF Categories of Care</b>	<b>Types of Background Check</b>	<b>Frequency</b>	<b>Who is Subject to Background Checks?</b>
	<input type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home
	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home
	<input type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home
<input type="checkbox"/> <b>Family Child Care Homes</b>	<input type="checkbox"/> Child Abuse Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home
	<input type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home

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<b>CCDF Categories of Care</b>	<b>Types of Background Check</b>	<b>Frequency</b>	<b>Who is Subject to Background Checks?</b>
	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home
	<input type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home
<input type="checkbox"/> <b>In-Home Child Care Providers</b>  <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2e)	<input type="checkbox"/> Child Abuse Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home
	<input type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home
	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home

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CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
	<input type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe	<input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home

d) Please **provide a brief overview** of the State/Territory’s process for conducting background checks for child care. In this brief overview, include the following:

d -1) The cost associated with each type of background check conducted **\$26**

d-2) Who pays for background checks **providers**

d-3) What types of violations would make providers ineligible for CCDF? **LA R.S. 15:587.1**

d-4) The process for providers to appeal **the Lead Agency’s decision based on the background check findings. Describe The Lead Agency does not provide appeal however the individual may seek correction/expungement.**

e) If not performing visits (announced or unannounced) or background checks, describe how the State/Territory will ensure that its licensing requirements are effectively enforced per the CCDF regulations? \_\_\_\_\_ (658E(c)(2)(E), §98.40(a)(2))

f) Does the State/Territory disseminate information to parents and the public, including the use of on-line tools or other “search tools,” about child care program licensing status and compliance records?

Yes. Describe **Information is made available via agency website that includes status and compliance as well as access to reports of deficiencies and complaints.**

No

**3.1.3. Compliance with Applicable State/Territory and Local Regulatory Requirements on Health and Safety**

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to



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child care providers of services for which assistance is provided under CCDF. Such requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)

Check if the Lead Agency certifies that 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))

a) **Describe** the Lead Agency’s health and safety requirements for prevention and control of infectious disease in effect for child care providers of services for which assistance is provided under CCDF using the table below.  
(658E(c)(2)(F)(i), §98.41(a)(1))

The Lead Agency requires:	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
<input checked="" type="checkbox"/> Physical exam or health statement for providers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Physical exam or health statement for children	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Tuberculosis check for providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Tuberculosis check for children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Provider immunizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Child immunizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Hand-washing policy for providers and children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Diapering policy and procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe <span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 50px; height: 1em; vertical-align: middle;"></span>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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b) **Describe** the Lead Agency’s health and safety requirements for building and physical premises safety, including policies and practices to protect from environmental hazards, in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(ii), §98.41(a)(2))

The Lead Agency requires:	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
<input checked="" type="checkbox"/> Fire inspection	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Building inspection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Health inspection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inaccessibility of toxic substances policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Safe sleep policy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Tobacco exposure reduction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Transportation policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe <span style="background-color: #ADD8E6; border: 1px solid black; padding: 2px;"> </span>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

c) **Describe** the Lead Agency’s health and safety requirements for health and safety training in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(iii), §98.41(a)(3)).  
**Note:** While Lead Agencies have the flexibility to define these terms, for this question, pre-service refers to any training that happens prior to a person starting or shortly thereafter (first week, etc). “On-going” would be some type of routine occurrence (e.g., maintain qualifications each year).

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
<b>Child Care Centers</b>	First Aid		X
	CPR		X
	Medication Administration Policies and Practices	X	X
	Poison Prevention and Safety		
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention		

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<b>CCDF Categories of Care</b>	<b>Health and safety training requirements</b>	<b>Pre-Service</b>	<b>On-Going</b>
	Shaken Baby Syndrome and abusive head trauma prevention		
	Age appropriate nutrition, feeding, including support for breastfeeding	X	X
	Physical Activities		
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods		
	Recognition and mandatory reporting of suspected child abuse and neglect	X	X
	Emergency preparedness and planning response procedures	X	X
	Management of common childhood illnesses, including food intolerances and allergies	X	X
	Transportation and child passenger safety (if applicable)	X	X
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	X	X
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.		
	Supervision of children	X	X
	Behavior management	X	X
	Other. Describe <span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 50px; height: 1em; vertical-align: middle;"></span>		
	<b>Group Home Child Care</b>	First Aid	
CPR			
Medication Administration Policies and Practices			
Poison Prevention and Safety			
Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention			
Shaken Baby Syndrome and abusive head trauma prevention			
Age appropriate nutrition, feeding, including support for breastfeeding			
Physical Activities			
Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods			
Recognition and mandatory reporting of suspected child abuse and neglect			
Emergency preparedness and planning response procedures			
Management of common childhood illnesses, including food intolerances and allergies			

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<b>CCDF Categories of Care</b>	<b>Health and safety training requirements</b>	<b>Pre-Service</b>	<b>On-Going</b>
	Transportation and child passenger safety (if applicable)		
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act		
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.		
	Supervision of children		
	Behavior management		
	Other. Describe <span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 50px; height: 1em;"></span>		
<b>Family Child Care Providers</b>	First Aid	X	X
	CPR	X	X
	Medication Administration Policies and Practices		
	Poison Prevention and Safety		
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention		
	Shaken Baby Syndrome and abusive head trauma prevention		
	Age appropriate nutrition, feeding, including support for breastfeeding		
	Physical Activities		
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods		
	Recognition and mandatory reporting of suspected child abuse and neglect		
	Emergency preparedness and planning response procedures		
	Management of common childhood illnesses, including food intolerances and allergies		
	Transportation and child passenger safety (if applicable)		
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act		
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.		
	Supervision of children		
Behavior management			
Other. Describe <span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 50px; height: 1em;"></span>			
<b>In-Home Child Care Providers</b>	First Aid	X	X
	CPR	X	X

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<b>CCDF Categories of Care</b>	<b>Health and safety training requirements</b>	<b>Pre-Service</b>	<b>On-Going</b>
	Medication Administration Policies and Practices		
	Poison Prevention and Safety		
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention		
	Shaken Baby Syndrome and abusive head trauma prevention		
	Age appropriate nutrition, feeding, including support for breastfeeding		
	Physical Activities		
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods		
	Recognition and mandatory reporting of suspected child abuse and neglect		
	Emergency preparedness and planning response procedures		
	Management of common childhood illnesses, including food intolerances and allergies		
	Transportation and child passenger safety (if applicable)		
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act		
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.		
	Supervision of children		
	Behavior management		
	Other. Describe <span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 50px; height: 1em; vertical-align: middle;"></span>		

d) CCDF allows Lead Agencies to exempt relative providers (grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles) from these health and safety requirements. What are the Lead Agency’s requirements for relative providers? (§98.41(A)(ii)(A))

- All relative providers are subject to the same health and safety requirements as described in 3.1.2a-c, as appropriate; there are no exceptions for relatives.
- Relative providers are NOT required to meet any health and safety requirements as described in 3.1.2a-c, as appropriate.
- Relative providers are subject to certain requirements. Describe the different requirements

e) Provide a web address for the State/Territory’s health and safety requirements, if available:

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Health and Safety Requirements for Licensing can be reviewed at:

<http://www.dss.state.la.us/index.cfm?md=pagebuilder&tmp=home&nid=25&pnid=7&pid=247&catid=0>

Health and Safety requirements for CCAP can be reviewed at:

<http://www.dss.louisiana.gov/index.cfm?md=pagebuilder&tmp=home&pid=264>

### 3.1.4 Effective enforcement of the CCDF health and safety requirements.

For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described in 3.1.2 for licensed providers, please describe how the Lead Agency enforces the CCDF health and safety enforcement requirements.

- a) Describe whether and how the Lead Agency uses on-site visits (announced and unannounced):

The Department staff or representatives may make announced and unannounced inspections of Provider's facility at any time during normal working hours to monitor compliance with health and safety requirements, conduct fiscal or programmatic audits and provide consultation and technical assistance for the development of Provider's facility.

- b) Describe whether the Lead Agency uses background checks:

The Department must obtain a criminal background check on all In-Home providers and on all adults living at the Family Child Daycare Home provider's residence, including the provider and any persons employed by the provider in the provider's home or on the provider's home property. These criminal background checks must be obtained from Louisiana State Police.

The DCFS Licensing Section monitors this requirement for Class A centers.

NOTE: DCFS does not obtain or maintain criminal background checks for military providers (Class M) or school child care program providers (Class E). Military providers obtain and maintain their own criminal background checks as required by and through the Department of Defense. Class E providers obtain and maintain their own criminal background checks as required by the Department of Education.

- c) Does the Lead Agency permit providers to self-certify compliance with applicable health and safety standards?

Yes. If yes, what documentation, if any, is required? Describe:

Health and Safety Standards for In-Home Child Care Providers (CCAP 17B).

No

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- d) Describe whether the **Lead Agency** uses any other enforcement policies and practices for the health and safety requirements.

**Yes, the Office of State Fire Marshal.**

Check if the Lead Agency certifies that 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))

**3.1.5. Does the State/Territory encourage or require child care programs to conduct developmental screening and referral for children participating in child care programs?**

Lead Agencies are not required to conduct developmental screenings of children, but are encouraged to work with child care providers to promote screening in the areas of physical health (including vision and hearing), mental health, oral health, and developmental disabilities.

- Yes. Describe
- No

- a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?

- Yes. Describe
- No
- Other. Describe

- b) If yes, are resources and supports provided to programs to help them understand how families are referred to indicated services and how to work with the health, mental health, and developmental disabilities agencies to support children when follow-up to screening is needed?

- Yes. Describe
- No
- Other. Describe

- c) Does the State/Territory use developmental screening and referral tools?

- Yes. If Yes, provide the name of the tool(s)
- No
- Other. Describe

**3.1.6 Data & Performance Measures on Licensing and Health and Safety Compliance –**

What data elements, if any, does the State/Territory currently have access to related to licensing compliance? What, if any, performance measures does the Lead Agency use for ensuring health and safety? The purpose of these questions is for Lead Agencies to



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provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

**a) Data on licensing and health and safety.** Indicate if the Lead Agency or another agency has access to data on:

- Number of licensed programs. Describe (optional) \_\_\_\_\_
- Numbers of programs operating that are legally exempt from licensing. Describe (optional) \_\_\_\_\_
- Number of programs whose licenses were suspended or revoked due to non-compliance. Describe (optional) \_\_\_\_\_
- Number of injuries in child care as defined by the State/Territory. Describe (optional) \_\_\_\_\_
- Number of fatalities in child care as defined by the State/Territory. Describe (optional) \_\_\_\_\_

The Licensing Section tracks data related to Critical Incidents that occur in Child Care Facilities.

- Number of monitoring visits received by programs. Describe (optional) \_\_\_\_\_
- Caseload of licensing staff. Describe (optional) \_\_\_\_\_
- Number of programs revoked from CCDF due to non-compliance with health and safety requirements. Describe (optional) \_\_\_\_\_
- Other. Describe.

Provider disqualifications are tracked through Webfocus reports and Disqualification Information Log.

None

**b) Performance measurement.** What, if any, performance measures does the State/Territory use in its licensing system to monitor compliance with CCDF health and safety requirements?

Performance Measures used to monitor compliance with health and safety requirements: (1) of all licensing complaints received regarding DCFS licensed Child Care Facilities received during the reporting period, what percentage of complaints were completed within 30 days of the receipt of the complaint; (2) number of on-site visits conducted by Licensing; (3) percentage of child care facilities undergoing a comprehensive inspection prior to the expiration of the provider's current license.

**c) Evaluation.** What, if any, are the State/Territory's plans for evaluation related to licensing and health and safety? Evaluation can include efforts

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related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

Licensing Section will be assessing the compliance outcomes of child care facilities in which technical assistance has been provided to correct deficiencies that are serious, repeated and numerous.

### 3.1.7 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section of 3.1. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.


What are the Lead Agency’s goals for the licensing and health and safety system in the coming biennium? What progress does the State/Territory expect to make on core areas (e.g. licensing standards, monitoring visits or other effective enforcement, improved technical assistance, or fewer serious non-compliances?)

**Note** – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 – Review and align standards across settings related to outcomes-based rating system.
Goal 2 - Revise child care regulation in coordination with alignment.
Goal 3 -
Goal 4 -
Goal 5 -



CCDF has a number of performance measures that are used to track progress for key aspects of the program at the national level. These performance measures are included in budget materials submitted to Congress and other documents. Please follow this link <http://www.acf.hhs.gov/programs/occ/resource/government-performance-and-results-act-gpra-measures> to see the CCDF performance measures. A number of these performance measures rely on information reported in the State and Territorial Plans as

a data source. We have added a ruler icon  in Section 3.2 through 3.4 in order to identify the specific questions used in the performance measures. When answering these questions, Lead Agencies should ensure that their answers are accurate and complete in order to promote the usefulness and integrity of the performance measures.

**3.2 Establishing Voluntary Early Learning Guidelines (Component #2)**

For purposes of this section, voluntary early learning guidelines (also referred to as early learning and development standards) include the expectations for what children should know (content) and be able to do (skills) at different levels of development. These standards provide guidelines, articulate developmental milestones, and set expectations for the healthy growth and development of young children. The term *early learning guidelines* (ELGs) refers to age-appropriate developmental learning guidelines for infants and toddlers and school-age children. These early learning guidelines are voluntary because States/Territories are not required to develop such guidelines or implement them in a specified manner.

 **3.2.1 Has the State/Territory developed voluntary early learning guidelines for children? Check any early learning guidelines the State/Territory has developed.**

- Birth-to-three
- Three-to-five
- Five years and older
- None. **Skip to 3.2.6.**

If yes, insert web addresses, where possible:

Which State/Territory agency is the lead for the early learning guidelines?

**LDE**

 **3.2.2 Do the early learning guidelines cover a range of domains across physical, cognitive, and social and emotional development?**

Check all that apply for each age group as applicable in the chart below. Because States vary in their domain names and which domains to include, we have used the domains identified in the Head Start Child Development and Early Learning Framework for reference purposes.

<b>Domains</b>	<b>Birth-to-Three ELGs</b>	<b>Three-to-Five ELGs</b>	<b>Five and Older ELGs</b>
Physical development and health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Social and emotional development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Approaches to learning	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Logic and reasoning (e.g., problem-solving)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Language development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Literacy knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mathematics knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Science knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Creative arts expression (e.g., music, art, drama)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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Domains	Birth-to-Three ELGs	Three-to-Five ELGs	Five and Older ELGs
Social studies knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
English language development (for dual language learners)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List any domains not covered in the above _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other. Describe _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 3.2.3 To whom are the early learning guidelines disseminated and in what manner?

Check all audiences and methods that your State/Territory has chosen to use in the chart below.

	Information Dissemination	Voluntary Training	Mandatory Training
Parents in the child care subsidy system	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parents using child care more broadly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practitioners in child care centers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Providers in family child care homes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Practitioners in Head Start	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Practitioners in Early Head Start	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Practitioners in public Pre-K program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Practitioners in elementary schools	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other. List: Nonpublic School PreK	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

### 3.2.4 Are voluntary early learning guidelines incorporated into other parts of the child care system?

Check which ways, if any, the State/Territory incorporates its early learning guidelines into other parts of the child care system.

- To define the content of training required to meet licensing requirements
- To define the content of training required for program quality improvement standards (e.g., QRIS standards)
- To define the content of training required for the career lattice or professional credential
- To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs
- To require programs in quality improvement standards to develop

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curriculum/learning activities based on the voluntary ELGs

- To develop State-/Territory –approved curricula
- Other. List
- None.



### **3.2.5 Are voluntary early learning guidelines and development standards aligned with into other parts of the child care system?**

Check the standards, if any, with which the State/Territory aligns its early learning guidelines.

- Cross-walked to align with Head Start Child Development and Early Learning Framework
- Cross-walked to align with K-12 content standards
- Cross-walked to align with State/Territory pre-k standards
- Cross-walked with accreditation standards
- Other. List
- None.

### **3.2.6 Describe how your State/Territory uses ongoing assessments and measures of school readiness assessment using the following series of questions.**

In this section, assessment is framed with two distinct purposes/tools – 1) ongoing assessment of children’s progress within the classroom to improve and individualize instruction (this corresponds to 3.2.6a) and 2) assessments conducted **within pre-kindergarten and/or** at kindergarten entry to inform policymakers about the school readiness of children across the State on a broad range of domains, used to guide program initiatives (this corresponds to 3.2.6b).

In the description for each Yes response, please include a) who administers, and b) how often assessments are conducted, and c) what assessment tools are used.

- a) Are programs required to conduct ongoing assessments of children’s progress of children using valid, reliable and age-appropriate tools aligned with the early learning guidelines or other child standards?

Yes. Describe.

Beginning fall 2013, programs receiving public funds and participating in Community Network Pilots will be required to conduct ongoing assessment of children’s progress.

In fall 2014, additional programs will have access and be encouraged to participate. Beginning in fall 2015, all programs receiving public funds will be required to fully implement child assessment for children receiving public funds.

a-1) If yes, are programs encouraged to use information from ongoing assessments to improve practice and individual children’s needs?

Yes. Describe.

Beginning in 2015, publicly funded programs will receive a letter grade based (in part) on child outcomes. This information along with other data will inform the support and information needed by the program to meet children's needs.

No

Other. Describe

a-2) If yes, is information on child's progress reported to parents?

Yes. Describe.

Programs will report information to parents in a variety of ways including parent teacher conferences, email messages and calls.

No

Other. Describe

No

Other. Describe:

b) Does the State/Territory use tools that are valid, reliable and age-appropriate to track the readiness of children within pre-kindergarten and/or as they enter kindergarten?

Yes. Describe

b-1) If yes, do the tools cover the developmental domains identified in 3.2.2?

Yes. Describe

No

Other. Describe

b-2) If yes, are the tools used on all children or samples of children?

All children. Describe.

All children receiving public assistance and in the Community Network Pilot in 2013-2015. Beginning in fall 2015, all children receiving publicly funded services will be assessed.

Samples of children. Describe

Other. Describe

b-3) If yes, is the information from the school readiness measures used to target program quality improvement activities?

Yes. Describe.

Beginning in 2014, programs in the Community Network Pilots will be evaluated based on child assessment outcomes. This will trigger support and resources to improve quality. This data will also be used to establish a letter grade system. Beginning in 2015-2016 school year, all programs will receive a letter grade based in part on child assessment outcomes. Letter grades will also be based on program assessment.

- No
- Other. Describe

- No
- Other. Describe

c) Is school readiness information linked to the statewide longitudinal data system (SLDS, program of the Department of Education)?

- Yes. Describe:
- No
- Not applicable. State does not have an SLDS.

**3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines –**

What data elements, if any, does the State/Territory have access to on the dissemination of, implementation of, or children’s attainment of the early learning guidelines? What, if any, performance measures does the State/Territory use for dissemination and implementation of the early learning guidelines? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on voluntary early learning guidelines.** Indicate if the Lead Agency or another agency has access to data on:

- Number/percentage of child care providers trained on ELG’s for preschool aged children. Describe (optional)  
Lead Agency will provide number of child care providers trained by CCR&R. LDE will provide number of prekindergarten teachers receiving training in the new standards.
- Number/percentage of child care providers trained on ELG’s for infants and toddlers. Describe (optional)  
Lead Agency will provide number of child care providers trained by CCR&R.
- Number of programs using ELG’s in planning for their work. Describe (optional)
- Number of parents trained on or served in family support programs



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- that use ELG's. Describe (optional) \_\_\_\_\_
- Other. Describe \_\_\_\_\_
- None

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures related to dissemination and implementation of the early learning guidelines? **NA**

c) **Evaluation.** What are the State/Territory's plans, if any, for evaluation related to early learning guidelines and the progress of children in child care? Evaluation can include efforts related to monitoring implementation of an initiative validation of standards or program assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

Beginning in fall 2013, Community Network Pilot programs will be expected to improve school readiness using the ELDS. Child assessment data will serve as evaluation of their success and permit the state to target programs needing support.

### 3.2.8 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). What are the Lead Agency's goals for using voluntary early learning guidelines in the coming biennium? What progress does the Lead Agency expect to make related to early learning guidelines?

70% of the programs receiving public funds will access resources and training on ELDS and implementation strategies. These will be made available through online resources and distance learning opportunities designed to support understanding and use of the ELDS.

### **3.3 Creating Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)**

Many States have chosen to use targeted quality funds and other resources to develop a systematic framework for evaluating, improving, and communicating the level of quality in early childhood programs (i.e. QRIS). States and Territories will provide a self-assessment on current program quality improvement activities by responding to questions in this section and then describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to a Quality Rating and Improvement System (QRIS) framework. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards

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2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

While not all States and Territories have developed or implemented a formal QRIS, all are pursuing quality improvement strategies that can be described within this framework (based upon previous CCDF Plans). Using this framework to organize this section allows States/Territories to report on their quality improvement activities systematically whether they have a QRIS or not. Over time, States and Territories are encouraged to work on linking their quality improvement initiatives and strategies across all of these elements, culminating in a comprehensive Quality Rating and Improvement System with adequate support for providers to attain higher levels of quality and transparency for parents and the community regarding the quality of child care.


a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities.

DCFS established the current QRIS in 2006 and has implemented that rating system since 2007. The Lead Agency has used regional child care resource and referral agencies and contracted for program assessment with a private university (Tulane) and with Northwestern State University (LA Pathways) for evaluation of staff qualifications. Tulane has also provided the Mental Health Consultation services to participating programs. Currently a new Tiered Kindergarten Readiness Improvement System (TKRIS) is being developed by LDE, DCFS, and DHH as a result of Act 3 of the 2012 legislature. Effective in fall 2015 this system will be administered by the State Board of Elementary and Secondary Education through the LA Department of Education. During the period of this State Plan (2014-2015) various activities are planned to provide information, training and transition to the new TKRIS.

The current QRIS system is described in answers below.

### 3.3.1 Element 1 – Program Standards

**Definition** – For purposes of this section, program standards refers to the expectations for quality, or quality indicators, which identify different levels of and pathways to improved quality. Minimum licensing standards and health and safety requirements provided in section 3.1 are also program standards but in this section, we focus on those standards that build upon and go beyond those minimum requirements.

 a) Does your State/Territory's have quality improvement standards that include indicators covering the following areas beyond what is required for licensing? Check any indicators, if any, that your State/Territory has chosen to establish.

- Ratios and group size
- Health, nutrition and safety
- Learning environment and curriculum
- Staff/Provider qualifications and professional development

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- Teacher/providers-child relationships
- Teacher/provider instructional practices
- Family partnerships and family strengthening
- Community relationships
- Administration and management
- Developmental screenings
- Child assessment for the purposes of individualizing instruction and/or targeting program improvement
- Cultural competence
- Other. Describe
- None. If checked, skip to 3.3.2.

b) Does your State/Territory have quality improvement standards with provisions about the care of any of these groups of children? Check any provisions your State/Territory has chosen to establish.

- Children with special needs as defined by your State/Territory
- Infants and toddlers
- School-age children
- Children who are dual language learners
- None

c) How do your State/Territory's quality standards link to State/Territory licensing requirements? Check any links between your State/Territory's quality standards and licensing requirements.

- Licensing is a pre-requisite for participation
- Licensing is the first tier of the quality levels
- State/Territory license is a "rated" license.
- Other. Describe
- Not linked.

d) Do your State/Territory's quality improvement standards align with or have reciprocity with any of the following standards? Check any alignment, if any, between your State/Territory's quality standards and other standards.

- Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)
- Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)
- Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)
- Other. Describe

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None

**3.3.2 Element 2 –Supports to Programs to Improve Quality**

**Definition** – For purposes of this section, supports to programs to improve quality refers to such activities as technical assistance and consultation services for programs to assist in meeting child care quality improvement standards.



a) Check which types of and for what purposes the State/Territory uses supports to child care programs, if any, in the following chart. If none, skip to 3.3.3.

<b>Types and Purposes of Support</b>	<b>Information or Written Materials</b>	<b>Training</b>	<b>On-Site Consultation</b>
<input checked="" type="checkbox"/> Attaining and maintaining licensing compliance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Attaining and maintaining quality improvement standards beyond licensing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Attaining and maintaining accreditation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Providing targeted technical assistance in specialized content areas:			
Health and safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Infant/toddler care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
School-age care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Inclusion	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Teaching dual language learners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Business management practices	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other. Describe <span style="background-color: #ADD8E6; display: inline-block; width: 50px; height: 1em;"></span>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> None. Skip to 3.3.3.			

b) Methods used to customize quality improvement supports to the needs of individual programs include:

- Program improvement plans
- Technical assistance on the use of program assessment tools
- Other. Describe

c) Is technical assistance linked to entering the QRIS or targeted to help programs forward on QRIS?

Yes. Describe

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Technical Assistance (TA) is used to provide both assistance in applying and on moving forward.

- No
- Other. Describe

**3.3.3 Element 3 – Financial Incentives and Supports**

**Definition** – For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and QRIS or other child care quality improvement standards for programs.



a) Identify which types of financial incentives are offered and to which providers in the following chart. Check which incentives and supports, if any, the State/Territory chooses to offer. If none, skip to 3.3.4.

<b>Types of Financial Incentives and Supports for Programs</b>	<b>Child Care Centers</b>	<b>Child Care Homes</b>	<b>License-Exempt Providers</b>
<input type="checkbox"/> Grants to programs to meet or maintain licensing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Grants to programs to meet QRIS or similar quality level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> One-time awards or bonuses on completion of quality standard attainment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tiered reimbursement tied to quality for children receiving subsidy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> On-going, periodic grants or stipends tied to <span style="color: purple;">improving</span> /maintaining quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tax credits tied to meeting program quality standards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe <span style="background-color: #ADD8E6; border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> None. Skip to 3.3.4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**3.3.4 – Element 4 - Quality Assurance and Monitoring**

**Definition** – For purposes of this section, quality assurance and monitoring refers to the ways that the State/Territory measures program quality for the purposes of its QRIS or other quality improvement system and the methods for measuring that the child care quality improvement standards for programs are met initially and maintained over time.



a) What tools, if any, does the State/Territory use to measure and monitor the quality of programs? Check all that apply and briefly describe using the chart below, including which programs are required to participate and the frequency of assessments. **If none, skip to 3.3.5.**

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<b>Types of Program Quality Assessment Tools</b>	<b>Child Care Centers</b>	<b>Child Care Homes</b>	<b>License-Exempt Providers</b>
<input checked="" type="checkbox"/> Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS)  Describe, including frequency of assessments. <b>Centers with rating of three to five stars must receive ratings at least every two years</b>	<input checked="" type="checkbox"/> Infant/Toddler <input checked="" type="checkbox"/> Preschool <input type="checkbox"/> School-Age	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Classroom Assessment Scoring System (CLASS)  Describe, including frequency of assessments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes  Describe, including frequency of assessments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21 <sup>st</sup> Century Learning Center programs  Describe, including frequency of assessments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> None. Skip to 3.3.5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b) What steps, if any, has the State/Territory taken to align quality assurance and monitoring across funding streams and sectors in order to minimize duplication?

- Have a mechanism to track different quality assessments/monitoring activities to avoid duplication
- Include QRIS or other quality reviews as part of licensing enforcement
- Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- Other. Describe
- None

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## 3.3.5 – Element 5 - Outreach and Consumer Education

**Definition** – For purposes of this section, outreach and consumer education refers to the strategies used to promote the child care quality improvement standards to parents, programs and the general public.



a) Does the State/Territory use symbols or simple icons to communicate levels of quality for child care programs beyond what may communicated to parents about licensing status and licensing compliance as reported in 3.1.3? (e.g. stars, or gold/silver/bronze levels).

Yes. If yes, how is it used?

Resource and referral/consumer education services use with parents seeking care

Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting

Searchable database on the web

Voluntarily, visibly posted in programs

Mandatory to post visibly in programs

Used in marketing and public awareness campaigns

Other. Describe

Star ratings are also displayed on DCFS Licensing searchable website and with an iPhone app.

No. If no, skip to 3.3.6.

b) Does the State/Territory use any forms of media to reach parents and the public to communicate about levels of quality for child care programs? Check which forms, if any, the State/Territory uses to communicate levels of quality for child care programs.

Print

Radio

Television

Web

Telephone

Social Marketing

Other. Describe

None

c) Describe any targeted outreach for culturally and linguistically diverse families.

## 3.3.6. Quality Rating and Improvement System (QRIS)



a) **Based on the five key elements of a QRIS described above in 3.3.1 through 3.3.5**, does your State/Territory have a quality rating and improvement system (QRIS) or similar quality improvement system in place?



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Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating State/Territory-wide.

Participation is voluntary for **child care centers**

Participation is mandatory for \_\_\_\_\_

Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating as a pilot or in a few localities but not State/Territory-wide.

No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.

State/Territory is in the development phase

State/Territory has no plans for development

Other. Describe



b) If yes to 3.3.6a, **CHECK** the types of providers eligible to participate in the QRIS:

Child care centers

Group child care homes

Family child care homes

In-home child care

License exempt providers

Early Head Start programs

Head Start programs

Pre-kindergarten programs

School-age programs

Other. Describe

**3.3.7. If the State/Territory has or will have any quality improvement strategies for targeted groups of providers (e.g., relative caregivers or caregivers who are legally exempt from licensing) that are not described in your responses to any question in section 3.3 above, please describe \_\_\_\_\_**

### **3.3.8 Data & Performance Measures on Program Quality –**

What data elements, if any, does the State/Territory currently have access to related to the quality of programs? What, if any, does the State/Territory use for performance measures on program quality improvement? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on program quality.** Indicate if the Lead Agency or another agency has access to data on:

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- Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory. Describe (optional) \_\_\_\_\_
- Number of programs that move program quality levels annually (up or down). Describe (optional) \_\_\_\_\_
- Program scores on program assessment instruments. List instruments: Environment Rating Scales. Describe (optional) Facility scores (average) for all classrooms scored on the ERS.
- Classroom scores on program assessment instruments. List instruments: Environment Rating Scales: ITERS-R, ECERS-R. Describe (optional) \_\_\_\_\_
- Qualifications for teachers or caregivers within each program. Describe (optional) Verified education and training as well as overall measure of staff qualifications
- Number/Percentage of children receiving CCDF assistance in licensed care. Describe (optional) \_\_\_\_\_
- Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory
- Number/Percentage of programs receiving financial assistance to meet higher program standards. Describe (optional) \_\_\_\_\_
- Other. Describe \_\_\_\_\_
- None

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures on program quality?

Quarterly tracking and reporting of the percent of centers increasing to a 3, 4 or 5 star rating. Performance target is 5% increase in number of 3-5 star centers quarterly.

c) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to program quality? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. \_\_\_\_\_

### 3.3.9 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub-section in 3.3. What are the State/Territory's goals for the program quality improvement system in the coming biennium? What progress does the State/Territory expect to make across the five key elements for quality improvement systems?

By fall 2015, a new outcome based quality rating and improvement system will be in place. This TKRIS will be mandatory for all programs receiving public funds (including Head Start/Early

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Head Starts and public school prekindergarten classrooms) and provide clear indication of rating for parents through letter grades. During this biennium, LA will evaluate the elements of the TKRIS through Community Network Pilots including a comprehensive child assessment system and use of the CLASS as a program/teacher assessment in 13 Community Network Pilot early care and education classrooms serving nearly 22,500 children.

## **3.4 Pathways to Excellence for the Workforce – Professional Development Systems and Workforce Initiatives (Component #4)**

Pathways to excellence for the workforce builds on the significant investments States and Territories have made in the area of professional development systems to ensure a well-qualified workforce with opportunities for growth from entry level through master teacher, with an increasing emphasis on the many additional roles in the child care system (e.g. adult educators such as consultants, technical assistance providers, trainers, and higher education faculty). In this section, States and Territories provide a self-assessment on current professional development and workforce activities and describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to five key elements for workforce systems:

- 1) Core Knowledge and Competencies
  - 2) Career Pathways (or Career Lattice)
  - 3) Professional Development Capacity
  - 4) Access to Professional Development
  - 5) Compensation, Benefits and Workforce Conditions
- a) Describe which entities are involved in planning and administering the activities in Section 3.4, including State/Territory entities and local or community level entities.

### **3.4.1 Workforce Element 1 - Core Knowledge and Competencies**

**Definition** – For purposes of this section, core knowledge and competencies (CKCs) refers to the expectations for what the workforce should know (content) and be able to do (skills) in their role working with and/or on behalf of children and their families. These CKCs provide a foundation for professional development design (including instructional practices) and other quality improvement efforts.



a) Has the State/Territory developed core knowledge and competencies (CKCs) for practitioners working with and/or on behalf of children?

Yes

No, the State/Territory has not developed core knowledge and competencies. Skip to question 3.4.2.

Other. Describe

If yes, insert web addresses, where possible:

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b) Check which of the following teaching and learning topics, if any, are covered in the CKCs.

- Child growth, development and learning
- Health, nutrition, and safety
- Learning environment and curriculum
- Interactions with children
- Family and community relationships
- Professionalism and leadership
- Observation and assessment
- Program planning and management
- Diversity
- Other. Describe
- None

c) Are the CKCs incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its CKCs into other parts of the child care system.

- To define the content of training required to meet licensing requirements
- To define the content of training required for program quality improvement standards (as reported in section 3.3)
- To define the content of training required for the career lattice or credential
- To correspond to the early learning guidelines
- To define curriculum and degree requirements at institutions of higher education
- Other. Describe
- None

d) Are the CKCs aligned with other State/Territory or national standards? Check which ways, if any, the State/Territory aligns its CKCs with other standards.

- Cross-walked with the Child Development Associate (CDA) competencies
- Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, [National Council for Accreditation of Teacher Education/Council for the Accreditation of Educator Preparation](#), Head Start SOLAR staff skills indicators)
- Cross-walked with apprenticeship competencies
- Other. Describe.

Recommended practices of DEC.

- None

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e) Check for which roles, if any, the State/Territory developed supplemental or specialized competencies.

- Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe \_\_\_\_\_
- Providers working directly with children in family child care homes, including aides and assistants. Describe \_\_\_\_\_
- Administrators in centers (including educational coordinators, directors). Describe \_\_\_\_\_
- Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe \_\_\_\_\_
- Education and training staff (such as trainers, CCR&R staff, faculty). Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_
- None

f) Check if the State/Territory has developed any supplemental or specialized competencies for practitioners/providers working with the following ages.

- Birth-to-three
- Three-to-five
- Five and older
- Other. Describe \_\_\_\_\_
- None

### 3.4.2 Workforce Element 2 - Career Pathways

**Definition** – For purposes of this section, career pathways (or career lattice) defines the options and sequence of qualifications and ongoing professional development to work with children. Career pathways assist professionals in understanding their career options and identify steps for advancement for the workforce recognizing and rewarding higher levels of preparation and mastery of practice to promote higher quality services for children.



a) Does the State/Territory have a career pathway which defines the sequence of qualifications related to professional development (education, training and technical assistance) and experience required to work with children?

Yes. Describe.

**LA Pathways Child Care Career Development System**

No, the State/Territory has not developed a career pathway. Skip to question 3.4.3.

Insert web addresses, where possible: \_\_\_\_\_

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b) Check for which roles, if any, the career pathways include qualifications, specializations or credentials.

Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe.

**Classroom Track**

Providers working directly with children in family child care homes, including aides and assistants. Describe \_\_\_\_\_

Administrators in centers (including educational coordinators, directors). Describe. **Administrator**

Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe \_\_\_\_\_

Education and training staff (such as trainers, CCR&R staff, faculty). Describe.

**Trainer registry and ladder are part of LA Pathways.**

Other. Describe

None

c) Does the career pathways (or lattice) include specializations or credentials, if any, for working with any of the following children?

Infants and toddlers

Preschoolers

School-age children

Dual language learners

Children with disabilities, children with developmental delays, and children with other special needs

Other. Describe

None

d) In what ways, if any, is the career pathway (or lattice) used?

Voluntary guide and planning resource

Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13

Required placement for all practitioners working in programs that receive public funds to serve children birth to 13

Required placement for adult educators (i.e., those that provide training, education and/or technical assistance)

Required placement for participation in scholarship and/or other incentive and support programs

Required placement for participation in the QRIS or other quality improvement system

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- Other. Describe
- None

e) Are individuals' qualifications, professional development, and work experience verified prior to placement on the career pathway (or lattice)?


- Yes. If yes, describe

Submitted certificates and transcripts are reviewed for appropriateness, employment verification forms are reviewed to determine years of relevant experience, and membership cards are used for documentation of current membership in a professional organization. Letters, emails, memos, or a listing in a program are used to verify service to the profession. A summary form is used to enter all relevant information and the information is also entered into the database. This information is used to determine their placement on the career ladder and a letter and certificate is sent to them.


- No

### 3.4.3 Workforce Element 3 – Professional Development Capacity

**Definition** – For purposes of this section, professional development incorporates higher education, training and technical assistance. Higher education capacity refers to capability of the higher education system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Training and technical assistance capacity refers to capability of the training and technical assistance system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. **Early childhood includes infants, toddlers and preschoolers.**

 a) Has the State/Territory assessed the availability of degree programs in early-childhood education, school-age care or youth development, and related fields in the State/Territory (e.g., both physical location and distance-based, accessibility to practitioners, etc.)?

- Yes. If yes, describe
- No

 b) Has the State/Territory assessed the availability of early-childhood and school-age and related training and technical assistance programs in the State/Territory (e.g., both physical location and distance-based, degree level, etc.)?

- Yes. If yes, describe
- No

c) What quality assurance mechanisms, if any, are in place for the degree programs and courses offered by the State/Territory institutions?



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- Standards set by the institution
- Standards set by the State/Territory higher education board
- Standards set by program accreditors
- Standards set by State/Territory departments of education
- Standards set by national teacher preparation accrediting agencies
- Other. Describe
- None

d) What quality assurance mechanisms, if any, are in place for the training and technical assistance programs offered by the State/Territory?

- Training approval process. Describe
- Trainer approval process. Describe

LA Pathways Trainer Approval includes verification of education and experience as well as requirements for continuing connection to early care and education and adult learning.

- Training and/or technical assistance evaluations. Describe
- Other. Describe
- None

e) Does the State/Territory have articulation agreements in place across and within institutions of higher education?

- Yes. If yes, describe
- No

f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?

- Yes. If yes, describe
- No

### 3.4.4 Workforce Element 4 – Access to Professional Development

Definition – For purposes of this section, access to professional development (training, education and technical assistance) refers to the degree to which practitioners are made aware of, and receive supports and assistance to utilize, professional development opportunities.



a) Does the State/Territory have professional development opportunities accessible for professionals in various or all sectors of the early childhood and school-age field?

- Yes. If yes, for which sectors?
  - Child care
  - Head Start/Early Head Start
  - Pre-Kindergarten

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- Public schools
- Early intervention/special education
- Other. Describe [redacted]
- No

b) Does the State/Territory have a State/Territory-wide, coordinated and easily accessible clearinghouse of information about professional development opportunities available to all members of the early childhood and school-age workforce? Lead Agencies are not required to have a professional development system, but States/Territories may develop such clearinghouses to promote access to professional development opportunities.

- Yes. If yes, describe [redacted]
- No

Insert web addresses, where possible: [redacted]

c) What supports, if any, does the State/Territory provide to promote access to training and education activities?

- Scholarships. Describe

LA Pathways provides scholarships following successful completion of higher education hours, CDA assessment, and administrator training.

- Free training and education. Describe [redacted]
- Reimbursement for training and education expenses. Describe [redacted]
- Grants. Describe [redacted]
- Loans. Describe [redacted]
- Loan forgiveness programs. Describe [redacted]
- Substitute pools. Describe [redacted]
- Release time. Describe [redacted]
- Other. Describe.

Training provided by the regional child care resource and referral agencies. The training is provided at a very low cost through contract with the Lead Agency.

- None

d) Does the State/Territory have career advisors for early childhood and school-age practitioners?

- Yes. If yes, describe.

CCR&R's provide limited career advising.

- No

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e) Does the State/Territory have mentors, coaches, consultants, and/or other specialists available to provide technical assistance to the workforce?


Yes. If yes, describe.

CCR&R agencies have inclusion specialists as well as staff who can assist the provider with specific questions related to Licensing, the subsidy system and other topics. Child Care Mental Health Consultants are also available.

No


### 3.4.5 Workforce Element 5- Compensation, Benefits and Workforce Conditions

**Definition** – For purposes of this section, rewards for education and training refers to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.

 a) Does the State/Territory have a salary or wage scale for various professional roles?


Yes. If yes, describe

No

 b) Does the State/Territory provide financial rewards for participation in professional development, such as one-time salary bonuses for completing a training or education program?

Yes. If yes, describe

No

 c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?

Yes. If yes, describe.

The School Readiness Tax Credit is available for directors and staff working in programs participating in the QRIS. Eligibility is determined by education (CDA, AA, BA/BS and MS/MA), experience, professional activity and verification that the person worked in a star rated center for at least six months during the calendar year.

No

d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?

Yes. If yes, describe

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No

### 3.4.6 Data & Performance Measures on the Child Care Workforce –

What data elements, if any, does the State/Territory currently have access to related to the child care workforce? What, if any, does the State/Territory use for performance measures on professional development and workforce initiatives? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on the child care workforce.** Indicate if the Lead Agency or another agency has access to data on:

- Data on the size of the child care workforce. Describe (optional)
- Data on the demographic characteristics of practitioners or providers working directly with children. Describe (optional)

General information is available from such sources as the Child Care Market Rate Survey.

- Records of individual teachers or caregivers and their qualifications. Describe

Information is available for those child care teachers who are part of the LA Pathways Child Care Career Development System. Additional information and qualifications are available for staff in star rated centers.

- Retention rates. Describe (optional)
- Records of individual professional development specialists and their qualifications. Describe (optional)
- Qualifications of teachers or caregivers linked to the programs in which they teach. Describe (optional)
- Number of scholarships awarded . Describe (optional)

Information is available regarding number of scholarship recipients and the types of scholarships awarded (College Tuition, CDA Assessment, or Administrative). Demographic information is also available.

- Number of individuals receiving bonuses or other financial rewards or incentives. Describe (optional).

Information is available on the eligibility of individuals. However, the Lead Agency does not have information on actual tax credits/refunds received.

- Number of credentials and degrees conferred annually. Describe (optional)
- Data on T/TA completion or attrition rates. Describe (optional)

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- Data on degree completion or attrition rates. Describe (optional) \_\_\_\_\_
- Other. Describe \_\_\_\_\_
- None

b) Does the State/Territory have a workforce data system, such as a workforce registry, which tracks workforce demographics, compensation, and qualifications and ongoing professional development for practitioners working with children birth to age 13?

**Definition**— For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.

Yes.

b-1) If yes, which roles are included in the workforce data system? For each role checked, indicate in your description whether participation is voluntary or mandatory.

Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe.

Voluntary participation unless working in a star rated center or participating in scholarship program.

Providers working directly with children in family child care homes, including aides and assistants. Describe

Administrators in centers (including educational coordinators, directors). Describe.

Voluntary participation unless working in a star rated center or participating in scholarship program.

Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe \_\_\_\_\_

Education and training staff (such as trainers, CCR&R staff, faculty). Describe.

Mandatory.

- Other. Describe \_\_\_\_\_
- None

b-2) Does the workforce data system apply to:

all practitioners working in programs that are licensed or regulated by the State/Territory to serve children birth to 13?

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all practitioners working in programs that receive public funds to serve children birth to age 13?

No

c) **Performance measurement.** What, if any, performance measures does the State/Territory use related to its workforce and professional development systems?

LA does not have a performance measure(s) related to workforce and professional development systems.

d) **Evaluation.** What, if any, are the State/Territory’s plans for evaluation related to its workforce and professional development systems? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

An evaluation of workforce and professional development will be conducted in 13 CNP.

**3.4.7 Goals for the next Biennium –**

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section in 3.4. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the State/Territory’s goals for the building the professional development system and improving conditions for the workforce in the coming biennium? What progress does the State/Territory expect to make across the five key elements for the workforce and professional development system described above?

**Note** – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 – Pilot expanded professional learning opportunities through collaboration resulting from CNP.
Goal 2 – Review and identify CKC for education and training staff as well as coaches and consultants. Pilot draft during CNP.
Goal 3 -
Goal 4 -
Goal 5 -

**AMENDMENTS LOG**

**CHILD CARE AND DEVELOPMENT FUND PLAN FOR:** \_\_\_\_\_  
**FOR THE PERIOD:** 10/1/11 – 9/30/12

Lead Agencies are required to request approval from Administration for Children and Families (ACF) whenever a “substantial” change in the Lead Agency’s approved CCDF plan occurs. Please refer to the ACF Program Instruction regarding CCDF Plan amendments for more information <http://www.acf.hhs.gov/programs/occ/resource/pi-2009-01>

Plan amendments must be submitted to ACF within 60 days of the effective date of the change. Under the regulation, the plan amendment must be approved no later than the 90th day following the date on which the amendment is received by ACF unless the Lead Agency and ACF mutually agree in writing to extend the period. (§98.18 (b)).

ACF encourages Lead Agencies to contact the Child Care program staff in the appropriate ACF Regional Office to discuss any proposed amendment as early as possible.

**Instructions for Submitting Amendments:**

Complete the first 3 columns of the Amendment Log and send a copy 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.

ACF will complete column 4 and returns a photocopy of the Log to the grantee following its review and approval of the amendment. 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.





**APPENDIX 1  
QUALITY PERFORMANCE REPORT**

This annual report will be submitted to ACF no later than **December 31, 2014** and will reflect the period **October 1, 2013 through September 30, 2014**. Lead Agencies will leave this report blank when the Plan is initially submitted.

In this report, Lead Agencies are asked about the State/Territory's progress in meetings its goals as reported in the FY 2014-2015 CCDF Plan, and provide available data on the results of those activities. At a minimum, Lead Agencies are expected to respond to the first question in each section of the Quality Performance Report (QPR) which asks for their progress toward meeting their goal(s) articulated in **Part 2 and Part 3** of the CCDF Plan for this Biennium.

Because of the flexibility in administering the CCDF program, it is expected that Lead Agencies may not have information and data available to respond to all questions. **A Describe box is provided for each question for Lead Agencies to provide descriptive context for data reported and narrative updates in each data section, including any plans for reporting data in the future, if actual data is not currently available or if specific questions are not applicable.** Lead Agencies may use data collected by other agencies and entities (e.g., CCR&R agencies or other contractors) as appropriate. The term Lead Agency is used in questions when the data relate to a CCDF-specific activity, otherwise the term State/Territory is used when another entity may be responsible or involved with an activity (e.g., licensing).

The purpose of this annual report is to capture State/Territory progress on improving the quality of child care. Specifically, this report will:

- Provide a national assessment of State's and Territory's progress toward improving the quality of child care, including a focus on program quality and child care workforce quality;
- Track State's and Territory's annual progress toward meeting high quality indicators and benchmarks, including those that they set for themselves in their CCDF Plans and those that are of interest to the U.S. Department of Health and Human Services in measuring CCDF program performance;
- Assist national and State/Territory technical assistance efforts to help States/Territories make strategic use of quality funds; and Assist with program accountability

**This report collects progress on the five goals identified in Part 2 and Part 3 of the Child Care and Development Fund (CCDF) Plan for FY2014-2015 along with key data in relation to the four components of child care quality used as a quality framework in Part 3 of the Child Care and Development Fund Plan for FY 2014-2015:**

1. Ensuring health and safety of children through licensing and health and safety standards

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2. Establishing early learning guidelines
3. Creating pathways to excellence for child care programs through program quality improvement activities
4. Creating pathways to an effective, well-supported child care workforce through professional development systems and workforce initiatives.

### Ensuring the Health and Safety of Children (Component #1)

In this section, Lead Agencies provide information on the minimum health and safety standards and activities in effect over the past year as of September 30, 2014.

#### A1.1 Progress on Overall Goals

**Based on the goals described in the Lead Agency's CCDF Plan at Section 3.1.7, please report your progress using the chart below.**

You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible ( e.g., revised licensing regulation to include elements related to SIDS prevention, lowered caseload of licensing staff to 1:50, or increased monitoring visits to twice annually for child care centers). If applicable, describe any barriers to implementing your planned goals.

<b>Goals Described in FY 2014-2015 CCDF Plan</b>	<b>Describe Progress – Include Examples and Numeric Targets where Possible</b>

**Note: If your licensing standards changed during this period, please provide a brief summary of the major changes and submit the updated regulations to the National Resource Center for Health and Safety in Child Care ([www.nrckids.org](http://www.nrckids.org).) \_\_\_\_\_**

#### A1.2 Key Data

OCC is collecting this information as one part of our overall effort to better understand States/Territories' activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here **and that some data requested may be collected by another agency or entity other than the Lead Agency.** Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. For example, the number of programs with licensing violations will be affected by how stringent the licensing standards are. States with more stringent standards may be more likely to

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report more violations than those with less stringent licensing standards. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### A1.2.1 Number of Programs

- a) How many licensed center-based programs operated in the State/Territory as of September 30, 2014? \_\_\_\_\_  
 N/A  
Describe: \_\_\_\_\_
- b) How many licensed home-based programs operated in the State/Territory as of September 30, 2014? \_\_\_\_\_  
 N/A  
Describe: \_\_\_\_\_
- c) Does the State/Territory have data on the number of programs operating in the State/Territory that are legally exempt from licensing? **At a minimum, the Lead Agency should provide the number of legally exempt providers serving children receiving CCDF.**
- Yes. If yes, include the number of programs as of September 30, 2014 and describe \_\_\_\_\_ (Use the Describe Box to provide the universe of programs on which the number is based)
- No. Describe: \_\_\_\_\_

### A1.2.2 Number and Frequency of Monitoring Visits

**For licensed programs, a monitoring visit is an onsite visit by department personnel to a licensed child care program with the goal of ensuring compliance with licensing regulations. This may include initial licensing determination visits, licensing renewal visits, periodic announced or unannounced visits, and visits made after a complaint is lodged. For legally exempt providers, a monitoring visit is an onsite visit to a child care program with the goal of ensuring compliance with health and safety standards as defined by CCDF and required for receipt of CCDF funds. Use the Describe box to provide your State/Territory monitoring visit requirement.**

- a) How many licensed center-based programs received at least one monitoring visit between October 1, 2013 and September 30, 2014? \_\_\_\_\_
- a-1) Of those programs visited, how many were unannounced? \_\_\_\_\_
- a-2) Of those programs visited, how many were triggered by a complaint or identified risk? \_\_\_\_\_
- a-3) What percentage of required visits for licensed center-based program were completed? \_\_\_\_\_
- N/A  
Describe: \_\_\_\_\_

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- b) How many licensed family child care programs received at least one monitoring visit between October 1, 2013 and September 30, 2014? \_\_\_\_\_  
 b-1) Of those programs visited, how many were unannounced? \_\_\_\_\_  
 b-2) Of those programs visited, how many were triggered by a complaint or identified risk? \_\_\_\_\_  
 b-3) What percentage of required visits for licensed family child care programs were completed? \_\_\_\_\_  
 N/A  
 Describe: \_\_\_\_\_

- c) How many legally exempt providers receiving CCDF received at least one monitoring visit between October 1, 2013 and September 30, 2014? Of those,  
 c-1) Of those programs visited, how many were unannounced? \_\_\_\_\_  
 c-2) Of those programs visited, how many were triggered by a complaint or identified risk? \_\_\_\_\_  
 c-3) What percentage of required visits for legally exempt providers were completed? \_\_\_\_\_  
 N/A  
 Describe: \_\_\_\_\_

**A1.2.3 Number of Licensing Suspensions, Licensing Revocations and Terminations from CCDF**

Suspension of license includes any enforcement action that requires the temporary suspension of child care services because of licensing violations. Revocation of license includes termination or non-renewal of licensure and any other enforcement action that requires the closure of a program because of licensing violations.

	How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year?	How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year?	N/A	Describe
<b>Child Care Centers</b>	_____	_____	_____	<input type="checkbox"/>	_____
<b>Group Child Care Homes</b>	_____	_____	_____	<input type="checkbox"/>	_____
<b>Family Child Care Homes</b>	_____	_____	_____	<input type="checkbox"/>	_____
<b>In-Home Providers</b>	_____	_____	_____	<input type="checkbox"/>	_____

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**A1.2.5 How many previously license-exempt providers were brought under the licensing system during the last fiscal year? \_\_\_\_\_**

N/A

Describe:

**A1.2.6 How many injuries as defined by the State/Territory occurred in child care during the last year?**

Please provide your definition of injuries in the Describe box and indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). \_\_\_\_\_

N/A

Describe:

**A1.2.7 How many fatalities occurred in child care or as the result of a child care accident or injury as of the end of the last year?**

Please indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). \_\_\_\_\_

N/A

Describe:

## Establishing Early Learning Guidelines (Component #2)

### A2.1 Progress on Overall Goals

**A2.1.1 Did the State/Territory make any changes to its voluntary early learning guidelines (including guidelines for school-age children) as reported in 3.2 during the last fiscal year?**

Yes. Describe \_\_\_\_\_

No

**A2.1.2 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.2.8, please report your progress.**

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs trained on using the ELG's, Aligned the ELG's with Head Start Child Development and Early Learning Framework). If applicable, describe any barriers to implementing your planned goals.

<b>Goals Described in FY 2014-2015 CCDF Plan</b>	<b>Describe Progress – Include Examples and Numeric Targets where Possible</b>

**DRAFT**

<b>Goals Described in FY 2014-2015 CCDF Plan</b>	<b>Describe Progress – Include Examples and Numeric Targets where Possible</b>

**A2.2 Key Data**

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory’s policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

**A2.2.1a How many individuals were trained on early learning guidelines (ELG’s) or standards over the last fiscal year?**

Responses to this question should be consistent with information provided in question 3.2.3 in the CCDF Plan.

<b>Provider Categories</b>	<b>Birth to Three ELG’s</b>	<b>Three-to-Five ELG’s</b>	<b>Five and Older ELG’s</b>	<b>N/A</b>	<b>Describe</b>
How many teachers/practitioners in center-based programs were trained on ELG’s over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____	<input type="checkbox"/>	_____
How many family child care providers were trained on ELG’s over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____	<input type="checkbox"/>	_____
How many legally exempt providers were trained on ELG’s over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____	<input type="checkbox"/>	_____



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**A2.2.1b How many children are served in programs implementing the ELG's?**

Refer to question 3.2.4 in the CCDF Plan for examples of how ELG's can be implemented in programs. Program capacity can be used as an estimate of children served.

<b>Provider Categories</b>	<b>Birth to Three ELG's</b>	<b>Three-to-Five ELG's</b>	<b>Five and Older ELG's</b>	<b>N/A</b>	<b>Describe</b>
How many children are served in center-based programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____	_____	_____	<input type="checkbox"/>	_____
How many children are served in program implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____ _____	_____ _____	_____ _____	<input type="checkbox"/>	_____
How many children are served in programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children)	_____ _____	_____ _____	_____ _____	<input type="checkbox"/>	_____

**Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)**

**A3.1 Progress on Overall Goals**

**A3.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.3.9, please report your progress.**

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs included in the QRIS, Aligned the QRIS standards with Head Start performance standards, or expanded the number of programs with access to an on-site quality consultant). If applicable, describe any barriers to implementing your planned goals.

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<b>Goals Described in FY 2014-2015 CCDF Plan</b>	<b>Describe Progress – Include Examples and Numeric Targets where Possible</b>

## **A3.2 Key Data**

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory’s policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### **A3.2.1 Number of Program Receiving Targeted Technical Assistance**

Targeted technical assistance is technical assistance (coaching, mentoring and consultation) that is designed to address a particular domain/area of quality. Responses in this section should be consistent with responses provided in question 3.3.2 in the CCDF Plan which focuses on targeted technical assistance to programs (rather than practitioners) that is intended for moving programs to higher levels of quality.

- a) How many programs received targeted technical assistance during the last fiscal year (October 1, 2013 through September 30, 2014)?

N/A

Describe:

- b) If possible, report the number of programs who received targeted technical assistance in the following areas:

Health and safety \_\_\_\_\_

Infant and toddler care \_\_\_\_\_

School-age care \_\_\_\_\_

Inclusion \_\_\_\_\_

Teaching dual language learners \_\_\_\_\_

Understanding developmental screenings and/or observational assessment tools for program improvement purposes \_\_\_\_\_

Mental health \_\_\_\_\_

Business management practices \_\_\_\_\_

N/A

Describe:

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## A3.2.2 Number of Programs Receiving Financial Supports

Responses to this question should be consistent with responses provided in question 3.3.3 of the CCDF Plan. **Financial supports** must be intended to reward, improve, or sustain quality. They can include grants, cash, reimbursements, gift cards, or purchases made to benefit a program. This includes tiered reimbursements for CCDF subsidies.

**One-time grants, awards, or bonuses** include any kind of financial support that a program can receive only once. **On-going or periodic quality stipends** include any kind of financial support intended to reward, improve, or sustain quality that a program can receive more than once.

a) How many programs received one-time, grants, awards or bonuses?

Child Care Centers \_\_\_\_\_

N/A

Describe: \_\_\_\_\_

Family Child Care Homes \_\_\_\_\_

N/A

Describe: \_\_\_\_\_

b) How many programs received on-going or periodic quality stipends?

Child Care Centers \_\_\_\_\_

N/A

Describe: \_\_\_\_\_

Family Child Care Homes \_\_\_\_\_

N/A

Describe: \_\_\_\_\_

## A3.2.3 Number of Eligible Programs for State/Territory QRIS or Other Quality Improvement System

a) What is the total number of eligible child care centers for QRIS \_\_\_\_\_ OR Other Quality Improvement System? \_\_\_\_\_

N/A

Describe: \_\_\_\_\_

b) What is the total number of eligible family child care homes for QRIS \_\_\_\_\_ OR Other Quality Improvement System? \_\_\_\_\_

N/A

Describe: \_\_\_\_\_

c) What is the total number of eligible license-exempt providers for QRIS \_\_\_\_\_ OR Other Quality Improvement System? \_\_\_\_\_

N/A

Describe: \_\_\_\_\_

## A3.2.4 Number and Percentage of Programs Participating in State/Territory QRIS or Other Quality Improvement System

**DRAFT**

- a) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of child care center programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of Child Care Centers Participating in QRIS \_\_\_\_\_ OR Other Quality Improvement System \_\_\_\_\_

Percentage of Child Care Centers Participating in QRIS \_\_\_\_\_ OR Other Quality Improvement System \_\_\_\_\_

N/A

Describe:

- b) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of family child care programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of Family Child Care Homes QRIS \_\_\_\_\_ OR Other Quality Improvement System \_\_\_\_\_

Percentage of Family Child Care Homes QRIS \_\_\_\_\_ OR Other Quality Improvement System \_\_\_\_\_

N/A

Describe:

- c) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of license-exempt programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of License-Exempt Providers QRIS \_\_\_\_\_ OR Other Quality Improvement System \_\_\_\_\_

Percentage of License-Exempt Providers QRIS \_\_\_\_\_ OR Other Quality Improvement System \_\_\_\_\_

N/A

Describe:

**A3.2.5. Number of Programs at Each Level of Quality**

For each type of care, provide the total number of quality levels and the number of programs at that level of the total number of participating as reported in A3.2.4. Describe metric if other than QRIS, such as accreditation.

	Number of levels of quality	Number of programs at each level	N/A	Describe
Child Care Centers	<input style="background-color: #ADD8E6;" type="text"/>	<input style="background-color: #ADD8E6;" type="text"/>	<input type="checkbox"/>	<input style="background-color: #ADD8E6;" type="text"/>
Family Child Care	<input style="background-color: #ADD8E6;" type="text"/>	<input style="background-color: #ADD8E6;" type="text"/>	<input type="checkbox"/>	<input style="background-color: #ADD8E6;" type="text"/>

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	Number of levels of quality	Number of programs at each level	N/A	Describe
Homes				
License-Exempt Providers	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

**A3.2.6 Number of Programs Who Moved Up or Down within QRIS**

If quality threshold is something other than QRIS, describe the metric used, such as accreditation. These numbers ARE NOT expected to total the number of participating programs in the QRIS as reported in A3.2.4.

	How many programs moved up within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year?	How many programs moved down within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year?	N/A	Describe
Child Care Centers	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Family Child Care Homes	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
License-Exempt Providers	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

**A3.2.7 Number of CCDF Subsidized Children Served in Programs Participating in the State/Territory Quality Improvement System**

**Note.** If the State/Territory does not have a formal QRIS, the State/Territory may define another quality indicator and report it here.

- a) What percentage of CCDF children were served in participating programs during the last fiscal year? \_\_\_\_\_
- b) What percentage of CCDF children were served in high quality care as defined by the State/Territory? \_\_\_\_\_ Provide the definition of high quality care in the Describe box. This may include assessment scores, accreditation, or other metric, if no QRIS.

N/A  
Describe:

**Pathways to Excellence for the Child Care Workforce: Professional Development Systems and Workforce Initiatives (Component #4)**

**A4.1 Progress on Overall Goals**

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## **A4.1.1 Based on the goals described in the Lead Agency’s CCDF Plan at Section 3.4.7, please report your progress.**

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Implement a wage supplement program, Develop articulation agreements). If applicable, describe any barriers to implementing your planned goals.

<b>Goals Described in FY 2014-2015 CCDF Plan</b>	<b>Describe Progress – Include Examples and Numeric Targets where Possible</b>

## **A4.2 Key Data**

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory’s policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

### **A4.2.1 Number of Teachers/Caregivers and Qualification Levels**

- a) What is the total number of child care center teachers in the State/Territory as of September 30, 2014? \_\_\_\_\_  
 N/A  
Describe:
  
- b) What is the total number of family child care providers in the State/Territory as of September 30, 2014? \_\_\_\_\_  
 N/A  
Describe:
  
- c) What is the number of center teachers and family child care providers by qualification level as of the end of the last fiscal year? Count only the highest level of education attained.

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	<b>Child Care Center Teachers</b>	<b>Family Child Care Providers</b>	<b>N/A</b>	<b>Describe</b>
Child Development Associate (CDA)	_____	_____	<input type="checkbox"/>	_____
State/Territory Credential	_____	_____	<input type="checkbox"/>	_____
Associate's degree	_____	_____	<input type="checkbox"/>	_____
Bachelor's degree	_____	_____	<input type="checkbox"/>	_____
Graduate/Advanced degree	_____	_____	<input type="checkbox"/>	_____

**A4.2.2 Number of Individuals Included in State/Territory's Professional Development Registry during Last Fiscal Year (October 1, 2013 through September 30, 2014)**

Teachers in child care centers \_\_\_\_\_  
 Family child care home providers \_\_\_\_\_  
 License-exempt providers \_\_\_\_\_  
 N/A  
 Describe:

**A4.2.3 Number of Individuals Receiving Credit-Based Training and/or Education as defined by State/Territory during the last fiscal year**

Teachers in child care centers \_\_\_\_\_  
 Family child care home providers \_\_\_\_\_  
 License-exempt providers \_\_\_\_\_  
 N/A  
 Describe:

**A4.2.4 Number of Credentials and Degrees Awarded during Last Fiscal Year**  
 If possible, list the type of credential or degree and in what type of setting the practitioner worked.

<b>Setting</b>	<b>List Type of Credential and Provide Number Awarded</b>	<b>List Type of Degree and Provide Number Awarded</b>	<b>N/A</b>	<b>Describe</b>
Teachers in child care centers	_____	_____	<input type="checkbox"/>	_____
Family child care home providers	_____	_____	<input type="checkbox"/>	_____
License-exempt providers	_____	_____	<input type="checkbox"/>	_____



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**A4.2.5 Number of Individuals Receiving Technical Assistance during Last Fiscal Year**

Describe any data you track on coaching, mentoring, or other specialist consultation. If possible, include in what type of setting the practitioner worked. Responses to this question should be consistent with information provided in question 3.4.4e of the CCDF Plan.

<b>Setting</b>	<b>List Type of Technical Assistance and Provide Number</b>	<b>N/A</b>	<b>Describe</b>
Teachers in child care centers	_____	<input type="checkbox"/>	_____
Family child care home providers	_____	<input type="checkbox"/>	_____
License-exempt providers	_____	<input type="checkbox"/>	_____

**A4.2.6 Type of Financial Supports Provided and Number of Teachers/Providers Receiving as of End of Last Fiscal Year?**

- Scholarships. How many teachers/providers received? \_\_\_\_\_
- Reimbursement for Training Expenses. How many teachers/providers received? \_\_\_\_\_
- Loans. How many teachers/providers received? \_\_\_\_\_
- Wage supplements. How many teachers/providers received? \_\_\_\_\_
- Other. Describe
- N/A  
Describe:

**Building Subsidy Systems that Increase Access to High Quality Care**

In this section, Lead Agencies provide progress on their subsidy administration goals over the past year as of September 30, 2014.

**A5.1 Progress on Overall Goals**

**Based on the goals described in the Lead Agency’s CCDF Plan at Section 2.8, please report your progress using the chart below.** You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., established copayment policies that sustain income and sustain quality, or established eligibility policies that promote continuity of care). If applicable, describe any barriers to implementing your planned goals.

<b>Goals Described in FY 2014-2015 CCDF Plan</b>	<b>Describe Progress – Include Examples and Numeric Targets where Possible</b>

**APPENDIX 2**  
**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))

## DRAFT

- (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))

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/grants/certification-regarding-debarment-suspension-and-other>

**3. Definitions for use with certification of debarment:**

<http://www.acf.hhs.gov/grants/certification-regarding-debarment-suspension-and-other-o>

**4. HHS certification regarding drug-free workplace requirements:**

<http://www.acf.hhs.gov/grants/certification-regarding-drug-free-workplace-requirements>

**5. Certification of Compliance with the Pro-Children Act of 1994:**


<http://www.acf.hhs.gov/grants/certification-regarding-environmental-tobacco-smoke>

**6. Certification regarding lobbying:**

<http://www.acf.hhs.gov/grants/certification-regarding-lobbying>

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.

## ATTACHMENT 2.4.1

	<b>Agency Name</b>	Office of Family Support (OFS)
	<b>Chapter No./Name</b>	08 - Child Care Assistance Program (CCAP) Manual
	<b>Part No./Name</b>	J. Sliding Fee Scale (LI-CC)
	<b>Section No./Name</b>	J-100 Sliding Fee Scale (LI-CC)
	<b>Document No./Name</b>	J-110 Sliding Fee Scale (LI-CC)
	<b>Effective Date</b>	August 1, 2012

STEP participants are categorically eligible. The child care costs charged by the provider are paid at 100%, not to exceed the state maximum rate.

The agency pays a certain percentage of authorized low-income child care costs that are charged by the provider. The sliding fee scale below is used to determine the percentage that the agency will pay, based on the household's monthly income and the household size. The provider must charge the participant no more and no less than the amount shown on the CCAP Rate and Availability Verification Form ([CCAP 7B](#)) if the provider wishes to remain an eligible CCAP provider. The difference between the amount that the agency pays and the total amount charged by the provider must be paid by the participant in the form of a co-payment. The provider is responsible for collecting this co-payment.

No. in HH	2	3	4	5	Agency %
	0-1261	0-1591	0-1921	0-2251	80%
	1262-1661	1592-2068	1922-2476	2252-2883	60%
	1662-2060	2069-2545	2477-3030	2884-3515	40%
	ABOVE 2060	ABOVE 2545	ABOVE 3030	ABOVE 3515	0%
No. in HH	6	7	8	9	Agency %
	0-2581	0-2911	0-3241	0-3571	80%
	2582-3291	2912-3501	3242-3712	3572-3922	60%
	3292-4000	3502-4090	3713-4182	3923-4272	40%
	ABOVE 4000	ABOVE 4090	ABOVE 4182	ABOVE 4272	0%
No. in HH	10	11	12	13	Agency %
	0-3901	0-4231	0-4561	0-4891	80%
	3902-4132	4232-4343	-	-	60%
	4133-4363	4344-4454	-	-	40%
	ABOVE 4363	ABOVE 4454	-	-	0%
No. in HH	14	15	16	17	Agency %
	0-5221	0-5551	0-5881	0-6211	80%
	-	-	-	-	60%
	-	-	-	-	40%
	-	-	-	-	0%

**ATTACHMENT 2.6.1**

CCAP 13  
Rev. 09/12  
08/10 Issue Obsolete

**Louisiana Department of Children and Family Services  
Child Care Assistance Program**

**Notice of Certification and Payments**

Date: \_\_\_\_\_

Case ID: \_\_\_\_\_

Time and Attendance Number: \_\_\_\_\_

Dear \_\_\_\_\_ :

Eligibility and payments for the following children will  Begin  Continue  Resume for the Child Care Assistance Program (CCAP) for the period from \_\_\_\_\_ through \_\_\_\_\_ .

Child Name	Child Number	Provider Name	Agency %	Maximum Payment	
				First Month	Full Month

Reason:

You will be required to check your child in and out of care each day your child is in care using Tracking of Time Services (TOTS), which is an electronic time and attendance process that tracks your child's attendance, in order for payments to be made on your behalf for child care provided.

If care is provided in a Class A or Class M center or a Family Child Day Care Home, the child must be checked in and out with your or your Household Designee's finger image scan and the Child Number listed above.

If care is provided in a School Child Care Program or with an In-Home Provider, the child must be checked in and out where the care is provided by calling the Interactive Voice Response at 1-888-281-1093 with the Child Number, Time and Attendance Number, and the Person Number for you or your Household Designee. Your Person Number is 100. Your Household Designees each have their own Person Number to check your child in and out of child care. Their Person Numbers will be given to you on a separate letter.

Your child cannot be checked in or out without these numbers. CCAP will not pay for child care anytime you do not check your child in and out of care.

The agency will pay up to the maximum amount(s) indicated above. Payment is based on the child's actual attendance. Your monthly co-payment for child care costs will be the difference between the amount the agency pays and the provider's actual charges. Your CCAP case may be closed if you do not remain up-to-date on your co-payments.

The agency's payment for the first month will be less if the effective date given above is later than the first day of the month. This is because payments are prorated for a partial month. If this applies to you, the maximum agency payment for the first month will also be shown in the left column above. Note: The agency will not make payment(s) to your provider when your child is not in the provider's care.

For information about eligibility requirements, your case status, or how to choose a provider, call 1-888-LAHELPU (1-888-524-3578).

Sincerely,

\_\_\_\_\_  
Worker

\_\_\_\_\_  
Telephone Number

**ATTACHMENT 2.6.1**

THE ENCLOSED FORM (CCAP 10) MAY BE COMPLETED AND RETURNED TO REPORT CHANGES IN YOUR CIRCUMSTANCES.

REMEMBER TO KEEP YOUR CHECK STUBS AND RECEIPTS OF ALL CO-PAYMENTS MADE TO YOUR PROVIDER FOR FUTURE REVIEW.

\*A notice will be sent to each Provider listed above if there is a change in the agency payment amount.

**DISCLAIMER**

You have been approved to participate in the Child Care Assistance Program (CCAP). Under federal law, freedom of parental choice of child care providers is guaranteed, as long as the chosen provider meets certain licensing or registration requirements. Your provider may be a Class A Day Care Center, a Class M Day Care Center Provider, a Family Child Day Care Home Provider, an In-Home Provider (in the child's home), or a School Child Care Program. Regardless of the type of provider chosen, approval for this provider by the Department of Children and Family Services (DCFS) does not imply any endorsement or recommendation of the provider.

DCFS registration as a Family Child Day Care Home Provider or certification as an In-Home Provider, a Class M Day Care Center Provider, or a School Child Care Program involves no DCFS inspection of the provider of any kind, and these providers are subject to far fewer regulations than licensed Class A Day Care Centers. Approval of these types of providers to receive payments for caring for your child or children under CCAP, or registration of these types of providers by DCFS, is in no way an endorsement or recommendation, express or implied, of the provider, nor is it a guarantee of your child's safety and welfare while in the care of this provider.

DCFS licensing of a Class A Day Care Center involves limited DCFS oversight. In most cases, DCFS oversight consists of a single annual visit to the center to determine whether the center is in compliance with minimum standards at the time of the visit. Licensing of these Class A Centers is in no way an endorsement or recommendation, express or implied, of the center, nor is it a guarantee of your child's safety and welfare while in the care of this provider.

The quality of child care varies greatly from one provider to another and you as a parent have responsibility for investigating and ascertaining the suitability of a provider to your needs and the fitness of that provider to ensure the safety and well-being of your child.

**CHILD CARE ASSISTANCE FAIR HEARING NOTICE**

If you disagree with the agency's decision, you may discuss it with a supervisor in this office, and you may request a fair hearing, but you must do so on or before \_\_\_\_\_. A fair hearing may be requested by completing the bottom portion of this form and mailing it or delivering it to the address shown at the top of the reverse side of this page. You may be represented at the hearing by an authorized representative, such as legal counsel, relative, friend, or other spokesperson, or you may represent yourself. In the space provided, give the reason you are requesting a fair hearing.

**COMPLETE AND SIGN ONLY IF YOU WANT TO REQUEST A FAIR HEARING.**

The reason I am requesting a hearing is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Phone Number

OR

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Address of Authorized Representative

**ATTACHMENT 2.7.1**

Provider Type	Regular Care	Regular Care For Infants/Toddlers (Under Age 3)	Special Needs Care Incentive	Special Needs Care Incentive for Infants/Toddlers (Under Age 3)
Class A	\$17.50	\$18.50	\$21.65	\$22.65
Class E	\$15.00	\$16.00	\$18.50	\$19.50
Class M	\$17.50	\$18.50	\$21.65	\$22.65
Class R	\$15.00	\$16.00	\$18.50	\$19.50
Class U	\$14.50	\$15.50	\$17.90	\$18.90